Nottinghamshire
POLICE & CRIME COMMISSIONER

JOINT AUDIT AND SCRUTINY PANEL

TUESDAY 9 JUNE 2015 at 2.00 PM
The Committee Room
GEDLING BOROUGH COUNCIL

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

A G E N D A

1. Election of Chair
2. Apologies for absence
3. Declarations of Interest by Panel Members and Officers (see notes below)
4. To agree the minutes of the previous meeting held on 12 February 2015
5. Introduction of new internal auditors
6. IPCC investigations
7. Force Improvement Activity Lessons Learned
8. Professional Standards Confidential Reporting Procedure (Whistle Blowing)
9. Anti-Fraud and Corruption Policy– Review of Compliance
10. Draft Group Annual Governance Statements 2014-15

11. Internal Audit Annual Assurance Report 2014-15

12. Internal Audit Annual Plan 2015-16

13. Update on the close of accounts 2014-15

14. External Audit – progress report and fees 2015-16

15. Reserves and provisions out-turn report 2014-15

16. Audit and Inspection Report

17. Survey of Police Audit Committee Chairs (Verbal)

18. Work plan and Meeting Schedule

NOTES

- Members of the **public are welcome to attend** to observe this meeting

- For **further information** on this agenda, please contact the Office of the Police and Crime Commissioner on 0115 9670999 extension 801 2005 or email nopcc@nottinghamshire.pnn.police.uk

- A **declaration of interest** could involve a private or financial matter which could be seen as having an influence on the decision being taken, such as having a family member who would be directly affected by the decision being taken, or being involved with the organisation the decision relates to. Contact the Democratic Services Officer: sara.allmond@nottscc.gov.uk for clarification or advice prior to the meeting.

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

MINUTES
OF THE MEETING OF THE
NOTTINGHAMSHIRE POLICE AND CRIME COMMISSIONER
JOINT AUDIT & SCRUTINY PANEL
HELD ON THURSDAY 12 FEBRUARY 2015
AT GEDLING BOROUGH COUNCIL,
NOTTINGHAM
COMMENCING AT 2.00 PM

MEMBERSHIP
(A - denotes absent)

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

OFFICERS PRESENT

Paddy Tipping	Police and Crime Commissioner
Phil Gilbert	Head of Strategy and Assurance, OPCC
Charlotte Radford	Chief Finance Officer, OPCC
Chris Eyre	Chief Constable, Notts. Police
Paul Steeples	Head of Business and Finance, Notts. Police
Andrew Cordoza	KPMG (External Audit)
Simon Lacey	KPMG (External Audit)
Angela Ward	Baker Tilly
Kelly Waddoups	Baker Tilly
Alison Fawley	Democratic Services, Notts. County Council

1. APOLOGIES FOR ABSENCE

None

2. DECLARATIONS OF INTERESTS BY MEMBERS AND OFFICERS

None

3. MINUTES OF THE PREVIOUS MEETING

The minutes of the meeting held on 23 September 2014, having been circulated to all Members, were taken as read and were confirmed and were signed by the Chair.

The minutes of the last meeting held on 15 December 2014, having been circulated to all Members, were taken as read and were confirmed and were signed by the Chair.

4. REFRESHED POLICE AND CRIME PLAN (2015-16)

Paddy Tipping introduced the report which provided an update on the refreshed Police and Crime Plan 2015-18.

During discussion the following points were made:

- Nottinghamshire was working with other public sector partners regarding Cybercrime. Additional resources had been allocated and two additional civilian officers would be taking this forward. All officers needed to tackle cybercrime and practices would need to be embedded across the organisation. The cost of investigating cybercrime was high as internet service providers charged for supplying information. Active discussions were being held with the Home Office about the best way of dealing with cybercrime as the offence occurred where victimisation took place regardless of where the offender lived.

- Nottinghamshire saw an increase of approximately 6% in reported crime. However new recording practices meant that the data was not comparable year on year and had made it difficult to show how targets were being met.

- The report identified 10 key areas for savings which formed part of an improvement plan of action for the Force which would be monitored by the Commissioner.

- The Police and Crime Panel were supportive of how challenges were being met and had provided constructive comments on the draft plan.

- It would be necessary to consider and implement new ways of working to secure greater efficiencies through collaboration with other forces and partners.

RESOLVED 2015/001

That the refreshed Police and Crime Plan 2015-18 be noted.

5. THE COMMISSIONER'S BUDGET AND PRECEPT REPORTS 2015-16

Paddy Tipping introduced the report which informed members of the decision in relation to the Precept and budget for the financial year 2015-16. The budget was based upon a 5.1% reduction in grant income and increased cost pressures of £8.4m.

During discussion the following points were made:

- A different structure to policing could see more investment of resources in high demand locations, response hubs and a named contact in each area, dedicated crime investigation teams, a different mix of police officers and police staff, investigation teams in custody areas and a highly structured problem solving model.

- Progress had been made with recruitment from BME groups and work was continuing on retention plans.

- The budget gap of £11m would be met through efficiencies identified by the force and included savings from regional collaboration and the Delivering the Future programme. Work was needed on the risks relating to delivery of efficiencies as savings from regional collaborations had been slower to realise than expected.

- It was anticipated that A19 cases would be heard in April with the decision given in summer. Reserves held for this were thought to be adequate at time but there may be additional funding available from Home Office.

- The capital programme was ambitious and needed to achieve a great deal to deliver future savings.

RESOLVED 2015/002

That the report be noted.

AGENDA ORDER

The Panel agreed to take the items on Audit and Inspection, Strategic Risk Management Report (2014/15 Quarter 3) and Business Continuity Management Report (2014/15) earlier on the agenda.

6. AUDIT AND INSPECTION

Paul Steeples introduced the report which provided an update on the status of audits and inspections which had taken place within the Force and informed the Panel of expected future audits and inspections.

During discussions the following points were made:

- There were no actions deemed to be off target or at risk of being off target.

- A new system was in the process of being implemented and there was confidence that the automated process would be robust.

RESOLVED 2015/003

1) That progress made against audit and inspection recommendations be noted.

2) That the forthcoming audits and inspections be noted.

STRATEGIC RISK MANAGEMENT REPORT (2014/15 QUARTER 3)

Paul Steeples introduced the report which provided an update on strategic risk management (to the end of 2014/15 Quarter 3) across Nottingham Police (the Force) and the Nottinghamshire Office of the Police and Crime Commissioner (NOPCC).

During discussion the following points were made:

- A review of risk management had been undertaken and was in the final stages of consultation. A Risk Management Process Guide which provided an overview of risk management techniques and their application in practice had also been produced.

- Registers were produced for four key areas each quarter that summarised identified risks and monitoring actions.

- The Panel congratulated the Force on this work.

RESOLVED 2015/004

1) That the current approach to strategic risk management be noted.

2) That the Panel had received assurance as to the effectiveness of corporate risk management within Nottinghamshire Police and the Nottinghamshire Office of the Police and Crime Commissioner.

7. BUSINESS CONTINUITY MANAGEMENT REPORT (2014/15)

Paul Steeples introduced the report which provided an update on business continuity management within Nottinghamshire Police.

During discussion the following points were made:

- The Force had adopted 13 critical functions, as recommended by the Association of Chief Police Officers, as the basis of its Business Continuity Strategy.

- The Contact Management plan which provided for the continuation of emergency call handling in the event of a loss of essential ICT, staffing or premises was the most comprehensive and routinely tested plan.

- The risks to ICT were tested and monitored across all critical functions as appropriate.

RESOLVED 2015/005

1) That the current state of business management continuity within the Force be noted.

2) That the Panel had received assurance as to the effectiveness of the Force's arrangements.

8. EXTERNAL AUDIT PLAN 2014-15

Andrew Cordoza and Simon Lacey introduced the External Audit Plan for the 2014-15 financial year accounts and gave a detailed account of the audit work for 2014-15 financial statements including the Value for Money statement.

RESOLVED 2015/006

That the External Audit Plan 2014-15 be noted.

10. INTERNAL AUDIT PROGRESS REPORT

RESOLVED 2015/007

That the report be noted

11. FREEDOM OF INFORMATION MONITORING, REVIEW AND ASSURANCE

Charlie Radford introduced the report which provided assurance that the Nottinghamshire Office of the Police and Crime Commissioner was working in full compliance of the Freedom of Information Act 2000.

RESOLVED 2015/008

That the report be noted.

12. INFORMATION MANAGEMENT REPORT

Charlie Radford introduced the report which provided data on the legislative compliance of the Freedom of Information Act 2000 and Data Protection Act 1998.

During discussion the following point was made:

- There had been a significant rise in the number of subject access requests and an increasing number that had not been completed within the 40 day deadline. An update would be provided at the next meeting.

RESOLVED 2015/009

- That the report be noted
- A further update be given at the next Panel meeting

13. CORPORATE GOVERNANCE AND WORKING TOGETHER

Charlie Radford introduced the report which gave an overview of the Corporate Governance arrangements for the Nottinghamshire Police and Crime Commissioner and Chief Constable as outlined in the Governance and Working Together document which had been previously circulated to members.

RESOLVED 2015/010

That the report be noted.

14. POLICE AND CRIME COMMISSIONER'S UPDATE REPORT

Paddy Tipping introduced the report which had been tabled at the Police and Crime Panel on 5 January 2105.

During discussion the following points were raised:

- More officers left the Force than expected and it was felt that this was due to staff considering their options for the future in an uncertain climate. It was noted that many PCSO's left to become Police Officers.
- Increased satisfaction ratings indicated that there was much to celebrate in the report.

RESOLVED 2015/011

- That the report be noted.

- That the Panel had received assurance from the Commissioner on areas of concern.

15. <u>WORK PLAN AND MEETING SCHEDULE</u>

RESOLVED 2015/012

The work programme was agreed.

The meeting closed at 4.15pm

CHAIR

For Information	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**June 2015**
Report of:	**IPCC Investigations, recommendations and actions**
Report Author:	**DCI Murphy**
E-mail:	**paul.murphy@nottinghamshire.pnn.police.uk**
Other Contacts:	**nicola.thomas@nottinghamshire.pnn.police.uk**
Agenda Item:	**6**

IPCC INVESTIGATIONS

1. Purpose of the Report

1.1 To inform the PCC in respect of complaint and conduct matters which have been referred by Nottinghamshire Police to the IPCC during the relevant period 1st October 2014 to 31st March 2015, together with relevant recommendations and actions.

2. Recommendations

2.1 That the Panel receive assurance from the processes in place relating to IPCC investigations as detailed within the report.

3. Reasons for Recommendations

3.1 To provide the PCC with relevant information and oversight in respect of cases that Nottinghamshire Police refers to the IPCC

4. Referral Volume and Demand

4.1 The data summary below outlines:

- Cases referred to the IPCC during the relevant period.
- All cases finalised by during the relevant period

It includes a breakdown of how the IPCC determined primacy of investigations referred. Details of referred cases are attached at Appendix A.

Referred	Total	Complaint	Conduct	Miscellaneous
Cases referred	41	26	6	9
Compared to previous period	-7%			
Mandatory referral	34			
Voluntary referral	7			
Supervised Investigation	2	1	1	
Independent Investigation	2	1	1	
Local Investigation	37	24	6	9

Finalised	
All cases finalised	32
Finalised “No Action”	27
Finalised “Upheld”	1
Finalised “Not Upheld”	4

4.2 The following is a description of those cases finalised outlining the nature of the complaint or conduct and the outcome.

	Circumstance	Outcome
1	Issue of penalty notice for failing to wear seatbelt based on ethnicity and therefore racist.	No evidence of discrimination; case not upheld.
2	DSI. Death of a person having been warned to attend police station for voluntary interview while suspect in metal theft enquiry.	IPCC determined no investigation necessary; satisfied with police action.
3	Prisoner secreted blade and mobile phone in intimate part of person	Policy reviewed. Management action and learning for Custody staff.
4	Taser deployment	IPCC determined no investigation necessary; satisfied with police action.
5	Taser deployment	IPCC determined no investigation necessary; satisfied with police action.
6	Injury of person in custody	IPCC determined no investigation necessary; satisfied with police action.
7	Officer used public finances for personal use; vehicle fuel. Local investigation of gross misconduct.	CPS review determined no criminal charges. Resignation prior to hearing, accepted in consideration of public interest, although a referral of this matter will be made for inclusion on national disapproved register.
8	Officer engaged in unauthorised vehicle pursuit causing injury and damage. Managed investigation of gross misconduct.	Hearing outcome; officer dismissed.
9	Fail to record information material to location of suspect in vicinity of complainant’s home address.	No conduct case to answer, dealt with by Unsatisfactory Performance Policy (UPP).
10	DSI: Fail to carry out risk assessment of person prior to leaving custody. Found dead several hours later.	Local investigation leading to management meeting. Outcome; written warning
11	Police failure to return property promptly was racially motivated.	Local Resolution. No evidence of racial motivation
12	Use of excessive force during arrest.	Criminal proceedings taken, not guilty finding. Not upheld as as conduct matter but learning identified for officer.
13	Inappropriate disclosure of sensitive images to member of the public.	Local investigation resulting in management action including negative performance record in respect of professional & ethical standards.
14	Off duty officer Common Assault and threatening behaviour aggravated by homophobic comments.	Local investigation found no evidence of hate crime. Management action including negative performance record in respect of personal responsibility.
15	Arrested person for assault, alleged racial	Local investigation; local resolution. No evidence of racial discrimination.

	discrimination by police.	
16	Perceived racist language by officer in contact with member of public.	Local investigation; officer held accountable for inappropriate language but without evidence of any racial intent. Management action delivered including negative performance record for communication.
17	Allegation of excessive force and racial motivation on stop search following vehicle fail to stop.	Local investigation; complainant failed to cooperate. Accounts given and video/audio evidence upheld officers' action. No case to answer.
18	Excessive force used by officer on arrest.	Local investigation; evidence shows appropriate use of handcuffs. No case to answer
19	Allegation, theft of money during search of vehicle.	Local investigation; no evidence to prove allegation and correct exhibits procedure followed. No case to answer
20	Excessive force on arrest including use of police dog.	Local investigation: procedures and accounts reviewed. No case to answer
21	Off duty officer alleged non accidental injury to step child (common assault).	Local investigation alongside safeguarding protocols. No case to answer
22	Officers fail to conduct diligent enquiries of investigation and make correct decisions to bail person connected with that enquiry.	Local investigation. Local resolution concerning diligent enquiries while no case to answer on bail decision
23	Excessive force by officers on arrest for disorder. Use of CS and racial motivation alleged	Local investigation; review CCTV, airwave and other accounts. No case to answer.
24	Vehicle stopped for manner of driving. Allegation motivation for stop was racially motivated.	Local resolution. Complainant engaged but refused to cooperate with Investigation Officer (IO). No evidence of racial discrimination.
25	Officer refused to record complaint by public as too busy.	Local resolution. Management action for officer who recognises failed to explain sufficiently and appeared curt.
26	Officers acted with racially biased in decisions not to arrest one party over another.	Local resolution. Conduct of investigation found no case to answer
27	Officer failed to consider welfare of person and update parent on investigation	Local Resolution. Miscommunication explained to satisfaction of complainant.
28	Incivility by off duty Special Constable in neighbour dispute. Using office of constable as influence	Local investigation; no independent evidence to substantiate allegations.
29	Allegation of unprofessional behaviour at time of vehicle stop, including inappropriate	Local resolution. Review of circumstance resulting in management action re search procedures.

	search of vehicle.	
30	Complaint of failing to maintain neighbourhood police web site with diary of public meetings.	Local resolution. Advice to Neighbourhood Teams to maintain public web site information
31	Failing to use interpreter with victim of domestic violence and effectively complete DASH form	Local resolution. Management action to officers on good practice.
32	Allegation of incivility on arrest and execution of warrant that was out of date	Local resolution. IO findings determine actions lawful, reasonable and proportionate.

4.3 Based on the above information it is asserted that Nottinghamshire Police maintains a good application of the IPCC Statutory Guidance giving due regard to compliance with voluntary and mandatory referrals. This is supported by recent feedback from the regional IPCC lead officer to Nottinghamshire Police; acknowledging its strength in preventative work and improved timeliness of reporting.

4.4 Emerging themes of cases referred to the IPPC are recognised as areas of opportunity for organisational learning (see Audit Scrutiny Report: Organisational Learning). Current themes include:

- Use of force pertaining to taser
- Monitoring and searching during custody
- Safeguarding vulnerable people
- Racial and other discrimination combined with miscommunication
- Inappropriate police officer conduct, failing to recognise professional boundaries

4.5 Investigations connected to these themes often result in findings which satisfy the police conduct and regulation standard. Aspects of police legitimacy are also routinely examined, as factors of fairness and proportionality are applied alongside the legal basis for police action.

4.6 Nottinghamshire Police, Professional Standards Directorate (PSD) is presently undertaking an internal review of its engagement strategy. It seeks to maximise opportunities with representative community groups often affected by police contact. The identification of common themes will help inform this work as the Directorate develops collaboration within and beyond the organisation.

5 Financial Implications and Budget Provision

5.1 There are no specific financial implications in respect of this report. The Directorate is aware of its responsibilities in relation to 'Spending Money Wisely' and the information within this report exemplifies approaches to manage resources effectively.

5 Human Resources Implications

5.1 PSD resources are under constant review, ensuring that the department has both the capacity and capability to meet demand. Where additional resources have been

required these have been authorised and temporary staff recruited where necessary.

6 Equality Implications

6.1 No specific implications

7 Risk Management

7.1 It is essential the public have confidence in the service Nottinghamshire Police provide.

7.1 Organisational learning is a whole organisation responsibility which helps to mitigate risk. Professional Standards Directorate contributes to risk management through the sharing of learning and encouragement of change across the organisation where appropriate.

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

8.1 IPCC Investigations ensure that the public can have confidence in the independence, accountability and integrity, of the most serious of cases, most notably Death or Serious Injury.

8.2 It is the responsibility of the force to ensure mandatory and voluntary referrals are made in a timely fashion and that appropriate support is given to IPCC investigators. This delivers professional services in support of the organisations PROUD values.

9 Changes in Legislation or other Legal Considerations

9.1 None

10 Details of outcome of consultation

10.1 None

11. Appendices

11.1 Appendix A - Cases referred to the IPCC 1st October 2014 to 31st March 2015.

APPENDIX A

Summary of IPCC Referrals between 01-Oct 14 to 31 March 15

	Referred To IPCC	Reason Referred	Mode of referral	IPCC Decision	Investigation Status
1	2-Oct-2014	Allegation that whilst carrying out a search unnecessary force was used.	Mandatory	Local	Live
2	7-Oct-2014	Alleges that during the journey to the Police Station the complainant experienced a claustrophobic episode in the rear of the van and fell off the seat causing injuries.	Mandatory	Local	Live
3	8-Oct-2014	Allegation that during the arrest excessive force was used amounting to ABH	Mandatory	Local	Live
4	9-Oct-2014	Allegation that son was assaulted during arrest and her son victimised by the Police because of ethnicity.	Mandatory	Local	Live
5	15-Oct-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Pending outcome of IPCC Appeal
6	28-Oct-2014	Criminal allegation regarding the officers inappropriate relationship with a colleague.	Mandatory	Local	Live
7	29-Oct-2014	Allegation that the complainant was only stopped because of ethnicity. Excessive use of handcuffs.	Mandatory	Local	Appeal Period
8	30-Oct-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Appeal Period
9	5-Nov-2014	Alleged discrimination on grounds of disability.	Mandatory	Local	Appeal Period
10	6-Nov-2014	Allegation that complainant suffered a heart attack during arrest.	Mandatory	Supervised	Live
11	7-Nov-2014	Complaint received regarding a negligent discharge of a firearm causing a minor injury to a member of the public.	Mandatory	Independent	Live
12	10-Nov-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Finalised
13	10-Nov-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Live
14	11-Nov-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Live
15	1-Dec-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Finalised
16	8-Dec-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Live
17	29-Dec-2014	Allegation of discriminatory behaviour.	Mandatory	Local	Live
18	31-Dec-2014	Allegation of assault and discriminatory behaviour	Mandatory	Local	Live
19	13-Jan-2015	Allegation of insufficient care during the investigation of serious historic allegations contributing to the victim's suicide.	Mandatory	Local	Live
20	16-Jan-2015	Allegation that racist language was used towards the complainant.	Mandatory	Local	Live
21	19-Jan-2015	Allegation that racist language was used towards the complainant.	Mandatory	Local	Live
22	26-Jan-2015	Allegations that officers failed to act in a diligent manner for person who was subsequently found to be deceased.	Mandatory	Local	Live
23	3-Feb-2015	Allegation ofexcessive force by police officer against child causing trauma.	Voluntary	Local	Live (currently SJ)
24	4-Feb-2015	Allegation of discriminatory behaviour.	Mandatory	Local	Live
25	25-Feb-2015	Allegation of discriminatory behaviour.	Mandatory	Local	Live
26	15-Dec-2014	Allegation that a detainee suffered a serious injury whilst detained in custody.	Voluntary	Independent	Live
27	16-Dec-2014	Allegation of racist languge used towards a black male.	Mandatory	Local	Live
28	3-Feb-2015	Criminal allegation regarding police officer pursuing inappropriate personal relationships during the course of policing duties.	Mandatory	Supervised	Live
29	9-Feb-2015	Allegation regarding failure to take appropriate action regarding a detainee concealing drugs while in custody.	Voluntary	Local	Live
30	14-Feb-2015	Failure to take steps that a vulnerable person was safeguarded appropriately.	Voluntary	Local	Live
31	1-Oct-2014	DSI: Fail to carry out risk assessment of person prior to leaving custody. Found dead several hours later.	Mandatory	Local	Finalised
32	2-Oct-2014	Serious injury to a detainee whilst in custody	Voluntary	Local	Finalised
33	16-Oct-2014	Taser deployment	Mandatory	Local	Finalised
34	16-Jan-2015	Death following a call to the control room	Mandatory	Local	Finalised
35	27-Oct-2014	Taser deployment	Mandatory	Local	Finalised
36	20-Nov-2014	Serious injury which occurred during the arrest.	Mandatory	Local	Finalised
37	8-Dec-2014	Fail to correctly supervise person in custody found self harming.	Voluntary	Local	Live
38	13-Jan-2015	DSI. Failure to notify DVLA of driver's medical condition prior to fatal road traffic collision.	Voluntary	Local	Live
39	27-Feb-2015	Police interaction which is alleged to have caused a heart attack.	Mandatory	Local	Live
40	28-Feb-2015	Following attendance at an incident the individiual caused himself serious injury which required medical assistance.	Mandatory	Local	Live
41	4-Mar-2015	Taser deployment	Mandatory	Local	Finalised

For Information	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**June 2015**
Report of:	**FORCE IMPROVEMENT ACTIVITY, LESSONS LEARNED MONITORING, IPCC LESSONS LEARNED REPORT**
Report Author:	**DCI MURPHY**
E-mail:	**paul.murphy@nottinghamshire.pnn.police.uk**
Other Contacts:	**nicola.thomas@nottinghamshire.pnn.police.uk**
Agenda Item:	**7**

FORCE IMPROVEMENT ACTIVITY LESSONS LEARNED

1. Purpose of the Report

1.1 To inform the PCC in respect of force improvement activity, lessons learned monitoring, and the implementation of learning from the IPCC 'lessons learned' bulletins during the relevant period – October 2014 to March 2015.

2. Recommendations

2.1 That the Audit and Scrutiny Panel notes the report.

3. Reasons for Recommendations

3.1 To provide the PCC with relevant information and oversight of Nottinghamshire Police response to lessons learned as a result of public complaints and internal conduct matters.

4. Context

4.1 The identification of organisational learning within the context of Professional Standards is sourced through assessment of three key business areas:

- Complaints from members of the public
- Police conduct
- Independent Police Complaints Commission (IPCC)

4.2 The strategic aim is to ensure best practice across the organisation by sharing knowledge and learning with relevant business areas.

4.3 In addition to organisational learning, individual accountability is expected of specific officers through "management action" by their local leader.

4.4 Monitoring and evaluation of this approach is organised through the national police complaints recording system, "*Centurion*".

4.5 Where learning is considered relevant to the wider organisation it is shared with respective discipline heads including for example Learning & Development, Custody or Contact Management. Learning is also shared through the Police Intranet and "Keeping You Informed" bulletins. Discipline heads are invited to review current

practice against specific learning and if appropriate, deliver changes to policy and practice.

4.6 Governance and oversight of PSD organisational is secured at the '*Professional Standards, Integrity and Ethics Board*' Chaired by Deputy Chief Constable Fish.

4.7 Monitoring, evaluation and reporting mechanisms have recently been developed which will enhance the governance of learning and development at the *Professional Standards, Integrity and Ethics Board*. This scheme improves clarity of ownership for learning across a range of business disciplines as appropriate.

5. Learning from Complaints, Conduct, IPCC

5.1 Listed below are thematic examples of current learning during the reporting period. As described at 4.5, where appropriate, these topics will have been shared with discipline heads for consideration.

5.2 **Maximising use of the National Decision Making Model** (NDMM).
(Source: Centurion Lessons 281, 306, 307, 309).

Example:

- Include greater detail prior to the deployment of officers to inform a family of the death of a relative. Recognising the speed of information via social media, consideration should be given to attendance within 60minutes.

5.3 **Improving application of forms and notices with the public.**
(Source: Centurion Lessons 308, 332)
Local leadership: BCU Operations & Neighbourhood Policing

Examples:

- Community Resolution forms require sufficient information recorded to allow all parties concerned to supply a signature in full knowledge of the matter at issue.

- When serving a harassment warning letter on a person, it is fair and proportionate to give opportunity for that person to provide an account or explanation. This should be recorded as information/intelligence.

5.4 **Recognising and responding to needs of vulnerable people**
(Source: Centurion Lessons 298, 300, 332)

Examples:

- When dealing with a person with learning difficulties, consideration should be given to seeking support from any relevant social or health service the person may already be receiving advocacy from. This will improve communication and satisfaction.
- The police engagement of people with mental health conditions can vary outside of force boundaries. Consistency could be achieved through more regional police approaches in line with Health and East Midlands Ambulance Service areas.

- Occasions arise where the force may be slow to recognise vulnerability and officers unsure how to gain access to appropriate provision. Greater focus on the individual perspective, rather than “task oriented”.

5.5 **Safeguarding property & information on rights to property**
(Source: Centurion Lessons 280, 333, 352)

Examples:

- Opportunities exist to have due regard to “valuable” and unique property items. Recording detail of its condition including video footage of items can prevent future allegations of mishandling. Use of Body Worn Video during searches may assist reduce complaints and conduct.
- Complaints of failure to return property could be minimised through improved information. Use the Internet with FAQs on rights, explanation, venues and opening hours.
- Speed and timeliness in returning property is important to reduce unnecessary complaints.

5.6 **IPCC Learning**

Two Learning Lesson Bulletins have been released by the IPCC since October 2014 (see Appendix 1 & 2). Each bulletin has been shared with Departmental and BCU leads inviting consideration as to how the evidence can be used to inform business locally.

5.7 Bulletin 22, was a general topic circulation with the following areas of interest.

Suitability to hold a shotgun licence	Do you make sure that people are told at least 12 weeks before the expiry of certificates to allow enough time for the renewal process?
Responding to concerns about a woman	How does your police force make sure that incident logs are not downgraded without positive action being taken to deal with the incident?
Searching for a missing person	Does your police force provide clear guidance to officers about when searches should take place, especially if someone is missing from a hospital?
Managing a pursuit	What steps has your police force taken to make officers and staff aware of the general principles contained in the Authorised Professional Practice (APP) on Police Pursuits (2013)?

5.8 Protocols within Nottinghamshire Police have been reviewed against the challenge questions from the above bulletins. The organisation has satisfied itself that the aspect of learning are already fulfilled and no change is necessary.

5.8 Bulletin 23 is an article dedicated to Custody matters which presented a number of questions including:

Pre-arrest	Do you carry out a risk assessment before you arrest someone on a warrant?
	What contingencies would you consider as part of the arrest process?
Medical care	What advice do you give to officers on their responsibilities in relation to people who are detained under section 136 of the Mental Health Act?
Risk assessment, rousing and checks	What training or guidance have you given to officers to help them spot and deal with people who have head injuries?
	What steps do you take to make sure that officers are able to carry out constant observation of detainees effectively?

5.10 Bulletin 23 has prompted direct engagement with Criminal Justice lead officers. Aspects have been reviewed to the satisfaction of local leadership. However, plans are presently being made to undertake scenario based training on aspects of IPCC and local learning. This scenario will be based on factors affecting decisions prior an event resulting in death in custody.

6. Financial Implications and Budget Provision

6.1 No specific financial implications have been identified.

7. Human Resources Implications

7.1 No specific implications.

8. Equality Implications

8.1 No specific internal equality implications are identified. Learning around improving services to the vulnerable, the young and in respect of mental health services will enhance equality of service across the local communities.

8 Risk Management

9.1 The process as described ensures that learning is embedded in a way that mitigates against risk.

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

10.1. Strategic Priority Theme 1: Protect, support and respond to victims, witnesses and vulnerable people.

11. Changes in Legislation or other Legal Considerations

11.1 None.

12. Details of outcome of consultation

12.1 None.

13. Appendices

13.1 Appendix A IPCC BULLETIN 22

13.2 Appendix B IPCC BULLETIN 23

LEARNING THE LESSONS

ASK YOURSELF: Could it happen here?

www.ipcc.gov.uk/learning-the-lessons

November 2014

Bulletin 22 – General

Learning the Lessons bulletins summarise investigations conducted by the Independent Police Complaints Commission (IPCC) or police forces where learning opportunities are identified. Police forces facing similar situations to those described can use the experience of other forces to improve their policies and practices. The bulletin challenges forces to ask "Could it happen here?"

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Contacting us

Please email learning@ipcc.gsi.gov.uk with any queries or to join our mailing list.

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Case summaries

Firearms licensing

1 Suitability to hold a shotgun licence

Police officers contacted a man's GP after he referred to his depression in an application to renew his shotgun license. After speaking to his GP the firearms enquiry officer decided to approve the application for renewal.

The officer sent his completed report to the firearms licensing unit, where it awaited review. Meanwhile, the man's shotgun certificate expired.

Several weeks later the man's paperwork was referred to the police force's firearms licensing manager who wrote to the man's GP for more information about his medical history.

The GP said that the man had been depressed, had suicidal thoughts and was on medication that could affect his judgement and level of consciousness. The GP said that the man was unsuitable to hold a shotgun certificate.

The force's forensic medical examiner reviewed the report from the GP and asked for an up-to-date psychologist's report.

At no point was consideration given to removing the firearms from the man.

A few days later police received an emergency call from the man's wife saying that he had hurt her in the past and that she was afraid that he would do so again. Officers went to the man's home address, and although he appeared drunk, he was calm and pleasant. The man's wife did not make any criminal allegations so officers provided appropriate advice and left. The incident was recorded as a non-crime domestic and closed with no further action taken.

The same day an officer spoke to the man and advised him to speak to his GP about obtaining a psychologist's report. The man told the officer that, as the report was likely to be too expensive, he would probably sell his shotguns.

The next day police received a 999 call from the man's wife who said that he had a gun and was threatening to shoot her and the dog.

Armed officers and negotiators were deployed to the scene.

After lengthy negotiations, during which the man threatened to shoot officers, he finally emerged from the property in the early hours of the morning armed with a shotgun. Officers were forced to discharge three shots which hit him in the chest and leg when he refused to comply with police warnings to put the shotgun down.

Key questions for policy makers/managers:

- Do you make sure that people are told at least 12 weeks before the expiry of certificates to allow enough time for the renewal process?
- What steps has your police force taken to make sure that information about a person's suitability to hold firearms, in particular information from medical professionals, is reviewed promptly, and that proper consideration is given to removal of firearms at the earliest opportunity where necessary?
- Does your police force check whether people have had recent contact with the police, and what the nature of this contact was, before considering their suitability for a shotgun certificate?
- What steps has your police force taken to identify peak periods for your firearms licensing department, and to make sure that the department is properly resourced to match demand?

Key questions for police officers/staff:

- When attending incidents where there may be a risk to the safety of anyone at the address or the wider public, do officers find out whether anyone at that address is licensed to possess a firearm or shotgun?
- In such incidents, where there is a firearms/shotgun licence holder involved, do officers give immediate consideration to seizing any weapons to reduce the threat of harm?

Action taken by this police force:

- The notice period given to licence holders for renewals is now 12 weeks. It is up to the licence holder to present a fully completed

application and payment at least eight weeks before the licence expiry date.

- If the licence expires before the renewal is completed then the licence holder should lodge their weapons with a registered firearms dealer.
- An amended process has been implemented whereby all renewals and applications flagged as referring to medications or other medical concerns are reviewed by the unit manager in light of the medical advice presented. Any confirmed cause for concern will lead to action to suspend and review the licence. If something is not clear in the medical advice then it will be referred to the forensic medical examiner for interpretation and any action overseen by the unit manager.

Outcomes for the officers/staff involved:

- No individuals had a case to answer in respect of misconduct or gross misconduct.

Click here for a link to the full learning report

Concerns for welfare

2 Responding to concerns about a woman

Around 6.45pm police received a call from a member of the public who was concerned about her daughter. She said that her daughter had been having problems with her eight year old son and was 'at the end of her tether'.

The call handler began to log the information and graded the incident as grade 1 requiring emergency attendance. While still inputting the information the call handler transferred the log to a radio operator so that the call could be allocated to a police patrol. The log was entitled 'problem with child' as this was the initial information she had received.

During the call the woman said that her boyfriend had previously stopped her from taking an overdose, however the call handler was unable to change the title of the log.

While the call handler was still inputting information the radio operator made a request to a supervisor that the call be re-graded to grade 2, requiring attendance within an hour. The re-grade was authorised by a supervisor but the reason for this was not recorded on the log.

At the time, the supervisor was performing the role of a radio assistant because a member of staff was missing from the control room. She was unable to act as a radio assistant and monitor incident logs at the same time as the computer system was not set up to allow this. As a result, she asked another supervisor with responsibility for a different geographical area of the police force to monitor her incident logs.

Neither of the supervisors accepted responsibility for re-grading the call and the police force computer system could not show which one had done it.

Due to other priority incidents, no officers were available to respond to the call, even when the log was escalated to a patrol sergeant and a duty inspector. Attempts were made to see if cross border patrols could attend this incident but only the division where the incident was taking place was checked. Neighbouring divisions were not checked as should have been done according to local policy.

At 9.25pm a radio operator allocated the call to a police constable. He advised the police constable, who he knew was in the police station, to read the log which was 12 pages long. The officer read 11 of the 12 pages in two minutes. However, the officer said he believed he was dealing with an issue about a family's ability to deal with the behaviour of a child and claimed he had not seen the notes about a suicide risk.

The officer went to the woman's home at about 10.20pm accompanied by another officer and found the house in darkness. He knocked on the front door and left when he did not get a response. He told the control room that someone should visit again in the morning.

Overnight the incident log was read twice by a sergeant on duty but no further action was taken.

An officer went to the house at around 8.15am the next day. After gaining entry to the property she found the woman's body.

Key questions for policy makers/managers:

- Does your police force's command and control system allow officers to update titles of incident logs?
- How does your police force make sure that incident logs are not downgraded without positive action being taken to deal with the incident?

- Does your police force's mobile data provision allow officers to read the log when despatched?
- What steps has your police force taken to make sure that officers working in the control room are able to perform multiple functions if their role requires it?
- How does your police force make sure that officers use all available resources to respond to incidents?

Key questions for police officers/staff:

- What steps do you take to familiarise yourself with all available information before deciding how a log should be dealt with?
- Are you aware of the importance of making sure that you log into police force IT systems with your own ID, and of not sharing your ID or passwords with colleagues to make sure that action taken can be audited?

Action taken by this police force:

- The police force produced a briefing document about re-grading of calls. This clarified that: no incident should be downgraded except for a scheduled appointment, and where this is the case this must be authorised by an inspector with a full rationale entered on the system; and all grade 3s outstanding after two hours must be switched to a supervisor, and if still not actioned after three hours the supervisor should liaise with the divisional inspector to review the resources.
- Guidance was issued around the use of IT when acting in a dual role of a supervisor and a radio operator.

Outcomes for the officers/staff involved:

- The radio operator who requested the call be downgraded received management action.
- The two supervisors involved in re-grading the call received management action.
- A radio operator who allocated the incident to an officer received management action for failing to inform the officer about the contents of the incident.
- The police officer who read the log and went to the house but could not gain access received management action.
- The sergeant who read the log but took no action on the morning before the woman's body was found received management action.

Click here for a link to the full learning report

3 Checking on an elderly woman

Around 2.30pm a man visited his 82 year old friend who lived alone at home. His visit was pre-arranged but there was no reply when he knocked at her door. The man returned home and telephoned his friend several times but was unable to reach her.

At around 10.20pm the man called the police as he was concerned about his friend's welfare.

A call handler received the call and the incident log was graded as a priority three response, requiring police attendance within one hour.

Around an hour after the man's call the police unit allocated to the call was diverted to another incident with a higher priority.

No action was taken in relation to the call until around 2am the next day when a control room supervisor reviewed the log and endorsed it. Another control room operator viewed the log at around 3.15am, but again, no resources were allocated and no one was made aware that the call was still outstanding.

At 6.30am the night duty manager was preparing to handover to the oncoming shift. He found out that the incident had still not been dealt with. He passed the log to one of the morning shift sergeants, who immediately instructed officers to go to the woman's address.

Police arrived at around 7.15am. After gaining entry, they found the woman conscious, but seriously ill. An ambulance was called and she was taken to hospital, but died a few days later.

The police approach to dealing with vulnerable adults is currently set out in national guidance on Safeguarding and Investigating the Abuse of Vulnerable Adults (2012), published by the Association of Chief Police Officers (ACPO).

This is available online at http://library.college.police.uk/docs/acpo/vulnerable-adults-2012.pdf

This includes a list of relevant questions and considerations as an aid to inform the stages of the policing national decision model.

Key questions for policy makers/managers:

- How does your police force make sure that calls from people about concern for vulnerable people are dealt with appropriately?
- What steps has your police force taken to make sure that outstanding calls are properly resourced and that officers make use of all available resources?
- Does your call handling system automatically update control room supervisors when calls have not been resourced within specific time limits, when resources are sent elsewhere, or logs are viewed or deferred without positive action?

Key questions for police officers/staff:

- How do you ensure when taking initial calls from members of the public you get enough information to be able to effectively assess the potential for harm, which would then decide the priority of the call?

Action taken by this police force:

- The police force developed a call handling policy that details the expectations of specific role holders in relation to call handling.
- The police force developed a protocol that defines responsibilities and action in relation to resourcing outstanding calls.
- The police force made clear to staff that they are expected to escalate logs that cannot be resolved within certain time limits to supervisors and managers.

Outcomes for the officers/staff involved:

- The two members of staff in the control room who reviewed and endorsed the open log without actioning it received management action, and action plans were developed to improve their future performance.

Click here for a link to the full learning report

4 Allocating incidents

Around 4.30pm a mental health outreach worker called police about one of his patients that he was concerned about. He told the call taker that the man was a paranoid schizophrenic, that he had not been able to reach him all day, and that the man's friends had not seen him all week.

The incident was graded as a 'priority' and categorised as 'concern for safety', meaning that officers should attend 'as soon as possible'.

About ten minutes later a dispatcher assigned the incident to an officer on his radio. The dispatcher was filling in for a colleague and was not familiar with the area where the incident was.

Around 10pm the officer contacted the control room to say that the incident was not in his area. This was over five hours after being allocated the incident.

The incident was re-assigned to another officer.

Around ten minutes later the assigned officer radioed the control room to say that there was no reply to knocking at the address and that the lights were on and the curtains were drawn.

A sergeant in the control room agreed that entry should be forced. However, the officer at the property was not trained in forcing entry and did not have the correct equipment so another officer was assigned to the incident.

When the officer arrived he tried to gain entry but was unable to do so due to the security on the door, and so the fire service was called. When the fire service gained entry at 11pm the man was found dead in an armchair.

The control room emailed the coroner's office to inform it of the death but due to the time of night the email was not read until the following morning.

The subsequent investigation found that the coroner's office should have been contacted by telephone using the on-call system as the death was unusual but officers did not treat it as such. This would have made sure that a police officer was available to accompany the body to hospital.

Key questions for policy makers/managers:

- What steps does your police force take to check the location and status of officers before allocating incidents to them?
- Does your command and control system flag unattended incidents even when officers are allocated?
- Does your police force have effective mobile data provision that prevents officers having to drive back to the police station to view an incident log?

- How does your police force keep track of whether an officer has accepted an incident that has been allocated to them?
- Are your officers aware of the differences between suspicious and unusual sudden deaths?
- Is your police force able to contact the coroner's office out of hours so there is no delay in the case being picked up?

Key questions for police officers/staff:

- Do you keep your control room updated if you are allocated an incident to deal with and you are unable to do so within the time expected? This is so that, if necessary, the incident can be re-allocated to someone who is able to attend more quickly.

Action taken by this police force:

- Following this incident a chief inspector sent out a police force-wide email stating that: "with immediate effect, any incident recorded as concern for safety where risk to life factors are present and the individual may be at risk of significant harm will be graded as urgent".
- Management input was provided to all supervisors to tell dispatchers that when sending officers to incidents consideration is given to both the officer's and the incident's location.
- A learning poster was developed around the use of the coroner's office's on-call telephone system.
- Student officers and supervisors training includes input that because a death is not suspicious it can still be unusual, and continuity of a body is important to any subsequent criminal investigation or court proceedings.

Outcomes for the officers/staff involved:

- The officer who was originally allocated the incident received words of advice for delaying viewing the incident.

Click here for a link to the full learning report

Missing persons

5 Searching for a missing person

Around 3.15pm police received a telephone call on the non-emergency police number from a nurse at a hospital who reported a missing patient. The nurse explained that the man had been detained under Section 3 of the Mental Health Act 1983, that he had been quite anxious recently, and that he would be considered a risk to the public. They also said that there were a number of additional risk factors once medication was not in his system.

The operator created an incident log but incorrectly recorded it as escorted leave instead of unescorted leave and missed out some of the detail provided by the nurse. When the hospital address was entered onto the log, the system automatically generated a different address.

The call was graded 'standard response' which required a police response within four hours. The operator also decided that the man was a low-risk missing person as the nurse said that he may have just gone for a drink.

At approximately 4pm an inspector reviewed the log and decided that the man should be treated as a missing person. They assessed the risk level to be low and recorded an entry on the log requesting that a police patrol be deployed. This did not take place within the required response time of four hours.

In the early hours of the following day another inspector requested the attendance of police at the hospital. Officers attended but went to the wrong address as the address was incorrect on the log. Once at the correct address the officers spoke to a nurse and searched the man's room. They did not search the hospital due to the time of night, the disruption it may cause to other patients, and a lack of resources to conduct a full search. The officers were told that hospital staff had searched the grounds and buildings prior to their arrival. While one officer searched the man's room, another officer telephoned his mother to find out whether she could provide any information to assist the search for her son.

On their return to the police station the inspector deemed the man to be a low-risk missing person and asked an officer to complete a missing person form. The inspector had to attend a high priority incident and was unable to review the form before his shift ended.

The next day another inspector told officers to go back to the hospital to find out how concerned staff were that the man was still missing. Hospital staff told the officers that they were very concerned about the man as he would be considered a risk to the public when his medication wore off. The officers did a quick search of the hospital but did not locate the man as it was dark and the grounds were not well lit.

The next day the inspector raised the risk assessment to medium because of the information from hospital staff. That afternoon the man's mother contacted police as they had failed to provide a promised update.

Over the next few days various other enquiries took place including liaison with another police force where the man's ex-partner lived, a check of other hospitals, circulation of a photograph of the man, and the drafting of a press release. Throughout this period the risk assessment remained at medium.

Two days later a solicitor contacted police on behalf of the man's mother requesting an update. An agreement regarding regular contact with her was put in place by the police force.

Two days later police carried out a detailed search of the hospital and grounds. The man was found dead in a wooded area of the hospital grounds approximately 30 metres from the main entrance to the hospital building. There were no suspicious circumstances and it appeared he committed suicide on the day he was reported missing.

Key questions for policy makers/managers:

- Does your police force provide clear guidance to officers about when searches should take place, especially if someone is missing from a hospital?
- Does your police force have a policy for keeping the family members of a missing person informed during an investigation?
- Does your police force have an appropriate mechanism for deciding the risk category of missing people?
- What steps has your police force taken to make officers aware of the latest national guidance relating to risk assessment for missing persons?

Key questions for police officers/staff:

- How would you make sure you have secured all available information relating to a missing person to enable you to make a full assessment of their vulnerability and potential risk to others?
- If you were dealing with someone who is vulnerable, who would you inform and when?
- How would you make sure that you have fully searched likely locations as much as possible in the circumstances?
- If darkness stopped you from making a full search, how would you make sure that a fuller search is carried out in daylight hours?
- How do you make sure that you are aware of the latest national guidance relating to risk assessment for missing persons?

Action taken by this police force:

- A re-drafted missing persons' policy was produced with particular reference to searching, supervision and risk assessments.
- The police force drafted guidance which provides advice and clarity to supervisors in dealing with reports of missing persons.
- Local Policing Support will follow-up the distribution of the new policy to ensure lessons are fully learnt. This may take the form of a critical incident seminar targeted at sergeants and inspectors.
- Chief inspectors will address the learning for all the officers involved in our investigation directly with those concerned and will make sure that appropriate advice is given.

Outcomes for the officers/staff involved:

- The operator who did not record all information on the original log received management action.
- The inspector who assessed the risk level to be low received management action.
- Two police constables received management action about the need to complete the relevant missing person form according to their risk assessments.
- Three other inspectors received management action after failing to conduct reviews in line with force policy.

Click here for a link to the full learning report

Domestic abuse

6 Responding to domestic abuse incidents

A woman came to the attention of police when she reported that her partner had threatened to harm their baby. When officers arrived they found the baby was fine and decided no further action was required.

On two separate occasions over the coming weeks police received information that the man had made threats to the woman. He was arrested on both occasions, however no further action was taken as the woman did not support this. In both cases the police failed to contact the witnesses for more information. Domestic violence forms were completed in all three cases but contrary to force policy only two were forwarded to the council's social care department.

It was nearly a year before officers next responded to a call at the couple's property. They found the man had barricaded himself in the house and had a cut to his wrist, while the woman was drunk at a neighbour's house with the children. Officers decided they had no reason to detain the man. No domestic violence form was completed and no referrals were made.

A few months later the woman called police to report that the man had been out with their baby but was now refusing to return her. Officers attended and advised the woman to seek legal advice as they could not remove the baby from her father. A domestic violence form was completed and the risk was assessed as standard. The woman subsequently obtained a court order for the return of the baby and a non-molestation order against the man.

The day after the non-molestation order was granted the woman reported that the man had breached the order by sending her a number of text messages. An officer attended but did not think that the texts contravened the order. The woman decided not to proceed with her complaint after the officer told her that if the man was remanded it might clash with a scheduled family court hearing. A domestic abuse form was completed. It was not re-assessed by a domestic abuse liaison officer as the police force had recently changed its policy regarding standard risk domestic incidents due to a backlog of these forms.

Five days later the woman reported another breach of the order. The same officer attended but did not complete a domestic violence form as he thought the incident was a continuation of his last visit. He then completed a form from police records without speaking to the woman. Again, the form was not re-assessed. The next day a supervisor decided that there was insufficient evidence to justify taking further action.

Over a week later the woman reported a further breach. Another officer attended, took a statement and completed a domestic violence form. He assessed the risk as medium, but despite the woman giving a positive response to a question about stalking and harassment, he failed to ask the 11 additional questions relating to risk factors for future violence.

Over the next few days several attempts were made to arrest the man for a breach of the order but officers were unable to find him. Officers failed to check with the woman if she knew of his whereabouts.

Eleven days after making her complaint the woman withdrew it as she said that relations between her and the man had improved.

The following day the man attended a police station where he was arrested. The case was referred to the Crown Prosecution Service (CPS) which decided that no further action should be taken. However, it was not given information about previous incidents involving the couple.

The domestic violence form which had been completed earlier was re-assessed by a domestic abuse liaison officer who agreed with the medium risk assessment. Despite the change in risk assessment, no further contact was made with the woman.

Later that month the woman reported a further breach. Responsibility for investigating the latest complaint was passed to an officer who was not aware of the history between the man and the woman. The officer did not complete any intelligence checks as he assumed that any relevant information would have been included in the arrest pack. The man was not arrested immediately as the officer was due to go on leave and a new policy for the local policing area said he should retain the case rather than hand it over.

A few days later officers attended the woman's house after reports that the man was there and had a gun. When officers entered the property they discovered the bodies of the woman and her baby. The man was subsequently sentenced for their murder.

Key questions for policy makers/managers:

- Does your police force remind officers about the importance of speaking to independent witnesses?
- How does your police force make sure that domestic violence forms are forwarded to appropriate agencies where relevant?

- What steps has your police force taken to make sure that officers attending similar incidents give consideration to the welfare of children within the household?
- What training has your police force given to officers to make sure they obtain good quality statements?
- How does your police force make sure that officers complete domestic violence forms when attending relevant incidents?
- Does your police force ask officers to obtain a signature from the victim when they refuse to complete the risk assessment?
- How does your police force make sure that officers complete all relevant intelligence checks when preparing arrest packages?
- What steps has your police force taken to make sure officers keep victims properly updated with the progress of investigations?

Key questions for police officers/staff:

- Have you secured as much information and intelligence as possible to enable you to carry out a full risk assessment of the vulnerability of those involved in domestic violence incidents?
- Do you fully understand how to escalate cases where you consider there is a high degree of risk to anyone involved in such cases?

Action taken by this police force:

- Officers were reminded to collect evidence from independent witnesses.
- The domestic violence form was updated so officers have to obtain a signature from the victim if they refuse to complete the risk assessment.
- Officers are now trained to ask additional questions if the victims provide a positive response to stalking and harassment questions.
- Officers are now required to confirm that intelligence checks have been carried out when developing arrest packages.
- Computer systems now include reminders to prompt officers to update the victim.
- Area supervisors now develop case action plans to ensure that all reasonable lines of enquiry are considered. This is reviewed on a regular basis.

Outcomes for the officers/staff involved:

- No evidence was found that any police officer or police staff member committed a criminal offence or breached the standards of professional behaviour.

Click here for a link to the full learning report

7 Using restorative justice

A woman contacted police to report concerns that her mother had been assaulted by her father and that he may be preventing her from leaving the house.

An officer went to the parents' house and spoke alone with the mother while the father was in another room.

The mother told the officer that she had been involved in an argument with her husband a few days earlier during which he had pushed her backwards, causing her to bang her head and worsen a previous back injury. She said that she was shocked that her daughter had called police.

The mother became tearful and said that she was suffering from depression and that her husband had an aneurism, which she had difficulty coping with. She said that she did not want to make a formal complaint and would not assist or attend any future court appearance.

The officer spoke to the father who accepted what he had done to his wife and appeared to be very remorseful.

The officer decided not to arrest the father because the mother was determined not to help the police. The officer decided that restorative justice was a way forward as it would allow a resolution acceptable to all parties.

Restorative justice is a process that brings together the victim of a crime and the perpetrator to discuss the crime, the motivation for the crime, and to impress upon the perpetrator its consequences, reach resolution and through this obtain closure for the victim.

The officer made a notebook entry about this which was signed by the mother and the father. The officer also contacted her supervisor to ask them to approve the decision, which she did.

Less than a month later, the mother was assaulted by her husband and died.

Key questions for policy makers/managers:

- Does your police force provide officers with clear guidance and training on when restorative justice should be used?
- Has your police force updated its guidance and training to reflect the national guidance from the Association of Chief Police Officer's (ACPO) lead for domestic abuse that restorative justice should not be used as an alternative to prosecution in cases of domestic abuse between intimate partners?

Key questions for police officers/staff:

- Are you clear about the types of crimes and incidents which may be appropriate for a restorative disposal and those which are not?
- How do you make sure you are you making a decision about taking a restorative approach which is truly victim-led?
- Do you know which crime and incident types require authority from a senior officer before a restorative approach can be taken?
- What would prompt you to make a referral to adult social care or a domestic abuse support service?

Action taken by this police force:

- Following the incident police force policy was strengthened to ensure that incidents involving domestic abuse should never be diverted away from the criminal justice system or disposed of by way of on-street disposal.

Action taken by ACPO:

- The national policing lead for domestic abuse wrote to all chief constables and commissioners to say that until alternative ways of dealing with domestic abuse have been thoroughly evaluated, restorative justice should not be used as an alternative to prosecution. This was in response to a national recommendation made in this case and work undertaken by a working group set up by the IPCC. However, restorative justice may be considered if certain criteria are met in cases where there is no intimate partner relationship or history of such, and offences do not include violence, stalking, harassment or sexual offences.

Outcomes for the officers/staff involved:

- There was no evidence that any police officer or member of police staff committed a criminal offence or breached the Standards of Professional Behaviour.

Click here for a link to the full learning report

Roads policing

8 Managing a pursuit

Around 3am two police officers were on patrol in a marked police car. They saw a car that they wanted to stop due to its speed near the centre of a city.

The driver of the police car illuminated the vehicle's lights to indicate for the car to stop. However, the car went through a red traffic light and the police driver used his radio to alert staff in the control room that he was behind a car failing to stop. The police driver was not an authorised pursuit driver and was not in an authorised pursuit vehicle despite engaging in a pursuit. The control room operator who dealt with the incident did not ask the police driver for this information. National pursuit policy says control room staff should, where necessary, ask the information source in order to find out specific points relating to the pursuit criteria.

An incident log was created on the police force's command and control system by the control room operator who graded the incident as an emergency. This requires an immediate emergency police response.

Another control room operator verbally made the control room supervisor aware of the incident and began to monitor the incident on her computer screen and via CCTV.

Around this time another police vehicle which was part of the traffic unit told the police control room that he was going to the location of the incident but did not give specific details about his location. He said he was an authorised driver in an authorised vehicle.

The first police car continued to pursue the car and provide brief commentary regarding his location.

While the control room supervisor was monitoring the incident she was told by another control room operator that the traffic unit was at the scene as this

is what she believed to be the case. The supervisor contacted the traffic unit to ask for a dynamic risk assessment in order to assess the situation but was told he was still en route.

At the same time, the passenger in the first police car reported that the suspect car had crashed, knocking down a pedestrian who was taken to hospital but died.

The IPCC investigation found no evidence of high speeds and no obvious dangers to other road users. The driver of the suspect car was convicted of murder.

Key questions for policy makers/managers:

- What steps has your police force taken to make officers and staff aware of the general principles contained in the Authorised Professional Practice (APP) on Police Pursuits (2013)?
- Does your command and control system clearly display to the radio operator whether an officer is pursuit trained?
- What guidance or training have you given your officers and staff to help them understand the rationale for authorising and discontinuing a pursuit as outlined in the APP?
- What guidance or training have you given your control room/communications officers and staff to make them aware of their specific responsibilities during a pursuit as outlined in the APP?
- Does your police force's command and control system provide the control room operator with prompts to ask a driver whether they are authorised to conduct pursuits and whether they are in an authorised vehicle?

Key questions for police officers/staff:

- Are you properly authorised to undertake vehicle pursuits?

Action taken by this police force:

- The police force opened a centre which combined call handling and dispatch functions.
- All radio dispatchers are supported by a buddy during busy shifts who sits next to them. Their role is to provide dynamic support and assistance at all times.
- All dispatchers received formal tactical pursuit management training and are authorised to undertake such duties.
- Two dispatch supervisors are now on duty at all times within the centre supported by a number of deputies. All dispatch supervisors and deputies are qualified pursuit managers.
- All former area control room staff working within the centre received formal tactical pursuit management training.
- Discussions took place with the driving school to design a training package for all control room staff. On successful completion participants will be accredited to deal with all aspects of tactical pursuit management.

Outcomes for the officers/staff involved:

- The driver of the first police vehicle received management action for pursuing the vehicle when he was not an authorised pursuit driver.
- The control room operator who managed the incident received a first written warning for the overall management of the pursuit with particular emphasis on the importance of establishing the driver status of the police officer at the outset of a pursuit.

Click here for a link to the full learning report

9 Maintaining incident data recorders

Around 10pm two police officers travelling in a marked police vehicle were sent to the scene of an urgent incident. On the way to the incident, the officers' vehicle collided with a cyclist. The man later died of his injuries.

Although the subsequent investigation found that there was no evidence that the conduct of the officer driving the police vehicle had fallen below the required standard, it did identify important learning around the servicing and maintenance of the police vehicle fleet.

Incident data recorders (IDRs) can provide a useful source of information for any investigations into incidents where police vehicles have been involved.

When the IDR was examined as part of this investigation it was found that it did not record input signals from the sidelights and siren. This was not a fault with the IDR itself, but appeared

to be due to wiring connection issues between the sidelight switch and the IDR, and a faulty electronic relay unit between the siren and the IDR.

Investigations also showed that the IDR had not been checked since its initial installation, and that the police force had no formal policy or procedure in place about how frequently checks should be carried out. As no calibration checks had been undertaken, it was not possible to verify the accuracy of the speed reading recorded in relation to the incident.

Key questions for policy makers/managers:

- Does your police force have a clear policy setting out when checks of police vehicles and related equipment (including IDRs) should be carried out, who should carry them out, what should be included in checks, and who is responsible for monitoring compliance?
- Does your police force have a policy on when and how IDR data will be used, for example in vehicle collisions?

Click here for a link to the full learning report

10 Fatality following pursuit

In the early hours of the morning, two uniformed police constables were on duty in a marked police car when they saw a car which matched the description of one involved in the thefts of number plates and fuel.

The officers decided to stop the vehicle, and activated the police car's blue lights. The car initially decreased its speed, but then sped off, so the officers decided to pursue it.

As the pursuit continued, one of the officers told the control room that the driver of the police car was suitably trained and in a suitable vehicle to carry out a pursuit. He then continued to provide a basic commentary, which described the speed and direction they were travelling.

The control room operator, who was acting as the 'buddy' for the primary dispatcher, created a log for the pursuit and made it available to the supervisory consoles as a priority flash message.

It is clear from the audio recordings that the primary dispatcher was not in control of the pursuit and did not communicate with the authorised driver until approximately one minute and ten seconds into the pursuit. The primary dispatcher's buddy ensured that the correct resources were informed, updated and dispatched. Her actions ensured that the appropriate supervisory ranks were informed and the relevant tactical support options were notified.

The investigation found that new control room staff were required to complete the National Centre for Applied Learning Technologies (NCALT) pursuit management e-learning computer programme, as well as a live pursuit in the workplace during one-to-one training before being signed off by their training mentor. This training was not available for existing staff and neither the primary dispatcher or her buddy had completed the training.

After a few minutes, the officers lost sight of the car, and later reported finding it crashed at the side of the road.

The time taken from the beginning of the pursuit, to the discovery of the crash site, was approximately three minutes and 30 seconds.

One of the people in the car was discovered lying on the road some distance from the car with significant injuries. Officers gave first aid, but he died later. A second man left the scene on foot but later returned.

On their return to the police station, an inspector asked if the driver of the police car had been breathalysed as a part of the collision investigation. This had not been carried out. The officer, who was a passenger in the police car, took a roadside breath test kit from another police vehicle and gave this to the inspector. The inspector was unfamiliar with the equipment and handed it back to the officer, instructing him to administer the breath test. The test was then conducted in his presence and he recorded the zero reading on the incident log.

An independent collision investigator from the local police force was called out to the scene of the incident. An IPCC investigator was separately called to the scene. As a result, the collision investigator was not aware that he would be expected to provide a statement to the IPCC about his actions on the night, as well as details of the quality assurance aspects of his role in relation to the report provided by the police force's collision investigation team.

Key questions for policy makers/managers:

- What steps does your police force take to brief independent collision investigators about their role and the expectations of them when the incident involves a police vehicle?
- Does your police force make sure that a roadside breath test is given to the driver of a police vehicle involved in a road traffic incident by someone who was not involved in the incident or any preceding police action as soon as possible?
- What steps does your police force take to make sure that all control room staff have received relevant training, including completion of relevant NCALT packages, and that their skills remain up-to-date?

Action taken by this police force:

- All on-call staff were made aware of the importance of ensuring that independent collision investigators are properly briefed. This message was also given to all relevant PSD staff.
- The police force now ensures that initial breath tests are not carried out by any person involved in the road traffic incident or any preceding police action. This message was shared with all staff by the force operational command board.
- The police force held learning and development days for control room staff, focusing on pursuits and including input from specialist staff involved in driver training.
- Control room staff who had not previously received it were directed to undertake relevant NCALT training.
- The police force took action to ensure that all shift patterns include a regular training day.

Outcomes for the officers/staff involved:

- The primary dispatcher received management action in the form of words of advice for failing to take control of the pursuit and not engaging with the authorised driver until approximately one minute and ten seconds into the pursuit. A record was also made on her appraisal. She has since completed the NCALT pursuit training package.

Click here for a link to the full learning report

Related reading

The Learning the Lessons pages on the IPCC website (www.ipcc.gov.uk/learning-the-lessons) contain links to a variety of research and other publications, as well as previously published bulletins, and copies of the more detailed learning reports which accompany each case.

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LEARNING THE LESSONS

ASK YOURSELF: Could it happen here?

www.ipcc.gov.uk/learning-the-lessons

March 2015

Bulletin 23 – Custody

Learning the Lessons bulletins summarise investigations conducted by the Independent Police Complaints Commission (IPCC) or police forces where learning opportunities are identified. Police forces facing similar situations to those described can use the experience of other forces to improve their policies and practices. The bulletin challenges forces to ask "Could it happen here?"

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Contacting us

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Foreword

Carl Gumsley and Tom Milsom

This bulletin provides learning from cases covering the point of arrest through to release from police custody. The themes it contains will be familiar to people who work in the custody environment yet, despite repeated attempts to highlight these issues, they still happen. Not all of the cases in this bulletin have resulted in a death but many have. It is important that lessons are learnt and processes are followed in order to prevent future deaths.

The number of deaths in or following police custody in England and Wales have continued to decline over the last ten years and in 2013/14. The IPCC's annual report into deaths during or following police contact in 2013/14 shows that there were 11 deaths recorded, down from 15 the previous year and less than a third of the 36 recorded in 2004/05 when the IPCC was first set up. However, the number of those recorded as having apparently committed suicide within 48 hours of release from police custody is the highest it has been over the last ten years, at 68 in 2013/14. There is clearly no room for complacency.

One of the most important functions of the Independent Police Complaints Commission (IPCC) is the investigation of deaths following contact with the police, to make sure that lessons are identified and that deaths are prevented. The IPCC has been a key part of the drive to reduce the number of deaths in or following police contact by reporting our findings from investigations and thereby contributing to better guidance and standards.

Although the numbers of deaths in custody has reduced, some of the deaths in this bulletin could have been prevented. It is essential that:

- Arresting officers make sure there is a proper assessment of vulnerability, to inform the initial response and all later actions of the police. This is important to decide whether a person needs to be taken to custody, a healthcare setting or a place of safety.
- Those who come into custody must be fully risk assessed. If a person cannot interact in that process, it is likely to mean that they should not be in custody.
- Any checks or rousing that are put in place are carried out at the frequency and standard expected.
- Any change in a person's condition is properly noted and clinical treatment arranged if appropriate.
- When risks are identified for a person, this information is provided to ongoing custodial providers.

To make sure lessons are learnt, the IPCC has fed the recommendations from our investigations into the revision of the Authorised Professional Practice (APP) on Detention and Custody. The new APP will be published in Summer 2015. We welcome the update of the guidance and all staff working in the custody environment need to understand and be trained on its content to make sure those in custody are kept safe and deaths are prevented.

Carl Gumsley

Tom Milsom

Case summaries

Pre-arrest

1 Risk assessment prior to arrest

Two police officers went to a marina to arrest a man who was wanted on a warrant for non-payment of council tax.

While they were escorting the man from a boat to the shore, he fell off the jetty onto an embankment which was three to four feet below. The officers believed he had suffered an epileptic fit.

The man had come into contact with the police before, and custody records showed that he suffered from epilepsy. However, this information was not available to the officers when they undertook their pre-arrest planning and risk assessment.

The officers called an ambulance, but while they were waiting for it to arrive the man stopped breathing so they started CPR.

The man was taken to hospital by ambulance but died sometime later.

Key questions for policy makers/managers:

- Does your force make sure that relevant information about a person's medical history is routinely transferred on to the Police National Computer (PNC) and force intelligence records? How do you make sure that these help inform any future risk assessments or decision making by officers?
- Which systems or sources of intelligence do you ask officers to routinely check when carrying out a risk assessment before arresting someone?

Key questions for police officers/staff:

- Do you carry out a risk assessment before you arrest someone on a warrant?
- What records/information do you consider to inform your pre-arrest planning and risk assessment?
- What contingencies would you consider as part of the arrest process?

Action taken by this police force:

- The force took steps to make sure medical information is transferred to a person's PNC record.

Click here for a link to the full learning report

Medical care

2 Dealing with a man detained under section 136 of the Mental Health Act

A friend of a man called police after he threatened to harm himself by jumping in front of a train following a break up with his girlfriend.

Three officers went to the scene and detained the man under section 136 of the Mental Health Act. An ambulance was called to transport him to hospital.

A paramedic arrived in a rapid response vehicle. He took the man to hospital and two officers followed behind in a police car.

When they arrived at hospital the paramedic took the man to the accident and emergency department (A&E) rather than a designated place of safety and he was placed in a side room. Police officers left the man at the hospital with A&E staff.

Shortly after they left, the man left the hospital too. The hospital told the police of the man's departure.

Police were then called to an incident where a man had been hit by a train. This was the same man who had been detained but later left the hospital. He later died of his injuries.

Key questions for policy makers/managers:

- How do you make sure officers are aware of the places of safety in your force area where they can take someone detained under section 136 of the Mental Health Act?
- What advice do you give to officers on their responsibilities in relation to people who are detained under section 136 of the Mental Health Act?

Key questions for police officers/staff:

- Are you aware of the places of safety in your force area where you can take someone you detain under section 136 of the Mental Health Act?
- Do you know what your responsibilities are (for example, in relation to handover) when healthcare professionals are involved with a person who is detained under section 136 of the Mental Health Act?
- Are you aware of how your responsibilities differ if an individual who has been detained under section 136 of the Mental Health Act is taken to A&E rather than a NHS place of safety?

Action taken by this police force:

- All local policies were made available on the force intranet site to make them readily available for frontline staff.
- A mental health learning site was developed providing short reference guides on mental health policy and procedure.
- An iCard was developed on the ambulance transportation policy. A mobile version was also developed to be available at incidents.
- A mental health awareness week was held in the force.
- Mental health awareness training events were held across agencies.
- Police officers and staff received one day training. The training covered handovers to mental health teams.
- A monitoring form is being introduced for all section 136 detentions.

Click here for a link to the full learning report

3 Moving a man from hospital to custody

Two intoxicated men had an agitated exchange which led to one man hitting his head on the pavement and becoming unconscious.

The police and ambulance service attended and the man was taken to hospital.

Hospital staff called police when the man became, and continued to be, aggressive and refuse treatment.

Police attended and decided to remove the man to custody.

When the man arrived in custody, the custody sergeant asked him about an injury to his head but did not call a healthcare professional, because the man had just come from a hospital.

Due to the man's level of intoxication he was placed on constant observations throughout the night. During the check at 7.30am the man was lying on the floor. There was no response from the man when he was spoken to or when his ear lobe was squeezed. He was also twitching. He was placed on a mattress and a blanket placed over him. An ambulance was called and paramedics took the man to hospital.

Following the incident, the man was in hospital for about two and a half months and was in a coma for most of this time. Since he has come out of hospital he needs care provided 36 hours per week, at the assisted living care home where he now lives.

Key questions for policy makers/managers:

- Does your force have agreements with local health authorities about how you will respond to calls about people in a healthcare setting who are intoxicated or aggressive?
- What information do you ask hospitals to provide about patients before officers are sent to deal with people in hospital? How do you make sure you are getting the right information?
- What training or guidance have you given to officers to help them spot and deal with people who have head injuries?

Key questions for police officers/staff:

- What information would you consider important to the custody sergeant so that risk can be assessed when bringing a detainee in to custody?
- Do you think you would recognise the effects of a head injury?
- Do you know how to obtain enough detail to inform a thorough risk assessment?

Action taken by this police force:

- The force has shared the learning from this case with their learning and development department who deliver custody training and first aid training.
- The force is working with the NHS hospitals in their force area to make sure accurate and appropriate information is exchanged in similar cases.

Click here for a link to the full learning report

Recognising head injuries

4 Man with head injury who was also intoxicated

Late one evening police took a man into custody after a taxi driver asked for help following a dispute over the fare.

The man was reported to have kicked out at an officer and he was subsequently taken to the ground, handcuffed, and a Violent Person Restraint (VIPER) was used to restrain him before he was carried to the police van. Several police officers reported later that they heard a noise that may have been the man hitting his head on the pavement.

On arrival at the police station five officers carried him into the custody suite and straight into a cell.

The mattress from the bench was placed in the middle of the cell floor and the man was placed upon it.

An officer used CAPTOR spray before restraints were removed from the man.

There was confusion throughout the night and morning as to which custody officer had responsibility for looking after the man. There were also failures in relation to how the man was monitored via cell checks throughout the night and morning by both privately contracted custody staff and custody officers.

Initially the man was active and moved around the cell. On one occasion he tried to lay on the bench but slid to the floor. At around 5am he tried to get up, but was unable to do so and stayed lying on the floor. He remained in this position for some time, before he eventually stopped moving.

He was placed on half hour visits but was not placed on rousing checks. Staff said they believed him to be asleep as several reported hearing loud snoring.

At around 11am officers entered the cell and found the man unconscious, so placed him in the recovery position before calling for an ambulance.

An ambulance arrived and he was transferred to hospital where he was found to have a serious head injury.

Key questions for policy makers/managers:

- What guidance or training do you give to officers to help them identify people with head injuries?
- Does your force policy reflect guidance in PACE and authorised professional practice about how people in custody who are drunk and incapable should be treated?
- What steps does your force take to make sure that all detainees are appropriately risk assessed and that this is revisited during their time in custody?
- Does your force policy reflect the need to report potential injuries of the detainee when booked into custody?

Key questions for police officers/staff:

- What information would you give to the custody officer if you were aware that the detainee may have sustained a head injury either before or during arrest?
- What behaviour from the detainee would make you ask the arresting officer more questions about what may have happened during or before the arrest and what action would you take?
- Would you know what to look for to be able to identify the difference between someone who was drunk and incapable and someone who had a head injury?
- How do you interact with those who you feel are drunk?
- When would you decide that someone is in need of medical help?
- What new information would make you revisit your risk assessment?

Action taken nationally:

- PACE and the Authorised Professional Practice (APP) for detention and custody was amended to state those who are drunk and incapable are in need of medical assistance. It also said those who are under the influence should be checked and roused.

Action taken by this police force:

- The custody computer system was updated to ask more specific questions to allow appropriate risk assessments.
- A full training programme was conducted involving both the custody staff and the private contractor.

- First aid training included recognising and responding to head injuries.
- A principal custody policy was introduced to support staff in the decisions that they make.
- A principal custody officer role who takes primary responsibility for detainee care was introduced in all custody facilities.
- Inspections were carried out by the head of custody to review the knowledge of the custody staff on duty and the custody inspectors across the force.

Click here for a link to the full learning report

Authorised Professional Practice on Detention and Custody states:

A **drunk and incapable** person is someone who has consumed alcohol to the point that:

- they cannot walk or stand unaided, or
- they are unaware of their own actions, or
- they are unable to fully understand what is said to them.

It is suggested that if someone appears to be drunk and showing any aspect of incapability which is perceived to result from that drunkenness, then that person should be treated as drunk and incapable.

Drunk and incapable individuals are in need of medical assistance in hospital and an ambulance should be called.

Under the influence of alcohol

All detainees should be risk assessed on arrival in custody and throughout their detention. Where a risk assessment shows that the person is not drunk and incapable but that they have a degree of impairment from alcohol or drugs to the extent that any of the following apply, they should be considered as being under the influence and treated accordingly:

- close proximity (level 4) monitoring
- constant observation (level 3) monitoring
- the requirements for PACE Code C Annex H rousing checks.

The amount of alcohol and/or drugs that a detainee has taken cannot be readily confirmed and their reaction to them is also unpredictable.

The importance of monitoring the response to Annex H rousing checks is key to ensuring that any underlying medical conditions (such as head injury or undeclared drug consumption) is identified as soon as practicable.

5 Response to those believed to be drunk and incapable

Around midday police officers went to a property after a man and a woman reported that their son was behaving violently.

When the officers arrived it quickly became clear that the man was not a threat to them and that he was having difficulty walking or talking coherently.

A decision was made to arrest the man on the grounds that he was drunk and incapable.

The man was helped into a police van before being transported to custody.

The journey to custody took approximately 10 minutes.

On arrival the man had to be woken before being helped by two officers out of the van and into the custody suite. Once in custody he was immediately placed in a cell covered by CCTV which was monitored from a screen above the custody charge desk.

Neither the custody sergeant nor any of the custody officers present attempted to speak to the man before he was placed in the cell.

A decision was made by a custody sergeant to place the man on level 3 observations which meant he would be constantly monitored via CCTV and physically checked. A decision was also made that he should be roused at least every 30 minutes and that a health care professional should be called because of his intoxicated state.

The arresting officer was told to carry out the constant observations and the physical checks.

Visits were made to the man approximately every 30 minutes with the officer doing the constant observations carrying out all of those visits (apart from one which was done by a custody sergeant and a detention escort officer). On some entries in the custody record it was recorded that the man was roused. During a number of those visits the man was found to be sleeping and officers received no verbal response from him.

In between the visits the police constable viewed the monitor showing CCTV from the cell while performing other tasks, including making and receiving calls and texts on his mobile phone, dealing with other work related issues and using the internet for non-work related purposes.

A nurse arrived approximately two hours after being asked to attend the custody suite. On arrival the nurse decided to visit another detainee before seeing the man.

Approximately 30 minutes after arriving in custody the nurse visited the man in his cell. It became clear that the man was seriously ill. An ambulance was called and CPR was given.

Attempts to resuscitate the man were held back when the custody sergeant could not find a face mask in the first aid kit which was kept in the custody suite.

The man was taken to hospital by ambulance where he was pronounced dead.

Key questions for policy makers/managers:

- What guidance and training does your force give to officers on dealing with those who are drunk and incapable? Does this include advice about when to take to hospital?
- What steps do you take to make sure that officers are able to carry out constant observation of detainees effectively?
- What steps do you take to make sure that the entries officers make in the custody record accurately reflect the visits they have made to detainees?
- What advice or guidance do you provide to custody staff to help them direct healthcare professionals to deal with detainees in need of most immediate assistance?
- What steps do you take to make sure medical equipment (including face masks and vent aids for CPR) is easily available to custody staff and is properly maintained?

Key questions for police officers/staff:

- What action would you take if you identified someone as drunk and incapable?
- Would you know what was required while conducting a constant observation?
- Are you familiar with the content of Annex H of PACE code C which says how to assess the level of rousability of an individual?
- Do you understand the importance of rousing an individual?
- Are you aware how to access face masks or vent aids used in CPR?

Action taken by this police force:

- All custody staff are required to carry a CPR face mask for emergency use.
- AED/defibrillator devices were installed in every custody suite and staff were given training on how to use them.
- Detainee prompt cards were revised and re-launched.
- Briefing sheets were developed for staff who perform level 3 or 4 observations.
- All operational constables and sergeants were required to attend a half day custody awareness course which included material relevant to dealing with those who were drunk and incapable.
- A learning the lessons page was made available on the force intranet.
- Checks are now carried out to make sure that incidents involving people who are drunk and incapable are handled in accordance with force policy.

Click here for a link to the full learning report

Annex H of PACE Code C states that when assessing the level of rousability, consider:

Rousability – can they be woken?

- Go into the cell
- Call their name
- Shake gently

Response to questions – can they give appropriate answers to questions such as:

- What's your name?
- Where do you live?
- Where do you think you are?

Response to commands – can they respond appropriately to commands such as:

- Open your eyes!
- Lift one arm, now the other arm!

Checks and rousing

6 Rousing an intoxicated detainee

A man was taken to custody after being arrested on suspicion of breach of the peace.

The man was un-cooperative on arrival at the police station and refused to get out of the police van so officers were forced to carry him into the custody suite.

The sergeant on duty told the officers to take the man straight to a cell which was monitored by CCTV. The man was then left there in the recovery position.

The sergeant completed a risk assessment, but despite guidance recommending the man be seen by a doctor, and despite the fact that a forensic medical examiner (FME) was on duty in the custody suite, he did not ask the FME to assess the man.

The man was placed on 30 minute checks. A system within the custody suite allowed officers to set reminders for visits, however no reminders were set this time.

The first check took place at around 11.05pm and was carried out by a civilian detention officer (CDO). They can be seen entering the man's cell and lightly shaking him but he does not appear to be roused as there was no apparent response or movement.

Just under half an hour later an officer recorded that he had conducted a visit on the custody record, but no evidence of this can be seen on CCTV.

Twenty minutes later the same officer who conducted the first check can be seen entering the cell and bending over the man. The man tried to move his head slightly in response, but remained in the recovery position.

At around 12.20am, and again nine minutes later, officers looked through the spy-hole in the door of the man's cell but did not enter the cell or try to rouse him.

At around 1.15am the officer who conducted the last check entered the man's cell but did not rouse the man or record his visit in the custody record.

At around 1.40am a further check is recorded as having been made, but no evidence of this can be seen on CCTV.

Ten minutes later the same officer that conducted the last recorded check looked through the spy-hole in the cell door. The man had still not moved from his original position.

At 2.40am the officer re-entered the cell but did not rouse the man. He returned two minutes later with a sergeant and they tried to rouse the man.

The officer recorded on the custody recorded that "DP is snoring loudly try to wake up but no response."

At around 3.20am he re-entered the cell and tried to move the man's arms and his fingers and rolled him over into the recovery position on his other side. He then left the cell.

Over the next five minutes he carried out two more spy-hole checks then, eleven minutes later, he returned to the cell and checked the man's pulse. He tried to move the man's head, however he did not respond.

The officer then left the cell and returned a few minutes later with a sergeant. The sergeant left the cell a few minutes later to call for an ambulance and returned with a defibrillator while the two officers tried to revive the man.

Paramedics arrived at around 3.50am and the man was taken to hospital where he remained in a persistent vegetative state and died a few months later.

Key questions for policy makers/managers:

- What guidance do you provide custody staff with on seeking healthcare professional advice?
- What training or guidance have you given to officers to identify whether someone is drunk and incapable?
- Do your custody suites have the facility to set reminders for cell visits? If so, is this system used routinely?
- Does your force give staff working in custody annual refresher training on first aid?
- What steps has your force taken to make sure that detainees are properly roused and that any checks are properly documented on the custody record?

Key questions for police officers/staff:

- When would you decide that someone who had consumed alcohol should be seen by a healthcare professional?

- Do you understand the difference between someone who is drunk and incapable and someone who is under the influence of alcohol?

Action taken by this police force:

- All custody staff are given first aid training every 12 months in line with national guidelines.
- All custody staff are trained on the safer detention and handling of persons in police custody guidance (now APP) and refresher courses have been scheduled as part of a yearly training program.

Click here for a link to the full learning report

7 Checking a detainee who is sleeping

A 66 year old man was arrested by police after information relating to his whereabouts was received from a member of the public. He was wanted on warrant after failing to appear in court to face allegations under the Sexual Offences Act 1956, the Indecency with Children Act 1960, and the Criminal Attempts Act 1981.

During the booking in process the man said that he had a heart condition and was diabetic, but that he had not taken any medication so far that day.

The custody sergeant kept an Angina spray that the man was carrying when he was brought into custody.

The custody sergeant decided that the man should be seen by a healthcare professional, and he was taken to hospital where doctors prescribed him medication for some of his conditions.

Neither the doctor nor the officers updated the person escort record.

On his return to custody the man was placed on 30 minute rousal visits. After being seen by the healthcare professional again, the custody sergeant and healthcare professional agreed that the man should be placed on 30 minute visits, without the need to obtain a response from the man.

Visits continued throughout the night and were carried out through the spy hole. At one point during the early hours of the morning the man's face became covered by a blanket so he could not be seen during visits, however officers continued to record that they could see him breathing.

When officers and medical staff entered the cell later that morning to re-administer medication, they found the man had died.

Key questions for policy makers/managers:

- What guidance does your force give to officers on the types of medication that detainees are allowed to keep?
- When officers take someone to hospital are they aware of information they should include in the person escort record?
- How does your force make sure that when a detainee has received treatment at hospital and is then returned to the custody suite, officers have all the information they need about any medication prescribed or any aftercare required to help them provide the best standard of care to the detainee?

Key questions for police officers/staff:

- What action would you have taken if you had noticed that the man's face was covered by a blanket while you were carrying out a check?

Action taken by this police force:

Following the incident the force reminded all custody staff about the following issues:

- All visits to detainees must be recorded on the custody record.
- Detainees who present as no risk of self harm and disclose angina or asthma should be allowed to keep their sprays/pumps with them or the custody record should record the reason for refusal.
- There should be continuity of officers checking a detainee's condition.
- When officers are asked to escort a detainee to hospital they should be fully briefed as to the reasons for attending.
- The custody record should be endorsed when a detainee leaves and returns to their cell.
- Person escort record forms should be completed accurately to show the whereabouts of an individual at all times.
- Handovers between shifts must be recorded on CCTV.
- Custody sergeants accepting responsibility for a detainee at the start of a new shift must enter the cell of any detainee who is asleep and wake them to make sure of their welfare.
- Spy hole checks must not be used to check the welfare of a detainee.

- Custody sergeants should record a full rationale and risk assessment when changing observations.
- When a detainee has a blanket or other item covering their face, they should be asked to remove it to make a proper welfare check.
- Custody records should be clear whether a waking or sleeping review was made.
- When a detainee is visited and is sleeping, staff should record how movement is seen.

Click here for a link to the full learning report

8 Monitoring an individual under the influence

At 10.45am a man was arrested by officers on suspicion of burglary. He was taken to a police station and booked into custody.

The custody sergeant on duty carried out a risk assessment but did not ask the man if he had taken any drugs that day. However, on the custody log the sergeant recorded that he had asked this question, and that the man had said no. He also ticked the box to say that the man did not seem to be under the influence of drugs or alcohol.

The custody sergeant decided that the man should be seen by the on-duty healthcare professional (HCP) because the man had said, during the risk assessment, that he was suffering from post traumatic stress disorder and borderline personality disorder and did not have any medication with him.

The HCP examined the man and, despite denying that he had taken any drugs or alcohol that day, the HCP decided he was possibly under the influence of a substance. The HCP discussed his regime of care with the custody sergeant and they decided that he should receive 30 minute rousal visits. The man was placed in a cell monitored by CCTV at 11.34am.

During the man's detention, his condition got worse. He was subject to checks every 30 minutes by the custody staff, but after a shift change at 2pm, these were made via the cell hatch and no detention officers entered his cell. From 2.18pm, the man is seen to be lying on the floor of his cell and makes no visible movements from this point on.

At 3.33pm, a check was conducted on the man and he was found to be un-responsive in his cell. He was taken to hospital where he was diagnosed to be suffering from the effects of a methadone overdose and suspected pneumonia. He later admitted to having taken three 100ml doses of methadone before his arrest.

Key questions for policy makers/managers:

- When a detainee is placed in a cell with CCTV, how do you make sure that the CCTV is monitored effectively?
- Does your training for custody officers include guidance on rousing, and include information on how to deal with detainees who are un-responsive?
- How does your force check that officers rouse detainees in accordance with guidance?
- What steps has your force taken to make sure that officers record all relevant information in custody records where appropriate?
- How does your force make sure that information is handed over effectively between outgoing and incoming shifts, in particular information about why certain levels of observation are required?
- What steps has your force taken to make sure that staff are kept informed of latest guidance issued by the College of Policing?

Key questions for police officers/staff:

- How would you recognise someone who may have taken drugs?
- How do you provide clear instructions and use CCTV to monitor someone effectively?

Action taken by this police force:

- A comprehensive action plan was drawn up by the force about improvements to be made. These included making sure that custody staff are aware of the safer detention guidelines (now APP); that the handover process from one shift to another is carried out in a structured way; and that more proactive responsibility is taken for monitoring cells through the CCTV system.
- Following the incident the force has achieved improvements to the care and professionalism demonstrated by the custody staff. This was reflected in the latest HMIC inspection which specifically praised the force on this issue.

Click here for a link to the full learning report

9 Transfer of a man from police custody

A man was arrested and taken into custody following an argument with his mother.

He was assessed as low risk for self harm. However, the custody sergeant placed him in an anti-rip suit and on 30 minute visits due to the nature of the offence.

An officer was assigned to deal with the case. He visited the parents of the man and felt that the man was in need of help with his alcohol abuse and mood changes. The officer thought that the court was able to order the man to attend an intervention process, to provide him with the support he needed.

While being interviewed, the man became ill and was taken to hospital where he was treated for alcohol withdrawal symptoms. The following day he discharged himself from hospital, refusing any further treatment and he was returned to custody.

Once back in custody the officer interviewed the man, who admitted the offences and expressed regret. The officer discussed the case with the Crown Prosecution Service (CPS). It was agreed to charge him with common assault, to make sure that he appeared before a court, and that consideration could be given to placing him on a suitable intervention programme, to assist him in overcoming his alcohol and anger problems.

Prior to the man being transported to court by a private contractor, a custody sergeant completed a Prisoner Escort Record (PER) form. He ticked the self harm box on the form and provided extra details on a separately typed sheet, which he stapled to the front cover of the form. The further information stated that the man was suffering from alcohol dependency, depression which was not being treated with medication, and set out the nature of the offence.

The officer felt that, taken together, the information given may provide factors which should be considered in carrying out a risk assessment for self harm.

While the man was at court, the CPS lawyer re-determined the charges and included a charge of making threats to kill, a much more serious charge. The magistrates agreed and remanded the man into custody, awaiting an appearance at Crown Court.

The man was transported to prison, where he took his own life the following day.

Key questions for policy makers/managers:

- How do you advise officers to record additional information about a detainee's vulnerabilities on the PER if more space is required?
- How does an escort private contractor transporting those to court consider the information on the PER form to manage risk?
- What steps does your force take to make sure that PER forms are completed correctly?
- How do you make sure that staff working in custody are kept informed of any changes to guidance and complete any appropriate training?

Key questions for police officers/staff:

- If you had extra information that you could not fit on the PER form, how would you pass this to other agencies?

Action taken nationally:

- The national offender management service which owns the PER form, is looking at the use and design throughout custody. They are also considering the possibility of making the PER form an electronic document.

Action taken by this police force:

- The force has introduced an envelope to house the PER form and all associated documents.
- The force has introduced two processes of dip sampling to monitor the consistency of PER forms. Firstly, the respective custody inspectors dip sample the PER form submissions for relevance and quality, and secondly, they are checked by the professional standards department.
- The force has delivered refresher training to staff which has included learning from this case and other similar cases.

Click here for a link to the full learning report

10 Investigating a death following contact

A 17 year old was arrested on suspicion of driving a motor vehicle with excess alcohol.

On arrival at the custody suite he was taken to the intoxilyser room so a reading of his alcohol level could be taken. He was briefly seated in the room before the CCTV cameras were turned on. He was found to be over the prescribed limit.

The investigation found that during the risk assessment process he was asked questions which were found to be closed. This may have resulted in a negative and limited response to the questions.

The risk assessment process led to the custody sergeant noting there were no concerns in respect of self-harm, no injuries or medical conditions, no drugs, that the man had drunk eight bottles of lager, and no doctor was required. As a result the custody sergeant decided he should be observed every 30 minutes on level 1 observations.

The 17 year old was provided with his rights and entitlements and asked if he wanted anyone to be told about his whereabouts. He said "not really, there's nothing they can do".

He was kept in custody, and was visited throughout the night where he was recorded as sleeping or resting. There was no change to his health or wellbeing during his time in custody, which was reported to the custody officer. During the investigation it was found that two visits during his detention fell outside the 30 minute time period.

He spent less than eight hours in police custody and at 8.20am he was charged and released on bail to appear at the Magistrates Court four days later.

Two days after his arrest his father told the police that his son had taken his own life. Letters that were left for family and friends had no reference to his time or treatment in custody.

The force referred the matter to the IPCC which decided that the circumstances of the police contact would be suitable for a local investigation by the force. Following concerns raised by his father, the force re-referred this matter to the IPCC. These concerns were around relevant CCTV footage not being secured in a timely manner; conflicting information provided around the availability of CCTV footage; and conflicting information about the provision of items such as transcripts to the family.

The IPCC decided to conduct an independent investigation into the police contact with the 17 year old to consider these matters.

Key questions for policy makers/managers:

- Do you carry out regular checks to make sure that the time on all CCTV cameras is accurate?
- Are all your CCTV cameras linked to a main recording system?
- Do you make sure there is early contact with complainants and interested persons and a culture of openness in local investigations?

Key questions for police officers/staff:

- What advice do you give to officers on carrying out/scheduling checks to make sure that detainees do not go unchecked while a handover between shifts is taking place?

Action taken by this police force:

- Regular checks to establish accuracy of the time of the CCTV cameras in the custody suite are carried out weekly by the custody inspector responsible for that suite. A record of this check is made and is checked weekly by the chief inspector.
- A circulation telling officers from the professional standards branch to check the accuracy of seized CCTV to decide any potential time differences was circulated to all staff.
- A reminder was sent to all professional standards department staff to remind them about the importance of early contact with interested persons to the investigation to help identify any issues or concerns which may impact on the CCTV retrieval policy.
- The force is exploring the costs of linking the CCTV in the intoxilyser room to the main recording system throughout their custody suites.
- All custody staff were made aware of the existing custody operating procedures and best practice involving the activation of intoxilyser recording equipment before the detainee entering the room. The role of a custody inspectorate managed by an inspector was created. The role was created to drive up standards and monitor working practices to make sure the branch is doing its utmost to promote detainee safety.

- Custody inspectors conducted a dip-sampling exercise for six weeks of handovers and visit regimes. This was to make sure handovers are made in a professional manner and to make sure the visits regime is effectively maintained in the time before and after handover.

Click here for a link to the full learning report

Related reading

Learning reports which provide more detail about each of the cases featured in this bulletin are available on our website.

The **College of Policing** has identified the relevant **national learning standards and training resources** to support the case studies contained within this bulletin. A supporting document is available on our website.

© Independent Police Complaints Commission (IPCC).

For Information	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**June 2015**
Report of:	**D/Supt Alexander**
Report Author:	**DCI Mathew Healey**
E-mail:	**mathew.healey@nottinghamshire.pnn.police.uk**
Other Contacts:	**DI Allison**
Agenda Item:	**8**

PROFESSIONAL STANDARDS CONFIDENTIAL REPORTING PROCEDURE (Whistle Blowing)

1. Purpose of the Report

1.1 To inform the PCC regarding the above procedure and outline how the organisation in general and the Professional Standards Directorate manages and deals with those members of the organisation who make reports concerning breaches of Professional Standards. In particular how they can be provided with support and confidentiality, when appropriate and necessary.

2. Recommendations

2.1 That the Panel receive assurance from the processes in place relating to confidential reporting as detailed within the report.

3. Reasons for Recommendations

3.1 To provide the PCC with relevant information and oversight in respect of how Nottinghamshire Police ensures that appropriate systems are in place to both encourage and support officers and staff to report concerns in respect of unethical behaviour or 'wrong doing'.

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

4.1 There can be no more important qualities for members of the police service than that they are honest and act with integrity. Without these key attributes public trust and confidence will be eroded. The reputation of any organisation must always be considered as one of its most cherished assets.

4.2 The Procedure for Professional Standards Reporting aims to create a climate where staff feel a genuine commitment to openness and transparency when reporting breaches of Professional Standards, their motivation arising from a desire to maintain the integrity of the police service and in the knowledge that such action will be universally acknowledged as 'doing the right thing'.

4.3 This force professional standards reporting procedure defines how Nottinghamshire Police will protect and support its staff by providing a broad

range of options for reporting breaches of Professional Standards and providing consistent and meaningful support to colleagues who report concerns.

4.4 Staff have a clear responsibility to report suspected breaches of Professional Standards by others in Nottinghamshire Police and should feel that they can report such breaches openly and with the support of their colleagues and managers in line with our PROUD Values and Code of Ethics

4.5 The procedure identifies guiding principles and some examples of what activity or conduct should be reported, before outlining the different mechanisms for making such reports which can be done anonymously, confidentially or in an open report.

4.6 Professional Standards Directorate have a key part to play in this procedure once information comes into the Directorate, including agreeing a 'Statement of Expectations' with the member of staff and including offering support from a group of trained 'Supporters'.

4.7 The 'Supporters' have been established as part of this procedure to offer support on a one to one basis. The volunteer police officers and police staff have been given training and an input from PSD as to the procedure and they do not work within PSD, but can be utilised where necessary as a conduit for the staff member in terms of the progression and updates of any enquiry. This is in addition to any welfare support. The HMIC Police Integrity and Corruption (PIC) Inspection, November 14, identified through their reality testing that this 'Supporters' process is not well known and the PSD have now reinvigorated the work in this respect. This includes liaison with the Force Learning and Development department; on-going assessment of the experiences and continual personal development of existing supporters; the development of a more comprehensive training package and a review of communications and promotion of the supporters' programme.

4.8 For any officers and staff who are concerned coming forward to report any suspicion of 'wrong doing' or unethical behaviour, the force has an established anonymous and confidential e-reporting system called 'Integrity Messenger'. This system allows two-way communication with the force counter-corruption unit while preserving the anonymity of the referee for as long as they feel the need. It also allows rapport and confidence to be built which may lead to the referee providing personal details in due course.

4.9 In the relevant period (October 1st 2014 to March 31st 2015) 33 referrals were made to the Counter Corruption Unit comprising of Integrity Messenger, Confidential Reporting Line & anonymous internal contact. This compares to 40 referrals in the previous six months.

5. Financial Implications and Budget Provision

5.1 No specific financial implications are noted

6. Human Resources Implications

6.1 No specific HR implications are noted

7. Equality Implications

7.1 This document has been drafted to comply with the general and specific duties in the Equality Act 2010; Data Protection Act; Freedom of Information Act; ECHR; Employment Act 2002; Employment Relations Act 1999 and other legislation relevant to policing.

7.2 This procedure is robust and the evidence shows there is no potential for discrimination and that all opportunities to promote equality have been taken.

8. Risk Management

8.1 It is essential the public have confidence in the service Nottinghamshire Police provide.

8.2 The overwhelming majority of individual members of police personnel including Police Officers, Police Staff and members of the Special Constabulary within the Nottinghamshire Police are dedicated, hard working, compassionate, and deliver policing services with a high degree of integrity. Regrettably, there are a small number of police personnel that are guilty of and vulnerable to, unethical behaviour, dishonesty and corruption. The harm they do far outweighs the numbers they represent

8.3 We all have a part to play in enhancing the integrity and reputation of the Force. This process starts with recognition that we are all individually accountable for our actions and responsible for our behaviour

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

9.1 By having a Professional Standards Reporting Procedure we are able to set out ways that staff can make reports concerning breaches of Professional Standards and ensure we support the organisations 'Vision', 'Values' (PROUD) and 'Plan' 'To cut crime and keep you safe', 'To spend your money wisely' and 'Earn your trust and confidence', ensure all relevant parts of the organisation are given help to improve our service and ultimately achieve the force priorities.

10. Changes in Legislation or other Legal Considerations

10.1 None

11. Details of outcome of consultation

11.1 None

12. Appendices

12.1 None

For Information	
Public	
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**R. Adams, Commercial Director, East Midlands Strategic Commercial Unit**
Report Author:	**S. North, Head of Commercial**
E-mail:	**steve.north@emscu.pnn.police.uk**
Other Contacts:	**emscuenquiries@emscu.pnn.police.uk**
Agenda Item:	**9**

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

ANTI-FRAUD & CORRUPTION POLICY – REVIEW OF COMPLIANCE (Jan – June 2015)

1. Purpose of the Report

1.1 The East Midlands Strategic Commercial Unit (EMSCU) published their policy entitled Prevention of Fraud and Corruption in the Procurement Process (the Policy) on 16th May 2013 – see Appendix A. The policy is written for both partner Forces and whilst written to be applicable to procurement activity conducted by EMSCU for contracts with a total value of £25k and above, the principles are equally applicable to lower level procurements. The two partner Forces are Nottinghamshire Police and Northamptonshire Police.

1.2 The report informs the Audit and Scrutiny Panel of the level of compliance against the EMSCU Fraud and Corruption Policy for the period December 2014 until July 2015.

2. Recommendations

2.1 It is recommended that the Panel notes the following:

2.2 That EMSCU's Commercial Director has received no reports of any fraudulent activity following any audit of procurement activity undertaken by the Force.

2.3 That EMSCU's Head of Supplier Services (to which the Policy directs any individual wishing to report any suspicion of fraudulent activity) has advised that there have been no reports of any fraudulent activity in relation to procurement activity undertaken within Nottinghamshire Police.

2.4 That EMSCU`s Head of Supplier Services has written to Suppliers to re-iterate the Force position in relation to Gifts, Gratuities and Hospitality. The relevant Force procedure states that Police Officers and Staff should not accept the offer of any gift, gratuity, favour or hospitality as to do so might compromise their impartiality or give rise to a perception of such compromise.

2.5 That EMSCU's Commercial Awareness training programme which was launched in December 2013 is being delivered on an on-going basis, includes content on the prevention of fraud and corruption in the procurement process.

2.6 In addition EMSCU have included reference and guidance to Conflicts of Interest and Gifts & Hospitality on procurement documents in relation to suppliers notifying us if they have any 'relationship' with any member of the Forces. We have also included links to the Code of Ethics.

PQQ – Conflict of Interest, Gifts & Hospitality
ITT - Conflict of Interest, Gifts & Hospitality
RFQ - Conflict of Interest, Gifts & Hospitality
Evaluation Code of Conduct - Conflict of Interest
Tender Evaluation Panelist Declaration – Conflict of Interest

3. Reasons for Recommendations

3.1 To give the Panel confidence that there is policy, guidance and training in place to mitigate the risk of fraudulent activity occurring during the procurement process.

4. Summary of Key Points

4.1 Nothing further to note.

5. Financial Implications and Budget Provision

5.1 Not applicable

6. Human Resources Implications

6.1 Not applicable

7. Equality Implications

7.1 Not applicable

8. Risk Management

8.1 EMSCU maintains its own Risk Register and manages and controls all identified commercial risks. Currently, there are no high risks recorded in relation to fraud and corruption.

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

9.1 Not applicable

10. Changes in Legislation or other Legal Considerations

10.1 None to note at present.

11. Details of outcome of consultation

11.1 Not applicable

12. Appendices

12.1 The Policy is attached to this report at Appendix A.

APPENDIX A

TITLE OF DOCUMENT	**PREVENTION OF FRAUD AND CORRUPTION IN THE PROCUREMENT PROCESS**

VERSION CONTROL

Version No	Published Date	Review Date	Document Owner	Document Author	Reason for issue
1.0	16th May 2013	16th May 2014	Graeme Unwin (Procurement Policy Manager)	Graeme Unwin (Procurement Policy Manager)	New process
1.1	18th Nov 2013				New Form created
1.2	23rd Jan 2014				Minor amendment
1.3	23rd June 2014				Signposting how to report fraud

PROCUREMENT FRAUD

Procurement is a particularly high risk area in terms of fraud. It is important that EMCSU officers, Force officers and staff involved in the procurement process are aware of procurement fraud risks and able to recognise and report potentially fraudulent activity.

There are two basic types of procurement fraud:

i) Collusion between procurer and supplier

ii) Collusion between suppliers

Listed below are the specific fraud risks that fall under these two general headings (based on information provided by CIPFA), including controls for mitigating the risks. Whilst the Force(s) Contract Procedure Rules and Standing Orders embed these controls, Force officers and staff should be conscious of the risks and the reasons for the controls.

COLLUSION BETWEEN PROCURER AND SUPPLIER

The principle Risks that could exist in relation to fraud during the relationship between the procurer and the supplier are as follows -:

- A need / requirement is invented
- Matching a specification to favour a particular supplier
- Supplier introduced to selection / evaluation process by single officer
- Tender invitations only made to preferred supplier
- Provision of information is only provided to preferred supplier
- Tender documents disappear or are altered
- Inadequate records showing, for example, when tenders were received
- Undeclared interests of members of the evaluation panel or bidders
- Tender assessment criteria not established, allowing manipulation of the evaluation
- Use of non-standard contracts, including an overly complex / vague schedule of charges.
- Payment risks, e.g. payment for goods that were not received or were of lower quality, over ordering, duplicate invoices, suspicious invoices (no valid VAT no., mobile phone no. only, little / vague information, round sum amounts, sequential invoice nos. over extended period).

Controls:

- Specifications drafted wherever possible, as a result of the Force Procurement Business Partner consulting with users and the supply market (not just one provider), encouraging innovation by stating outcomes wherever possible, and stating ‘or equivalent’ wherever appropriate
- Documented policies and procedures. For example, how and in what circumstances shortlists are compiled (see Clause 7.6 and 7.14 of the Contract Procedure Rules)
- Authorisation and documentation of exceptions from policy and procedure (see Clause 8.4 of the Contract Procedure Rules and specifically Clause 7.5 – Exemptions to normal procedures/single tender action)
- Standing / Approved List membership being subject to authorisation, and adherence to submission, financial and technical criteria (see Clause 7.8 of the Contract Procedure Rules)
- Standing / Approved List / Framework Agreement usage monitored to track for example contract awards
- Equality of opportunity for all suppliers to submit tenders (see Clause 7.6 of the Contract Procedure Rules)
- Management trail – documented evidence of how suppliers were selected (see Clause 7.18 of the Contract Procedure Rules)
- Clear instructions in independently despatched tender invitation documents

- Any clarifications following the issuing of the Request for Quotation or Invitation to Tender are provided to all potential bidders
- Declaration of interests of evaluation panel members – completion of Tender Panellist Declaration form (Form Ref EMSCU 002) as per Appendix A (see Clause 2.3.2.1 of the Contract Procedure Rules)
- Declarations of interests of tenderers. The following question (or similar) should be asked in the Pre-Qualification Questionnaire or Invitation to Tender:
    - *To the best of your knowledge, does any director or senior officer of your organisation have any personal or financial connection with any member or senior officer of Nottinghamshire Police / Derbyshire Constabulary / Northamptonshire Police?*
- Procedures for tender receipt, e.g. fully auditable for every stage of the tender process using the Proactis e-tendering system, including recording, date/time stamping, opening, custody (see Clause 7.11 of the Contract Procedure Rules)
- Evaluation methodology and criteria formally established prior to issuing Request for Quotation or Invitation to Tender (see Clause 7.14 of the Contract Procedure Rules)
- Policy for post tender negotiation (see Clause 7.15 of the Contract Procedure Rules)
- Contract conditions approved by Legal Services
- Documentation of the recording, authorisation, acceptance (see Clause 7.11), notification to tenderers (see Clause 7.16) and retention of tender documents (see Clause 7.18)
- Ordering, receipt and invoicing in compliance with approved electronic system, whether National Police Procurement Hub (NPPH), Force(s) Financial System, Procurement Card

Valuation of works and services

Risks:

- Valuations are made at face value without checks and / or verification to supporting documentation
- Authorisation of payments is made without assurance that checks have taken place
- Inflated claims for payment
- Due damages and credits not being deducted

Controls:

- Checking and sign off of interim valuation certificate
- Full supporting documentation provides completeness, for example how the valuation was compiled, calculated, that deductions (such as for defective work) are included and mitigating actions taken on delays
- Adherence to Force(s) Financial Regulations and the necessary checks of the above prior to payment certification
- Documentation and approval of decisions to deduct damages/apply credits

Collusion between suppliers

Risks:

- Suppliers are part of a cartel and divide up contracts between them by sharing tender information
- Pressure on non-cartel members to not submit tenders

Controls:

- Suppliers appointed on the basis of quality as well as price – most economically advantageous tender
- Monitoring of tender activities and market awareness by Procurement Services – to identify suspicious behaviour, e.g.:
    - patterns of successful tenderers
    - high margins between tenders
    - same price, discounts, service, credit terms offered by tenderers
    - unexpected refusal to tender
- Maintain the confidentiality of tenderers

How do you report suspected collusion between procurer and supplier or between suppliers?

Inform Ronnie Adams, Commercial Director, EMSCU (Ronnie.adams@emscu.pnn.police.uk) Mobile: (07702 141531)

Or

Employees should use their internal Force reporting system for incidents of suspected corruption. This is usually signposted on the Force Intranet or employees can contact their Professional Standards Department for further information.

TENDER EVALUATION PANELLIST
DECLARATION REGARDING ANY CONFLICT OF INTEREST
AND CONFIDENTIALITY UNDERTAKING

I, *(Title)* *(Name)* *(Surname)*
(Job title) *(Organisation/Department)*
(Email address) *(Contact phone number)*

Conflict of Interest

Conflict of Interest refers to situations in which personal interests (which may include financial interests) may compromise, or have the appearance of, or potential for, compromising professional judgement and integrity and, in doing so, the best interests of Nottinghamshire Police and Northamptonshire Police.

Examples of conflicts of interest include: *(This is not an exhaustive list)*

- Having a financial interest (e.g. holding shares or options) in a potential tenderer or any entity involved in any tendering consortium
- Having a financial or any other personal interest in the outcome of the evaluation of any tender evaluation process
- Being employed by (as staff member or volunteer) or providing services to any potential tenderer
- Being a member of a potential tenderer's management/executive board
- Receiving any kind of monetary payment or non-monetary gift or incentive (including hospitality) from any tenderer or its representatives
- Canvassing, or negotiating with, any person with a view to entering into any of the arrangements outlined above
- Having a close member of your family (which term includes unmarried partners) or personal friends who falls into any of the categories outlined above

Having any other close relationship (current or historical) with any potential tenderer

It is the individual's responsibility to ensure that any and all potential conflicts are disclosed to the EMSCU (the Chair of the Tender Evaluation Panel) in writing prior to them becoming involved in any procurement process. Individuals will be excluded from the procurement process where the identified conflict is in the EMSCU's opinion material and cannot be mitigated. The decision as to whether the identified conflict is material, and whether any mitigating arrangements are required, is to be made by the line manager of the Chair of the Tender Evaluation Panel (with support from the respective Commercial Officer).

Option 1:

"I do not have any conflicts of interest that prevent my full and unprejudiced participation in any procurement process.

I also declare that I will inform the EMSCU immediately, should my circumstances change in any way that effects this declaration."

Signature **Date**

Option 2:

"I **do have** a conflict of interest that may prevent my full and unprejudiced participation in a procurement process. The nature of this conflict of interest is described below:

I also declare that I will inform the EMSCU as soon as is practicable, should my circumstances change in any way that effects this declaration."

Signature **Date**

Confidentiality Undertakings

"Procurement process" encompasses any formal and informal meetings, associated discussions, meeting preparation and follow up or any other related activity.

"Information" means all information, facts, data and other matters of which I acquire knowledge, either directly or indirectly, as a result of my activities as an evaluator of any supplier Pre-Qualification Questionnaire or Tender submissions or tender interviews/presentations etc.

"Documents" means all draft, preparatory information, documents and any other material in either paper or electronic form, together with any information contained therein, to which I have access, either directly or indirectly, as a result of my participation in any procurement process. Furthermore, any records or notes made by me relating to information or documents shall be treated as Confidential Documents.

I understand that I may be invited to participate either directly or indirectly in the procurement process and agree:

1. To treat all information and documents under conditions of strict confidentiality
2. Not to disclose, make copies of, or discuss any received information with any person who is not a member of the Tender Evaluation Panel (without the prior written approval of the Chair of the Tender Evaluation Panel)
3. Not to use (or authorise any other person to use) information and documents other than for the purpose of my work in connection with the procurement process
4. To return documents to the Chair of the Tender Evaluation Panel as soon as the evaluation process is complete

Unless otherwise agreed with the Chair of the Tender Evaluation Panel, and subject to relevant legislation, this undertaking applies until the end of the contract, including any contract extensions.

This undertaking shall not apply to any document or information that becomes public knowledge otherwise than as a result of a breach of any of the above undertakings.

Signature **Date**

PLEASE FORWARD THE COMPLETED AND SIGNED FORM TO THE CHAIR OF THE EVALUATION PANEL

For Information and Decision	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**Chief Finance Officer**
Report Author:	**Charlotte Radford**
E-mail:	
Other Contacts:	**Julie Mair**
Agenda Item:	**10**

DRAFT GROUP ANNUAL GOVERNANCE STATEMENTS 2014-15

1. Purpose of the Report

1.1 This is to provide members with the opportunity to identify anything that should be included from the assurance that they have received during the year and not currently identified within the draft statement.

2. Recommendations

2.1 Members are requested to approve the draft group annual governance statements for 2014-15.

3. Reasons for Recommendations

3.1 This complies with the principles of good governance.

4. Summary of Key Points

4.1 Both legal entities are required to produce annual governance statements as evidence of the assurance being given relating to the operation of both legal entities and the resources used.

4.2 The draft statement from the Chief Constable is fed into the overall joint statement, which included the Police & Crime Commissioners statement. This are provided at **Appendix A and B**.

4.3 The continuing financial climate for policing is resulting in significant changes to the way in which the service and its support functions will be provided in the future. It is therefore imperative that there are sound systems of governance in place.

4.4 Both statements identify significant governance issues identified by internal audit and other external agencies that have been identified in the year and are in the process of being addressed as a priority. Updates on the progress made against these recommendations will be reported to the Audit & Scrutiny Panel through 2015-16.

5. Financial Implications and Budget Provision

5.1 None as a direct result of this report.

6. Human Resources Implications

6.1 None as a direct result of this report.

7. Equality Implications

7.1 None as a direct result of this report.

8. Risk Management

8.1 None as a direct result of this report.

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

9.1 This complies with regulatory requirements and best practice for good governance.

10. Changes in Legislation or other Legal Considerations

10.1 None

11. Details of outcome of consultation

11.1 Not applicable.

12. Appendices

A – draft Group and PCC Annual Governance Statement
B – draft Chief Constable Annual Governance Statement

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GROUP

ANNUAL GOVERNANCE STATEMENT

2014-15

1. SCOPE OF RESPONSIBILITIES

1.1 The Nottinghamshire Police and Crime Commissioner (Commissioner) is responsible for ensuring that business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively.

1.2 The Commissioner also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

1.3 In discharging this overall responsibility the Commissioner is responsible for putting in place suitable arrangements for the governance of the organisations affairs, which facilitate the effective exercise of its functions and include arrangements for the management of risk.

1.4 The Commissioner has approved and adopted jointly with the Chief Constable a Joint Corporate Code of Governance, which is consistent with the principles of the CIPFA/SOLACE Framework: *Delivering Good Governance in Local Government.* A copy of our code is available on our website at www.nottinghamshire.pcc.police.uk or from:

The Nottinghamshire Office of the Police and Crime Commissioner
Arnot Hill House
Arnot Hill Park
Arnold
Nottinghamshire
NG5 6LU

This statement explains how we have followed the code and also meets the requirements of the Accounts and Audit (England) Regulations 2011.

1.5 Throughout this statement there are references made to other documents being available on the Commissioners website (or the website). This reference relates to the Police and Crime Commissioners website at the address given above.

1.6 The Police & Crime Commissioners financial management arrangements conform to the governance requirements of the CIPFA *Statement on the Role of the Chief Financial Officer in Local Government* (2010); as set out in the Application Note to *Delivering Good Governance in Local Government: Framework.*

2. THE AIM OF THE GOVERNANCE FRAMEWORK

2.1 The governance framework is basically the systems and processes, and the culture and values, we are controlled by and which we answer to, get involved with and lead the community. The framework allows us to monitor how we are achieving our long-term aims, and to consider whether our aims have helped us deliver appropriate services that are value for money.

2.2 The system of internal control is an important part of the framework and is designed to manage risk to a reasonable level. It cannot remove all risk of failing to achieve our policies and aims, so it can only offer reasonable protection. The system of internal control is based on an ongoing process designed to:

- Identify and prioritise risks that could prevent us from achieving our policies and aims;
- Assess how likely it is that the identified risks will happen, and what will be the result if they did; and
- Manage the risks efficiently, effectively and economically.

We have had a governance framework in place for the year ended the 31st March 2015 and up to the date of approval of the annual statement of accounts.

3. THE GOVERNANCE FRAMEWORK

Our governance framework is made up of many systems, policies, procedures and operations we have in place to do the following:

3.1 ***Introduction***

The Police Reform and Social Responsibility Act 2011 (the Act) introduced one of the biggest changes in governance arrangements for policing. The Act created two legal entities, the Police and Crime Commissioner and the Chief Constable.

The Chief Constable retained the responsibility for operational policing whereas; the Commissioner has the responsibility for the totality of policing in the area. The Commissioners responsibilities were also extended to include crime prevention and the protection of vulnerable people and victims.

During 2014-15 the staff under the Chief Constables direction and control transferred to the Chief Constable from the Police and Crime Commissioner. This was not the only significant change during the year. The Commissioner was an early adopter under the Ministry of Justice funded Victims services and significant systems changes within the support services of Finance and Human Resources was also planned for so that full implementation of a Multi Force Shared service was operational from April 2015.

Full details on what has been achieved during the year will be published within the Annual Report and will be available on the website.

3.2 *Publish our aims for local people and others who use our services*

The Commissioner has refreshed the Police and Crime Plan taking account of the feedback he has received during the year and the achievements that have been made. The plan sets out our priorities, focusing on achieving seven priorities which aim to make communities safer and place victims at the centre of what we do. The plan reflects the time period covered by the Medium Term Financial Plan (MTFP).

The Police and Crime Plan is based upon the following seven priorities:

1. Protect, support and respond to victims, witnesses and vulnerable people
2. Improve the efficiency, accessibility and effectiveness of the criminal justice process
3. Focus on ***priority crime types*** and those local areas that are most affected by crime and antisocial behaviour
4. Reduce the impact of drugs and alcohol on levels of crime and antisocial behaviour
5. Reduce the threat from organised crime
6. Prevention, early intervention and reduction in reoffending
7. Spending your money wisely

These priorities build upon the Commissioners vision of giving victims and citizens a bigger voice in policing to achieve a safer Nottingham and Nottinghamshire.

The plan was built and refreshed after listening to members of the public and with our partners. It includes a review of each organisations strategic assessment, incorporating regional and national requirements in relation to policing and crime. The performance measures and targets within the plan have all been agreed with partners and the force.

For the plan next year we are already working with partners to further develop a Police and Crime Needs Assessment which will refresh the Joint Partnership Strategic Assessment, aiming to maximise analytical capacity, minimise duplication and share learning, good practice and innovation across the City and County. This will provide a comprehensive threat, risk and harm assessment, which will identify local consultation and engagement and improve the identification of need across the Commissioners priorities.

3.3 ***Review our aims and the effect they have on our governance arrangements***

We have worked hard to communicate (and receive feedback on) our aims for the community. We have done this a number of ways, including:

- The Commissioner listened to the public during his attendance at partner meetings and his walkabouts within the City and County. But he has not made decisions based upon public need alone. For example the financial pressure on the service has meant that continued increase in Police officer numbers is no longer possible. However, the increase made up to and including 2014-15 has meant that the future reductions will not have as hard and impact as they might have had.

- The review work put in place by the Commissioner has continued to have a positive effect on achieving priorities within the Police & Crime plan - such as a review of BME Recruitment and Retention, Base Budget Review, Domestic Violence, Restorative Justice, a Victim Consortium to inform the commissioning strategy and Alcohol.

- The learning from the Base Budget Review has also influenced work at a regional level where the Commissioner chairs the Regional Efficiency Board.

- Following on from the work of the BME Steering Group a specific recruitment drive was put in place for BME communities this resulted in a significant increase in BME Police officer recruitment (i.e. from 4.69% in 2013 to 15.62% in 2014).

- Domestic violence been jointly tendered for within the County and the Deputy Commissioner has been influential in ensuring the best service possible for victims. The City is also jointly tendering for this service during 2015-16.

- An Alcohol Strategy has been developed with partners and is being delivered. Further detail is provided later in this paper.

- Alcohol and drug treatment provision has been tendered for in the County, with the City tendering for Alcohol treatment provision from the same date. This is being provided in custody and criminal justice settings and is part funded by the Commissioners Community Safety fund.

However, this is not all - since coming into post the Commissioner has listened to partners, the public and the force on what are emerging issues and started working with people on areas such as:

- **CCTV Taxi voluntary scheme:** Following extensive partnership working and negotiations throughout 2013-14, the CCTV Taxi voluntary scheme was launched in June 2014. The Commissioner provided £98k funding for a voluntary scheme which would enable 100 Hackney Taxis to be fitted with CCTV to provide assurance to those using taxis and the drivers themselves.
- **Crime Reduction Initiative**: has been awarded the contract for the provision of substance misuse services in the County. Following a period of mobilisation after award of contract in October 2014, the service is being embedded across the County. Progress is reviewed in quarterly contract review meetings with Public Health and CRI.
- **Alcohol Strategy:** Both the County and City lead Officers are working hard to deliver the action points in the strategy which the Commissioner's Office (NOPCC) is monitoring. The Plan is progressing with key achievements which include: Best Bar None, Purple Flag, the Drink Aware Project and Operation Promote. There is further work being developed with Bassetlaw and Newark to improve information sharing.
- **The Alcohol Strategy and Action Plan**: Additional developments will incorporate the potential pilot of Alcohol Concern's Blue-light project, further development of the Drinkaware project and continuing the achievements made by the Local Alcohol Action Areas in both the City and County.
- **Mental Health issues:** The Mental Health Crisis Concordat Conference was held on the 25 September 2014 in collaboration with the Clinical Commissioning Group(s) (CCGs). A key priority area was to address the use of Section 136 of the Mental Health Act 1983. An Action Plan is due to follow and will be put together over the next quarter, including the actions to reduce the use of Section 136.

- **A Crisis Concordat action plan:** has been developed and was submitted to the national Crisis Concordat team in March 2015. The action plan will be implemented from April 2015 onwards. There is a clear priority within the plan to reduce the use of Section 136 for both adults and children. A target has been set that there will be no further inappropriate detentions of under 18s from April 2015, and from October 2015, no further inappropriate detentions of adults.
- **New and Emerging Community's Project**: The Commissioner has led a 'European Migration Seminar: New and Emerging Communities. This seminar provided an opportunity to discuss those issues that stakeholders and partners understand as the challenges in the way we currently deliver services and help identify ways to improve policies and operational changes. The Commissioner has commissioned work through Nottingham University to undertake research to better understand new and emerging communities.
- **Better Policing Collaborative**: The East Midlands now has the most substantial police collaboration programme of any region in England and Wales, combining innovative yet practical approaches to policing to make the entire region a safer place to live, work and visit in spite of significant financial challenges for the service. There will be the identification of further research working within the 'Better Policing Collaborative', which the Commissioner is a member, and which has received College of Policing innovation funding for academics to work with operational areas to develop innovation and improve effectiveness of service delivery.

- The Commissioner and Deputy Commissioner have continued to attend meetings with community groups across the City and County and many public events. This work is informing them of the priorities they are implementing in the refreshed police and crime plan update.

- Focus groups were held with ASB victims and members of the public in relation to the refreshed Police and Crime Plan priorities and the precept.

- The Commissioner's on-line survey was used for consulting on the precept and provided a supporting video on the Police's Delivering the Future proposals.

- There have also been consultant led focus groups, on in the Nottingham (City), one in the North Nottinghamshire (Worksop), one in South Nottinghamshire (Bingham), one with women and one with members of the BME community.

- Evidence has been collected through the Nottinghamshire County Council Annual residents Satisfaction Survey 2014 and the Nottingham City Council and the City's Crime and Drugs Partnership Annual Respect Survey on the policing and crime priorities and the precept.

- There is also an academic led research project utilising telephone surveys for the Nottinghamshire Safer Neighbourhood Board's Partnership Plus Areas.

- An on-line survey was used for consulting on the precept and a telephone survey was undertaken in relation to the plan and the precept.

- The Commissioner and Deputy Commissioner have held discussion groups and web chats with young people and undertaken patch walks across the City and County.

- The Commissioner and the Office of the Police and Crime Commissioner (OPCC) staff have attended events across the City and County. These events were used to canvass opinion in relation to the budget and general issues relating to policing.

We use feedback that we receive from all sources to help inform decisions. Feedback that the Commissioner received during the public events, meetings and walkabouts resulted in us reviewing our outcomes, which reflect our communities' top priorities of improving antisocial behaviour, supporting our vulnerable people and victims of crime and increasing community safety.

3.4 ***Measure the quality of our services and make sure we provide them in line with our aims and that they provide value for money***

The Commissioner is provided with weekly briefings on performance and formally holds the Chief Constable to account for performance in the Strategic Resources and Performance meetings, that are held in public venues around the County and City.

The Commissioner is also briefed on a monthly basis on expenditure against the budget. The Chief Finance Officer to the Commissioner also advises on any changes and emerging issues that could impact on the Medium Term Financial Plan.

In addition to the Strategic Resources and Performance meetings the Joint Audit and Scrutiny Committee receives updates on performance and financial monitoring and the Police and Crime Panel receive update reports from the Commissioner. Public Stakeholder meetings have also been held in the City and the County.

The Commissioner has instigated several pieces of review/scrutiny work, drawing on professionals in the field and community representation. Such areas of work under review include:

- A new restorative justice provider, called 'Remedi' has been appointed by the Commissioner to provide, restorative justice interventions for victims for the period from February 2015 to March 2016. Staff recruitment and training, information sharing protocols, office set up and case transfer have all been completed by end of March. First meeting of the Nottinghamshire Restorative Strategy is to take place in early April 2015.

- Vulnerable People – the street triage team, supported by the Commissioner, continues to deliver exceptional results and the number of non-crime related arrests under section 136 have more than halved since its introduction.

- Restorative Justice (RJ) – The Commissioner has appointed restorative justice specialist 'Remedi' to provide RJ interventions from February 2015 to March 2016.

- The reports from these pieces of work will continue to be presented to the Audit and Scrutiny Panel and the recommendations will continue to be monitored by the Panel. Progress on these reviews is also reported to the Police and Crime Panel.

3.5 ***Ensuring a High Quality Service***

The Police and Crime Plan is based upon the Commissioners values which are:

Victims - by listening and taking action to protect and safeguard vulnerable people.

Openness- by putting victims and public at the heart of open and transparent decision–making.

Inclusiveness- by working effectively with communities and business to tackle crime and anti social behaviour.

Communities - by ensuring fairness, respect and accountability to victims and communities.

Empowering - by engaging with victims and communities to help shape policing services and building partnerships.

The Plan itself incorporates global, national, regional and local requirements into the seven priorities and details how these will be met, measured and monitored. Specific targets for the Force and partners are included in this and the overall measure of success will be the improvement in victim satisfaction and public confidence.

Each year the Commissioner will produce an Annual Report detailing how well performance against the plan is progressing. A copy of the Annual Report is available on the Commissioners website.

In addition to this is the role of the Police and Crime Panel. The Commissioner is held to account by this panel, which also has power to veto the precept and the appointment of a new Chief Constable. This panel is administered by the County Council and its terms of reference can be found on Nottinghamshire County Councils website.

3.6 *Ensuring Value for Money*

In times of austerity there is a great deal of focus on the “money” and how it is being spent. Following the Base Budget review in 2013 the Commissioner successfully challenged the regional budget managers to deliver further savings to their own budget areas. This means that no budget is protected; each element of expenditure must demonstrate that it is being used in the achievement of the police and crime plan and in doing this is the work being done at the most economic level.

The Commissioner has also commissioned specific pieces of work with partners and the third sector. Each commissioning agreement requires performance details and achievement goals. Similarly, the grant monies that are being allocated to community groups and the third sector also have a requirement to achieve performance aims linked to the Police and Crime Plan. The Commissioner was also the Regional Chair from 1st April 2014 on the PCC Board, which; ensures regional activities continue to drive out further savings and improved working over the medium term financial period.

The joint audit and scrutiny panel receive audit reports, update reports and the strategic risk register. These reports enable the panel to challenge the OPCC and the Force on ensuring value for money across all activities. The terms of reference for the Joint Audit and Scrutiny Panel, together with all reports and minutes are available on the website.

3.7 *Working Together*

As has been reported in previous sections the Commissioner is listening to victims, communities and partners and this is at the heart of how he does business. He is involving people from across these areas to develop and work with him in bringing about improvements.

Each partnership, commissioning agreement, grant agreement and review has terms of reference linked to the clear achievement of the police and crime plan priorities. These agreements clearly define the responsibility of each participant.

Regionally the five PCC’s and forces collaborate to ensure resilience and deliver value for money. This is done under Section 22 agreements.

In addition to the collaborations already in place the region has been successful in obtaining innovation funding from the HO for projects such as Body Worn Video, Virtual Courts, Interoperable Crime and Justice Platform and Rapid DNA technology.

Funding awarded in 2014-15 is worth more than £4.1m.

The "Act" required PCC's to put a Scheme of Delegation in place to ensure the business continued to run smoothly. There was one significant change relating to this in that delegations could no longer be made to the Chief Constable (or any constable) and therefore have been made to specific members of staff employed by the Commissioner, but some of whom are under the direction and control of the Chief Constable. The Scheme of Delegation is approved and operating effectively. The Scheme of Delegation is available on the Commissioners website.

The OPCC and Force also have a Working Relationship Agreement, bringing clarity to the services required by the OPCC from functions under the Chief Constable's direction and control. The Working Relationship Agreement is available on the Commissioners website.

The work that had been done prior to 2014 ensured a smooth transition under the stage 2 transfer from "the Act".

3.8 ***Ensuring High Standards of Conduct and Behaviour***

There are a number of ways that this is achieved:

- The Commissioner, Deputy Commissioner, Chief Executive and Chief Finance Officer have published declarations of interest on the OPCC website.
- Details of salaries and expenses claimed are also published on the website.
- A gifts and hospitality register is in place for all staff and members of the OPCC to record details of all offers made and this is reviewed annually.
- Members of the Joint Audit and Scrutiny Panel and staff attending the Strategic Resources and Performance meeting are required to make declarations of interest where appropriate and that these are formally minuted.

- Professional bodies codes of conduct, that staff have to comply with (e.g. Charted Institute of Public Finance and Accountancy) are part of what we do.
- A Complaints Procedure is in place for complaints against the Commissioner, Deputy Commissioner, staff and members in the OPCC and the Chief Constable.
- An Anti-Fraud and Anti-Corruption Policy is in place and reported on together with fraud returns annually to the Audit Commission.
- Financial Regulations are in place together with standing orders for Land and Property and Contracts.
- The Commissioner and Deputy Commissioners Code of Ethics.

All of the above together with other policies and the culture of working in the OPCC ensure the high standards of conduct and behaviour are achieved.

3.9 ***Decision Making Transparency***

All decisions not specifically delegated are made by the Commissioner. There are two ways in which decisions can be made, either:

1. In a public meeting of Strategic Resources and Performance, where minutes are taken recording decisions made. These minutes are published on the website.

2. In day-to-day management activity by the Commissioner. This is done by a report with any required supporting information and Executive Decision Record being completed and submitted to the Commissioner. Once approved the decision record is published on the website.

The Commissioner refers to the professional officers within the OPCC to inform him on the decisions being made.

The role of the Joint Audit and Scrutiny Panel also ensures transparency in the decisions made. It receives reports and can make recommendations to the Commissioner on issues relating to audit and inspection, risk management, recommendations from other sources such as scrutiny working groups and governance.

The strategic risks of the OPCC are incorporated in the joint strategic risk register that is reported regularly to the Joint Audit and Scrutiny Panel. All significant public interest decisions are published on the Commissioners website.

3.10 ***Developing Capacity and Capability***

Staff within the OPCC were directly transferred from the former Police Authority, bringing those skills with them. This structure was reviewed in 2013-14 and will continue to be assessed to ensure that the best possible service will continue to be provided.

The joint authorities CIPFA Graduate Trainee scheme has been seen as an international success and is being rolled out in Australia, Canada and other parts of the UK.

Members of the Joint Audit and Scrutiny Panel have undertaken training within the OPCC and Force during the year. Internal audit and external audit have also provided training on their roles and the roles of the members in providing an effective Audit Panel. CIPFA provided their training course to members in the region in September 2013.

3.11 ***Engagement***

Throughout the previous sections you will have seen that engagement with people in our communities, in business, in third sector organisations, in partners and in our own staff and police officers is very important to us.

We are constantly striving to ensure inclusion of all stakeholders especially in driving improvement in community safety that is important to you.

We encourage you to complete our surveys and questionnaires which we have available at public events and on line.

The Commissioner has met his commitment to establishing two Public Stakeholder Forums to allow stakeholders to have a direct influence and voice over policing priorities and how resources are allocated.

How the Commissioner proposes to engage with the public and victims of crime is set out in the published Community Engagement and Consultation Strategy. This document can be found on the Commissioners website.

3.12 **OTHER ACHIEVEMENTS DURING THE YEAR:**

- **The Policing Estate:** in partnership with Nottingham City Council a new City policing base is being created at Byron House. This will also include the City's Community's protection team under the Auroa II partnership.

  This partnership working will also deliver significant revenue savings.

  Further consultation and work is ongoing in relation to Sneinton, Meadow, Eastwood and Mansfield Woodhouse.

  Co-location proposals are being developed for Retford. This follows successful arrangements in West Bridgford and Beeston.

- **Rural Crime Focus:** the Commissioner has hosted a meeting to highlight issues of rural and wildlife crime – with a commitment to tackle this issue. He supports the need for dedicated officers to tackle rural and wildlife crime and a conference is being planned for later in 2015.

- **PCSO Powers:** The Commissioner initiated the Home Office rethink on PCSO powers and changes were made within the Anti-social Behaviour, Crime and Policing Act 2014.

- **Victims Code:** The Commissioner and Deputy Commissioner have been influential in identifying the gaps in compliance with the code and ensuring that the Force delivers an action plan to address these gaps.

- **Mental Health:** The Commissioner, with the Nottingham Clinical Commissioners Group, has led the response to the Mental Health Concordate and Partnership commitment to implement the national action plan. Alongside the Chief Constable he has made a commitment that no young people or adults will be detained in custody as a place of safety from October 2015.

- **Armed Services Veterans:** Nottinghamshire leads the way on identifying veterans with mental health issues that may related to PTSS to ensure the right support is given.

- **The living wage accreditation:** Nottinghamshire Police was to be the first police force in England and Wales to sign up to a national campaign calling for all workers to be paid an hourly rate that matches the cost of living. The new Living Wage is £7.65 per hour, which is significantly higher than the Minimum Wage, which is £6.31.

4. REVIEW OF EFFECTIVENESS

4.1 The OPCC has responsibility for conducting, at least annually, a review of the effectiveness of the governance framework, including:

- The system of internal audit.
- The system of internal control.

The review by the OPCC has two elements to it. Firstly, it has to be satisfied that the process put in place by the Chief Constable for the force's assurance review is adequate and reliable. This was done through a joint consultation early in the review process.

Secondly, is the process upon which the OPCC can rely. This consists of obtaining individual assurances from the Chief Constable, the ACO Resources, the Chief Executive and the Chief Finance Officer, together with the annual assurance provided by the internal auditors and regional Deputy Chief Constable. These assurances form the basis of assessing whether governance is operating effectively and that controls which are in place are being adhered to.

4.2 The comments made on the assurance forms are incorporated where applicable in the accounts and action plans. For example contingent liabilities and accruals have been made where appropriate.

4.3 In addition to this a review based upon the use of resources self assessment principles and the schedule provided in the CIPFA/SOLACE framework has been developed and completed. This provides links to documentary evidence to support this statement and has been provided to the external auditor for their review.

4.3 The Chief Finance Officer has had responsibility for reviewing and updating the Scheme of Delegation and Financial Regulations, during the year, to ensure they were fit for purpose and met the new requirements of the Act. The reviewed delegation and regulations have been approved by the Commissioner. These have been reviewed further by the Chief Finance Officer with the Chief Executive and the Deputy Chief Constable.

4.4 The internal auditors produce reports for the Joint Audit and Scrutiny Panel throughout the year and use this work to inform their annual assurance opinion in their annual report. For 2014-15 they have rated the assurance level as adequate. The internal audit annual report will be available on the website under the Audit and Scrutiny Panel meeting papers for June 2015.

4.5 The work of the HMIC is also reported to the Joint Audit and Scrutiny Panel and the Force produce regular reports to the panel on the implementation of all audit and inspection recommendations. The Audit and Scrutiny Panel papers on the website include as a standing item a report on all audit and inspection report recommendations, which includes a tracker for their implementation.

4.6 Internal Audit verifies the implementation of all audit and inspection recommendations in their follow-up audits during the year. The results of the follow-up audit are reported in the Internal Audit Progress Reports to the Audit and Scrutiny panel.

4.7 Other assurance mechanisms include the Regional meeting of Commissioners and Chief Constables and the Police and Crime Panel.

4.8 There are areas to monitor further, which include the development and delivery of the Forces efficiency savings, which form part of the HMIC inspection regime, under Valuing the Police.

4.9 There will be further challenges and opportunities for partnership and community working for the Commissioner with the introduction of the Anti-Social Behaviour, Crime and Policing Act 2014, particularly around the need to consult on Community Triggers and Community Remedies.

4.10 Effectiveness of victims' services will transfer to the Commissioner from October 2014. As an early adopter, the Commissioner has in place an Integrated Victims Services Programme Board to manage the interoperability and delivery of services to victims.

4.11 The effectiveness of the Strategic Policing Requirement will be monitored by the use of a Strategic Toolkit produced by the College of Policing, and will form part of the assurance processes of the Joint Audit and Scrutiny Panel.

4.12 During 2014-15 the National Audit Office also undertook a review aimed at the role and support of the Home Office, where Nottinghamshire was one of the pilot OPCC's included in the review. This report is due to be published in June 2015.

5. SIGNIFICANT GOVERNANCE ISSUES

FINANCIAL CLIMATE

5.1 The Comprehensive Spending Review (CSR) announced in December 2014 confirmed a further 20% at least of cuts up to 2019. An in year budget is to be announced in July 2015 which is expected to bring further cuts and probably in year cuts to the grant funding. The next CSR is expected in the Autumn and it is anticipated that the new Government will be front loading the cuts required.

5.2 To date the Force has delivered savings on average of £10m per annum. The Medium Term Plan sees this continuing up to 2020 at least. Savings of £11.0m have to be achieved in 2015-16 and for 2016-17 this increases to £14.7m.

5.3 The achievement of the savings is getting harder year on year. In 2014-15 an additional £2.2m from reserves was required to deliver a balanced budget by the end of the year, making up for the shortfall on the savings target.

5.4 The Medium Term Financial Plan is approved by the Commissioner in February and is available on the website. It is updated during the year as significant changes emerge. These updates are also available on the website.

5.5 There are further risks that could impact on the above estimates for example the impact of the Single Rate Pension from April 2016 this is likely to result in an additional cost of £3.5m in the budget.

5.6 We are also limited in any other mitigation that we could take. Council Tax referendum limits are being set low and the freeze grant ceases in 2015-16.

5.7 We are further impacted by the localisation of council tax – the billing authorities in response to the Governments limited delegation, have made decisions that have significantly reduced the tax base estimates and therefore the amount to be raised through the precept. Similarly any further change to Partners funding is likely to have an impact on the Police and Crime budget or service delivery.

5.8 Whilst funding continues to reduce it is imperative that good governance structures and processes continue to operate in the OPCC and Force.

PERFORMANCE

5.9 During 2014-15, crime increased by 5.8% and ASB increased by 6.5%. However, since 2011-12 there have been 3,019 fewer incidents of ASB (-33.6%) and 4,962 less crimes (-6.4%).

5.10 Details on performance and the improvements made are reported to the Strategic Resources and Performance meeting as a standing item on the agenda. Performance details are also provided in the Commissioners update report which is reported to the Police and Crime Panel and the Audit and Scrutiny Panel. These are also available on the website and Nottinghamshire County Councils website. The Commissioner has weekly bi-lateral meetings with the Chief Constable to review performance.

5.11 The continued reduction in funding is now impacting on the number of Police Officers and PCSO's that we will be able to retain. To mitigate the impact on performance the force are in the process of delivering a redesigned police service, where non-warranted roles are being undertaken by civilians.

HUMAN RESOURCES

5.12 The Target Operating Model is developing a picture of what the Force will look like in 2020 as funding reduces year on year. One major change will be to the way of working and therefore the workforce mix and numbers of officers and staff will change.

5.13 BME recruitment and retention to reflect the communities of Nottinghamshire will continue to be a cause for concern and the force positive action campaigns' will continue to be reviewed. The work to date has resulted in an increase of BME Police Officer recruitment (from 4.69% in 2013 to 15.62% in 2014).

5.14 A contingent liability has been identified within the statement of accounts relating to the application of regulations A19 during 2011-12. The full cost of this is unknown as each individual case has to be assessed and could take a few years to complete.

STAGE 2 TRANSITION

5.15 This has been successfully managed and the changes implemented.

INFORMATION GOVERNANCE

5.16 The arrangements for information governance need to provide the assurance needed by the Commissioner. This particularly relates to the unauthorised use of force data and the need for information sharing protocols to be standardised for partner organisations.

5.17 The Information Sharing Protocol between the Force and the Commissioner is in place.

FINDINGS FROM INTERNAL AUDIT AND OTHER EXTERNAL REVIEWS

Internal Audit

5.18 During the year Internal Audit has issued two "Red" Audit Reports and two high "Amber" reports, for partnerships, Code of Practice for Victims, Volunteering and Grants – Preventing Demand. Action plans are being put in place to address these issues as a priority.

5.19 The Force has also highlighted significant issues raised by the Internal Auditors, within the Information Management Audit Report, within its Annual Governance Statement and the plans to address this issue.

National Audit Office (NAO)

5.20 Nottinghamshire was one of the pilot authorities consulted in the NAO's review of the Home Office (HO). This report is due to be issued on 4th June and contains recommendations for all organisations working within the policing service (HO, College of Policing, CIPFA, Forces).

5.21 The most significant finding of the NAO is the lack of understanding demand at local levels and what drives this demand. There are examples of good practice in some areas which we should learn from.

5.22 The HO's lack of understanding of how its decisions impact at a local level is also highlighted within the report.

Her Majesty's Inspectorate of the Constabulary (HMIC)

5.23 During 2014/15 there have been 4 HMIC inspections which have identified significant governance issues for the force. These are:

- Valuing the Police
- Crime Inspection
- National Child Protection Inspection
- Police Integrity and Corruption

The Annual Governance Statement of the Force details the significant issues and action being taken to address them.

Nottinghamshire
POLICE & CRIME COMMISSIONER

ANNUAL ASSURANCE STATEMENT

2014-15

SIGNED:

Mr Paddy Tipping
Police and Crime Commissioner
08 September 2015

Mr Kevin Dennis
Chief Executive - OPCC
08 September 2015

Mrs Charlotte Radford
Chief Finance Officer – OPCC
08 September 2015

Annual Governance Statement (AGS)

2014/15

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Scope of responsibility

Nottinghamshire Police (the Force) is responsible for ensuring that its business is conducted in accordance with the law and proper standards, and that public money is safeguarded and properly accounted for, and used economically, efficiently and effectively. The Force also has a duty under the Local Government Act 1999 to make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness.

In discharging this overall responsibility, the Force is responsible for putting in place proper arrangements for the governance of its affairs, facilitating the effective exercise of its functions, and which includes arrangements for the management of risk.

The Force has approved and adopted a Joint Code of Corporate Governance with the Nottinghamshire Office of the Police and Crime Commissioner (NOPCC), which is consistent with the principles of the CIPFA/SOLACE Framework *Delivering Good Governance in Local Government*. A copy of the code is available on the Commissioner's website or can be obtained from the Force by writing to:

Staff Office,
Nottinghamshire Police Headquarters,
Sherwood Lodge,
Sherwood Drive,
Arnold,
Nottingham NG5 8PP

This Statement explains how the Force has complied with the code and also meets the requirements of Accounts and Audit (England) Regulations 2011, regulation 4(3), which requires all relevant bodies to prepare an annual governance statement.

The purpose of the governance framework

The governance framework comprises the systems and processes, culture and values by which the Force is directed and controlled and its activities through which it accounts to, engages with and leads its communities. It enables the Force to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate services and value for money.

The system of internal control is a significant part of that framework and is designed to manage risk to a reasonable level. It cannot eliminate all risk of failure to achieve policies, aims and objectives and can therefore only provide reasonable and not absolute assurance of effectiveness.

The system of internal control is based on an on-going process designed to identify and prioritise the risks to the achievement of the Force's policies, aims and objectives, to evaluate the likelihood and potential impact of those risks being realised, and to manage them efficiently, effectively and economically.

The governance framework has been in place at the Force for the year ended 31 March 2015 and up to the date of approval of the statement of accounts.

The governance framework

The principles which form the basis of the governance framework, and how they are applied within the Force, are described briefly in the following sections.

Principle 1: Focusing on the purpose of the Force, and on outcomes for the community, and creating and implementing a vision for the local area

- The national Code of Practice for Victims of Crime sets the standards for the police and criminal justice agencies when providing services to victims
- The Home Secretary sets the Strategic Policing Requirement (SPR), which describes the roles and responsibilities of individual forces in preparing for and responding to national risks
- The local direction and priorities for the Force are set in the Commissioner's Police and Crime Plan, which was originally created following a comprehensive multi-agency strategic assessment process coordinated by the Force
- The Force and local partner organisations each complete an annual Local Profile assessment to inform the Police and Crime Needs Assessment (PCNA) and refresh of the Police and Crime Plan
- The current priority themes in the Police and Crime Plan for Nottinghamshire, refreshed for 2015-18 following an updated PCNA are:
    - Protect, support and respond to victims, witnesses and vulnerable people
    - Improve the efficiency, accessibility and effectiveness of the criminal justice system
    - Focus on priority crime types and those local areas that are most affected by crime and antisocial behaviour
    - Reduce the impact of drugs and alcohol on levels of crime and antisocial behaviour
    - Reduce the threat from organised crime
    - Prevention, early intervention and reduction in reoffending
    - Spending your money wisely

Principle 2: Leaders, officers and partners working together to achieve a common purpose with clearly defined functions and roles

- The Policing Protocol Order 2011 is the statutory instrument that describes the relationship between the Police and Crime Commissioner and the Chief Constable
- The Chief Constable is accountable to the Commissioner for the delivery of efficient and effective policing in Nottinghamshire, whilst retaining operational independence and direction and control of their officers and staff
- The Force has in place a Working Relationship Agreement with the NOPCC for the sharing of services and information
- Police collaboration agreements, made in accordance with the Police Act 1996, are in place with other forces in the East Midlands for the delivery of a wide range of specialist operational and support services; governance of collaborative functions is achieved through joint management boards involving PCCs and Chief Officers

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- Strategic community safety partnerships, established in accordance with the Crime and Disorder Act 1998, are in place with the local authorities in Nottingham City, Nottinghamshire County and district councils
- Nottingham City Division and Nottingham City Council Community Protection prepare a joint annual business plan to facilitate their continued working arrangements
- The Force is a member of the Nottinghamshire Local Criminal Justice Board (LCJB)

Principle 3: Promoting values for the Force and demonstrating the values of good governance through upholding high standards of conduct and behaviour

- The College of Policing has developed a national Code of Ethics for the police service, which applies to all officers and staff within the Force
- The Force has also developed and continues to reinforce its own PROUD values:
    - Professional
    - Respect for all
    - One team
    - Utmost integrity, trust and honesty
    - Doing it differently
- All police officers take the Oath (Attestation) before assuming the office of constable, and are subject to the Police Regulations; all members of police staff are subject to the Force's Police Staff Misconduct Policy

Principle 4: Taking informed and transparent decisions which are subject to effective scrutiny and managing risk

- A formal Scheme of Delegation sets out the extent to which the Commissioner has delegated authority to the Chief Constable and officers of the Force to make decisions that fall within the Commissioner's areas of responsibility; decisions made in accordance with the Scheme are published on the Commissioner's website
- The Force Executive Board (FEB) is the senior decision making body within the Force, responsible for formal approval of all capital business cases and organisational change
- The Chief Constable has appointed a suitably qualified Chief Finance Officer (CFO), as required under section 151 of the Local Government Act 1972
- The Chief Constable is the Force's Data Controller for the purposes of the Data Protection Act, with responsibilities of Senior Information Risk Owner (SIRO) assigned to the Deputy Chief Constable (DCC)
- The Force has agreed a joint Risk Management Policy with the NOPCC that is based on the Management of Risk (M_o_R) approach; major corporate projects and programmes are managed in accordance with the principles of PRINCE2 project management and Managing Successful Programmes (MSP)

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Principle 5: Developing the capacity and capability of the Force to be effective

- The College of Policing is the professional body for policing; the College provides Senior Police National Assessment Centre (PNAC) and Strategic Command Course (SCC) for Chief Officers and access to Authorised Professional Practice (APP) across a wide range of policing functions, amongst its many services
- All new police officers complete the Police Constable Student Officer Learning and Assessment Portfolio (PC-SOLAP) as part of their Initial Police Learning and Development Programme (IPLDP); the Professionalising Investigations Programme (PIP) provides accredited training for the development of investigative skills
- Training services are provided to the Force by the East Midlands Collaborative Human Resources Services – Learning and Development (EMCHRS-L&D); the Force also has a dedicated Leadership and Management Development team within the Human Resources and Organisational Development department
- The National Centre for Applied Learning Technologies (NCALT) Managed Learning Environment (MLE) is used to provide a range of e-learning courses to officers and staff

Principle 6: Engaging with local people and other stakeholders to ensure robust public accountability

- The Force provides regular performance data to the Commissioner and to the Home Office to enable scrutiny of its effectiveness; in addition, Chief Officers routinely attend public Strategic Resources and Performance meetings chaired by the Commissioner to account for Force performance
- The Commissioner and Force have appointed an independent Joint Audit and Scrutiny Panel, which receives quarterly reports on matters of governance
- The Force is subject to the inspection programme of Her Majesty's Inspectorate of Constabulary (HMIC) and the Criminal Justice Joint Inspectorate (CJJI), with inspection reports published on the Justice Inspectorate website
- The Publication Scheme, available through the Force website, provides a wide range of information about the Force and how it operates; the Force also has a visible online presence, including a website as well as Facebook and Twitter accounts
- A sample of victims of crime are surveyed every quarter to measure satisfaction with the Force's services
- Established community engagement mechanisms include support for Neighbourhood Watch; Neighbourhood Alert; Crimestoppers; Key Individual Networks (KINs); and Independent Advisory Groups (IAGs)
- A wide range of volunteering opportunities area available within the Force, including the Special Constabulary, Police Cadets and police staff volunteers

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Review of effectiveness

The Force has responsibility for conducting, at least annually, a review of the effectiveness of its governance framework including the system of internal control. The review of effectiveness is informed by the work of the Chief Officer Team within the Force who have responsibility for the development and maintenance of the governance environment, the head of internal audit's annual report, and also by comments made by the external auditors and other review agencies and inspectorates.

Specifically, the review of effectiveness of the Force's governance framework for 2014/15 has been based on information from the following sources:

- Internal audits carried out by Baker Tilly LLP, summarised in their annual report to the Joint Audit and Scrutiny Panel *(Not yet received)*
- Annual external audit report to the Joint Audit and Scrutiny Panel by KPMG LLP *(Not yet received)*
- Inspections of the Force by HMIC, as reported to the Chief Constable

We have been advised on the implications of the results of the review of the effectiveness of the governance framework by the Temporary Head of Corporate Development, and that the arrangements continue to be regarded as fit for purpose. The areas already addressed and those to be specifically addressed with new actions planned are outlined below.

Significant governance issues

The following significant governance issues were identified through audit and inspection of the Force during 2014/15:

Valuing the Police inspection (HMIC)

- Highlighted the urgent need for the Force to implement its plans for a new and affordable operating model in order to reduce long term risks to policing services
- Steps have been taken to finalise the Delivering the Future Programme to shape the operating model of the Force whilst continuing with its implementation; HMIC's re-inspection recognised the good progress that has been made since the original report was issued

Crime Inspection (HMIC)

- Expressed concerns about inconsistencies with investigating offending, the importance of supervision and the need for professional training; also highlighted issues of capacity within Public Protection
- An Improving Investigations programme has already been established; reorganisation of the Public Protection department, including the provision of additional resources, has also been approved

National Child Protection Inspections (HMIC)

- Highlighted the potential for improvements in management oversight of child protection work, including the benefits of service reviews and the use of performance data to improve services and develop work with partner agencies

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- A review is to take place, along with childrens social care services, in relation to the safeguarding of children; a child sexual exploitation (CSE) strategy is also being developed by the Force to enhance proactive and responsive work

Police Integrity and Corruption (HMIC)

- Recommended that the Force review its capacity and capability to carry out proportionate investigations into public complaints to minimise delays
- Resources within the Professional Standards Directorate (PSD) are regularly reviewed and fixed term contracts used where necessary to manage workload; recent data from the Independent Police Complaints Commission (IPCC) shows that the Force is now in line with national averages

Information Management (Baker Tilly)

- Recommended the development of a comprehensive information management strategy, which is required within the APP for information management; the strategy should clarify responsibilities and procedures across areas including records management; information security; and data quality
- A thorough review of the Force's information management policies and processes is underway, using the APP as its basis; the Force is also part of a collaborative project to implement the Niche Records Management System (RMS) to manage its crime, intelligence, case and custody records

Code of Practice for Victims of Crime (Baker Tilly)

- *Currently awaiting final report*
- *Draft report has recommended tighter procedures and documenting of actions taken in compliance with the Code*
- *Suitable arrangements have been devised to record actions and also to monitor compliance*

Partnerships (Baker Tilly)

- *Currently awaiting final report*
- *Draft report has highlighted the importance of up to date partnership arrangements and robust performance management*

We propose over the coming year to take necessary steps to further enhance our governance arrangements. We are satisfied that these steps will address the need for improvements that were identified in our review of effectiveness and will monitor their implementation and operation as part of our next annual review.

Signed: _____

Chris Eyre, Chief Constable

Signed: _____

Andrea Naylor, Chief Finance Officer

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For Comment	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**Chief Finance Officer**
Report Author:	**Charlotte Radford**
E-mail:	
Other Contacts:	**Angela Ward**
Agenda Item:	**11**

INTERNAL AUDIT ANNUAL ASSURANCE REPORT 2014-15

1. Purpose of the Report

1.1 To provide members with the assurance from Internal Audit work undertaken during the year 2014-15.

2. Recommendations

2.1 Members are recommended to consider the attached report and make comment.

3. Reasons for Recommendations

3.1 This report complies with the principles of good governance in providing assurance to the panel members.

4. Summary of Key Points

4.1 This is the final report from the Internal Auditors Baker Tilly and provides adequate assurance rating for the OPCC and the Force.

4.2 Areas of weakness have been identified during the year, which will need to be addressed by the Force. These will be followed up during 2015-16.

5. Financial Implications and Budget Provision

5.1 None as a direct result of this report.

6. Human Resources Implications

6.1 None as a direct result of this report.

7. Equality Implications

7.1 None as a direct result of this report.

8. Risk Management

8.1 The areas of improvement do include audit recommendations flagged as red.

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

9.1 This complies with good governance and financial regulations

10. Changes in Legislation or other Legal Considerations

10.1 None.

11. Details of outcome of consultation

11.1 Not applicable

12. Appendices

12.1 Appendix A – Annual Internal Audit Report 2015

Nottinghamshire Office of the Police & Crime Commissioner & Office of the Chief Constable of Nottinghamshire Force

Annual Internal Audit Report - Year ended 31 March 2015

Presented at the Joint Audit and Scrutiny Panel meeting of: 9 June 2015

Baker Tilly Risk Advisory Services LLP

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2 The Head of Internal Audit Opinions 3
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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.
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1 Introduction

As the provider of the internal audit service to the Nottinghamshire Office of the Police and Crime Commissioner and the Office of the Chief Constable for Nottinghamshire we are required to provide the Section 151 Officers and the Joint Audit Committee, an opinion on the adequacy and effectiveness of the organisation's governance, risk management and control arrangements.

In line with the Financial Management Code of Practice published by the Home Office, both the Office of the Police and Crime Commissioner (OPCC) and the Office of the Chief Constable (OCC) must have an internal audit service, and there must be an Audit Committee in place (which can be a joint committee). This annual report is therefore addressed to both the PCC and the Chief Constable, and summarises the work undertaken during 2014/15.

As your internal audit provider, the assurance and advisory reviews that Baker Tilly Risk Advisory Services LLP (Baker Tilly) provides during the year are part of the framework of assurances that assist the PCC and Chief Constable prepare informed annual governance statements.

In giving our opinion it should be noted that assurance can never be absolute. The opinion does not imply that Internal Audit has reviewed all risks and assurances relating to the organisation. The most that the internal audit service can provide is a reasonable assurance that there are no major weaknesses in risk management, governance and control processes.

2 The Head of Internal Audit Opinions

Police and Crime Commissioner for Nottinghamshire

For the 12 months ended 31 March 2015, based on the work we have undertaken, our opinion below details the adequacy and effectiveness of your organisation's, risk management, internal control and governance.

In our opinion, based upon the work we have undertaken, for the 12 months ended 31 March 2015 Police and Crime Commissioner for Nottinghamshire has adequate and effective risk management, control and governance processes to manage the achievement of the organisation's objectives. During the year, the Police and Crime Commissioner had identified some concerns specifically around the governance and oversight of Victims, Volunteering, Grant Schemes and Partnerships, which were confirmed during our internal audit work within these areas.

Chief Constable for Nottinghamshire

In our opinion, based upon the work we have undertaken, for the 12 months ended 31 March 2015 Nottinghamshire Police has adequate and effective risk management, control and governance processes to manage the achievement of the organisation's objectives. However, we have highlighted some concerns around Victims, Grant Scheme, Volunteering and Partnerships, following our coverage during the year and it is important that the Constabulary actions the highlighted weaknesses.

2.1 The basis of our opinion

Based on the work we have undertaken for the Nottinghamshire Office of the Police & Crime Commissioner and Nottinghamshire Constabulary's system of internal control we do consider that within some of the areas reviewed there are issues that need to be flagged as an internal control weakness.

We have issued two amber green (reasonable assurance) reports in relation to Business Continuity & IT Disaster Recovery and Key Financial Controls.

In addition, we have issued two further reports that received an amber red (some assurance) reports, specifically in relation to Volunteering and Grant Scheme.

Two red reports (no assurance) have been issued around Victims (Compliance with the Code) and Partnerships.

Furthermore, we also completed two reviews of an advisory nature. These were in the areas of Commissioning and Information Management. As part of the reviews a number of recommendations were included to assist both organisations, moving forward.

We have completed two follow up audits, one around Crime Recording, which provided good progress and a general follow-up of previous recommendations (both audit and inspection), which concluded that adequate progress had been in implementing previous recommendations.

In addition, we undertook two reviews within the East Midlands Collaboration: East Midlands Operational Support Service (EMOpSS) was provided with an Amber Green (reasonable assurance) opinion and Collaboration: Innovation Fund was provided with a Red (cannot take assurance) opinion as we found there was not a consistent, transparent and overarching governance framework in place to provide oversight and effective management of the Innovation Funds.

A summary of internal audit work undertaken, and the resulting opinions, is provided at appendix A.

2.2 Acceptance of 2014/2015 Internal Audit recommendations

All of the recommendations made during the year were accepted by management.

2.3 Reliance placed upon work of other assurance providers

In forming our opinion we have not placed any direct reliance on other assurance providers.

3 Our performance

3.1 Wider value-adding delivery

As part of our client service commitment, during 2014/15 we issued 4 sector specific client updates.

- Issued four client updates and general briefings during the year.
- Provided benchmarking within our reports on the number and category of recommendations and assurance opinions across organisations similar to yourselves.
- Undertook both advisory and assurance reviews across both Corporations Sole. This included sharing best practice across the sector through our work. Specific advisory reports completed included Information Management Arrangement and Commissioning.
- We have made suggestions throughout our audit reports based on our knowledge and experience in the public and private sector to provide areas for consideration.

3.2 Conflicts of interest

Baker Tilly has not undertaken any work or activity during 2014/15 that would lead us to declare any conflict of interests.

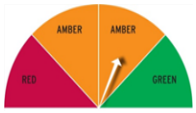
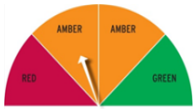
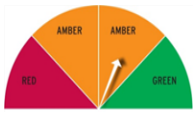
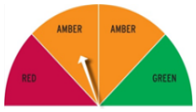
3.3 Conformance with internal auditing standards

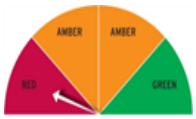
Baker Tilly affirms that our internal audit services to Nottinghamshire Office of Police & Crime Commissioner & Nottinghamshire Constabulary are designed to conform with the Public Sector Internal Audit Standards (PSIAS).

Under PSIAS, internal audit services are required to have an external quality assessment every five years. Our Risk Advisory service line commissioned an external independent review of our internal audit services in 2011 to provide assurance whether our approach meets the requirements of the International Professional Practices Framework (IPPF) published by the Global Institute of Internal Auditors (IIA) on which PSIAS is based.

The external review concluded that *"the design and implementation of systems for the delivery of internal audit provides **substantial assurance** that the standards established by the IIA in the IPPF will be delivered in an adequate and effective manner".*

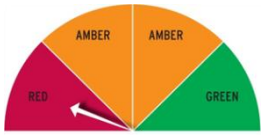
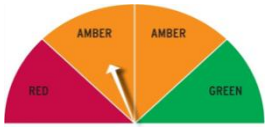
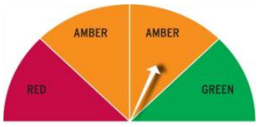
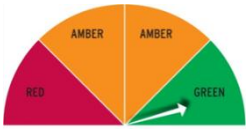
Appendix A: Internal Audit Opinion and Recommendations Summary 2014/2015

Assignment	Executive lead	Opinion	Actions agreed H	M	L
Information Management Arrangement *	Margaret Monckton, Assistant Chief Officer Resources & Julie Mair, Organisational Development Manager	Advisory	-	-	-
Business Continuity & IT Disaster Recovery Planning	Margaret Monckton, Assistant Chief Officer Resources		0	2	3
Volunteering	Charlotte Radford, Chief Finance Officer		0	5	2
Key Financial Controls	Margaret Monckton, Assistant Chief Officer Resources Charlotte Radford, Chief Finance Officer		0	4	3
Follow Up	Charlotte Radford, Chief Finance Officer & Julie Mair, Planning and Policy Officer	Adequate Progress	-	-	-
Crime Recording – Follow Up	Kevin Dennis, Chief Executive & Charlotte Radford, Chief Finance Officer	Good Progress	-	-	-
Victims Code of Practice for Victims of Crime – Demonstrating Compliance	Charlotte Radford, Chief Finance Officer		3	1	0
Grant Scheme – Preventing Demand	Charlotte Radford, Chief Finance Officer		0	4	1
Commissioning Framework *	Charlotte Radford, Chief Finance Officer	Advisory	-	-	-

Assignment	Executive lead	Opinion	Actions agreed H	M	L
Partnerships	Charlotte Radford, Chief Finance Officer		4	3	2

*=Advisory suggestions were included within the audit report

We use the following levels of opinion classification within our internal audit reports

			
Taking account of the issues identified, the Board cannot take assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied or effective. Action needs to be taken to ensure this risk is managed.	Taking account of the issues identified, whilst the Board can take some assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective, action needs to be taken to ensure this risk is managed.	Taking account of the issues identified, the Board can take reasonable assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective. However we have identified issues that, if not addressed, increase the likelihood of the risk materialising.	Taking account of the issues identified, the Board can take substantial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.

For further information contact

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Tel: 07966 091471

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For Decision	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**The Chief Finance Officer**
Report Author:	**Charlotte Radford**
E-mail:	
Other Contacts:	**Julie Mair, Brian Welch**
Agenda Item:	**12**

INTERNAL AUDIT ANNUAL PLAN 2015-16

1. Purpose of the Report

1.1 To inform members of the proposed plan of work for 2015-16.

1.2 To provide members with a new Audit Charter following the change in Internal Audit providers

2. Recommendations

2.1 Members are requested to approve the audit plan for 2015-16 attached at **Appendix A**.

2.2 Members are requested to approve the Audit Charter provided at **Appendix B**

3. Reasons for Recommendations

3.1 This complies with good governance and financial regulations

4. Summary of Key Points

4.1 The internal auditors have met with the OPCC and force to agree the plan proposed at **Appendix A.** This plan for 2015-16 has been established based upon meeting statutory requirements for auditing key financial systems, the need to audit systems where there has been a significant change in year and other audit requests based upon risks within the strategic risk register and advisory audits required to ensure the smooth running of both legal entities.

4.2 The newly appointed internal auditors will also have responsibility for producing a longer term audit plan, which will be brought to the next meeting of this panel.

5. Financial Implications and Budget Provision

5.1 None as a direct result of this report.

6. Human Resources Implications

6.1 None as a direct result of this report.

7. Equality Implications

7.1 None as a direct result of this report.

8. Risk Management

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

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

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

10. Changes in Legislation or other Legal Considerations

10.1 The internal changes to systems and processes have been considered as part of this plan.

11. Details of outcome of consultation

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

12. Appendices

12.1 **Appendix A** – Internal Audit Plan 2015-16

12.2 **Appendix B** – Draft Internal Audit Strategy 2015/15 to2018/19 and 2015/16 Internal Audit Plan

Appendix A: Internal Audit Plan 2015/16

Audit area	Suggested audit scope	Rationale	Proposed timing	Estimated audit days
Joint Code of Corporate Governance (Force and NOPCC)	Provide assurance that the Joint Code of Corporate Governance meets statutory requirements; assess the extent to which the commitments made by the Force and the PCC in the Code are being met	Since the introduction of the Code there has been no independent assurance that it is being followed which may leave the Force exposed to the risk of non-compliance	Quarter 1	10
Social impact / value (NOPCC)	Review of the PCCs processes including both the measurements of achievements so far and also potential measurements for future years	To establish the Social impact /value of Police and Crime Plan deliverables	Quarter 1	10
Collaboration agreements (Force and NOPCC)	Provide assurance that appropriate formal agreements are in place for all East Midlands police collaborations; assess the extent to which the terms of those agreements are being complied with	A considerable proportion of the Force's functions are now delivered by collaborative units; there has been no formal assurance reporting within the Force in relation to collaboration agreements which means the Force could be exposed to issues and risks that it is unaware of	Quarter 2	20
Procurement (Force and NOPCC)	Provide assurance that appropriate policies are in place to provide effective control over the procurement process; assess the extent to which current policies are being followed consistently	MFSS iProcurement now enables greater self-service spending by employees, potentially increasing the risk of unauthorised spending; a suite of procurement policies have been introduced by EMSCU, however there has been no independent assurance or assessment of compliance	Quarter 2	8

Appendix A: Internal Audit Plan 2015/16

Audit area	Suggested audit scope	Rationale	Proposed timing	Estimated audit days
Financial controls (Force and NOPCC)	General ledger; Cash, banking & treasury management; Budgetary control; Fixed assets & insurance; Income & debtors; Payments & creditors; Payroll, pensions & expenses	Annual audit to provide assurance as to the effectiveness of key internal financial controls in reducing risk of impropriety	Quarter 3	20
Commissioning (NOPCC)	To follow up on recommendations made as part of 2014/15 review, and to consider the changes in priorities given the end of the first term of the PCC	To inform NOPCC future commissioning plans	Quarter 3	7
Code of Practice for Victims of Crime	Specific follow-up to review progress against all actions agreed following the audit carried out in 2014/15; assess the arrangements in place for identifying and communicating with victims of crime	Response to the recommendations identified during the review in 14/15; changes from April 2015 in relation to how victims are identified and in	Quarter 4	7
Follow-up	Review progress against all actions agreed following previous internal audits and inspections by HMIC and other inspectorates	To provide independent assurance that appropriate action is taken to address recommendations previously agreed	Quarter 4	7

Appendix A: Internal Audit Plan 2015/16

Audit area	Suggested audit scope	Rationale	Proposed timing	Estimated audit days
Contingency	To be determined as and when required	To allow additional work to be commissioned should the opportunity arise	Tbc	5
Audit planning	• Audit planning • On-going liaison and progress reporting • Preparation for and attendance at the Joint Audit and Scrutiny Panel • Development and publication of the annual internal audit opinion	To enable the internal auditors to fulfil their obligations	N/A	20

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

Draft Internal Audit Strategy 2015/16 to 2018/19

and 2015/16 Internal Audit Plan

May 2015

This report has been prepared on the basis of the limitations set out on page 26.

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1. Introduction

1.1 A four-year proposed Strategic Audit Plan has been prepared on behalf of the Police and Crime Commissioner for Nottinghamshire and Nottinghamshire Police (the OPCC and Force) for the period 1 April 2015 to 31 March 2019. The plan has been compiled on the basis of identified risk and materiality, work undertaken by the previous internal audit providers in drawing up an indicative internal audit strategy, our existing experience of audit requirements within the sector, a review of strategic and operational risk registers, and research and horizon scanning of current risks and issues.

1.2 **Appendix A** sets out our assessment of the current risk environment.

1.3 **Appendix B** contains our proposed **Annual Audit Plan 2015 – 2016**.

1.4 **Appendix C** sets out our proposed **Strategic Audit Plan 2015 – 2019**.

2. The Scope and Purpose of Internal Audit

2.1 Internal Audit's primary role is to provide the organisation's management with independent assurance on the effectiveness of the internal control systems that contribute to the achievement of the organisation's business objectives. In so doing, this will support the OPCC and Force in signing the Annual Governance Statement. It is also Internal Audit's role to provide the OPCC and Force with assurance that they have in place effective processes for the management of risk.

2.2 The requirements of the Annual Governance Statement can be summarised as follows:

- The OPCC and Force are accountable for internal control. The OPCC and Force responsible for maintaining a sound system of internal control that supports the achievement of the organisation's objectives, and for reviewing its effectiveness;
- The system of internal control is designed to manage rather than eliminate the risk of failure to achieve these objectives;
- The system of internal control can therefore only provide reasonable and not absolute assurance of effectiveness; and
- The system of internal control is based on an on-going risk management process designed to identify the principal risks to the achievement of the organisation's objectives; to evaluate the nature and extent of those risks; and to manage them efficiently, effectively and economically.

2.3 As set out in the **Audit Charter** in **Appendix D**, Internal Audit fulfils this role by:

- Coordinating assurance activities with other assurance providers (such as the external auditors and HMIC) such that the assurance needs of the OPCC and Force, regulators and other stakeholders are met in the most effective way.
- Evaluating and assessing the implications of new or changing systems, products, services, operations and control processes.
- Carrying out assurance and consulting activities across all aspects of the OPCC and Force's business based on a risk-based plan agreed with the Joint Audit & Scrutiny Panel.
- Providing the Police & Crime Commissioner and Chief Constable with reasonable, but not absolute, assurance as to the adequacy and effectiveness of the key controls associated with the management of risk in the area being audited.
- Issuing periodic reports to the Joint Audit & Scrutiny Panel and Senior Management Team summarising results of assurance activities.
- Promoting an anti-fraud, anti-bribery and anti-corruption culture within the OPCC and Force to aid the prevention and detection of fraud.
- Assisting in the investigation of allegations of fraud, bribery and corruption within the OPCC and Force and notifying management and the Joint Audit & Scrutiny Panel of the results.
- Assessing the adequacy of remedial action to address significant risk and control issues reported to the Joint Audit & Scrutiny Panel. Responsibility for remedial action in response to audit findings rests with line management.

3. Approach

3.1 Whilst vitally maintaining independence from management (in order to remain impartial in making judgements and recommendations), it is important that Internal Audit is recognised as a tool for management. As such, the relationship with management must be to provide support and assistance with the aim of providing assurances to both them and the Joint Audit & Scrutiny Panel about the adequacy and effectiveness of controls in place to manage risk throughout the organisation.

3.2 Risk-based audit techniques will be used wherever appropriate as the principal means of providing assurance on the adequacy and effectiveness of internal controls within financial and non-financial systems. A cyclical approach will be adopted with the frequency and depth of audit depending on the significance band into which the audit falls.

3.3 We have drawn on the following in developing the Strategic Audit Plan for 2015-2019 and the Operational Audit Plan for 2015/16:

- A review of assurance received from audits carried out over the past three years by the previous internal auditors;
- A review of assurance received from inspections carried out over the past three years by Her Majesty's Inspectorate of Constabulary (HMIC) and other justice inspectorates;
- Consideration of the published inspection programmes of HMIC and the Criminal Justice Joint Inspectorate (CJJI) for 2015/16;
- Consideration of the Force's planned use of its own information audit resources; and
- Analysis of current areas of significant risk to OPCC and Force objectives, to identify opportunities for using internal audit to improve understanding of key risk factors and the effectiveness of existing controls.

3.4 Through a focused approach to assurance, the internal audit service can be utilised to provide the right level of assurance, it can avoid unnecessary use of its finite resources and it can support the OPCC and Force in maintaining an effective Assurance Framework. Internal Audit, through its support for the Assurance Framework, should:

- support the OPCC and Force in managing its risks through the establishment (and, more importantly, the maintenance) of an Assurance Framework that is fit for purpose;
- look to other sources of assurance and assurance providers, including third party assurance, to supplement the resources of the internal audit team;
- work along side other assurance providers, such as External Audit, to more effectively provide assurance and avoid duplication; and
- through risk-based auditing, focus internal audit resource on what is really important to each organisation.

3.5 Further to the above risk identification process, it should also be remembered that Nottinghamshire form part of the East Midlands Policing Region and, as such, collaborate on a wide variety of services. The aim will therefore be to, wherever possible, align the audit plans across the region in order to secure efficiencies through collaborative auditing.

3.6 The plan will be amended each year to reflect changes affecting the organisation and, subsequently, the risks you face.

4 Considerations when drawing up the Internal Audit Strategy

4.1 In producing the Operational Audit plan for 2015/16 we have drawn on the OPCC and Force's own risk registers, discussions with management, the views of the previous internal auditors and our understanding of the wider risks facing the policing sector. This analysis of the current risk environment is provided in **Appendix A.**

4.2 Whilst brief outlines of the individual audit scopes are provided in **Appendix B – Annual Audit Plan 2015/16**, the rationale for including a number of the audit assignments is summarised below:

Audit Area	Rationale
Joint Code of Corporate Governance	Since the introduction of the Code there has been no independent assurance that it is being followed which may leave the Force exposed to the risk of non-compliance.
Collaboration	A considerable proportion of the Force's functions are now delivered by collaborative units; there has been no formal assurance reporting within the Force in relation to collaboration agreements which means the Force could be exposed to issues and risks that it is unaware of.
Social Impact / Value	Assurance is required in respect of both the measurement of achievements so far and also potential measurements for future years.
Procurement	MFSS iProcurement now enables greater self-service spending by employees, potentially increasing the risk of unauthorised spending; a suite of procurement policies have been introduced by EMSCU, however there has been no independent assurance or assessment of compliance.
Code of Practice for Victims of Crime	Following changes from April 2015 and the issues raised in the 2014/15 internal audit of this area, assurance is required with regards the extent to which these changes and previous issues are being addressed.
Multi-Force Shared Service (MFSS)	With the Force due to join the shared service from January 2016 with regards its transactional services, assurance is required that sound governance arrangements are in place and that data transfer has been effectively managed.
Police Business Services	With the shared service due to 'go live' in January 2016 for much of the Force's back office services, assurance is required that sound governance arrangements are in place and that data transfer has been effectively managed.

5 External Audit Consultation

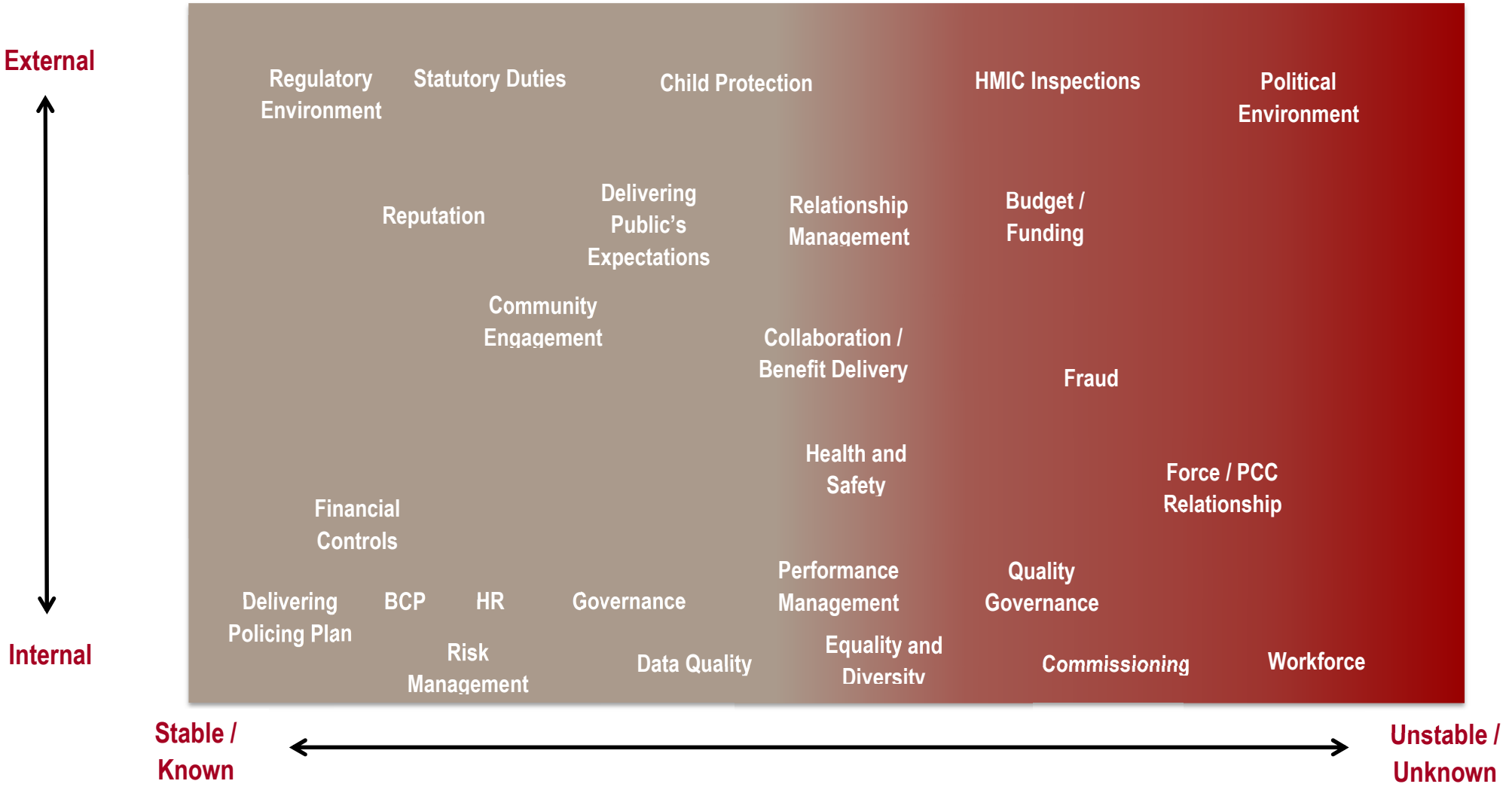
5.1 We liaise closely with your external auditors in preparing, and then delivering, a co-ordinated approach to the provision of assurance.

5.2 We speak regularly with the External Auditors to consult on audit plans; discuss matters of mutual interest; discuss common understanding of audit techniques; methods and terminology; and to seek opportunities for co-operation in the conduct of audit work. In particular, we will offer the External Auditors the opportunity to rely on our work where appropriate, provided this does not prejudice our independence.

5.3 Internal audit forms a significant part of the organisation's governance arrangements and it is therefore also important that Internal and External Audit have an effective working relationship. To facilitate this relationship we agree a protocol which sets out an agreed framework showing how we work together with your officers, including External Audit, to meet the responsibilities under the Code of Audit Practice. The key principles behind this agreement are:

- a willingness and commitment to working together;
- clear and open lines of communication;
- avoidance of duplication of work where possible.

Appendix A – Assessment of the Current Risk Environment



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Appendix B – Annual Audit Plan 2015-16

AUDITABLE AREA	PROPOSED TIMING	JOINT AUDIT & SCRUTINY PANEL	PLAN DAYS	SPONSOR	Commentary on Coverage
Core Assurance					
Compliance with the Joint Code of Corporate Governance	July 2015	Sept 2015	10	OPCC & Chief Constable	To provide assurance with regards compliance with the Joint Code of Corporate Governance. In particular, it will review the process for compiling the Annual Governance Statement and will provide a challenge with regards the evidence collected to support the declaration.
Financial Controls – Multi-Force Shared Service	Nov 2015 – Feb 2016	Dec 2015 & March 2016	18	OPCC & Chief Constable	To provide assurance in respect of the systems of internal control with regards the core financial transactional processes. We will liaise with the external auditors to ensure that compliance testing is aligned with their requirements. Amongst the financial processes covered will be Payroll, Accounts Receivable, Accounts Payable, General Ledger and Asset Management. With the transfer to the MFSS scheduled for Quarter 4, resources have been allocated as follows: • auditing the pre-MFSS systems, • evaluating the governance arrangements underpinning the transfer, • auditing the payroll element of the service in collaboration with Northamptonshire, • auditing the transfer of data from the old system to the new system, • liaising with the OPCC for Cheshire's internal auditors with regards post-MFSS assurance on those systems operated in Cheshire.

AUDITABLE AREA	PROPOSED TIMING	JOINT AUDIT & SCRUTINY PANEL	PLAN DAYS	SPONSOR	Commentary on Coverage
Financial Controls – Police Business Services	Jan 2016	March 2016	10	OPCC & Chief Constable	To provide assurance with regards the systems and controls and, in particular, the governance arrangements that underpin the transfer of back office services to the PBS. With the shared service due to 'go live' in January 2016 for much of the Force's back office services, the audit will seek to provide assurance that sound governance arrangements are in place and that data transfer has been effectively managed.
Strategic & Operational Risk Assurance					
Integrated Offender Management	Sept 2015	Dec 2015	8	Force	To provide assurance that there are effective systems and controls in place with regards the Integrated Offender Management process. In particular, the audit will consider how the Force liaises with its key partners to deliver critical interventions.
Social Impact / Value	August 2015	Sept 2015	10	OPCC	The audit will look at how social impact and value is being measured and what actions are being taken to facilitate better insight. The audit will provide assurance in respect of both the measurement of achievements so far and also potential measurements for future years.
Proceeds of Crime	Sept 2015	Dec 2015	8	Chief Constable	The audit will provide assurance with regards the policies and procedures put in place to ensure compliance with the Proceeds of Crime Act.
Commissioning	Jan 2016	March 2016	7	OPCC	The audit will follow-up the recommendations following the 2014/15 review. Given the ongoing work being carried out in this area, audit resource has been set aside to undertake work that comes out of this separate review.

AUDITABLE AREA	PROPOSED TIMING	JOINT AUDIT & SCRUTINY PANEL	PLAN DAYS	SPONSOR	Commentary on Coverage
Code of Practice for Victims of Crime	Oct 2015	Dec 2015	7	OPCC & Chief Constable	Following changes from April 2015 and the issues raised in the 2014/15 internal audit of this area, the audit will look to provide assurance with regards the extent to which these changes and previous issues are being addressed.
Collaboration					
Procurement	July 2015	Sept 2015	14	OPCC & Chief Constable	To provide assurance that sound controls are in place and value for money is being sought in respect of the procurement of goods and services. The audit will cover both local / under £25k expenditure, and the use of national procurement frameworks, and the use of the East Midlands Strategic Commercial Unit (EMSCU) for expenditure above £25k.
Collaboration	Nov 2015	March 2016	24	OPCC & Chief Constable	The purpose of this audit will be to examine the various collaborations Nottinghamshire are a part of. The audit will look at the original business cases and decision-making for entering into the collaborative arrangements and determine whether they were meeting the original objectives. The audit will review how these collaborative arrangements are being monitored and managed. The allocation will be used to cover a sample of collaborative services and maybe carried out in unison with other East Midlands forces.

AUDITABLE AREA	PROPOSED TIMING	JOINT AUDIT & SCRUTINY PANEL	PLAN DAYS	SPONSOR	Commentary on Coverage
Contingency					
Contingency			5		To allow for additional / unforeseen audits to be carried out in agreement with the Joint Audit & Scrutiny Panel and management.
Other					
Audit Management	Ongoing		14		This includes audit planning, production of progress and annual reports, and attendance at progress and Joint Audit & Scrutiny Panel meetings.
Follow Up of Recommendations	Ongoing		5		To provide assurance that management have implemented audit recommendations.
TOTAL			**140**		

Appendix C – Strategic Audit Plan 2015-19

Audit Assignment	2015/2016	2016/2017	2017/2018	2018/2019	Commentary on Coverage
Core Assurance					
Key Financial Controls	✓	✓	✓	✓	To provide assurance with regards the key financial controls and, in particular, the transfer of services to the MFSS and PBS.
Governance	✓		✓		To provide assurance with regards compliance with the Joint Code of Corporate Governance. In particular, it will review the process for compiling the Annual Governance Statement and will provide a challenge with regards the evidence collected to support the declaration.
Risk Management		✓		✓	To provide assurance that risk management arrangements are in place and contribute to the effective management of risk.
Information Technology		✓	✓	✓	Using computer specialist resource, the objective will be to provide assurance with regards key IT risks, such as those relating to data security, IT policies and procedures, network infrastructure and application controls.

Audit Assignment	2015/2016	2016/2017	2017/2018	2018/2019	Commentary on Coverage
Strategic & Operational Risk					
Recruitment and Selection		✓			To provide assurance following the introduction of a revised policy in 2014 and a period of substantial organisational change.
Code of Ethics			✓		To provide assurance that the Code is embedded and being consistently applied throughout the Force.
Complaints Management		✓			To ensure that the Force has a robust process in place to deal with complaints.
Workforce Data & Deployment			✓		To provide assurance during a period of staff reductions and the need to ensure that officers are effectively deployed.
Programme / Project Management		✓		✓	To review the overall programme management arrangements and / or to deep dive into specific projects.
Seizure and Management of Property		✓			To ensure that effective policies and procedures are in place for the seizure and management of property.
Anti-Social Behaviour			✓		To provide assurance with regards the manner in which the ASB policy is being applied, including the use of new powers introduced in 2014.

Audit Assignment	2015/2016	2016/2017	2017/2018	2018/2019	Commentary on Coverage
Integrated Offender Management	✓			✓	To provide assurance that there are effective systems and controls in place with regards the Integrated Offender Management process. In particular, the audit will consider how the Force liaises with its key partners to deliver critical interventions.
Code of Practice for Victims of Crime	✓			✓	Following changes from April 2015 and the issues raised in the 2014/15 internal audit of this area, the audit will look to provide assurance with regards the extent to which these changes and previous issues are being addressed.
Overtime and Time Recording			✓		Management and control of working hours and overtime, following the introduction of self service through MFSS.
Data Protection		✓			To review Data Protection Act compliance and, in particular, to follow-up changes made since the Information Commissioner's Office (ICO) audit of 2013/14.
Culture			✓		To review staff morale, productivity and culture following implementation of the Delivering the Future change programme.
Data Quality		✓		✓	To provide assurance with regards the accuracy and completeness of recorded data.

Audit Assignment	2015/2016	2016/2017	2017/2018	2018/2019	Commentary on Coverage
Commissioning	✓			✓	The audit will follow-up the recommendations following the 2014/15 review. Given the ongoing work being carried out in this area, audit resource has been set aside to undertake work that comes out of this separate review.
Health & Safety			✓		To provide assurance that the Force has effective processes in place in respect of health and safety and these are being consistently applied.
Estates			✓		Following the implementation of the estates rationalisation strategy, to ensure that the estate is effectively managed and contributes to the overall strategic objectives.
Proceeds of Crime	✓				The audit will provide assurance with regards the policies and procedures put in place to ensure compliance with the Proceeds of Crime Act.
Records Management		✓			To provide assurance that the implementation of the Niche Records Management System supports the objective of ensuring that there is a common approach to records management across the Force.
Vehicle Fleet Management			✓		To review the systems and controls in place to manage the vehicle fleet, including use of data from implementation of the Artemis vehicle tracking system.

Audit Assignment	2015/2016	2016/2017	2017/2018	2018/2019	Commentary on Coverage
Social Impact / Value	✓				The audit will look at how social impact and value is being measured and what actions are being taken to facilitate better insight. The audit will provide assurance in respect of both the measurement of achievements so far and also potential measurements for future years.
HR – Training and Skills		✓			To provide assurance that the Force has robust and effective procedures in place for the training of its workforce.
Collaboration					
Procurement	✓		✓		To provide assurance that sound controls are in place and value for money is being sought in respect of the procurement of goods and services. The audit will cover both local / under £25k expenditure, and the use of national procurement frameworks, and the use of the East Midlands Strategic Commercial Unit (EMSCU) for expenditure above £25k.
Collaboration	✓	✓	✓	✓	The purpose of this audit will be to examine the various collaborations Nottinghamshire are a part of and determine whether the collaborations are meeting the original objectives. The audit will review how these collaborative arrangements are being monitored and managed. The allocation will be used to cover a sample of collaborative services and maybe carried out in unison with other East Midlands forces.

Audit Assignment	2015/2016	2016/2017	2017/2018	2018/2019	Commentary on Coverage
Partnerships		✓			To provide assurance with regards the overall governance arrangements underpinning a sample of key strategic partnerships the Force is a part of.
Contingency					
Contingency	✓	✓	✓	✓	To allow for additional / unforeseen audits to be carried out in agreement with the Joint Audit & Scrutiny Panel and management.
Other					
Audit Management	✓	✓	✓	✓	This includes audit planning, production of progress and annual reports, and attendance at progress and Joint Audit & Scrutiny Panel meetings.
Follow Up of Recommendations	✓	✓	✓	✓	To provide assurance that management have implemented audit recommendations.

Appendix D – Audit Charter and Performance Measures

The Audit Charter sets out the terms of reference and serves as a basis for the governance of the Office of the Police & Crime Commissioner for Nottinghamshire and Nottinghamshire Police (the OPCC and Force) Internal Audit function. It sets out the purpose, authority and responsibility of the function in accordance with the UK Public Sector Internal Audit Standards.

The Charter will be reviewed annually and presented to the Joint Audit & Scrutiny Panel for final approval.

Nature and Purpose

The OPCC and Force have developed a risk management framework, overseen by the Police & Crime Commissioner and Chief Constable, which includes:

- Identification of the significant risks in the operations and allocation of a risk owner to each;
- An assessment of how well the significant risks are being managed; and
- Regular reviews by the Corporate Management Team and the Joint Audit & Scrutiny Panel of the significant risks, including reviews of key risk indicators, governance reports and action plans, and any changes to the risk profile.

A system of internal control is one of the primary means of managing risk and consequently the evaluation of its effectiveness is central to Internal Audit's responsibilities.

The OPCC and Force's system of internal control comprises the policies, procedures and practices, as well as organisational culture that collectively support the OPCC and Force's effective operation in the pursuit of its objectives. The risk management, control and governance processes enable the OPCC and Force to respond to significant business risks, be these of an operational, financial, compliance or other nature, and are the direct responsibility of the Corporate Management Team.

The OPCC and Force needs assurance over the significant business risks set out in the risk management framework. In addition, there are many other stakeholders, both internal and external, requiring assurance on the management of risk and other aspects of the OPCC and Force's business - these including members, regulators etc. There are also many assurance providers. The OPCC and Force have, therefore, developed an assurance framework which sets out the sources of assurance to meet the assurance needs of its stakeholders.

Internal Audit is defined by the Institute of Internal Auditors' International Professional Practices Framework as 'an independent, objective assurance and consulting activity designed to add value and improve an organisation's operations. It helps an organisation accomplish its objectives by bringing a systematic, disciplined approach to evaluate and improve the effectiveness of risk management, control and governance processes.'

Internal Audit carries out assurance and consulting activities across all aspects of the OPCC and Force's business, based on a programme agreed with the Joint Audit & Scrutiny Panel, and coordinates these activities via the assurance framework. In doing so, Internal Audit works closely with risk owners, service line risk teams and the Corporate Management Team.

In addition to providing independent assurance to various stakeholders, Internal Audit helps identify areas where the OPCC and Force's existing processes and procedures can be developed to improve the extent with which risks in these areas are managed; and public money is safeguarded and used economically, efficiently and effectively. In carrying out its work, Internal Audit liaises closely with the Corporate Management Team and management in the service lines (including risk teams).

The independent assurance provided by Internal Audit also assists the OPCC and Force to report annually on the effectiveness of the system of internal control included in the Annual Governance Statement.

Authority and Access to Records, Assets and Personnel

Internal Audit has unrestricted right of access to all OPCC and Force records and information, both manual and computerised, cash, stores and other property or assets it considers necessary to fulfil its responsibilities. Internal Audit may enter property and has unrestricted access to all locations and officers where necessary on demand and without prior notice. Right of access to other bodies funded by the OPCC and Force should be set out in the conditions of funding.

Any restriction (management or other) on the scope of Internal Audit's activities will be reported to the Joint Audit & Scrutiny Panel.

Internal Audit is accountable for the safekeeping and confidentiality of any information and assets acquired in the course of its duties and execution of its responsibilities.

Internal Audit will consider all requests from the external auditors for access to any information, files or working papers obtained or prepared during audit work that has been finalised, and which external audit would need to discharge their responsibilities.

Responsibility

The Chief Internal Auditor is required to provide an annual opinion to the OPCC and Force, through the Audit & Risk Panel, on the adequacy and the effectiveness of the OPCC and Force's risk management, control and governance processes. In order to achieve this, Internal Audit will:

- Coordinate assurance activities with other assurance providers (such as the external auditors and HMIC) such that the assurance needs of the OPCC and Force, regulators and other stakeholders are met in the most effective way.
- Evaluate and assess the implications of new or changing systems, products, services, operations and control processes.
- Carry out assurance and consulting activities across all aspects of the OPCC and Force's business based on a risk-based plan agreed with the Joint Audit & Scrutiny Panel.
- Provide the Police & Crime Commissioner, Chief Constable and other officers with reasonable, but not absolute, assurance as to the adequacy and effectiveness of the key controls associated with the management of risk in the area being audited.
- Issue periodic reports to the Joint Audit & Scrutiny Panel and the Corporate Management Team summarising results of assurance activities.
- Promote an anti-fraud, anti-bribery and anti-corruption culture within the OPCC and Force to aid the prevention and detection of fraud;
- Assist in the investigation of allegations of fraud, bribery and corruption within the OPCC and Force and notifying management and the Joint Audit & Scrutiny Panel of the results.
- Assess the adequacy of remedial action to address significant risk and control issues reported to the Joint Audit & Scrutiny Panel. Responsibility for remedial action in response to audit findings rests with line management.

There are inherent limitations in any system of internal control and thus errors or irregularities may occur and not be detected by Internal Audit's work. Unless specifically requested and agreed, Internal Audit will not perform substantive testing of underlying transactions.

When carrying out its work, Internal Audit will provide line management with comments and report breakdowns, failures or weaknesses of internal control systems together with recommendations for remedial action. However, Internal Audit cannot absolve line management of responsibility for internal controls.

Internal Audit will support line managers in determining measures to remedy deficiencies in risk management, control and governance processes and compliance to the OPCC and Force's policies and standards and will monitor whether such measures are implemented on a timely basis.

The Joint Audit & Scrutiny Panel is responsible for ensuring that Internal Audit is adequately resourced and afforded a sufficiently high standing within the organisation, necessary for its effectiveness.

Scope of Activities

As highlighted in the previous section, there are inherent limitations in any system of internal control. Internal Audit therefore provides the Police & Crime Commissioner, Chief Constable and other officers with reasonable, but not absolute, assurance as to the adequacy and effectiveness of the OPCC and Force's governance, risk management and control processes using a systematic and disciplined approach by:

- Assessing and making appropriate recommendations for improving the governance processes, promoting appropriate ethics and values, and ensuring effective performance management and accountability;
- Evaluating the effectiveness and contributing to the improvement of risk management processes; and
- Assisting the OPCC and Force in maintaining effective controls by evaluating their adequacy, effectiveness and efficiency and by promoting continuous improvement.

The scope of Internal Audit's value adding activities includes evaluating risk exposures relating to the OPCC and Force's governance, operations and information systems regarding the:

- Achievement of the organisation's strategic objectives;
- Reliability and integrity of financial and operational information;
- Effectiveness and efficiency of operations and programmes;
- Safeguarding of assets; and
- Compliance with laws, regulations, policies, procedures and contracts.

Reporting

For each engagement, Internal Audit will issue a report to the appropriate senior management and business risk owner, and depending on the nature of the engagement and as agreed in the engagement's Terms of Reference, with a summary to the Corporate Management Team and the Joint Audit & Scrutiny Panel.

The UK Public Sector Internal Audit Standards require the Chief Internal Auditor to report at the top of the organisation and this is done in the following ways:

- The Internal Audit Charter is reported to the Corporate Management Team and the Joint Audit & Scrutiny Panel. It is then presented to the Board annually for formal approval.
- The annual risk-based plan is compiled by the Chief Internal Auditor taking account of the OPCC and Force's risk management / assurance framework and after input from members of the Corporate Management Team. It is then presented to the Corporate Management Team and Joint Audit & Scrutiny Panel annually for noting and comment.
- The internal audit budget is reported to Board and the Joint Audit & Scrutiny Panel for approval annually as part of the overall budget.
- The adequacy, or otherwise, of the level of internal audit resources (as determined by the Chief Internal Auditor) and the independence of internal audit will be reported annually to the Joint Audit & Scrutiny Panel.
- Performance against the annual risk-based plan and any significant risk exposures and breakdowns, failures or weaknesses of internal control systems arising from internal audit work are reported to the Corporate Management Team and Joint Audit & Scrutiny Panel on a quarterly basis.
- Any significant consulting activity not already included in the risk-based plan and which might affect the level of assurance work undertaken will be reported to the Joint Audit & Scrutiny Panel.
- Results from the Quality Assurance and Improvement Programme will be reported to both the Corporate Management Team and the Joint Audit & Scrutiny Panel.

- Any instances of non-conformance with the Public Sector Internal Audit Standards must be reported to the Corporate Management Team and the Joint Audit & Scrutiny Panel and will be included in the annual Chief Internal Auditor's report. If there is significant non-conformance, this may be included in the Annual Governance Statement.

Independence

The Chief Internal Auditor has free and unfettered access to the following:

- Police & Crime Commissioner
- Chief Constable;
- Head of Finance (or equivalent) at the OPCC and Force;
- Chair of the Joint Audit & Scrutiny Panel; and
- Any other member of the Corporate Management Team.

The independence of the contracted Chief Internal Auditor is further safeguarded as his annual appraisal is not inappropriately influenced by those subject to internal audit.

To ensure that auditor objectivity is not impaired and that any potential conflicts of interest are appropriately managed, all internal audit staff are required to make an annual personal independence responsibilities declaration via the tailored 'My Compliance Responsibilities' portal which includes personal deadlines for:

- Annual Returns (a regulatory obligation regarding independence, fit and proper status and other matters which everyone in Mazars must complete);
- Personal Connections (the system for recording the interests in securities and collective investment vehicles held by partners, directors and managers, and their immediate family members); and
- Continuing Professional Development (CPD).

Internal Audit may also provide consultancy services, such as providing advice on implementing new systems and controls. However, any significant consulting activity not already included in the audit plan and which might affect the level of assurance work undertaken will be reported to the Joint Audit & Scrutiny Panel. To maintain independence, any audit staff involved in significant consulting activity will not be involved in the audit of that area for a period of at least 12 months.

External Auditors

The external auditors fulfil a statutory duty. Effective collaboration between Internal Audit and the external auditors will help ensure effective and efficient audit coverage and resolution of issues of mutual concern. Internal Audit will follow up the implementation of internal control issues raised by external audit.

Internal Audit and external audit meet periodically to:

- Plan the respective internal and external audits and discuss potential issues arising from the external audit; and
- Share the results of significant issues arising from audit work.

Due Professional Care

The Internal Audit function is bound by the following standards:

- Institute of Internal Auditor's International Code of Ethics;
- Seven Principles of Public Life (Nolan Principles);
- UK Public Sector Internal Audit Standards;
- All OPCC and Force Policies and Procedures; and
- All relevant legislation.

Internal Audit is subject to a Quality Assurance and Improvement Programme that covers all aspects of internal audit activity. This consists of an annual self-assessment of the service and its compliance with the UK Public Sector Internal Audit Standards, on-going performance monitoring and an external assessment at least once every five years by a suitably qualified, independent assessor.

A programme of CPD is maintained for all staff working on internal audit engagements to ensure that auditors maintain and enhance their knowledge, skills and audit competencies to deliver the risk-based plan. Both the Chief Internal Auditor and the PSIA Engagement Manager are required to hold a professional qualification (CMIIA, CCAB or equivalent) and be suitably experienced.

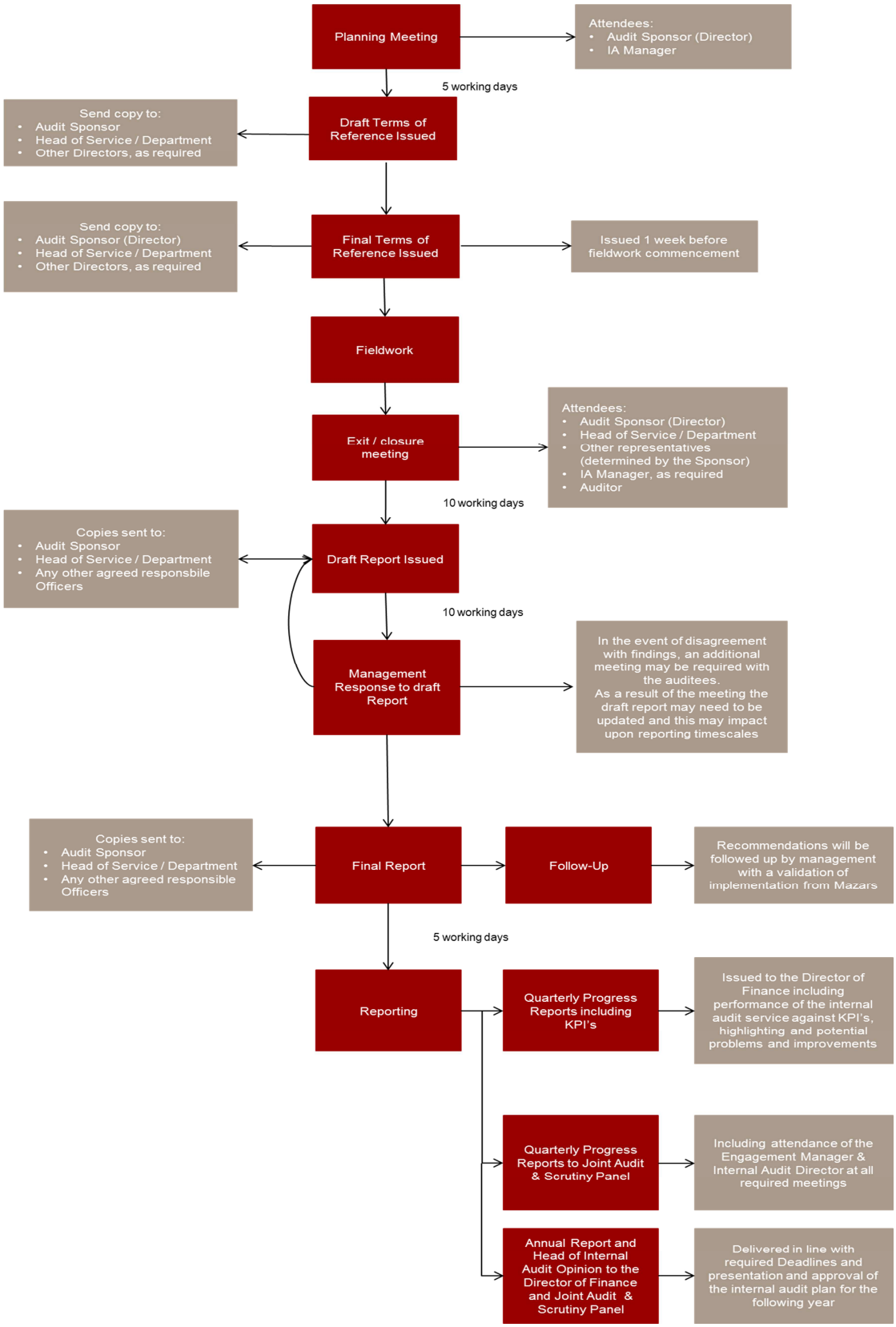
Performance Measures

In seeking to establish a service which is continually improving, we acknowledge it is essential that we agree measures by which Internal Audit should demonstrate both that it is meeting the OPCC and Force's requirements and that it is improving on an annual basis. This will be both through quantifiable factors within the Key Performance Indicators (KPI's) and additionally through a number of measures to further seek to establish the value derived from internal audit.

Below we provide example KPI's against which we regularly report our performance. Should you require additional performance measures, these will be incorporated within our regular reports to management and the Joint Audit & Scrutiny Panel.

STANDARD	TARGET
Annual report provided to Joint Audit & Scrutiny Panel	As agreed with the Client Officer
Annual Operational and Strategic Plans to Joint Audit & Scrutiny Panel	As agreed with the Client Officer
Progress report to Joint Audit & Scrutiny Panel	7 working days prior to meeting.
Issue of draft report	Within 10 working days of completion of final exit meeting.
Issue of final report	Within 5 working days of agreement of responses.
Follow-up of priority one recommendations	90% within four months. 100% within six months.
Follow-up of other recommendations	100% within 12 months of date of final report.
Audit Brief to auditee	At least 10 working days prior to commencement of fieldwork.
Customer satisfaction (measured by survey)	85% average of 3 or less
Achievement of annual plan	100%
Proportion of planned days on site	95%
Availability for urgent meetings (maximum time taken)	6 hours.
Availability for non-urgent meetings (maximum time taken)	2 working days.
Response to telephone calls (maximum)	3 hours

Appendix E – Audit Approach



Appendix F – Levels of Assurance & Opinions

Audit Assessment

In order to provide management with an assessment of the adequacy and effectiveness of their systems of internal control, the following definitions are used:

Level	Symbol	Evaluation Assessment	Testing Assessment
Full		There is a sound system of internal control designed to achieve the system objectives.	The controls are being consistently applied.
Substantial		Whilst there is a basically sound system of internal control design, there are weaknesses in design which may place some of the system objectives at risk.	There is evidence that the level of non-compliance with some of the controls may put some of the system objectives at risk.
Limited		Weaknesses in the system of internal control design are such as to put the system objectives at risk.	The level of non-compliance puts the system objectives at risk.
Nil		Control is generally weak leaving the system open to significant error or abuse.	Significant non-compliance with basic controls leaves the system open to error or abuse.

The assessment gradings provided here are not comparable with the International Standard on Assurance Engagements (ISAE 3000) issued by the International Audit and Assurance Standards Board and as such the grading of 'Full' does not imply that there are no risks to the stated control objectives.

Grading of Recommendations

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

Level	Definition
Priority 1	Recommendations which are fundamental to the system and upon which the organisation should take immediate action.
Priority 2	Recommendations which, although not fundamental to the system, provide scope for improvements to be made.
Priority 3	Recommendations concerning issues which are considered to be of a minor nature, but which nevertheless need to be addressed.

Appendix G – Contact Details

Contact Details

Mike Clarkson	07831 748135 Mike.Clarkson@mazars.co.uk
Brian Welch	07780 970200 Brian.Welch@mazars.co.uk

Statement of Responsibility

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

The matters raised in this report are only those which came to our attention during the course of our work and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Recommendations for improvements should be assessed by you for their full impact before they are implemented. The performance of our work is not and should not be taken as a substitute for management's responsibilities for the application of sound management practices. We emphasise that the responsibility for a sound system of internal controls and the prevention and detection of fraud and other irregularities rests with management and work performed by us should not be relied upon to identify all strengths and weaknesses in internal controls, nor relied upon to identify all circumstances of fraud or irregularity. Even sound systems of internal control can only provide reasonable and not absolute assurance and may not be proof against collusive fraud. Our procedures are designed to focus on areas as identified by management as being of greatest risk and significance and as such we rely on management to provide us full access to their accounting records and transactions for the purposes of our work and to ensure the authenticity of such material. Effective and timely implementation of our recommendations by management is important for the maintenance of a reliable internal control system.

Mazars LLP

London

May 2015

This document is confidential and prepared solely for your information. Therefore you should not, without our prior written consent, refer to or use our name or this document for any other purpose, disclose them or refer to them in any prospectus or other document, or make them available or communicate them to any other party. No other party is entitled to rely on our document for any purpose whatsoever and thus we accept no liability to any other party who is shown or gains access to this document.

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

For Decision	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**Chief Finance Officer**
Report Author:	**Charlotte Radford**
E-mail:	
Other Contacts:	
Agenda Item:	**13**

UPDATE ON THE CLOSE OF ACCOUNTS 2014-15

1. Purpose of the Report

1.1 To assure members that the process for closing the accounts is progressing well.

2. Recommendations

2.1 That a representative of the Audit & Scrutiny Panel meets with the Chief Finance Officer and Acting Head of Finance to go through the draft statement of accounts prior to the draft accounts being signed off.

3. Reasons for Recommendations

3.1 Good governance and financial management

4. Summary of Key Points

4.1 Each year the draft statement of accounts is provided to the Audit & Scrutiny panel members for their comments prior to the final version being provided to the panel in September. This year the panel meeting is earlier than usual for June and we therefore request a member to be nominated to discuss the draft statements with prior to sign off.

4.2 This year the draft accounts have been produced during a period of significant change within the finance department. These changes to systems will not affect this years audit, but will be a significant systems change year for next years statements.

5. Financial Implications and Budget Provision

5.1 None as a direct result of this report.

6. Human Resources Implications

6.1 None as a direct result of this report.

7. Equality Implications

7.1 None as a direct result of this report.

8. Risk Management

8.1 None as a direct result of this report.

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

9.1 None as a direct result of this report.

10. Changes in Legislation or other Legal Considerations

10.1 None as a direct result of this report.

11. Details of outcome of consultation

11.1 Not applicable

12. Appendices

12.1 None

For Decision	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**Chief Finance Officer**
Report Author:	**Charlotte Radford**
E-mail:	
Other Contacts:	**Simon Lacey**
Agenda Item:	**14**

EXTERNAL AUDIT – Progress Report and Fees 2015-16

1. Purpose of the Report

1.1 To inform members of the progress made in relation to the External Audit work plan and the proposed fees for 2015-16.

2. Recommendations

2.1 Members are requested to note the progress report attached at **Appendix A** and approve the fees as detailed within the letters also attached at **Appendix A.**

3. Reasons for Recommendations

3.1 This complies with good governance.

4. Summary of Key Points

4.1 The External Auditors have reported on their initial review of the financial systems and their planned audit work during 2015-16.

4.2 The fee letters also attached show the commitment to further reductions in the external audit fees as negotiated and the impact of that reduction in relation to the Chief Constables accounts and the accounts of the group.

5. Financial Implications and Budget Provision

5.1 The reduction in fees has been taken into account in the budget of the OPCC.

6. Human Resources Implications

6.1 None as a direct result of this report.

7. Equality Implications

7.1 None as a direct result of this report.

8. Risk Management

8.1 None as a direct result of this report.

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

9.1 The work of the External Auditors indirectly supports all of the Police and Crime Plan priorities.

10. Changes in Legislation or other Legal Considerations

10.1 None

11. Details of outcome of consultation

11.1 Not applicable.

12. Appendices

A – External Audit Progress Report and fee letters

KPMG

cutting through complexity

External audit progress report and technical update

Police and Crime Commissioner for Nottinghamshire & Chief Constable for Nottinghamshire

June 2015

External audit progress report – June 2015

This document provides the Audit Committee with a high level overview on progress in delivering our responsibilities as your external auditors.

At the end of each stage of the audit we issue certain deliverables, including reports and opinions. A summary of progress against these deliverables is provided in Appendix 1 of this report.

Summary of work performed since the last meeting of this Committee	Since the last meeting of the Audit Committee we have: ■ Completed the interim audit work which involved testing significant financial systems and assessment of the financial control environment. We have identified no significant risks and have gained the planned level of assurance from our work. ■ Undertaken work to support our VFM conclusion following guidance specified by the Audit Commission in terms of the scope and focus of the work. ■ Prepared our technical update (see overleaf).
Summary of upcoming work	Our upcoming work ahead of the next meeting of the Audit Committee includes: ■ Undertaking the financial statements audit which is scheduled for July 2015. We will assess your closedown arrangements, plan and perform substantive audit procedures and review the Annual Governance Statement. We will conclude on critical accounting matters and identify and report audit adjustments. ■ Completing the review of your value for money arrangements against the two criteria specified by the Audit Commission, and forming our VFM conclusion.
Actions	We ask the Audit Committee to: ■ **NOTE** this progress report and technical update.
Contacts	The key contacts in relation to our audit are:

Andrew Cardoza	**Simon Lacey**	**Anita Pipes**
Director	Manager	Assistant Manager
07711 869957	+44 (0)115 945 4484	+44 (0)115 945 4481
andrew.cardoza@kpmg.co.uk	simon.lacey@kpmg.co.uk	anita.pipes@kpmg.co.uk

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Technical update

We present below recent policy announcements and publications which we would like to draw to the attention of the Audit Committee.

KPMG Publications: Audit Committee Institute – Global Audit Committee Survey

To help identify the key challenges and concerns facing audit committees, boards, and their companies today, KPMG's Audit Committee Institute surveyed some 1,500 audit committee members in more than 36 countries.

A range of timely issues were explored including:

- The audit committee's workload and agenda
- Risk and information quality
- Oversight of auditors
- Audit committee effectiveness and mechanics

Our survey identifies broad international trends and provides detailed country data on audit committee challenges and concerns in different geographies.

Whilst focused on a company setting, the issues are relevant within the police setting and our survey findings can serve as an important reference – for benchmarking current practices, identifying gaps and emerging risks, and sparking fresh conversations about how audit committees and boards are strengthening their oversight and keeping pace in an uncertain and, at times, volatile business environment.

The survey can be viewed at: https://www.kpmg-institutes.com/content/dam/kpmg/auditcommitteeinstitute/pdf/2015/2015-global-audit-committee-survey.pdf

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Technical update

Issue	Impact on the Trust and insight from KPMG
Criminal Justice System continues to fail disabled victims A follow up review by HMIC into how the police, the Crown Prosecution Service and the probation service deal with disability hate crime reports that all three organisations have failed to comply and act on recommendations made in a previous report from March 2013. That report, "Living in a different world: A joint review of Disability Hate Crime" made seven recommendations for police, CPS and probation trusts to implement within a specific timescale. These included the need for a single and clear definition of disability hate crime and the requirement for police to ensure every opportunity is taken to identify victims. Police, prosecutors and probation officers were also recommended to undertake training around disability hate crime to improve their investigative, tribunal and rehabilitation skills. The recommendations were designed to improve performance and embed good working practices, acknowledging that disability hate crime should be treated the same as other hate crimes such as race, religion, sexual orientation or transgender. Although this follow up report has identified some examples of good practice relating to awareness-raising at a national level, neither the police nor the CPS has succeeded in significantly improving performance at an operational level. The report can be accessed here http://www.justiceinspectorates.gov.uk/hmic/publication/joint-review-of-disability-hate-crime-follow-up/	The Audit Committee should be aware of this follow up review.
Crime and Policing Comparator HMIC has published the Crime and Policing Comparator which allows a comparison of data on recorded crime and anti-social behaviour (ASB), quality of service, finances and workforce numbers for all police forces in England and Wales. HMIC validates and publishes this data, which is submitted by police forces. It can be accessed here http://www.justiceinspectorates.gov.uk/hmic/crime-and-policing-comparator/	The Audit Committee may wish to enquire as to how this comparative data is used.
Criminal Justice Joint Inspection Joint Business Plan 2015/16 Criminal Justice Joint inspection is carried out by the four Criminal Justice inspectorates, HM Inspectorate of Constabulary, HM Crown Prosecution Service Inspectorate, HM Inspectorate of Probation and HM Inspectorate of Prisons. The Business Plan for 2015/16 was published in March 2015. A joint inspection programme is required by statute (Police and Justice Act 2006) and this programme has been subject to consultation (with Ministers and other inspectorates) during the period November 2014 – January 2015. The cross-cutting areas of focus are: community safety; bringing offenders to justice; offender management; custodial conditions; the victim and witness experience; equality and diversity (in the CJS): and, overall and throughout each individual inspection, consideration of value for money. The document can be accessed here http://www.justiceinspectorates.gov.uk/hmic/news/news-feed/criminal-justice-joint-inspection-joint-business-plan-2015-16/	This item is brought to the attention of the Audit Committee for information.

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Issue	Impact on the Trust and insight from KPMG
HMIC inspection programme 2015/16 Following consultation earlier this year, HMIC has now published its inspection programme for the year ahead. To help forces with planning, they will publish an up-to-date schedule every month, showing the inspections they are carrying out, and what stage they are at. For the first time, this shows how the schedule for each inspection is split between planning, fieldwork, and reporting stages. The programme can be accessed at http://www.justiceinspectorates.gov.uk/hmic/publication/hmic-inspection-programme-2015-16/	The Audit Committee should be aware of the inspection programme.

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Appendix 1 – 2014/15 Audit deliverables

Deliverable	Purpose	Timing	Status
Planning			
Fee letter	Communicate indicative fee for the audit year.	April 2014	Complete
External audit plan	Outline our audit strategy and planned approach. Identify areas of audit focus and planned procedures.	March 2015	Complete
Interim			
Interim report	Details and resolution of control and process issues. Identify improvements required prior to the issue of the draft financial statements and the year-end audit. Initial VFM assessment on the PCC's and CC's arrangements for securing value for money in the use of its resources.	If required	Not required
Substantive procedures			
Report to those charged with governance (ISA260 report)	Details the resolution of key audit issues. Communication of adjusted and unadjusted audit differences. Performance improvement recommendations identified during our audit. Commentary on value for money arrangements.	September 2015	TBC
Completion			
Auditor's report	Providing an opinion on your accounts (including the Annual Governance Statement). Concluding on the arrangements in place for securing economy, efficiency and effectiveness in your use of resources (the VFM conclusion).	September 2015	TBC
WGA	Concluding on the Whole of Government Accounts consolidation pack in accordance with guidance issued by the National Audit Office.	September 2015	TBC
Annual audit letter	Summarise the outcomes and the key issues arising from our audit work for the year.	November 2015	TBC

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Chris Eyres
Chief Constable
Nottinghamshire Police
Sherwood Lodge
Sherwood Lodge Drive
Arnold
Nottingham, NG5 8PP

Our ref ac/dc/49

28 April 2015

Dear Chris

Annual audit fee 2015/16

I am writing to confirm the audit work and fee that we propose for the 2015/16 financial year at Nottinghamshire Police.

Closure of the Audit Commission

Although the Audit Commission formally closed at the end of March 2015, it was responsible for setting audit fees for the audit of the 2015/16 financial year. Our fee proposals are therefore based on the Audit Commission's *Work Programme & Scales of Fees 2015/16*.

Following the closure of the Audit Commission, responsibility for determining audit fees in the future has transferred to Public Sector Audit Appointments Limited (PSAA), an independent company established by the Local Government Association. PSAA will oversee the management of the Audit Commission's audit contracts until they end in 2017, or 2020 if they are extended. The Secretary of State for Communities and Local Government has delegated certain functions formerly exercised by the Audit Commission to PSAA to enable it to deliver these functions.

Also following the Audit Commission's closure, the National Audit Office (NAO) is now responsible for producing and maintaining the Code of Audit Practice (the Code) and providing supporting guidance to auditors. We will follow the requirements of the Code and supporting guidance when delivering our audit work.

Planned audit fee

The planned audit fee for 2015/16 are shown below, along with a comparison to the prior year's fee. All fees are exclusive of VAT.

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For full details of our professional regulation please refer to 'Regulatory Information' at www.kpmg.com/uk

Audit area	Planned fee 2015/16	Planned fee 2014/15
Audit fee – Chief Constable Nottinghamshire	**£15,000**	£20,000

In general, the Audit Commission set 2015/16 scale fees based on a reduction of 25 per cent to the fees applicable for 2014/15. This reduction is in addition to the savings of up to 40 per cent in scale audit fees in 2012. The planned fee is in line with the scale fee.

As we have not yet completed our audit for 2014/15 the audit planning process for 2015/16, including the risk assessment, will continue as the year progresses and fees will be reviewed and updated as necessary. We will naturally keep you informed.

Factors affecting audit work for 2015/16

We tailor our work to reflect local circumstances and our assessment of audit risk. We do this by assessing the significant financial and operational risks facing an audited body, and the arrangements it has put in place to manage those risks, as well as considering changes affecting our audit responsibilities or financial reporting standards.

Under the Code, we have a responsibility to consider an audited body's arrangements to secure economy, efficiency and effectiveness in its use of resources. The 2015/16 fees have been set on the basis that the NAO's Code maintains the scope of work required by auditors under the Audit Commission's previous Code and supporting guidance. The NAO has not yet published guidance for auditors on the required approach to work on value for money arrangements for 2015/16.

Assumptions

The indicative fees is based on a number of assumptions, including that you will provide us with complete and materially accurate financial statements with good quality supporting working papers, within agreed timeframes. It is imperative that you achieve this. If this is not the case and we have to complete more work than was envisaged, we will need to charge additional fees for this work. Our assumptions are set out in more detail in Appendix 1 to this letter.

In setting the fee at this level, we have assumed that the general level of risk in relation to the audit of the financial statements is not significantly different from that identified for the current year's audit. A more detailed audit plan will be issued later this year. This will detail the risks identified, planned audit procedures and (if required) any changes in fee. If we need to make any significant amendments to the audit fee during the course of the audit, I will first discuss this with you and then prepare a report for the Joint Audit and Scrutiny Panel, outlining the reasons why the fee needs to change.

We expect to issue a number of reports relating to our work over the course of the audit. These are listed at Appendix 2.

The proposed fee excludes any additional work we may agree to undertake at the request of the Chief Constable for Nottinghamshire. Any such piece of work will be separately discussed and a detailed project specification agreed with you.

Our team

The key members of our audit team for the 2015/16 audit are:

Name	Role	Contact details
Andrew Cardoza	Director	Andrew.Cardoza@kpmg.co.uk 0121 232 3869
Simon Lacey	Manager	Simon.Lacey@kpmg.co.uk 0115 945 4484
Anita Pipes	Assistant Manager	Anita.Pipes@kpmg.co.uk 0115 945 4481

Quality of service

We are committed to providing you with a high quality service. If you have any concerns or are dissatisfied with any part of KPMG's work, in the first instance you should contact me and I will try to resolve your complaint. If you are dissatisfied with your response please contact the national contact partner for all of KPMG's work under our contract with PSAA, Trevor Rees (on 0161 246 4063, or by email to trevor.rees@kpmg.co.uk). After this, if you are still dissatisfied with how your complaint has been handled you can access PSAA's complaints procedure by emailing generalenquiries@psaa.co.uk, by telephoning 020 7072 7445 or by writing to:

Public Sector Audit Appointments Limited
3rd Floor
Local Government House
Smith Square
London
SW1P 3HZ

Yours sincerely

Andrew Cardoza
Director

Appendix 1 – Audit fee assumptions

In setting the fee, we have assumed that:

- the level of risk in relation to the audit of the financial statements is not significantly different from that identified for 2014/15;
- you will inform us of significant developments impacting on our audit work;
- internal audit meets the appropriate professional standards;
- you will identify and implement any changes required under the CIPFA IFRS-based Code of Practice on local Authority Accounting within your 2015/16 financial statements;
- your financial statements will be made available for audit in line with the timetable we agree with you;
- good quality working papers and records will be provided to support the financial statements in line with our *prepared by client* request and by the date we agree with you;
- requested information will be provided within agreed timescales;
- prompt responses will be provided to draft reports; and
- additional work will not be required to address questions or objections raised by local government electors or for special investigations such as those arising from disclosures under the Public Interest Disclosure Act 1998

Improvements to the above factors may allow reductions to the audit fee in future years. Where these assumptions are not met, we will be required to undertake additional work and charge an increased audit fee. The fee for the audit of the financial statements will be re-visited when we issue the detailed audit plan.

Any changes to our audit plan and fee will be agreed with you. Changes may be required if:

- new residual audit risks emerge;
- additional work is required by KPMG, PSAA, the NAO or other regulators; or
- additional work is required as a result of changes in legislation, professional standards or as a result of changes in financial reporting.

Appendix 2: Planned outputs

Our reports will be discussed and agreed with the appropriate officers before being issued to the Joint Audit and Scrutiny Panel.

Planned output	**Indicative date**
External audit plan	January 2016
Report to those charged with governance (ISA260 report)	September 2016
Auditor's report giving the opinion on the financial statements, value for money conclusion and audit certificate	September 2016
Opinion on Whole of Government Accounts return	September 2016
Annual audit letter	October 2016

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Police & Crime Commissioner for
Nottinghamshire
Arnot Hill House
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Nottingham

Our ref ac/dc/49

28 April 2015

Dear Charlie

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Although the Audit Commission formally closed at the end of March 2015, it was responsible for setting audit fees for the audit of the 2015/16 financial year. Our fee proposals are therefore based on the Audit Commission's *Work Programme & Scales of Fees 2015/16*.

Following the closure of the Audit Commission, responsibility for determining audit fees in the future has transferred to Public Sector Audit Appointments Limited (PSAA), an independent company established by the Local Government Association. PSAA will oversee the management of the Audit Commission's audit contracts until they end in 2017, or 2020 if they are extended. The Secretary of State for Communities and Local Government has delegated certain functions formerly exercised by the Audit Commission to PSAA to enable it to deliver these functions.

Also following the Audit Commission's closure, the National Audit Office (NAO) is now responsible for producing and maintaining the Code of Audit Practice (the Code) and providing supporting guidance to auditors. We will follow the requirements of the Code and supporting guidance when delivering our audit work.

Planned audit fee

The planned audit fee for 2015/16 are shown below, along with a comparison to the prior year's fee. All fees are exclusive of VAT.

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Audit area	Planned fee 2015/16	Planned fee 2014/15
Audit fee – Police and Crime Commissioner for Nottinghamshire	**£35,220**	£46,960

In general, the Audit Commission set 2015/16 scale fees based on a reduction of 25 per cent to the fees applicable for 2014/15. This reduction is in addition to the savings of up to 40 per cent in scale audit fees in 2012. The planned fee is in line with the scale fee.

As we have not yet completed our audit for 2014/15 the audit planning process for 2015/16, including the risk assessment, will continue as the year progresses and fees will be reviewed and updated as necessary. We will naturally keep you informed.

Factors affecting audit work for 2015/16

We tailor our work to reflect local circumstances and our assessment of audit risk. We do this by assessing the significant financial and operational risks facing an audited body, and the arrangements it has put in place to manage those risks, as well as considering changes affecting our audit responsibilities or financial reporting standards.

Under the Code, we have a responsibility to consider an audited body's arrangements to secure economy, efficiency and effectiveness in its use of resources. The 2015/16 fees have been set on the basis that the NAO's Code maintains the scope of work required by auditors under the Audit Commission's previous Code and supporting guidance. The NAO has not yet published guidance for auditors on the required approach to work on value for money arrangements for 2015/16.

Assumptions

The indicative fees is based on a number of assumptions, including that you will provide us with complete and materially accurate financial statements with good quality supporting working papers, within agreed timeframes. It is imperative that you achieve this. If this is not the case and we have to complete more work than was envisaged, we will need to charge additional fees for this work. Our assumptions are set out in more detail in Appendix 1 to this letter.

In setting the fee at this level, we have assumed that the general level of risk in relation to the audit of the financial statements is not significantly different from that identified for the current year's audit. A more detailed audit plan will be issued later this year. This will detail the risks identified, planned audit procedures and (if required) any changes in fee. If we need to make any significant amendments to the audit fee during the course of the audit, I will first discuss this with you and then prepare a report for the Joint Audit and Scrutiny Panel, outlining the reasons why the fee needs to change.

We expect to issue a number of reports relating to our work over the course of the audit. These are listed at Appendix 2.

The proposed fee excludes any additional work we may agree to undertake at the request of the Police and Crime Commissioner for Nottinghamshire. Any such piece of work will be separately discussed and a detailed project specification agreed with you.

Our team

The key members of our audit team for the 2015/16 audit are:

Name	Role	Contact details
Andrew Cardoza	Director	Andrew.Cardoza@kpmg.co.uk 0121 232 3869
Simon Lacey	Manager	Simon.Lacey@kpmg.co.uk 0115 945 4484
Anita Pipes	Assistant Manager	Anita.Pipes@kpmg.co.uk [telephone number]

Quality of service

We are committed to providing you with a high quality service. If you have any concerns or are dissatisfied with any part of KPMG's work, in the first instance you should contact me and I will try to resolve your complaint. If you are dissatisfied with your response please contact the national contact partner for all of KPMG's work under our contract with PSAA, Trevor Rees (on 0161 246 4063, or by email to trevor.rees@kpmg.co.uk). After this, if you are still dissatisfied with how your complaint has been handled you can access PSAA's complaints procedure by emailing generalenquiries@psaa.co.uk, by telephoning 020 7072 7445 or by writing to:

Public Sector Audit Appointments Limited
3rd Floor
Local Government House
Smith Square
London
SW1P 3HZ

Yours sincerely

Andrew Cardoza
Director

Appendix 1 – Audit fee assumptions

In setting the fee, we have assumed that:

- the level of risk in relation to the audit of the financial statements is not significantly different from that identified for 2014/15;
- you will inform us of significant developments impacting on our audit work;
- internal audit meets the appropriate professional standards;
- you will identify and implement any changes required under the CIPFA IFRS-based Code of Practice on local Authority Accounting within your 2015/16 financial statements;
- your financial statements will be made available for audit in line with the timetable we agree with you;
- good quality working papers and records will be provided to support the financial statements in line with our *prepared by client* request and by the date we agree with you;
- requested information will be provided within agreed timescales;
- prompt responses will be provided to draft reports; and
- additional work will not be required to address questions or objections raised by local government electors or for special investigations such as those arising from disclosures under the Public Interest Disclosure Act 1998

Improvements to the above factors may allow reductions to the audit fee in future years. Where these assumptions are not met, we will be required to undertake additional work and charge an increased audit fee. The fee for the audit of the financial statements will be re-visited when we issue the detailed audit plan.

Any changes to our audit plan and fee will be agreed with you. Changes may be required if:

- new residual audit risks emerge;
- additional work is required by KPMG, PSAA, the NAO or other regulators; or
- additional work is required as a result of changes in legislation, professional standards or as a result of changes in financial reporting.

Appendix 2: Planned outputs

Our reports will be discussed and agreed with the appropriate officers before being issued to the Joint Audit and Scrutiny Panel.

Planned output	Indicative date
External audit plan	January 2016
Report to those charged with governance (ISA260 report)	September 2016
Auditor's report giving the opinion on the financial statements, value for money conclusion and audit certificate	September 2016
Opinion on Whole of Government Accounts return	September 2016
Annual audit letter	October 2016

Reserves and Provisions out-turn balances

RESERVE	Balance 01.04.14 £000	Balance 31.03.15 £000
Useable Capital Receipts	(1,553)	(1,553)
Property Act Fund	(95)	(123)
Drug Fund	(61)	(71)
PFI Reserve	(258)	(258)
Grants Reserve	(3,004)	(2,286)
MTFP Reserve	(14,184)	(10,286)
Tax Base Reserve	(230)	(230)
Animal Welfare Reserve	(20)	(19)
PCC Reserve	(405)	(487)
Grants & Commissioning Reserve	(283)	(1,025)
VAT Reserve	0	(36)
TOTAL USEABLE RESERVES	**(20,093)**	**(16,374)**

GENERAL RESERVE	**(7.000)**	**(7.000)**

PROVISION	Balance 01.04.14 £000	Balance 31.03.15 £000
Liability Insurance	(2,101)	(2,119)
Motor Insurance	(632)	(201)
Dilapidations	(196)	(106)
Industrial Tribunals	(50)	(36)
Medical Retirement contribution	(616)	(0)
TOTAL PROVISIONS	**(3,595)**	**(2,462)**

For Information	
Public/Non Public*	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9th June 2015**
Report of:	**Chief Finance Officer**
Report Author:	**Charlotte Radford**
E-mail:	
Other Contacts:	**Pamela Taylor**
Agenda Item:	**15**

RESERVES AND PROVISIONS OUT-TURN REPORT 2014-15

1. Purpose of the Report

1.1 To inform members on the level of reserves and provisions balances held at the end of the financial year 2014-15.

2. Recommendations

2.1 Members are requested to note the attached report.

3. Reasons for Recommendations

3.1 This complies with good financial management and assurance.

4. Summary of Key Points

4.1 The Police & Crime Commissioner is required to maintain a prudent level of reserves and provisions for items/risks that are known to be accruing and for unforeseen items that might be incurred.

4.2 Provisions are held for risks that we know are accruing and where we can reasonably calculate the financial impact.

4.3 Reserves are held for potential risks and for items which may become provisions, but where the full cost cannot accurately be calculated at this point in time. The most significant risk we have in relation to this is in relation to the A19 judgement.

4.4 In 2013-14 the DCLG undertook a review of local government reserve levels including Policing. At that point we were deemed to have low levels or reserves when compared with many other local government bodies and in comparison with other Police & Crime Commissioners.

4.5 The position for 2014-15 is not dissimilar. Like other organisation we have had to utilise the use of reserves to deliver a balanced budget and to meet the shortfall on savings not achieved during the year.

4.6 The reserves and provisions we hold are considered healthy but not excessive.

4.7 It should be noted that not all of our reserves and balances are cash backed. A significant amount of them a recurrently utilised as part of our planned under borrowed position.

4.8 The Treasury is currently undertaking a detailed review of all reserves held by local government bodies.

5. Financial Implications and Budget Provision

5.1 This report complies with reporting requirements, good financial management and financial regulations.

6. Human Resources Implications

6.1 None as a direct result of this report.

7. Equality Implications

7.1 None as a direct result of this report.

8. Risk Management

8.1 The holding and use of reserves is done to manage significant risks as they arise.

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

9.1 The use of reserves is linked to the achievement of the Police & Crime Plan priorities.

10. Changes in Legislation or other Legal Considerations

10.1 None as a direct result of this report. This report complies with financial accounting requirements.

11. Details of outcome of consultation

11.1 Not applicable.

12. Appendices

12.1 A – Reserves and Provisions Out-turn Report 2014-15

For Information	
Public/Non Public	**Public**
Report to:	**Audit & Scrutiny Panel**
Date of Meeting:	**Tuesday 9 June 2015**
Report of:	**Julie Mair, T/Head of Corporate Development**
Report Author:	**Paul White, Strategic Support Officer**
E-mail:	**paul.white@nottinghamshire.pnn.police.uk**
Other Contacts:	**Beverly Topham, Strategic Support & Review Officer**
Agenda Item:	**16**

AUDIT AND INSPECTION REPORT

1. Purpose of the Report

1.1 To provide the Audit and Scrutiny Panel with an update on progress against recommendations arising from audits and inspections that have taken place within the Force.

1.2 To inform the Panel of the schedule of planned audits and inspections.

2. Recommendations

2.1 That the Panel notes the progress made against audit and inspection recommendations.

2.2 That the Panel takes note of forthcoming audits and inspections.

3. Reasons for Recommendations

3.1 To enable the Panel to fulfil its scrutiny obligations to with regard to the Force's response to audits and inspections.

3.2 To keep the Panel informed about forthcoming audits and inspections.

4. Summary of Key Points

4.1 The actions referred to in this report are the result of recommendations made by the Force's previous internal auditor Baker Tilly and external inspectorates, including Her Majesty's Inspectorate of Constabulary (HMIC). They are managed through the Force Activity Plan process and updated on a monthly basis.

4.2 Appendix 1 'Audit, Inspection and Review Status Report Quarter 4 2014/15' provides a summary of actions agreed following previous audits and inspections; those audits and inspections where actions have yet to be agreed; and those where a final report has not yet been received. It also shows forthcoming audits and inspections that the Force is currently aware of.

4.3 The Force's internal audit contract from 2015/16 has been awarded to Mazars, who will take over from Baker Tilly.

4.4 Appendix 2 'Audit and Inspection Actions Update Report Q4 2014/15' provides details of specific actions arising from audits and inspections that are either off target, at risk of being off target, proposed for closure, on target, or closed.

Actions off target

4.5 There are currently 2 actions showing as off target, both of which require a revised target completion date from the action owner. Both actions continue to be progressed and an explanation for why the original anticipated completion was not met has been added to 4Action.

Actions at risk of being off target

4.6 There are 2 actions showing as at risk, because their target completion date is the end of May 2015. Work is progressing against both of these; however it is likely that these actions will require new target completion dates during the next reporting period.

Actions proposed for closure

4.7 There are 4 actions proposed for closure as the manager responsible has reported that the requirements of the agreed action have now been met. These actions will be formally closed as part of the Force's established action management process.

Actions on target

4.8 The remaining 23 actions are currently on target, following review by the Force Executive Board (FEB).

Closed actions

4.9 There are also 13 actions that have been closed since the last report to the Panel, as part of the established action management process.

5 Financial Implications and Budget Provision

5.1 There is no additional budget provision required to implement any of the audit or inspection related actions currently on the Force's action plan. All actions will be resourced from within existing budgets.

6 Human Resources Implications

6.5 There are likely to be HR implications arising from the following actions:

- PCSO role review
- Absence management process
- Strategic Policing Requirement – large scale cyber incident (student placement)

7 Equality Implications

7.5 There may be equality implications arising from the following reviews of policy and process:

- PCSO role review
- Witness care unit review
- Child protection referrals review
- Domestic abuse procedure update
- Safeguarding children statutory responsibilities review
- Detention of children review
- Children missing from home review
- Absence management process
- Review of complaints against officers and staff with protected characteristics
- Strategic assessment of stalking / harassment, honour based violence and forced marriage

8 Risk Management

8.5 None of the current actions are addressing specific risks on the Force's risk register. There are also no new risks arising from any of the agreed actions.

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

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

9.5 There are likely to be policy implications in relation to several current actions:

- PCSO role review
- Out of court disposal policy review
- Domestic abuse procedure update
- Detention of children review
- Children missing from home review
- Information management strategy development
- Absence management process
- Complaints process review
- Management of Police Information (MoPI) implementation

9.6 The following actions relate to aspects of current Police and Crime Plan priorities:

- Witness care unit review
- Child protection referrals review
- Domestic abuse procedure update
- Safeguarding children statutory responsibilities review
- Detention of children review
- Children missing from home review

- Strategic Policing Requirement – large scale cyber incident (student placement)
- Strategic assessment of stalking / harassment, honour based violence and forced marriage

10 Changes in Legislation or other Legal Considerations

10.5 There are potential legal implications arising from the following actions:

- Safeguarding children, review of statutory responsibilities
- Complaints against officers and staff with protected characteristics
- Strategic Policing Requirement assessment
- Management of Police Information (MoPI) implementation

11 Details of outcome of consultation

11.5 Following receipt of a final audit or inspection report a member of the Planning and Policy team consults with the Force lead and other responsible stakeholders to plan appropriate actions in response to each relevant recommendation, or to agree a suitable closing comment where no action is deemed necessary.

11.6 All responses are recorded in a formal Action Capture Form and planned actions are added to the Force's action planning system, 4Action, for management and review until completion.

12. Appendices

12.1 Appendix 1: Audit and Inspection Status Report Q4 2014/15
12.2 Appendix 2: Audit and Inspection Actions Update Report Q4 2014/15

Appendix 1: Audit and Inspection Status Report Quarter 4 2014/15

On target	On target to deliver within constraints, including target completion date, budget and resource allocated. It is also anticipated that any expected efficiency savings will be met. No further action required at this time.
At risk	Actions will be off target within one month and / or are unlikely to be completed by the end date.
Off target	Target date and / or other constraints such as budget or available resource have been exceeded, or it is anticipated that an expected efficiency saving will not be met. Issue to be highlighted to the Portfolio Board and corrective action sought to meet business objectives.

Current audits and inspections

					Actions				
COT Portfolio	**Title**	**Scrutiny Body**	**Audit, Inspection or Review**	**Total number of actions**	**On target**	**At risk of being off target***	**Off target**	**Proposed for Closure**	**Closed**
ACC Specialist Services	Domestic Abuse	HMIC	Inspection	8	1				7
ACC Local Policing	Core Business: Making the Best Use of Police Time	HMIC	Inspection	8	5				3
ACC Local Policing	Crime Data Integrity (November 2014)	HMIC	Inspection	5					5
ACC Specialist Services	Crime Recording (May 2014)	HMIC	Inspection	5	1				4
ACC Specialist Services	Crime Recording: Making the Victim Count (November 2014)	HMIC	Inspection	2	1				1
ACC Specialist Services	Strategic Policing Requirement	HMIC	Inspection	2	2				
ACC Specialist Services	Interim Crime Inspection	HMIC	Inspection	2			1		1

COT Portfolio	Title	Scrutiny Body	Audit, Inspection or Review	Total number of actions	On target	At risk of being off target*	Off target	Proposed for Closure	Closed
ACC Specialist Services	National Child Protection (Nottinghamshire)	HMIC	Inspection	7	6	1			
ACC Specialist Services	Undercover Policing	HMIC	Inspection	1	1				
ACC Local Policing	Stop and Search Powers 2	HMIC	Inspection	2				2	
DCC	Police Integrity & Corruption	HMIC	Inspection	3	1	1		1	
ACO Resources	Business Continuity & IT Disaster Recovery Planning	Baker Tilly	Audit	3	2		1		
ACO Resources	Information Management Arrangements	Baker Tilly	Audit	3	3				
ACO Resources	Absence Management	Baker Tilly	Audit	5	5				
ACO Resources	Payments and Creditors	Baker Tilly	Audit	2					2
				58	28	2	2	3	23

Recent audits and inspections

COT Portfolio	Title	Description	Date	Force Lead	Status
ACO Resources	Baker Tilly: Key Financial Controls	Annual audit of key financial controls.	6th – 20th October 2014.	Andrea Naylor	Draft report received. Awaiting confirmation of Force response.
ACC Local Policing	Baker Tilly: Volunteering	The review will consider how the use of volunteers is aligned to Force Priorities and linked to the requirements of Divisions and Force departments.	27th – 29th October 2014	Ch Insp Richard Stapleford	Awaiting final report.
ACO Resources	Follow Up	To meet the IIA Standards and to provide management with ongoing assurance regarding implementation of recommendations.	w/c 19th January 2015	Julie Mair	Final report received. In process of agreeing actions with Force leads.

Forthcoming audits and inspections

COT Portfolio	Title	Description	Date	Force Lead	Planning and Policy SPOC
Regional	Regional Organised Crime Unit (ROCU) Inspection	Inspection of regional organised crime units as part of Effectiveness element of PEEL	May - June	Det Supt Andy Dickin	Vijayshree Appa / Beverly Topham
ACC Specialist Services	Vulnerability	Fieldwork to answer Core question 3 of the Effectiveness element of PEEL	June - July 2015	TBC	Vijayshree Appa / Beverly Topham
ACC Specialist Services	Honour Based Violence	Phase 2; 8 forces to be selected for inspection	22 June 2 August 2015	Supt Helen Chamberlain	Vijayshree Appa / Beverly Topham
Regional	Joint Emergency Services Interoperability Programme(JESIP) Tri-Service Review	Inspection to be led and hosted by EMOpSS	June - July 2015	Ch Supt Chris Haward	Vijayshree Appa / Beverly Topham
ACC Specialist Services	Police Response to Online Child Sexual Exploitation*	An additional inspection to update HMIC's original report on 21st Century Child Exploitation inspection (October 2013).	TBC	Supt Helen Chamberlain	Vijayshree Appa / Beverly Topham
Regional	HMIC: Unannounced Custody Inspection**	Part of the rolling programme of unannounced custody inspections.	TBC	Ch Supt Julia Debenham	Vijayshree Appa / Beverly Topham
ACC Specialist Services	HMIC: Digital Crime and Policing Inspection	To be scoped.	TBC	Supt Mark Pollock	Vijayshree Appa / Beverly Topham

Appendix 2: Audit and Inspection Actions Update Report

Quarter 4:
2014/15

NB. Actions include those arising from recommendations highlighted by audit or inspection

Summary	Current	Previous	Trend
Action(s) off target	2	0	↑
Action(s) at risk of being off target	2	0	↑
Action(s) proposed for closure	4	0	↑
Action(s) on target	23	4	↑
New action(s)	0	21	↓
Total closed action(s)	13	10	↑
Total actions	44	35	↑

RAG Key

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

Action(s) off target

Ref	Target date	Original target date	Assigned to:	Recommendation	Action	Manager Responsible	Source/ Title	Action status	Action Update
BT/e493/131014	31/12/2014		Julie Mansfield	**Recommendation** The IT Business Continuity Toolkit - Tests & Exercise Tab should be fully completed and should provide comprehensive details of testing planned and undertaken.	Action: Update the Information Services department Business Continuity Toolkit Test & Exercise record with the results of Exercise Candle and the date of next year's test	Julie Mansfield	Baker Tilly: Business Continuity and IT Disaster Recovery Planning.	Off target	Planning is currently underway for a for a full County Wide break in IT Network service. This break is required for IS to complete an upgrade of the core network at HQ. **Action requires a new target completion date.**
BT/84aa/24215	31/03/2015		Janet Carlin	**Recommendation** Nottinghamshire Police should review immediately the operation of the witness care unit in relation to the updating of victims. If required, by January 2015 the force should implement an action plan to ensure service improvement	Action: Review immediately the operation of the witness care unit in relation to the updating of victims. If required, the force should implement an action plan to ensure service improvement.	Janet Carlin	HMIC: Crime Inspection 2014 Nottinghamshire Police.	Off target.	Since this report, the Witness Care Unit Manager has reminded officers to follow the Victims Code in terms of the manner and timeliness of the feedback given to victims regarding the updates and outcomes of cases. There was no requirement to retrain members of the team as staff were aware and just needed reminding since the restructure and downsizing of the WCU in Notts. There has been some adapting of processes and service delivery in the unit as a result of the reduced staffing levels however, this will not impact adversely the support to victims. The Supervisor has also introduced a regular series of dip sampling across all officers and their work to ensure that these procedures continue to be followed. Feedback is given immediately to the officers concerned, if required. Dip samples have not been carried out over the past month owing to the absence of the team supervisor however they are about to commence once again. The Regional Witness Care Unit Manager, who will be responsible for the service delivery and strategy of Witness Care across the East Midlands was appointed to role last week. This procedure will be reviewed as part of the new regional working requirements and the need to comply with the Inspection recommendation. Any learning from other forces and the new Manager will be added or will replace this procedure, if deemed to be an improvement on existing procedures. The experience of victims remains at the highest level at all times. **Action requires a new target completion date.**

Action(s) at risk of being off target

Ref	Target date	Original target date	Assigned to:	Recommendation	Action	Manager Responsible	Source/ Title		Action Update
CH/3486/12315	31/05/2015		Det Supt Jackie Alexander	**Recommendation** Within six months, the force should review the level of detail documented, as part of the rationale, and how and where this is recorded to enable information to be more easily retrieved for auditing purposes	Action: Review the level of detail in relation to decision making rationale, in respect of timeliness, supervision and appropriateness. This rationale to be recorded on Centurian to improve consistancy across cases and therfore improve the monthly audit reporting Share across the departments with persons involved, (to include police staff) the rules and coventions to increase the recording rationale using the NDM at key points.	Det Supt Jackie Alexander	HMIC: Police Integrity and Corruption	At risk	A draft rationale form has been circulated by T/DI Waller which is currently being piloted across the deparatment and will then be subject to further review.
CH/5490/1415	31/05/2015		T/Insp Jane Stubbs	**Recommendation 8** Within three months: (pg21-22) We recommend that Nottinghamshire Police undertakes a review (jointly with children's social care services and other relevant agencies) of how it manages the detention of children. This review should include, as a minimum, how best to: a) improve custody staff awareness of child vulnerability and child protection; b) improve risk assessments to reflect the needs of children and the support they require at the time of detention and on release; c) ensure that all staff act within the law so that all children are only detained when absolutely necessary and for the absolute minimum amount of time; d) assess at an early stage the likely need for secure or other accommodation, and work with children's social care services to achieve the best option for the child; e) ensure that children detained under section 136 of the Mental Health Act are only detained in police custody as a last resort, for a minimum amount of time, are regularly checked and receive the services of the mental health nurse; and f) ensure specific additional consideration is given to using family members as appropriate adults for children detained under section 136 of the Mental Health Act, and parental support and personal attendance at the custody suite are encouraged.	Action: Undertake a review (jointly with children's social care services and other relevant agencies) of how the Force manages the detention of children. This review should include, as a minimum, how best to: a) improve custody staff awareness of child vulnerability and child protection; b) improve risk assessments to reflect the needs of children and the support they require at the time of detention and on release; c) ensure that all staff act within the law so that all children are only detained when absolutely necessary and for the absolute minimum amount of time; d) assess at an early stage the likely need for secure or other accommodation, and work with children's social care services to achieve the best option for the child; e) ensure that children detained under section 136 of the Mental Health Act are only detained in police custody as a last resort, for a minimum amount of time, are regularly checked and receive the services of the mental health nurse; and f) ensure specific additional consideration is given to using family members as appropriate adults for children detained under section 136 of the Mental Health Act, and parental support and personal attendance at the custody suite are encouraged.	T/Insp Jane Stubbs	HMIC: National Child Protection	At risk	The work conducted by T/Insp Jane Stubbs and social care supported by the Force Research team as to how this action will be progressed whether in part or in full. A meeting is scheduled with Social Work Services at the end of May. A new target completion date will be discussed at this meeting.

Action(s) proposed for closure

Ref	Target date	Original target date	Assigned to:	Recommendation	Action	Manager Responsible	Source/ Title	Action status	Action Update
CH/248f/12315	31/05/2015		John Hammond	**Recommendation** Within six months, the force should ensure that any secondary employment or business interest applications which have been declined or withdrawn are followed up on to ensure compliance.	Action: Review and update the policy and health check to ensure any refusals or withdrawals to secondary employment or business interests are made known to the Professional Standards Department via line manager reporting. The health check should ensure probing questions are asked.	John Hammond	HMIC: Police Integrity and Corruption	On target	Policy reviewed and published April 2015. All refused interests will be reviewed by line managers. **Recommend complete.**
CH/44b5/1415	31/05/2015		Supt Paul Burrows	**Recommendation 2** Chief constables should, with immediate effect, develop plans that set out how each force will complete the action required to make good progress in relation to the recommendations in HMIC's 2013 report, and publish these plans so that the public can easily see them on their websites. These plans should include the action forces are taking to comply fully with the Best Use of Stop and Search Scheme, initiated in April 2014 by the Home Secretary. *HMIC expects chief constables to use the self assessments they completed as part of this inspection to formulate their plans, alongside any other relevant information. We expect all forces to have completed, or to be making good progress in relation to, the recommended actions by November 2015	Action: Update the Stop and Search plan to show progress in relation to the 2013 recommendations. These will need to be refreshed after the 2014/15 data outcome period. The plan should be regularly updated to comply with the most recent recommendations from the Policing College, Home Office of HMIC. Publish on our website.	Supt Paul Burrows	HMIC: Stop & Search Powers 2	On target	Plans are in place to show progress in relation to the 2013 recommendations. The previous 21 stop and search action plans have been edited together into one; the actions have been updated and the recommendations, along with updates, from the 2013, 2015 HMIC reports and BuSSS included and updated. **Recommend complete**
CH/348e/1415	31/7/2015		Supt Paul Burrows	**Recommendation 7** Within three months, chief constables should require their officers to record all searches which involve the removal of more than an outer coat, jacket or gloves. This record must specify: the clothing that was removed; the age of the person searched; whether the removal of clothing revealed intimate parts of the person's body; the location of the search including whether or not it was conducted in public view; and the sex of the officers present.	Action: Develop a separate section of the Stop Search dashboard to include Strip Search.	Supt Paul Burrows	HMIC: Stop & Search Powers 2	On target	The requirement for recording as outlined with the action has been communicated to officers via the Champions network and KYI articles. Compliance is now being audited via the strip search audit mechanism; however this will be improved once the new stop and search app is developed which will lead officers to comply. It is recommended that this action can be closed as the requirement has been made. **Recommend complete**
CH/649e/21115	30/06/2015	31/03/2015	T/Sgt Vanessa Wake	**Recommendation** Within three months: all forces should ensure that: • in cases of out-of-court disposals where there is a victim, they consult the victim before making the decision to issue or effect the disposal, and make a record that they have done so; and on every occasion when the making of an out-of-court disposal is under consideration, the previous offending history of the offender is checked to ensure the offender is eligible for the disposal in question, and make a record that this has been done.	Action: Formally agree that in all cases where an out-of-court disposal is used and there is a victim, the victim must be consulted before making the decision to issue or effect the disposal and a record must be made of the outcome of that consultation. In addition, agree that previous offending history should be checked whenever an out-of-court disposal is under consideration to verify that the offender is eligible and that a record must be made of the results of that check. Make these decisions part of Force policy and procedure for out-of-court disposals and work with the Corporate Documentation team to record and communicate them accordingly.	Ch Supt Helen Jebb	HMIC: Crime-recording making the victim count	On target	It has become apparent that for Cautions a number of rationale documents exist, it was thought there was a standard document that all supervisors completed, work to be completed in order to standardise rationale document for each out of court disposals encompassing victims thoughts/wishes and implications for the offender. The delay surrounding this was to also encompass the legal changes to cautions which brought about a legal requirement to consult with the victim and take their views into account. It was necessary to launch at the same time so not to confuse officers. In addition, please rest assured that the working practice of OoCD's has also been to capture the views/wishes of the victim within decision making, noticeably officers have been asked to consider within their review: • How does this outcome benefit the victim? • How does it prevent further offending? • How does the outcome benefit the community? • Why is this disposal option the correct outcome? This document and the procedure will be attached to Weekly Orders dated 15/05/2015. They will be saved in the appropriate sections in the library. **Recommend complete.**

Action(s) on target

Ref	Target date	Original target date	Assigned to:	Recommendation	Action	Manager Responsible	Source/ Title	Action status	Action Update
CH/249d/1415	30/06/2015		Emma Laughton	**Recommendation** Within three months: We recommend that Nottinghamshire Police undertakes a review of the level and quality of supervisory activity in cases involving children missing from home.	Action: Review / audit a given number of cases in cases involving children missing from home to assess compliance with procedure regarding levels and quality of supervision.	Supt Helen Chamberlain	HMIC: Child Protection	On target	A sample of missing children cases from across the Force will be reviewed / audited throughout May 2015. The process will be aligned to the approach that is being taken across all 5 forces in the region, using a standardized template to assess procedural compliance, quality of investigation and supervision. The results of the audit will be reported on by the end of June 2015.
BT/a493/131014	30/06/2015		Julie Mansfield	**Recommendation** An IT disaster recovery test schedule should be documented and approved. The IS disaster recovery plan should be tested at least annually or after a change of key personnel, operational system or any aspect of the operational infrastructure. Where recovery testing takes place this should also assess recovery point and recovery time testing to ensure the specified objectives are achieved.	Action: Plan, document and gain approval from the head of department for an Information Services disaster recovery test schedule and record; tests should be at least annually and after any changes to key personnel, operational system or infrastructure.	Julie Mansfield	Baker Tilly: Business Continuity and IT Disaster Recovery Planning.	On target	The documentation and working practices are established and a process for updating exists after significant change. However the test schedule has not been started as the resources required to contribute to this have been diverted to other Force Prioirty projects including MFSS, PSN, Network Improvement, Telephony Replacement
BT/b4ad/81014	30/06/2015		Julie Mansfield	**Recommendation** An action plan needs to be developed to ensure IT Information Services have an associated suite of recovery documentation covering all the identified critical IT services.	Action: Create a suite of recovery documentation covering all identified critical IT systems.	Julie Mansfield	Baker Tilly: Business Continuity and IT Disaster Recovery Planning.	On target	Working instructions and knowledge is available within the teams and core recovery documentation for each of the IT services is held within the Business Continuity Folder on the network. New documentation is published on the commissioning of each new or changed system or service. The documentation does require modernisation, however, the information is currently functional and approriate and provides the information that the engineers need to restore a service in the event of a failure. With current workload in the teams, a new target completion date of June 2015 has been agreed.
BT/f4a6/8914	30/06/2015		Richard Goold	**Recommendation** Managing victims and offenders: Effective use of intelligence at strategic and individual case levels in the management of victims and offenders.	Action: Create and communicate a problem profile so that staff are more aware of victims and perpetrators which will enable them to be proactive and apply offender management principles. Profiles to include: perpretrators details, definitions of serial and repeat and identification of management plans.	Det Supt Mark Pollock	HMIC: Domestic Abuse.	On target	Profile discussed and agreed at Force Tasking. The Profile will be resourced through FI - terms of reference discussed with Supt Chamberlain and the profile will be a refresh of the last profile. Currently on course for end of May / Early June completion.

CH/24a2/12315	31/08/2015		DI Louise Jordan	**Recommendation 4** By 31 August 2015, chief constables should review the number of officers and staff with protected characteristics who have formal allegations made against them, to ensure that force processes are operating without bias or discrimination.	Action: Review the current formal allegation process to include capturing a record of all protected characteristics. (Disability, Race, Gender Reassignment, Religion and Belief, Age, Marriage and Civil Partnership, Pregnance and Maternity, Sex and Sexual Orientation). This should also be extended to conduct investigations and included in the quarterly report	Det Supt Jackie Alexander	HMIC: Police Integrity and Corruption	On target	D/Supt Alexander and DI Jordan holding meetings with support networks and groups and now working with the analyst around reporting on protected characteristics. On target.
CH/04a5/16115	01/09/2015		Richard Hitch	**Recommendation 37** By 1 September 2015, all forces should have in place, and thereafter implement to the greatest extent reasonably practicable, a sufficient and costed plan to progress the development of mobile technology which prioritises the requirements of frontline officers and staff, and to achieve the objectives of the National Policing Vision 2016	Action: Produce a high level project plan and include costs and the objectives of the National Policing Vision 2016 to progress the development of mobile technology.	Richard Hitch	HMIC: Core Business: Making Best use of Police Time.	On target	The Force currently has in place a mobile working solution using software from Capita. There is a strategic board and a project board chaired by ACC Torr and Supt Antill respectively; the Force is seeking a replacement system that needs to be in place by the end of 2016. There is also a regional board lead by Simon Torr looking at the roadmap to a regional solution
CH/f4b6/1415	30/10/2015		Ch Insp Jim West	**Recommendation 3** Immediately: (pg 18-19) We recommend that Nottinghamshire Police takes steps to ensure that all relevant information is properly and uniformly recorded, and is readily accessible in all cases where there are concerns about the welfare of children.	Action: Implement the Public Protection module as part of phase 2 of the regional NICHE project.	Supt Helen Chamberlain	HMIC: National Child Protection (Nottinghamshire)	On target	The PP module of NICHE is not being delivered in the first phase of the NICHE roll out. The PP module will be phase 2. This has to be developed with the four forces that are collaborating, the NICHE PP module that Lincolnshire are using looks sufficient for DV/CP/VA purposes. Officers will be immediately directed that where ever checks of systems are to be made that they are to check all systems available to ensure that they have the most up to date information.
BT/949a/111214	18/09/2015		DS Les Charlton	**Recommendation** Large Scale Cyber Incident page 12: The force has not developed joint working with academic institutions and private industry that focus on the recruitment of people with information, communication and technology skills. Nor has it asked for assistance from volunteer information, communication and technology professionals. This would improve the force's skills in this area.	Action: Recruit for a student placement following the re-location to larger accommodation (Academia links supported here).	Det Supt Mark Pollock	HMIC: Strategic Policing Requirement	On target	Due to slippage in the facilities timescales, we do not anticipate moving now unitl July 2015 so recruitment would be delayed. As student placements need finalising before the summer, it may not be possible to complete this academic year.
CH/b48f/16115	30/09/2015		Keiliey Freeman	**Recommendation 27** All forces should progress work to gain a better understanding of the demands they face locally, and be prepared to provide this to the College of Policing to establish good practice in this respect. All forces should inform HMIC of their progress on this matter through their annual force management statements.	Action: Carry out research to improve understanding of local demand. The results of this research should be made available to the College of Policing and progress reported to HMIC in the annual force management statement.	Julie Mair	HMIC: Core Business: Making Best use of Police Time.	On target	Force Research previously carried out means that the Force has a good understanding of demand. We are still awaiting guidance from HMIC in relation to the annual force management statement.
BT/24a2/111214	30/09/2015		Richard Goold	**Recommendation** Chief constables should conduct an evidence-based assessment of the national threats (as described in the SPR), at least annually, and make it part of their arrangements for producing their strategic threat and risk assessments. This should start immediately because it is essential to understand the threat and risks before deciding upon the level of resources that are necessary to respond.	Action: Update the format of the Force Strategic Intelligence Assessment so that from the production of the next assessment report there is a separate section which describes the level of threat within Nottinghamshire in relation to each of the national threats in the SPR.	Det Supt Mark Pollock	HMIC: Strategic Policing Requirement	On target	This year SPR factors were included within thematic themes to give the best overall impression of how local and national crimes problems are affecting Notts. We will look to include a seperate SPR section in next year's assessment to further highlight issues around national problems.
BT/3487/101114	31/12/2015		Ch Insp Jim West	**Recommendation** The Force should implement MoPI groupings so that nominal crimes can be clearly grouped and reviewed.	DCC review - New Action: Following the implementation of NICHE, implement MoPI groupings so that nominal crimes can be clearly grouped and reviewed as an Information Assurance requirement.	Ch Insp Jim West	Baker Tilly: Information Management Arrangements	On target	This piece of work is now incorporated into the Niche BRC Strategy in terms of what is to be done with Nottinghamshire records before being migrated to Niche but also how MOPI compliance is managed going forwards as BAU.
BT/3491/8914	30/9/2015		Richard Goold	**Recommendation** [Leadership and Governance / Performance Management.] Include in the next strategic intelligence risk assessment references to stalking / harassment, Honour based violence and forced marriage.	Action: Include in the next strategic intelligence risk assessment references to stalking / harassment, Honour based violence and forced marriage.	Det Supt Mark Pollock	HMIC: Domestic Abuse.	On target	Work has begun on the new Strategic Assessment and these areas will be included as part of the DA section.
CH/e4bc/15115	30/06/2015	31/12/2014	Supt Richard Fretwell.	**Recommendation 17** By 31 December 2014, all forces should ensure that PCSOs are not being used to respond to incidents and crimes beyond their role profiles, in respect of which they have no powers, or for which they have not received appropriate levels of training.	Action: Review the role of the PCSO to assess the issue in relation to responding to incidents and crimes beyond their role profile.	Supt Richard Fretwell.	HMIC: Core Business: Making Best use of Police Time.	On target	Awaiting feedback from the NHP phase two review workshops where PCSOs have the opportunity to tell us whether they are being used appropriately or not. We will be speaking to all PCSOs again as part of the reducing numbers project which represents a further opportunity to obtain feedback. Work is in progress with the Head of Contact Management to monitor adherence to the graded response policy. A new procedural guide for the use of PCSOs is being developed which will clarify what they can / cannot attend. This will be completed by the end June 2015.
CH/c4a4/15115	30/06/2015	31/03/2015	Supt Richard Fretwell.	**Recommendation 3** By 31 March 2015, every force that does not have an adequate, force-wide problem-solving database should develop and start making use of one, to record, monitor and manage its neighbourhood problem-solving cases.	Action: Develop CIMA to include a central repository for force wide Problem Solving activity. It should record, monitor and manage its neighbourhood problem-solving cases.	Supt Richard Fretwell.	HMIC: Core Business: Making Best use of Police Time.	On target	The CIMA system is up and running. Use of the database to record, monitor and manage problem solving cases is a work package within the Neighbourhood Policing Review. Due to a technology issue on CIMA problem solving plans are temporarily on the Neighbourhood Policing intranet site.
CH/f496/15115	31/08/2015	31/03/2015	T/ Ch Insp Phillip Davies	**Recommendation 4** By 31 March 2015, all forces should ensure they are using their databases to track the progress and evaluate the success of actions taken in relation to each neighbourhood problem-solving case recorded on the database.	Action: Track the progress and evaluate the success of actions taken in relation to each neighbourhood problem-solving case recorded on the database. Interdependent with Recommendation 3	Supt Richard Fretwell.	HMIC: Core Business: Making Best use of Police Time.	On target	Requires competion of the action arising from Recommendation 3. Due to a technology issue on CIMA problem solving plans are temporarily on the Neighbourhood Policing intranet site.
CH/d484/15115	31/10/2015	31/03/2015	T/ Ch Insp Phillip Davies	**Recommendation 5** By 31 March 2015, each force should ensure that it is able to disseminate information and share good practice from its database throughout the force, as well as local authorities and other relevant organisations involved in community-based preventive policing or crime prevention.	Action: Carry out a review of problem solving with partners and key stakeholders. Identify best practice to enable dissemination of information and how to share best practice from the problem-solving database throughout the force, as well as local authorities and other relevant organisations involved in community-based preventive policing or crime prevention. Interdependent with Recommendation 3.	Supt Richard Fretwell.	HMIC: Core Business: Making Best use of Police Time.	On target	Requires competion of the action arising from Recommendation 3. The review can be carried out when CIMA and ECINS are fully functional. The partnership system is ECINS and this will be scoped at the next steering group meeting in June.

CH/5484/1415	30/06/2015	30/4/2015	A/DCI Yvonne Dales	**Recommendation 1** Immediately: (pg 9-11) We recommend that Nottinghamshire Police ensures that in domestic abuse incidents, officers see and speak to children (where possible and appropriate) and record their observations of a child's behaviour and demeanour so that better assessments of children's needs are made.	Action: Update the DA procedure to state that in domestic abuse incidents, officers see and speak to children and record their observations of the child's behaviour and demeanour to enable a better assessment of their needs. As a result of a national enquiry with the ACPO Child Protection lead as to good practice in this area on the 25th March 2015, there is now research being carried out by the University of Bedfordshire to review amongst other matters what this looks like in practice. When complete communicate the changes through a weekly order and corporate communications.	Supt Helen Chamberlain	HMIC: National Child Protection (Nottinghamshire)	On target	The Domestic Abuse Procedure has been updated to include these requirements. Emphasis added to the sections where this is mentioned to highlight the changes to the reader. In view of the other significant changes to the Procedure this has now gone out for Consultation, replies required back by 15th May 2015. Once this process is completed, the new Procedures can be published.
CH/e4ba/1415	30/06/2015	30/4/2015	A/DCI Yvonne Dales	**Recommendation 6** Within three months: (pg12-14) We recommend that Nottinghamshire Police undertakes a review, together with children's social care services, of how it manages child protection referrals to ensure a timely response to initial concerns, that action is subsequently taken, concerns are followed up and cases are regularly reviewed.	Action: Carry out a review with identified practitioners from both local authorities and the police to address a plan for the points raised within the recommendation and also highlight where action has already taken place with Theresa Godfrey (Social Care County) and John Matravers (Social Care City).	Supt Helen Chamberlain	HMIC: National Child Protection (Nottinghamshire)	On target	T/DCI Dales met with Teresa Godfrey (Group Manager – Children's Social Care, County) to discuss the HMIC findings and joint actions. CSC County have already formulated an implementation plan in response to this report. Collectively, TG and YD will now work together to look at coordinating the activities more effectively to develop a high-level implementation plan across both agencies. The finer details of this are currently being worked through in conjunction with the Public Protection -Dtf work. Further meetings are planned and T/DCI Dales has now arranged a meeting with John McTravers Children's Social Care – City for the 6th May 2015. In light of the work needed target date needs to be extended to end June.
BT/1494/81214	30/06/2015	30/04/2015	Det Supt Mark Pollock	**Recommendation 38** Chief constables and the heads of law enforcement agencies should ensure that his or her force or agency has, or has access to, an operational security advisor who has passed the relevant course.	EMSOU have an operational security advisor. Nottinghamshire in the process of recruiting. Access to EMSOU OPSE if required. Action: Nottinghamshire to recruit an operational security advisor.	Det Supt Mark Pollock	HMIC: Undercover Policing	On target	In the process of putting the post out for advert; hopeful that we will have someone in post in the next three months or so. **Action requires a new target completion date.**
CH/649b/1415	30/06/2015	30/4/2015	T/DI Steve Peaks	**Recommendation 4** Within three months: (pg12-14) We recommend that Nottinghamshire Police undertakes a review, together with children's social care services and other relevant agencies, to ensure that the police are fulfilling their statutory responsibilities set out in Working Together to Safeguard Children. As a minimum this should include: a) attendance at, and contribution to, initial child protection conferences; and b) recording decisions reached at meetings on police systems to ensure that staff are aware of these and of all relevant developments.	Action: A review will take place with identified practitioners from both local authorities and the police to address a plan for all the points raised within the recommendation and also highlight where action has already taken place with Theresa Godfrey (Social Care County) and John Matravers (Social Care City). a) Our Joint safeguarding procedures are written to reflect working together and states: A conference should consist of only those people who have a significant contribution to make due to their knowledge of the child and family or their expertise relevant to the case b) The organising and running of Child Protection Conferences remains the responsibility of Children's Social Care and the production of minutes is their decision. When minutes are communicated they are recorded on PP CATS system. These are then actioned appropriately.	Supt Helen Chamberlain	HMIC: National Child Protection (Nottinghamshire)	On target	T/DI Peaks is having meetings with CSC to ensure that the MASH are copied into the invites for ICPC. The finer details re attendance and criterion are still being worked through. This is linked to the Public Protection DtF work.
BT/4493/71114 BT/44a5/71114 BT/548d/71114 BT/949d/71114 BT/e4bb/71114	30/06/2015	30/04/2015	Pippa Wood	**Recommendations** 1. In accordance with the Policy, management visits should be taking place. 2. For a consistent approach a Return to Work Interview should be completed for every period of absence. Managers should ensure that Return to Work Interviews are conducted once an employee returns to work. 3. Spot checks should be completed to ensure compliance with Policy and process. Checks should be completed prior to Line Manager's PDR's to inform the process and highlight as a potential weakness in compliance with process. 4. If an employee has three periods of absence or 10 days during a 12 month rolling period a stage 1 interview should take place. Furthermore a further two periods of absence should result in a stage 2 meeting. Spot checks on compliance with this element should take place. 5. Line Managers should update the system with the sickness absence, as soon as it is possible, to ensure the system reflects an accurate position of sickness absence, across the Force. Furthermore, the log within Origin HRMS should be utilised and updated to clearly demonstrate compliance with the Policy and to effectively and consistently manage the sickness.	Action: HR consultants to remind managers of their responsibility via email. Introduce a monthly report and send out to divisional line managers. Complete audits to check compliance in December 2014 and March 2015	Steve Mitchel	Baker Tilly: Absence Management	On target	Multiple recommendations to be addressed by single course of action. Pippa Wood has now due to changes in HR taken over the responsibility in this area of sickness, alongside Steve Mitchel, Senior HR manager. HR Consultants remind managers of their responsibility monthly via email and face to face. HR Consultants also to attend monthly People Meetings. Audit to check compliance will be completed in June 2015
BT/c4a4/71114	31/03/2016	30/04/2015	Pat Stocker	**Recommendation** To ensure that responsibilities and procedures are clear, the force needs to develop and implement a comprehensive Information Management Strategy in line with National Guidance.	DCC Review - New Action: Develop and implement a comprehensive Information Management Strategy in line with National Guidance to include the following: i) To ensure staff in IM are aware of their roles and responsibilities, review and update policies and procedures for records management, information security, data diposal and data quality; ii) Ensure that the Information Assurance Improvement Plan and Risk Register are updated to include the risks and implications of not having appropriate strategy and policy documentation in place which is adhered to; iii) Report progress of development and implementation of the Information Management Strategy and assosciated policies and procedures to IRMG and FIAB.	Julie Mair	Baker Tilly: Information Management Arrangements	On target	Information Management Strategy still in draft format and other IM Policy still being drafted and reviewed - This piece of work has been delayed as a result of high priority Project work such as MFSS and long term sickness of relevant support members of staff - action will be to provide a plan for action to be managed through FIAB. New completion date will be end of March 2016 as the end result will be significantly affected by both the Regional Niche Project and PBS project
BT/2480/101114	31/03/2016	31/03/2015	Pat Stocker	**Recommendation** The Force should perform a data flow mapping exercise to identify information flows written and information that leaves and enters the organisation	Action: Carry out a data flow mapping exercise to identify information that leaves and enters the organisation.	Julie Mair	Baker Tilly: Information Management Arrangements	On target	A Data flow Mapping exercise cannot take place until we have identified all of our Information assets. The initial step in this process is to identify all Information Asset Owners and formally identify their assets in an Information Asset Register. Following the production of the first draft of the IAR we will then review the requirements for a Data Flow Mapping exercise (bearing in mind the timescales for Niche) and provide an options for paper for FIAB. New completion date will be end of March 2016 as the end result will be significantly affected by both the Regional Niche Project and PBS project
Closed action(s)									

Ref	Target date	Original target date	Assigned to:	Recommendation	Action	Manager Responsible	Source/ Title	Action status	Action Update
CH/84ba/15115	31/03/2015		Supt Richard Fretwell.	**Recommendation 3.1:** By 31 March 2015, every force that does not have an adequate, force-wide problem-solving database should develop and start making use of one, to record, monitor and manage its neighbourhood problem-solving cases.	Action: Secure the first years funding from the PCC to enable the use and development of ECINS. This is a multi -agency tool designed to record, monitor and manage partnership problem solving activity.	Supt Richard Fretwell.	HMIC: Core Business: Making Best use of Police Time.	Closed	ECINS funding secured. Show this action as complete
CH/64a8/15115	31/03/2015		DCI Robert Griffin	**Recommendation 9** By 31 March 2015, all forces should ensure that crime prevention or disruption activity carried out is systematically recorded and subsequently evaluated to determine the effectiveness of tactics being employed. .	Action: Evaluate Violent Crime (other crime types) in any activity, operation or initiative to determine the effectiveness of the tactics employed. Record, evaluate and develop a central repositary to capture the learning	Det Ch Supt Helen Jebb.	HMIC: Core Business: Making Best use of Police Time.	Closed	Following research of national best practice, and then subsequently in conjunction with senior Intell and performance analysts, a "Results report form," has been developed. This will be used as a single, consistent means of capturing the evaluation of plans. Once the Operation/initiative/tactic and results report is completed, it will be uploaded onto CIMA. CIMA (Crime Intelligence Management and Analysis)s a dedicated computer programme available to all operational officers and staff as well as though in operational support roles. It can be accessed via the Intranet through Intelligence Applications. All operational staff have the ability to upload documents onto the system, which will store them in a searchable format Documents can be searched for or filtered by using name, geographical area, crime type or product type. The system has a version control but stores previous versions (all available to view) in case they are needed Over time, CIMA will become an operational organisational memory database, with both officer reports as well as analytical and performance products. Its search facilities will be good enough to allow officers to see what previous plans and operations have been used around the Force as well as keep track of the operations they themselves have run. It will operate, in effect as a library for learning from an Ops planning perspective. Currently the system is live and can be accessed by all officers and equivalent staff, however we are working out the last few minor bugs before we promote the widespread use of the system so that it will have the maximum impact. We anticipate this full role out will be some time in April. However, documents can be uploaded in the meantime via the Senior Analysts.
CH/5496/20115	31/3/2015		Ch Insp Jim West	**Recommendation**: Within three months: The force should assess and put in place appropriate actions to mitigate the risks associated with duplicate records being carried forward to any new multi-force IT system for incidents, crime and intelligence recording	Action: Prepare a report for attention of ACC Jupp, detailing current issues with duplicate records and implications for the Niche project.	Ch Insp Andrew Burton	HMIC: Crime Data Integrity (November 2014)	Closed	Report presented to FEB data cleanse and MOPI compliant approach agreed. Work in this area being led by Insp Ahmed and linked into the Niche programme. Please show this action as complete.
CH/c48b/20115	31/3/2015		Neil Fletcher	**Recommendation:** Immediately: The force should amend its guidance on the investigation of rape and serious sexual assault to accurately reflect NCRS for the recording of crime and to include a definition of additional verifiable information and how it applies to the no-crime process.	Action - Update the Force Investigating Rape and Serious Sexual Assault Procedure (PD509) to accurately reflect NCRS for the recording of crime and to include a definition of additional verifiable information (AVI) and how it applies to the no-crime process. In addition, review the suitability of the current 'Rape no crime guidance' document (October 2010) and if it is still required then arrange for it to be made a formal corporate document.	Supt Helen Chamberlain	HMIC: Crime Data Integrity (November 2014)	Closed	(PD509) Investigating Rape and Serious Sexual Assault Procedure has been updated.
CH/448d/21115	31/1/2015		DCI Paul Murphy	**Recommendation**: Nottinghamshire Police should upload the Code of Practice for Victims of Crime on the website.	Action: Make the full Code of Practice for Victims of Crime, and associated guidance, available to the public on the Force website. Ensure that the Code features prominently on the home page.	Det Ch Supt Helen Jebb	Baker Tilly: Crime Recording (May 2014)	Closed	This action has been completed. VCoP can be found on the Intranet and Internet pages at Nottinghamshire Police. See http://www.nottinghamshire.police.uk/victims for source
BT/44b6/81014	31/12/2014		Julie Mansfield	**Recommendation**: An action plan needs to be developed to ensure IT Information Services have a complete and up to date Business Continuity Toolkit	Action:Update the Information Services department Business Continuity Plan using the Force BC Toolkit.	Christi Carson	Baker Tilly: Business Continuity and IT Disaster Recovery Planning.	Closed	This recommendation requires a different approach. Paul White (Strategic Support Officer) is in discussion with the DCC re agreeing changes to the Business Continuity Policy which will be based on functions rather than departments. IT business continuity will form part of functional plans where necessary. The IT disaster recovery actions are still valid. Request be recorded as superseded
CH/d4ae/21115	31/3/2015		Ch Insp Andrew Burton	**Recommendation:** Clarification around management reporting lines for the FCR need to be clarified and strengthened. Once clarified, the job description will need to be updated to reflect any changes made. Furthermore, it is essential that the FCR has an annual PDR, in line with process. The PDR provides a formal mechanism to discuss and consider training needs, progression and any issues in performing the current role and responsibilities.	Action: Review and if necessary update the Force Crime Registrar (FCR) job description, to include specific reference to management reporting lines.	Ch Insp Andrew Burton	Baker Tilly: Crime Recording (May 2014)	Closed	Ch Insp Burton met with both FCRs. Job description has been revised to reflect management reporting lines. Moving towards 1 permanent and 1 part time FCR assistant.
CH/84bf/21115	31/1/2015		Ch Insp Andrew Burton	**Recommendation**: Immediately: all forces should ensure their auditing procedures in respect of reports of serious sexual offences, including rapes, are sound.	Action: Formally agree the principles and procedures used by the Force to audit compliance with NCRS, to specifically include the auditing of reports of serious sexual offences (including rapes). Make these decisions part of Force policy and procedure for crime recording and work with the Corporate Documentation team to record and communicate them accordingly.	Ch Insp Andrew Burton	HMIC: Crime Recording making the victim count. (November 2014)	Closed	Sexual offences and rapes are included in the weekly NCRS compliance audits being conducted. The cumulative results are reported quarterly to the CAIDQ Board. Bespoke CATs audits are also conducted by the FCRs. The audit process will be easier with the introduction of NICHE when all reports will be recorded in the one system.
BT/44b1/8914	31/8/2015		DI Pete Quinn	**Recommendation** Managing victims and offenders. Effective use of intelligence at strategic and individual case levels in the management of victims and offenders. Develop an intelligence log on MEMEX. Intelligence 'drops off' PNC after 28 days. This intelligence needs to be retained. This links to the National Work serial and perpretator management.	Develop an intelligence log on MEMEX. Intelligence 'drops off' PNC after 28 days. This intelligence needs to be retained. This links to the National Work serial and perpretator management.	Supt Helen Chamberlain	HMIC: Domestic Abuse.	Closed	All successful applications for Domestic Violence Protection Orders (DVPO) are entered into MEMEX to provide corporate memory and for potential use for bad character evidence in future proceedings
BT/f4a4/8914	30/4/2015		Supt Helen Chamberlain	**Recommendation** Strategic leadership and governance. PCC and CC engage relevant partners and support sector in regular scrutiny of service.	Develop and implement a Joint Strategic Board for oversight of Domestic Abuse issues within City and County partnerships. Link to action: Develop clear multi-agency strategies in the City and the County to address DA. Identify ownership and incorporate defined objectives. Ensuring that the strategies are aligned	Supt Helen Chamberlain	HMIC: Domestic Abuse.	Closed	ACC Jupp chairs a cross authority oversight meeting including all partners and the Deputy PCC to ensure that commissioning and service are aligned and an assurance that practice will continue to align. Cross ref with BT/0488/8914
BT/0488/8914	30/4/2015		Supt Helen Chamberlain	**Recommendation** Strategic leadership and governance. A clear multi-agency strategy exists to address DA with defined objectives and ownership. Progress is monitored in regular multi-agency meetings and relevant support sector agencies have a scrutiny and challenge role.	Develop a clear multi-agency strategy to address DA, across the City and County. Identify ownership and incorporate defined objectives. Link to action: Develop and implement a Joint Strategic Board for oversight of City and County partnerships.	Supt Helen Chamberlain	HMIC: Domestic Abuse.	Closed	Action complete. See above.
BT/148d/11014	29/1/2015		John Gordon	**Recommendation** The Force should clear down old debit balances on creditor accounts to prevent creditors from being understated.	Carry out a full review of old sales ledger and purchase ledger balances during 2014 with a recommendation that approval is obtained from the PCC as required under the financial regulations for any write off.	John Gordon	Baker Tilly: Payments and Creditors	Closed	The Treasurer approved the write off of £518.51 (net) from the Purchase Ledger and £45719.75 from the sales ledger on 30/12/14. The write offs have now been processed into the ledgers.

BT/54b9/24215	30/4/2015		T/DI Justine Wilson	**Recommendation** Within three months Nottinghamshire Police should develop and commence the implementation of an action plan to improve the quality of investigations which will ensure that: (a) investigating officers and police staff are aware of the standards required, especially in relation to initial enquiries, and have the professional skills and expertise to fulfil their duties; (b) supervisors know what is expected of them in driving up standards; (c) the right resources are targeted in the right areas; and (d) there is appropriate monitoring and oversight of investigative quality.	Action: Develop and commence the implementation of an action plan to improve the quality of investigations which will ensure that: (a) investigating officers and police staff are aware of the standards required, especially in relation to initial enquiries, and have the professional skills and expertise to fulfil their duties; (b) supervisors know what is expected of them in driving up standards; (c) the right resources are targeted in the right areas; and (d) there is appropriate monitoring and oversight of investigative quality.	Det Ch Supt Helen Jebb.	HMIC: Crime Inspection 2014. Nottinghamshire Police.	Closed	Communications have previously been delivered and workpackages have now been delegated through the improving investigations project board to ensure that the actions are met in line with the restructure of the BCU CID - violence team and local CID.

Consideration	
Public/Non Public	**Public**
Report to:	**Audit and Scrutiny Panel**
Date of Meeting:	**9 June 2015**
Report of:	**The Chief Executive**
Report Author:	**Alison Fawley**
E-mail:	**alison.fawley@nottscc.gov.uk**
Other Contacts:	
Agenda Item:	**18**

PANEL WORK PLAN AND MEETING SCHEDULE

1. Purpose of the Report

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

2. Recommendations

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

3. Reasons for Recommendations

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

4. Summary of Key Points

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

5. Financial Implications and Budget Provision

5.1 None as a direct result of this report

6. Human Resources Implications

6.1 None as a direct result of this report

7. Equality Implications

7.1 None as a direct result of this report

8. Risk Management

8.1 None as a direct result of this report

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

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

10. Changes in Legislation or other Legal Considerations

10.1 None as a direct result of this report

11. Details of outcome of consultation

11.1 None as a direct result of this report

12. Appendices

12.1 Work Plan and schedule of meetings

JOINT AUDIT AND SCRUTINY PANEL WORK PLAN

	ITEM DESCRIPTION	REPORTING REQUENCY	LEAD OFFICER
9 June 2015 – 2pm			
1.	Election of Chair	Annually	OPCC
2.	**(5)** IPCC investigations, recommendations and actions (October – March)	6 monthly	Force
3.	**(36)** Force Improvement Activity Lessons Learned monitoring, IPCC lessons learned report (October - March)	6 monthly	Force
4.	**(6) & (7)** Whistle Blowing Policy and review of compliance (October – March) and Anti-Fraud and Corruption Policy - review of compliance update (October – March)	6 monthly	Force
6.	**(11)** Draft Internal Audit Plan (Annual Internal Audit Strategy and Audit Plan)	Annually	
7.	**(10) & (42)** Force, PCC and Regional Draft Annual Governance Statements	Annually	OPCC & Force
8.	**(39)** Internal Audit Annual Assurance and Performance Report	Annually	OPCC CFO
9.	**(33)** Insurance Provisions Report	Annually	OPCC CFO
10.	Police and Crime Plan		OPCC CFO
11.	Refreshed Police and Crime Plan Delivery Plan (2015-18)		OPCC CFO
12.	Verbal update on progress of Statement of Accounts		OPCC CFO
13.	Verbal update from External Audit		OPCC CFO
14.	Reserves and provisions out-turn report		OPCC CFO
15.	Introduction to new internal auditors		OPCC CFO
	Standard items:-		
	Updates on scrutiny and other reviews	As required	OPCC & Force
	PCC Update Report	Quarterly	OPCC
	HMIC Inspections and Recommendations	Every meeting	OPCC
	(12) & (40) Internal Audit Progress Report	Quarterly	OPCC CFO
	(40) Audit & Inspection Report	Quarterly	ACO Resources
8 September 2015– 2pm			
1.	**(23 & 24)** Statement of Accounts and Summary Statement of Accounts	Annually	OPCC & Force
2.	**(10 & 42)** Annual Governance Statements	Annually	OPCC & Force
3.	External Audit – Annual Governance report	Annually	OPCC CFO
4.	**(43)** Risk report on monitoring and actions for mitigation update	6 monthly	OPCC & Force

	ITEM DESCRIPTION	REPORTING REQUENCY	LEAD OFFICER
5.	**(35)** Force Governance monitoring, assurance and improvement outcomes for decision making	6 monthly	Force
6.	Regional Collaboration Update	Annually	Force
	Standard items:-		
	Updates on scrutiny and other reviews	As required	OPCC & Force
	PCC Update Report	Quarterly	OPCC
	HMIC Inspections and Recommendations	Every meeting	OPCC
	(12) & (40) Internal Audit Progress Report	Quarterly	OPCC CFO
	(40) Audit & Inspection Report	Quarterly	ACO Resources
7 December 2015 –			
1.	**(5)** IPCC investigations, recommendations and actions (April – September)	6 monthly	Force
2.	**(36)** Force Improvement Activity Lessons Learned monitoring, IPCC lessons learned report (April – September)	6 monthly	Force
3.	**(6) & (7)** Whistle Blowing Policy and review of compliance (April – September) and Anti-Fraud and Corruption Policy - review of compliance update (April – September)	6 monthly	Force & OPCC
4.	**(35)** Force Governance monitoring, assurance and improvement outcomes for decision making	6 monthly	Force
5.	External Audit Annual Audit letter	Annually	OPCC CFO
6.	Verbal update on regional assurance work	Annually	OPCC CFO
	Standard items:-		
	Updates on scrutiny and other reviews	As required	OPCC & Force
	PCC Update Report	Quarterly	OPCC
	HMIC Inspections and Recommendations	Every meeting	OPCC
	(12) & (40) Internal Audit Progress Report	Quarterly	OPCC CFO
	(40) Audit & Inspection Report	Quarterly	ACO Resources