JOINT AUDIT COMMITTEE
2nd July 2020

INTERNAL AUDIT ACTIVITY REPORT

1. PURPOSE OF REPORT

1.1 To inform the Committee of the progress of Internal Audit activity and summarise the key control issues arising for those audits undertaken for the period March 2020 to date.

2. BACKGROUND

2.1 The Committee's Terms of Reference include a requirement to receive progress reports on the activity of Internal Audit. This Activity Report attached also provides the following for members:

- Summaries of key findings;
- Recommendations analysis; and
- A performance update.

2.2 The role of Internal Audit is to provide members and managers with independent assurance on the effectiveness of controls that are in place to ensure that the Police and Crime Commissioner and Chief Constable's objectives are achieved. The work of the Team should be directed to those areas and risk which will most impact upon the Police and Crime Commissioner and Chief Constable's ability to achieve these objectives.

2.3 Upon completion of an audit, an assurance opinion is given on the soundness of the controls in place. The results of the entire audit programme of work culminate in an annual audit opinion given by the Head of Internal Audit based on the effectiveness of the framework of risk management, control and governance designed to support the achievement of organisation objectives.

2.4 This report provides members of the Committee with a summary of the Internal Audit work undertaken, together with a summary of audit opinions, during the period March 2020 to date. The audit report also summarises the key findings from those reviews where an audit opinion of "Minimal" or "Limited" Assurance has been assigned.

3. PROGRESS SUMMARY

3.1 An audit opinion is provided at the conclusion of each Internal Audit. The opinion is derived from the work undertaken during the audit and is intended to provide assurance about the internal controls in place in that system or particular activity. The audit opinions currently used are:

| Substantial | Sound framework of control in place and the controls are being consistently applied to ensure risks are managed effectively. Some minor action may be required to improve controls | Reasonable | Good framework of control in place and the majority of controls are being consistently applied to ensure risks are effectively managed. Some action may be required to improve controls. | Limited | Adequate framework of control in place but the controls are not being consistently applied to ensure the risks are managed effectively. Action is required to improve controls | Minimal | Weak framework of control in place and/or the controls are not being consistently applied to ensure the risks are managed effectively. Urgent action is required to improve controls |

3.2   Table 1 provides details of audits finalised since the previous report to the Committee in March 2020, along with details of the opinions given.

Table 1: Assurance Work Completed in the period March 2020 to date

No.	Audit Review	Assurance Opinion
1	Data Driven Insight	Limited
2	PSD Case Management (Complaints and Investigations)	Reasonable
3	Diversity and inclusion	Reasonable
4	Supplier Relationship Management	Reasonable
5	Fixed Asset Register	Reasonable

3.3   Summaries of key findings from those reviews where an audit opinion of "Minimal" or "Limited" has been assigned are provided in **Appendix 1**. Also provided at **Appendix 2** is a summary of progress against planned activity, which details the status of each review to be completed during 2020/21.   This will be considered when forming the annual audit opinion.

3.4   In addition to the audits finalised during the period, the following audits are nearing completion with draft reports issued and management comments awaited:

- Vulnerability
- Safeguarding Boards
- Missing Persons (2nd Review/Follow-up)
- Training

4.   RECOMMENDATION ANALYSIS

4.1   Recommendations are made based on the level of risk posed by the weakness identified. The current ratings used for ranking recommendations are:

High	Significant	Low
High level of risk	Significant level of risk.	Action to enhance control
Major impact on achievement of objectives	Significant impact on achievement of objectives	May impact on ability to achieve objectives

4.2   Internal Audit follow-up recommendations to ensure they have been implemented. All recommendations are followed up six months following the date the final audit report is issued to establish progress in implementing the recommendations. Any that remain outstanding following the six month follow-up review continue to be followed-up every three months until confirmation is received of implementation.

4.3   A number of follow-up reviews have commenced during 2020/21. 15 have been concluded to date, which are summarised in Table 2 below.

Table 2 – Analysis of Follow-Up Audits undertaken during 2020/21

	Follow-Up Audit	Total Recs	Implemented	Redundant/ Risk Accepted	Partially Implemented	Not Implemented
1	Application of Thrive+	8	7			1
2	Access and Usage of Intel Systems	6		1	5	
3	Independent Custody Visitors	9	7			2
4	Public Protection	6	5		1	
5	Workforce Planning	3	1			2
6	Sex Offender Management	11	7	1	3	
7	Mental Health	8	4			4
8	Bail Management	5	4		1	
9	PPU Child Conferencing	5	3		2	
10	Force Governance	4	3			1
11	Body Worn Video	11	11			
12	Fleet Telematics	7	6			1
13	IT Strategy	3				3
14	Force Response	7	2	2	1	2
15	GDPR – PCC Readiness	9	6	1	1	1
	Total	102	66	5	14	17

4.4 Table 2 identifies a 78% implementation rate (fully and partially) for those audits followed-up to date during 2020/21. The recommendations still outstanding will continue to be monitored in line with agreed processes.

4.5 A number of follow-up reviews are in progress, pending management feedback and supporting evidence confirming implementation of medium and high rated recommendations. These are detailed in *Appendix 3,* which also summarises the status of recommendations of those audits completed in 2019/20 and 2020/21 and any outstanding from previous years. Some recommendations are not yet due for follow-up, and an indication of the proposed follow-up dates is provided.

4.6 A summary of the recommendations agreed with management analysed over the last few years is provided in Table 3.

Table 3 – Breakdown of Recommendations 2017/18 to 2020/21

	Number agreed			
Rating	2017/18	2018/19	2019/20	2020/21
High	7	1	6	0
Medium	84	70	67	0
Low	52	59	55	0
Total	**143**	**130**	**128**	**0**

4.7 The current position of the high and medium rated recommendations is provided below.

Table 4 – Status of High/Medium Recommendations

	2017/18	2018/19	2019/20	2020/21	Total
Total Number	91	71	73	0	235
Total not yet due to be Followed-up/Follow-up in progress	0	0	59	0	59
Total Followed-up Concluded	91	71	14	0	176
Of Which:-					
Total Implemented	76	45	5	0	126
Total Redundant*/risk accepted	10	3	0	0	13
Total Outstanding after follow-up	5	23	9	0	37

*Redundant are recommendations that are no longer relevant or recommendations have been superseded by a later audit

4.8 Of the 176 significant recommendations followed-up since 2017/18, 126 (72%) have been implemented. A further 13 (7%) are considered redundant or superseded. 21%

remain outstanding and full details of these remain outstanding and the latest progress updates are detailed in *Appendix 4*. The latest update confirms progress is being made on the majority of these recommendations. There are however some for which management have not responded and reminders have been issued.

5.   OTHER AREAS OF ACTIVITY

5.1   In addition to planned Internal Audit work that require assurance levels to be assessed, other planned work relates to those areas of activity that support and underpin the overall concept of internal control and proactive advice work. During the period covered by this report, the other areas of activity undertaken are as follows:

- **National Fraud Initiative (NFI) –** The Cabinet Office are running the biennial National Fraud Initiative again this year. Planning for the data submission has commenced with testing being undertaken over the summer months ready for submission at various points between October and December 2020. This exercise includes payroll, pension and creditor data that is matched against other public sector organisations to identify potential fraud. Data match results will be issued approximately January 2021 for investigation.

- **Information Management** - Internal Audit continue to participate in the Force's Information Assurance Working Group and Strategic Information Management Board to consider the key information management demands of the Force. Both groups met during May to consider Information Management and GDPR matters and wider risks were escalated to the Board for consideration.

6.   PERFORMANCE

6.1   The performance of the internal audit is measured against a set of Key Performance Indicators. The KPIs are set out in Table 5 along with actuals for 2019/20. It is currently too early to usefully measure actuals to date for 2020/21 as most audits commenced have a status of work in progress. Actuals will be measured and reported to future meetings of the Committee.

Table 5 – KPI data 2019/20

KPI Description	Narrative	Annual Target	Actual 2019/20
Output Indicators:			
Audit Coverage	% of Audit Plan Delivered.	90%	84%
Report Production	Completion of Draft Audit Report within 10 working days.	95%	100%
Report Production	Completion of Final Report within 5 days of agreement of the draft.	95%	100%
Audit Recommendations	Recommendations accepted v made.	100%	100%
Quality Indicators:			
Client Satisfaction	% of Post Audit Questionnaires in which management have responded as "Very Good" or "Good".	95%	97%

6.2   Towards the end of the year, delays were experienced in completing some audits and others were postponed as a result of the Force and OPCC's response to COVID-19. This has impacted on the percentage of plan delivered. We are continuing our efforts in bringing the outstanding 2019/20 audits to their conclusion whilst commencing the plan for 2020/21. The Force's Senior Management representatives have been consulted on the 2020/21 plan and would like it to remain as it currently stands and audits to be progressed as planned. We will review this position again in the Autumn.

7. RECOMMENDATIONS

7.1 The Committee to note the material findings in the attached Internal Audit Activity Report and the performance of the Internal Audit Service.

CONTACT OFFICER	**BACKGROUND DOCUMENTS**
Name: Lynn Joyce	None
Title: Head of Internal Audit	

APPENDIX 1 - Summaries of Completed Audits with Limited or Minimal Opinion

1   Data Driven Insight

1.1   Insight Search is part of the Data Driven Insight project, which enables person, object, location and event searches from a number of force systems. This replaces the previous search system, Flints. This audit aimed to provide assurance on the arrangements for the use of Insight Search, accuracy of the data used for searches and controlling access to data through Insight Search.   Specifically, this included arrangements for data cleansing and processes for testing algorithms within the search function, how access to sensitive information in controlled, and processes adopted for real time and retrospective monitoring of usage. An overall opinion of Limited was given.

1.2   The key findings of the review are as follows:

- Stakeholder consultation throughout the audit identified concerns around usability of Insight Search in that users often receive duplicate, missing and random results from searches conducted. Data cleansing and User Acceptance Testing (UAT) processes were reviewed which identified that the following implementation issues may have contributed towards the problems faced by Insight Search users:

    o   Match & merge and de-duplication exercises were undertaken by Accenture for people, vehicle, location and telephone number data extractions that were provided by WMP. These exercises were completed to avoid duplicate records and help better quality data for Insight Search users. Whilst there was evidence of the rules and criteria that were used to complete this work, e.g. data quality checks such as missing data, misspellings etc., there was little evidence of other data cleansing exercises being completed to validate data extractions from source systems. This was partly due to the fact that the Project Manager and a key officer who led these processes have since left WMP and we were unable to obtain the relevant evidence.

    o   Controlworks was recently implemented, which replaced the previous command and control system, Oasis. As part of the ControlWorks project, issues with address matching was highlighted whereby a significant number of addresses recorded in Oasis could not be matched to the Ordinance Survey AddressBase Premium to provide accurate address details in DDI. An additional exercise was being completed at the time of audit to match these addresses using a Google Application Programming Interface (API) led by the Assistant Director of Shared Services. Whilst this work addresses the issues from the Oasis system, further work may be required to resolve any unmatched address data from the other sources systems that have been ingested into DDI.

    o   There was little evidence of how User Acceptance Testing (UAT) was completed, specifically what test scripts were used, records of tests completed and subsequent results. This was again due to the Project Manager and Subject Matter Expert who led the UAT process leaving the force. The current project team provided copies of the UAT log and the project issues log that show issues from the testing phases. An Accenture Senior Manager also provided copies of the test scripts, UAT plan and other UAT document templates that they had passed onto WMP at the time to assist the UAT process. However, we were unable to determine whether these had been used. This highlights issues regarding knowledge transfer and ensuring that proper records are maintained to evidence decisions and actions taken throughout the projects as these can have

a significant impact to users following go live and can make tracing causes of errors and issues difficult.

- Usage monitoring is currently restricted to the number of Insight Search users and the number of searches that have been conducted over a period of time. This does not provide management sufficient information to assess whether Insight Search is being used as expected and to its full capacity, that could enable assessment of the benefits of the application, i.e., whether Insight Search has resulted in quicker and more accurate searches. The Project Manager confirmed that the DDI project team are looking at ways to measure 'continuous usage' and assessing what reasonable usage would be for different roles. This will enable better assessment of whether officers and staff are using Insight Search as expected and can also help identify possible inappropriate usage through monitoring any sudden or unexplained spikes in usage by particular departments with ability to drilldown usage by individuals. The Counter Corruption Unit are currently liaising with IT & Digital to assess the DDI audit capability to monitor people's behaviour in the use of Insight Search for more advanced proactive monitoring.

- A 30 day challenge was conducted from mid-August 2019 to help increase Insight Search users and build confidence in the tool. Whilst this exercise highlighted some positive experience, it also highlighted that there is still a lack of trust and confidence in Insight Search and some improvements such as training and communications, data matching accuracy etc. are required. This complements the audit findings from interviews with a sample of high frequent Insight Search users as well as Flints users.

APPENDIX 2 – Summary of Plan Position

2019/20 Audits Completed During 2020/21

Audit	Status	Opinion / Comments
Supplier Relationship Management	Final*	Reasonable
Diversity & Inclusion	Final*	Reasonable
IT&D System-database access and administration	Final*	Minimal
Data Driven Insight	Final*	Limited
PSD Case Management (Complaints - Investigations)	Final*	Reasonable
Fixed Asset Register	Final*	Reasonable
PPU - Safeguarding Boards	Draft	Awaiting Director sign off
PPU - Vulnerability	Draft	Awaiting Director sign off
Missing Persons (2nd review)	Draft	Awaiting Management comments
Training	WIP	Draft
Vetting	WIP	Fieldwork underway
Cyber Security	WIP	Fieldwork underway

*included in 2019/20 annual opinion

2020/21 Internal Audit Plan – Status / Assurance Summary

Audit	Status	Opinion / Comments
NFI	WIP	Planning underway for 2020/21 exercise
Uplift programme / PEQF		
CTU Marauding Terrorist Attacks (MTAs)		
Terrorist Offender Management		
Commonwealth Games		
Serious Violence in under 25's (Project Guardian)	WIP	Planning stage
Domestic Abuse – serial perpetrators	WIP	Fieldwork underway
Domestic Abuse – case management		
Connect	WIP	Fieldwork underway
MyTime		
Customer Team / Portal		Request to postpone due to Covid-19 – supported by Force Executive Team
ControlWorks BAU review		
Sex Offender Management	WIP	Planning stage
Detained Property		
Violence Reduction Unit		
Complaints Appeals Process		
Commissioning		
Fraud and Cybercrime	WIP	Fieldwork underway
Use of Intelligence	WIP	Fieldwork underway

Audit	Status	Opinion / Comments
Vulnerability in calls/THRIVE+		
IT&D Service Management (Service Desk)		
Bank Reconciliation	WIP	Planning stage
Payroll		Request to postpone due to Covid-19 – supported by Force Executive Team
Force Risk Management		
Integrated Offender Management		
Environmental Strategy	WIP	Request to postpone testing until July
Estates		
Apprenticeship Levy	WIP	Fieldwork underway
Covert Funds		

APPENDIX 3 - Analysis of progress in implementing recommendations (by year)

	Good progress (>75% implemented)		Reasonable progress (>25 and <75% implemented)		Limited progress (<25% implemented)

2019/20 recommendations		Made	Implemented	Risk Accepted	Redundant/ Superseded	Not yet implemented	Not yet followed Up	Follow-up due
Mental Health	🟧	8	4			4		Aug-20
Force Response	🟧	7	2	2		3		Apr-20 - In progress
Debtors	🟩	6	5			1		Mar-20 - In progress
Duty Management System - pre-implementation review		3					3	Jan 20 - In progress
Appropriate Adults		8					8	Mar-20 - In progress
PPU – Child Protection Conferencing	🟧	5	3			2		Aug-20
Centre for Applied Automation		4					4	Mar-20 – In progress
Missing Persons		10					10	Apr-20 – Full follow-up in draft
IT Strategy	🟥	3				3		Sept 20
Asset Management – personal issued devices		6					6	May-20 – In progress
CTU Business Support		4					4	May-20 – In progress
VAT		4					4	May-20 – In progress
Management of Repeat Offenders		4					4	Jun-20
Drones		7					7	Aug-20
National Police Air Service		4					4	Jul-20
Credit Cards		5					5	Jun-20
Occupational Health		4					4	Aug-20
Disclosure		4					4	Sept-20
Crime Data Integrity		6					6	Sept-20
IT&D System-database access and administration		8					8	Nov-20
Supplier Relationship Management		3					3	Nov-20
Diversity and Inclusion		3					3	Nov-20
Data Driven Insight		5					5	Dec-20

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2019/20 recommendations		Made	Implemented	Risk Accepted	Redundant/ Superseded	Not yet implemented	Not yet followed Up	Follow-up due
PSD Case Management (Complaints and Investigations)		3					3	Dec-20
Fixed Asset Register		4					4	Dec-20
Totals for 2019/20		**128**	**14**	**2**	**0**	**13**	**99**	

Recommendations accepted during Quarter:

The risk was accepted for 2 low level recommendations in respect of Force response:

Force Response Recommendation - An approach to establish officers' availability / commitment timescales following leaving an incident should be established between Resource Allocators in Force Contact and Force Response officers to ensure officer status is accurately recorded. If officers state they are still committed after leaving an incident, this should include an approximate commitment time to indicate to the Resource Allocator when officers will be available to assist in the management of resources.

Original Management response - This featured within the Accenture review with the recommendation to build in 'task times' into incidents to assist Resource Allocators know which units should becoming available vs. those that are committed with enquiries.

Risk now accepted - Following the Accenture review, this was taken to OCB however not adopted as a project due to the introduction of ControlWorks.

Force Response Recommendation - Management should explore further whether Force Response officers could crime low level volume crimes to encourage officers to record crimes and updates as soon as possible throughout their tour of duty and provide victims with crime numbers promptly, as well as reducing the volume of calls handled by the CST. If progressed, any additional training officers would need should be considered.

Original Management Response - The benefits of Force Response Officers being able to self-generate crime numbers are multiple, ranging from better service to the victim, increased efficiency and productivity and also release of resource within the CST. Chief Superintendent Steve Graham, understanding the history of a previous request for criming at scene however this was declined by the Force Executive Team. Following this audit and also similar observations made by Accenture, CS Graham as the SRO for Smarter Responding will continue to pursue this with the support of ACC Johnson.

Risk now accepted - The request to 'crime at the scene' was rejected by the Force Executive Team (FET) due to the implementation of Connect. FET/IT were not prepared to invest in CRIMES systems changes when the system will be obsolete when Connect goes live. The length of time to contact the CST remains an issue for Force Response.

Outstanding recommendations previous years		Made	Implemented	Risk Accepted	Redundant/ Superseded	Not yet implemented	Not yet followed Up	Follow-up due
2018/19								
Public Protection Unit		6	5			1		Aug-20
Uniform allocation		5	1			4		Jun-20
GDPR Readiness Review (PCC)		9	6		1	2		Sept-20
GDPR Readiness Review (Force)		5	3			2		Jun-20
Independent Custody Visiting Scheme		9	7			2		Jul-20
Application and Usage of THRIVE+		8	7			1		Jul-20
Budgetary Control		3	2			1		Mar-20 – In progress
Expense Payments		7					7	Aug 19 - In progress (included in Appendix 4)
Onboarding		4	3			1		Jun-20
Access and Usage of Intelligence Systems		6		1		5		Jul-20
Force Governance Arrangements		4	3			1		Sept 20
SOM		11	7		1	3		Aug-20
WMP2020 Benefits Realisation		5	4			1		Jun-20
Creditors		4	3			1		Mar-20 – In progress
Fleet Telematics		7	6			1		Sept 20
Bail Management		5	4			1		Aug-20
2017/18								
Force Risk Management Arrangements		4	3			1		In progress
IR35		4					4	Aug 18 - In progress (included in Appendix 4)
Workforce Planning, Diversity & Inclusion		3	1			2		Aug-20
Totals		**109**	**65**	**1**	**2**	**30**	**11**	***details of high and medium rated recs not yet implemented are summarised in Appendix 4**

APPENDIX 4 – High/Medium Recommendations Outstanding after Follow-Up

Ref	Original Report to JAC	Audit	Recommendation	Action to be Taken to Implement Recommendation	Target Date /Responsible Officer	Latest position based on responses provided by management
1	June 2018	Workforce Demographics Diversity & Inclusion	To improve governance arrangements: - Terms of Reference should be completed and finalised for all Board and Working groups set up for workforce planning and workforce demographics. - Records of meetings should document actions agreed and confirmation that they have been completed and followed up at subsequent meetings.	Recommended action is accepted and is in the process of being implemented.	September 2018 *Assistant Director Business Partnering*	Update as at May 2020 Approved principles and TOR for a workforce alignment board which is to be chaired by ACC Matt Ward. This is focused on ensuring appropriate resourcing prioritisation against force demands. Background work and data gathering is in progress. Further follow-up due August 2020
2	June 2018	Workforce Demographics Diversity & Inclusion	When the Talent Management Framework has been developed and skills and capabilities for posts are mapped against those of the people in those posts, skills gap analysis should been completed to assess gaps between available and required resources. Plans and actions should be agreed to help address these gaps and help deliver the future workforce. This should be monitored and reported appropriately.	Agree this recommendation. This is part of the vision of how WMP will benefit from implementing a talent mgmt. framework. This project is in its early stages hence the target date in 2019.	August 2019 *Assistant Director Business Partnering*	Update as at May 2020 Talent management approach was approved by the Force Executive Team at the start of 2020, however roll out is paused due to COVID19 Further follow-up due August 2020
3	Dec 2018	Application of THRIVE+	To ensure THRIVE+ is appropriately embedded a review of training provided to staff should be undertake to promote its continued and effective use. This should include: - Seeking assurances from L&D that new recruits induction package includes THRIVE+ and if not take action to include; - Reviewing the training package being developed by the THRIVE+ Working Group to establish if it is appropriate to roll out across the Force. - Continued refresher training approaches should be considered to reinforce and further	L and D are part of the THRIVE working group and an action has been set to review and refresh all training material for THRIVE in accordance with the new policy design. It is not appropriate to design the training until policy and purpose of the use of THRIVE is clearly defined.	End Feb 2019 *Head of Force Contact*	Update as at April 2020 The new THRIVE approach incorporating it into the National Decision Making structure is signed off by Exec. Work had begun to engage corporate communications for publicity and Learning and Development for training materials for this, but on back burner given ControlWorks and now current events. Further follow-up due July 20

Ref	Original Report to JAC	Audit	Recommendation	Action to be Taken to Implement Recommendation	Target Date /Responsible Officer	Latest position based on responses provided by management
			embed THRIVE+.			
4	Sept 2018	National Uniform Managed Service	Management checks should be introduced to give assurances that processes regarding 'scale of issue' are working effectively and the Supplier invoices are accurate. These checks should include: - (1) Ensuring invoices agree to listing of orders and credits, - (2) ensuring that orders have not exceeded scales of issue, - (3) where a Superuser has placed an order that there is appropriate supporting documentation, - (4) that returns have been credited etc.	Set up a regime of dip sampling to ensure the 4 areas identified are within the scale of issue limits, documentation is in place for orders and invoice and credits are up to date and accurate.	31st October 2018 *Facilities Manager*	Update as at March 20 1) There is a CCN update in progress to align current contract pricing audit to commence after that 2) On-going, additional training to be identified as part of this process 3) Dip sampling to be undertaken 4) Initial audit identified considerable issues with DHL's processes, they are currently reviewing this for all forces. Feb 20 Further follow up issued June 20
5	Sept 2018	National Uniform Managed Service	WMP need to ensure that returns are being promptly credited to the account and challenge DHL when there are delays or missing credits. This should include reviewing returns which are listed as 'requested' to ensure they are promptly credited to individual scales of issue and WMP funds	Work already underway with Finance to identify realistic annual budget and reporting KPIs for the Uniform Board. There is a standing agenda item on the Uniform Board for financial review. Meet with Supt Dolby to discuss BAU budget as per action from last Uniform Board Project still working on project closure document which will identify any savings realised for NUMS	31st December 2018 *Facilities Manager*	Update as at March 20 Initial audit identified considerable issues with DHL's processes, they are currently reviewing this for all forces. Feb 20. Further follow up issued June 20
6	Sept 2018	National Uniform Managed Service	To improve controls around Super-user access and usage of the Dynamic Ordering platform: - (1) Facilities Management should undertake regular sampling of orders placed by Super-users to ensure there is adequate documentation to support orders either placed on behalf of other individuals or those which supersede Scales of Issue. - (2) There should be regular reviews of users with this level of access to ensure it remains appropriate. - (3) The NUMs team and DHL need to identify a	(1) To form part of the dip sampling process as per Risk 1 & 3 (2) Carry out quarterly audit of super users to ensure access remains appropriate (3) Confirm with DHL that the process to 'close' user accounts when they leave also locks the account for future super user orders. Work with DHL to resolve any gaps in the above process.	(1) 31st October 2018 (2) 31st October 2018 (3) 30th Nov 2018 *Facilities Manager*	Update as at March 20 1) On-going 2) Latest update to Super User access to the DOP completed. 6/11/19 (paperwork provided to audit) 3) DHL have as part of their improvements resolved this based on the HR data received from WMP Feb 20 Further follow up issued June 20

Ref	Original Report to JAC	Audit	Recommendation	Action to be Taken to Implement Recommendation	Target Date /Responsible Officer	Latest position based on responses provided by management
			method of removing leavers or closing their accounts on the Dynamic Ordering Platform.			
7	Dec 2018	GDPR Readiness - Force	As part of the requirements for 'Right to erasure', where an individual's request to delete or erase their information from force systems has been approved, processes should be established to ensure that where information has also been shared with 3rd parties, all parties must be informed to delete or erase the information in a timely manner.	Agreed in principle. However this may not be as simple as it sounds. 3rd parties may have legitimate reason to keep information we've shared. For example a person who we arrested but subsequently turned out to be a victim of a malicious allegation has the right to ask us to delete that record. However if as a result we passed their details to the LA as child protection issues were uncovered during the event then it may be right that the LA keep their information. We need to investigate this further as there will be some improvements to be made.	End of Dec for assessment and plan *Force Records Manager*	Update as at March 2020 The Assistant Director of Information Management confirmed that this will be implemented when Connect goes live around November 2020. Further follow up will be undertaken November 2020
8	Dec 2018	GDPR Readiness - PCC	Information Security should be covered in either a separate policy or included in existing policies. This should consider the following areas: a. Appropriate identification and security classification that should be agreed and assigned to reports and documents across the OPCC, for example, private reports presented at SPCB meetings. b. Adoption of a Home/remote working policy including the arrangements staff should adopt to ensure adequate information management and security. c. Procedures to ensure all employees (permanent and temporary staff) and third party users return all hardware assets upon termination of their employment, contract or agreement, and that this is evidenced properly (consider use of a leaver's checklist signed by the relevant line manager to confirm receipt of the returned assets/equipment.)	We are examining appropriate security measures including the GSC system and also encryption service for email. The Comms policy includes the IT provisions for working outside of the office. A leaver's checklist will be developed and implemented. A reminder has been placed in the newsletter for September 2018.	March 2019 *Head of Business Services*	Update as at June 2020 a) This is ongoing during 2020 b) To be completed Summer 2020 as part of the OPCC Recovery Plan. c) Complete d) Complete Further follow will be undertaken in Sept 2020 on point a)

Ref	Original Report to JAC	Audit	Recommendation	Action to be Taken to Implement Recommendation	Target Date /Responsible Officer	Latest position based on responses provided by management
			d. Undertaking regular office 'sweeps' or checks to help identify and address any instances where information is not kept securely. Following approval of any policy by the senior management team, these should be communicated to employees and subject to regular review.			
9	Dec 2018	GDPR Readiness - PCC	In line with GDPR requirements, a policy should be in place which sets out a clear process for determining when a DPIA should be conducted and the project or change management process includes a DPIA 'screening' process to identify projects which require a DPIA under GDPR.	Agreed	March 2019 *Head of Business Services*	<u>Update as at June 2020</u> I am unsure that a clear process is easy to achieve given the complexity and range of projects undertaken across the office. The approach we have taken is to include this subject in training, and to make teams aware of the DPIA template. In reality a DPIA is going to be quite rare in our office, but we need to be aware of it for the bigger projects as they are launched. I intend to attend VRU and Policy team meetings over the next few weeks to address this very point. Further follow up will be undertaken in Sept 2020
10	March 2019	Onboarding	In order to improve monitoring and compliance of onboarding activities: - Monitoring reports should be developed and reviewed to help identify any areas or specific officers/staff where allocated tasks are not being completed promptly. - These reports should cover all stages of the onboarding process as well as cancelled tasks and those not completed with the assigned timescales. - Once produced, these reports should be reviewed by senior management on a regular basis and appropriate actions should be agreed to help improve performance in onboarding. - Results or feedback from monitoring/exception reports should also be communicated to relevant departments as lessons learned to help improve performance in future and maximise	Monitoring process to be put into place as recommended in this report. Spot audits checks to be carried out to ensure that tasks are being completed in a timely manner.	1st February 2019 – spot check audit 1st March 2019 – monitoring reports developed *Head of Resourcing and Recruitment*	<u>Update as at March 2020</u> Oracle have announced all Taleo users must transfer to their new system Fluid Recruiting. To ensure our recruitment and on-boarding modules are correctly configured we have gained approval for a Taleo consultant to be onsite for 30 days to make all required updates so we are able to monitor and track the full life cycle of a candidate without the need for manual reporting. This work should start to take place by April 2020. Once the system has been configured correctly and the on-boarding module updated to match our needs, hiring manager training will be conducted so they are aware of their responsibilities within the system. In the meantime we have restructured our team into 3 streamlines Recruitment, Selection and On-boarding to help increase productivity, have clearer priorities and for the team to have a manageable workload. We will still have the need

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			use of the functionality within the system.			for manual reporting but with the new structure the Service Delivery Managers will be able to quality check and streamline where possible. Further follow-up due June 2020
11	March 2018	IR35	A system such as a central repository cross referenced to the assessment control record, needs to be put into place to aid the recovery of documentation supporting decision in regard to IR35.	Agreed. A single spreadsheet will be create that contains all agency/ contractor engagements, the status of their assessment and their assessment paperwork	30th March 2018 *Assistant Director Shared Services*	Follow-up issued August 18. Reminders issued. Awaiting management response
12	March 2018	IR35	The Force records retention schedule also needs to be updated to include these supporting records.	Agreed.	31st March 2018 *Assistant Director Shared Services*	Follow-up issued August 18. Reminders issued. Awaiting management response
13	March 2018	IR35	The IR35 procedure within the payroll system for making deductions should be tested to ensure it can be relied upon and is fit for purpose. Testing should also be undertaken to ensure that with the updated system configuration, the Force/PCC are able to comply with the Specified Information Order in producing monthly expenditure publications.	Agreed, configuration changes will be made and tested on the payroll system.	30th March 2018 *Assistant Director Shared Services*	Follow-up issued August 18. Reminders issued. Awaiting management response
14	March 2019	Expenses	Line Managers should be reminded of their responsibility to undertake a detailed check on expenses claimed prior to approval to ensure they are in accordance with Force Policy, they are accurate, miles appear reasonable and receipts are available where required. They should also be reminded and encouraged not to approve items through the expenses system that should be processed through the Procurement system.	Agreed	28th Feb 2019 *Assistant Director Shared Services*	Follow-up issued August 19. Reminders issued. Awaiting management response

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15	March 2019	Expenses	The current mileage rates for leased cars should be amended promptly and any underpayments should be corrected. A routine process should be established whereby HMRC mileage rates are reviewed regularly and any changes required must be entered into Oracle Fusion promptly and independently verified.	Agreed	4th Feb 2019 *Assistant Director Shared Services*	Follow-up issued August 19. Reminders issued. Awaiting management response
16	March 2019	Expenses	To ensure all claims are progressed according to policy a suite of reports, or a performance management dashboard prompting review and investigation by management, should be introduced. This should include: • analysis of claims within each status category, e.g. ready for payment, manager requested more information, pending expense auditor approval etc.; and • the age range of claims within each status category. Management should maintain oversight of this information to ensure claims are being reviewed and queries are resolved promptly. If any of the status categories available within the system, such as 'Manager requested more information,' Management should investigate the possibility of these categories being removed from the options list within the system.	Agreed	28th Feb 2019 *Assistant Director Shared Services*	Follow-up issued August 19. Reminders issued. Awaiting management response
17	March 2019	Expenses	To prevent duplicate expense claims being paid: - Line Managers need to be reminded of their responsibility to review and investigate the on screen prompts of recent similar events prior to authorising an expense. - Investigate the possibility of revising the criteria for the claims selected for expense audit to include potential duplicates. If included, this would negate the need for a separate duplicate	Agreed	31st March 2019 *Assistant Director Shared Services*	Follow-up issued August 19. Reminders issued. Awaiting management response

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			report to be produced and investigated. - Until such time the audit criteria can be amended, Payroll must produce and review the duplicate payment report on a frequent basis (at least weekly) and take action to recover any overpayments.			
18	March 2019	Expenses	Vacation rules must be amended to ensure compliance with financial delegation rules (as detailed on My service Portal) and to prevent delegation being applied multiple times in the approver's absence.	Agreed	28th Feb 2019 *Assistant Director Shared Services*	Follow-up issued August 19. Reminders issued. Awaiting management response
19	June 2019	WMP2020 Benefits Realisation	Post implementation reviews should be undertaken for all projects to help ensure that benefit owners understand the benefits and have adopted appropriate mechanisms for measuring benefits realisation	There is an acknowledgement that no PIR's have been formally undertaken, based on the PIR process launched by the PMO in 2018. The PIR approach needs to undergo a full review and the portfolio be clear of the purpose of the PIR's, because these will not just be aligned to benefit realisation, but will also look at how the change embedded/ has been received (Change Managers responsibility); that outstanding project risks and actions are closed off/ transferred to departmental risk registers (PMO Manager); and that the changes to the operating model are working effectively (Business Architecture Manager). Discussions around the PIR approach will be held during the 'Beyond 2020' workshop, which will look at the Force's change and transformational portfolio and required capabilities post 2020, which will take into account a CI/effectiveness programme. This should re-focus and re-purpose post implementation reviews moving forward.	Ongoing *Benefits Realisation Manager*	Update as at March 2020 There hasn't been a formal update on the PIR process since the last checkpoint (Nov 19). However (not to replace PIR but to ensure benefits are delivered /maintained) as part of the formal transfer process from project to business as usual, post implementation benefit reviews are conducted between the benefits manager and the business. For example: (1) CJS Redesign was reviewed monthly with the Head of CJS to ensure that financial benefits were delivered and have now moved to quarterly reviews for non-financial (performance improvements). (2) ANPR will be reviewed quarterly as part of a post implementation governance meeting. Further follow-up will be undertaken in June to determine latest position.

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20	June 2019	Fleet Telematics	Following the DSB decision not to develop a Driver Behaviour Governance Panel in April 2019, alternative governance arrangements should be determined and adopted to: - Provide an escalation process where Supervisors and/or Appropriate Authorities are not taking the required action when their officers are receiving multiple scores in excess of 1000 points; and - Provide an escalation process where officer driving performance is not improved following actions taken by the Supervisors/Appropriate Authorities. Arrangements for reporting on common themes of driver behaviour issues and the efficiency and effectiveness of utilising vehicles identified when the revised suite of reports are developed should also be agreed and adopted to strengthen the monitoring of driver behaviour and vehicle utilisation.	The process map V011 outlines the steps to manage performance by supervisor and/or Appropriate Authority. The Chairperson of DSB, through a governance group, will assist in the guidance route necessary to improve driver behaviour. The responsibilities of the board/group should be set out by the chair. The process of escalation is within the policy. Reports to influence decision making are in the process of being updated/summarised.	April 2020 *Fleet Manager*	Update as at June 2020 The utilisation report is still problematic and not to a satisfactory standard. It maybe we start again with this detailed reporting method. This was a report that WMP requested and has not been charged for. I have allowed them to continue working on the report until a) We get an easily usable report or b) An equivalent report that can assist However we still have the original report as per the contract which is used. Internal Audit Comment The Fleet Manager confirmed that the Vehicle User Group and the Driver Standard Board have now been combined. No meetings have been held since our previous review. The next meeting is scheduled for the 9th June 2020. The Fleet Manager has provided a statement from the Supplier who has confirmed that they are continuing to work on the changes/developments to the current utilisation report as requested by the Fleet Manager Due to the ongoing work on the utilisation report coupled with no evidence as yet of how driver behaviour will be escalated to the board the recommendation is considered OPEN. Further follow-up due Sept 2020
21	Sept 2019	PPU Child conferencing	Agreements/protocols should be developed with Local Authorities (LA) that set out both LA and WMPs roles and responsibilities in relation to the type and how much information should be shared via the police reports and police attendance at the Initial and Review conference meetings. This would help standardise processes for all WMP teams to follow.	This action and status is accepted and features as a key action in the PPUS ICPC delivery plan which has been developed as a result of this review. This is covered in action 1.1 of the ICPC delivery plan. The new PPU Workforce structure due to be introduced from 1st June 2020 includes a 'development and training group' and Organisational learning group'. The network lead for the ICPC attenders	January 2020 *Detective Superintendent with responsibility for child protection*	Update as at May 2020 The information required for provision to case conferences is outlined within 'Working together to Safeguard Children 2018', which states that practitioners should contribute to the information their agency provides ahead of the conference, setting out the nature of the organisation's or agency's involvement with the child and family. Guidance on the required content of the report is also outlined within Sections 8.31 and 8.32 of the draft CA policy including the requirement to confirm attendance, clarity on relationships within the report and the type of information

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				will be linked into both groups for governance of learning and development relevant to this function, with an overall DCI lead supporting this activity.		required as per the points raised in the audit. The CA Policy is not currently available to view on the Force Intranet and is due to be relaunched pending FET approval, following which this will be available to staff and supervision responsible for this work. The audit found that there was an additional report being completed for Solihull LA outside of the standard agreed format. This was the only LA requiring an additional report, and the completion of this report has now ceased to bring this process in line with the information provided to other LA's. The consistency of reports is addressed within the updates for recommendation 3. <u>Internal Audit comment</u> We have been provided with a copy of the Child Abuse Policy which covers responsibilities in relation to providing information for and attending the conferences. Following approval of the policy by FET, relevant sections should be shared and agreed with the Local Authority to ensure a consistent approach with all. Further follow up due August 2020.
22	Sept 2019	PPU Child conferencing	To improve timescales for providing police reports to meetings: - WMP should agree timescales with all LAs for submitting invites to allow sufficient time for WMP officers to compile the police reports and submit them 3 working days before the conference. To enable this, an assessment should be undertaken to establish the reasonable length of time required to compile the reports. - Performance regarding timings of submission of police reports and attendance at conferences should be monitored and reasons for not meeting the requirements should be analysed to develop mechanisms to increase timely reports and attendance (e.g., physical movement of officers or	Management response: This action and status is accepted and features as a key action in the PPU'S ICPC delivery plan which has been developed as a result of this review. This is covered in actions 1.1 and 2.1 of the ICPC delivery plan. The new PPU Workforce structure due to be introduced from 1st June 2020 includes a 'development and training group' and Organisational learning group'. The network lead for the ICPC attenders will be linked into both groups for governance of learning and development relevant to this function, with an overall	Sept 2019 *Detective Superintendent with responsibility for child protection*	<u>Update provided May 2020</u> The audit provided some data on timings of report submissions in comparison to LA invites, however the table showed that the timing of invites can vary significantly and indicated that timescales for report submission have been missed partly due to WMP not being able to meet demand and LAs not sending the invites within sufficient time for the police reports to be compiled. There is no clear correlation between the two figures and a strong argument for a specified invitation lead time is difficult to formulate where the causes of report provision are unclear and could be argued as a performance issue within WMP. The audit for example highlights a lack of consistency in report content and completion, which in turn affects performance of report timings. In order to improve the

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			sharing staff resources across teams, or using Skype or conference calls instead of physical attendance.)	DCI lead supporting this activity.		timeliness of report provision continued use in some form in the future. In addition the updates to recommendation 4 provides a feedback mechanism for quality and performance between WMP and the local authority. Internal Audit comment: Based on the additional notes and evidence provided by management to support this update, we are satisfied that the performance tracker that has been adopted to monitor ICPC performance includes the date of invite from the LA and date of the conference which will enable the Force to monitor timing of invites and the allowable time for reports to be submitted prior to the conference in line with the CA policy. We acknowledge that monitoring has currently been put on hold due to Covid-19 and therefore we will seek a further update in 3 months to assess outcomes of the monitoring taking place.
23	March 2019	Access & Usage of intel Systems	It must be ensured that all training records maintained by Learning and Development are fully up to date with the training given in respect of Force systems. Access to systems must not be granted unless there is an appropriate training record for that individual confirmed by Learning and Development.	1 – Assistant Director – Information Management The first action affects Flints, IMS, ICIS and Oasis whereby the appropriate training and checks by IT&D appear to be completed but the L&D records are incomplete. L&D are currently under a review. This issue will be included within that review. The second action refers to Corvus. Where the Information Asset Owner has been approving access without training. There is a new SLT in Intel (owners)and the wh ole access, user group and setup is to be reviewed. What can be improved will be but as the systems are due to be replaced in 2019 some changes may be deferred.	1. October 2019 2. End June 2019 *Assistant Director Information Management* *Assistant Director Shared Services*	Update provided April 2020 Information Management (IM) is bidding to be system admin for Connect. This is nearing completion. Once the central team is in place group membership will be better managed. At this time a review of Corvus users has been conducted by Intel and Assistant Director IM and corrections made. Further follow-up due July 2020 Awaiting response from Assistant Director Shared Services on point 2

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				2 – Assistant Director - Shared Services Agreed that they will:- -work with Intel to do a full review of who has access to what using HCM data (not Taleo as this doesn't capture movers or leavers). - provide the resource and technology (if agreed by IT&D) to create a Force wide portal to track user access to all systems. This will ensure all checks are being done at the right time. -work with IT&D to enable Shared Services to see what access everyone across the Force has – then when someone moves or leaves we can trigger actions on this.		
24	March 2019	Access & Usage of intel Systems	There should be regular reviews of users and their access levels for systems within the Force to ensure that levels are appropriate, users still require access and that leavers are removed from the system promptly.	The majority of Corvus groups have an annual refresher process built in. Each user is automatically emailed and asked to confirm via their supervisor that they still need access. Those that don't are automatically removed from the group. Leavers are removed from AD automatically every 15 minutes using an automated process between HR and IT&D systems. Information Management teams are currently reviewing the lists and planning how to start a regular review process. Flints is to be decommissioned within the next quarter – most users are now using the new Insight system. ICIS and IMS are due to be decommissioned this year. Oasis is due to be replaced in September 2019 at which time it will be	Some is complete. End 2019. *Assistant Director Information Management*	Update provided April 2020 The Assistant Director Information Management (IM) completed a Corvus review as a pilot and has now passed the work to PNC Bureau. An annual plan is being made to cover the various systems. When/if the sys admin team come to IM this work can be increased. There has been a rethink on the approach and the Head of Information Management is about to launch a re-energised Information Asset Owner (IAO) process. It's been via Strategic Information Management Board (SIMB). The paper suggested starting with fewer systems as well as focussing on new systems. It also introduced a shared model for the big systems such as Connect which straddle multiple portfolios. Templates have been drafted for IAO meeting agendas and for their annual reports. (Templates were provided to Internal Audit). There is a standing agenda item for a review of the membership groups.

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				decommissioned. KJ Will seek to confirm what scope there is within replacement systems to aid in this addressing this recommendation. There will also be bids for resources to enable this to be business as usual in new systems.		A review of progress against this new arrangement will be undertaken in 3 months-time. Further follow-up due July 2020
25	March 2019	Access & Usage of intel Systems	Access to IMS, Flints and ICIS should be reviewed to ensure the systems are appropriately restricted to individuals that require access for their work	The use of dynamic groups to populate the user list is a robust compromise designed to balance workload against risk. The group membership is dynamic in that if a person moves department their group is automatically updated to their new position. This adds a level of security and is faster and less open to failure than including people on an individual basis. As in item 2 the Information Management department is reviewing how it can implement a central review process to support this recommendation	April 2019 *Assistant Director Information Management*	Update provided April 2020 As above – an annual schedule is being completed. There has been a rethink on the approach and the Head of Information Management is about to launch a re-energised Information Asset Owner (IAO) process. It's been via Strategic Information Management Board (SIMB). The paper suggested starting with fewer systems as well as focussing on new systems. It also introduced a shared model for the big systems such as Connect which straddle multiple portfolios. Templates have been drafted for IAO meeting agendas and for their annual reports. (Templates were provided to Internal Audit). There is a standing agenda item for a review of the membership groups. Further follow-up due July 2020
26	March 2019	Access & Usage of intel Systems	There should be a review of the 'Joiners, Movers and Leavers' policy to identify a more robust procedure for capturing asset and access levels held by individuals when moving role. If the policy remains in its present state then it should be ensured that Shared Services are undertaking control checks as required by the policy.	1 – Assistant Director - Information Management There is an automated deletion process that removes computer access for a person leaving the force that runs every 15 minutes. This removes access to Corvus at the same time. 2 – Assistant Director - Shared Services Agreed that they will:- -work with Intel to do a full review of who has access to what using HCM data (not Taleo as this doesn't capture movers or leavers). -will provide the resource and technology (if agreed by IT&D) to create	End June 2019 *Assistant Director Information Management* *Assistant Director Shared Services*	Update provided April 2020 All managers now have access to My Time and are expected to check details regularly. The user groups are not yet included. There has been a delay with My Time due to technical issues so this part of the work is behind schedule Further follow-up due July 2020 Awaiting response from Assistant Director Shared Services on point 2

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				a Force wide portal to track user access to all systems. This will ensure all checks are being done at the right time. -will work with IT&D to enable my team to see what access everyone across the Force has – then when someone moves or leaves we can trigger actions on this.		
27	March 2019	Access & Usage of intel Systems	To improve system administration controls: • There should be segregation in duties in regard to system administration, in particular if these duties are given to individuals outside of the IT and Digital Department. • The number of system administrators should be reviewed and reduced as far as possible to ensure this higher level access to the system is appropriately restricted and controlled. • Should changes to the assignment of system admin roles be agreed, there should be a documented risk assessment completed.	This will form part of the Information Management review of what dip sampling processes can be provided. The work is underway and Corvus groups have been checked so far.	April 2019 *Assistant Director Information Management*	Update provided April 2020 The system admin (outside IT&D) is planned to be centralised in IM. This is starting with Connect. PNC Bureau already manage PNC users and audit PNC and PND. Connect system admin is still due to come into IM but that project has been delayed till later this year. Further follow-up due July 2020
28	Sept 2019	Mental Health	To ensure officers and staff are suitably trained on mental health issues that may be relevant to their role: - Determine and communicate which police staff roles are required to complete the 'Mental Health and the Police' NCALT training package. - Officers and staff should be reminded to complete the 'Mental Health and the Police' NCALT package; and A mechanism should be established to monitor completion rates and, if necessary, an escalation route if compliance rates do not improve.	A one day training programme in relation to mental health and the police was delivered to operational officers / PCSOs by L&D supported by Triage and specialist staff in 2017. This has been further supported by bespoke inputs to teams across the force when there have been identified training needs. Delivery of these inputs is typically by MH Triage staff. It is recognised that there is a turnover of staff within roles and a need to refresh training however the risk suggested is mitigated to a point as the significant number of officers filling vacancies in front line / public facing roles are student officers who, as identified, receive training in MH prior to deployment.	Progress update 28th June 2019 & 9th August 2019 Completion Sept 2019 *Superintendent with responsibility for mental health*	Update provided May 2020 NPU Commanders and relevant Heads of Department have been informed of the requirement for their front line officers to complete the NCALT package in addition to MH Steering Groups SPOC's also raising this locally. It has been recognised further training to support the NCALT package is more beneficial for front line officers and staff. 50 Tactical Advisors (Tac Ads) have received further mental health training to support colleagues which also relates to an HMICFRS action. Internal Audit reviewed the list of Mental Health Tac Ads listed on the Force Response intranet page, which also included Tac Ads in Force Contact and Custody. Learning & Development are to provide an up to date list of completion rates for the NCALT package. However due to some mandatory NCALT's over the last 6 months this won't have been a priority for many departments. It is our view that the guidance documents and Tac Ads are a more useful

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				It has however been identified during the current review of the MH policy that improving the knowledge and understanding of all staff in public facing roles or roles that bring them into contact with partners managing Mental Health services is critical to providing a service focused on the dignity, safety and rights of the public in relation to mental health matters. As part of the current policy review a proposal for a communications strategy, training programme and engagement event with partners is being drafted for FET consideration. The mandated completion of the NCalt package Mental Health and The Police has been circulated to relevant SLTs for local governance / management and results reported back to the MH steering group next VIB.		addition than pushing this further. This information is to be reviewed at the next MH Steering Group to determine any further actions. Further follow up due August 2020
29	Sept 2019	Mental Health	Additional guidance and training should be given to officers and Force Contact on health services powers under the Mental Health Act and care responsibilities to enable calls for service to be challenged.	As above the review of MH policy has resulted in a draft 'offer' to support Contact staff in understanding legislation and responsibilities of partners. This has been shared in draft with Contact SLT and is being developed to ensure bespoke needs of the department are addressed. This will be further supported by proposed training programme subject to approval by FET. Due to other training needs, it will not be possible for force contact staff to undergo formal training this year and therefore the route being taken is more around guidance, support and improved access to supporting documentation.	4/06/2019 *Superintendent with responsibility for mental health*	Update provided May 2020 Due to ControlWorks there has been no available time to provide additional training to Force Contact. However the guidance documents published on the intranet enable staff to challenge when needed. Mental Health Tac Ads trained across the Force also include within Force Contact so staff can discuss issues with these advisors and the Force SME has been assured from Force Contact that staff are challenging calls when needed. A briefing note has been produced as a supplementary guidance to force policy to provide additional guidance to Force Contact, which has been confirmed by Internal Audit with reference made to crisis & welfare situations. Supt Bridges confirmed that they have seen examples of declines logs but the log numbers have not been retained so no information could be provided for Internal Audit to review. Data will continue to be gathered to assess the push back and ACC Meir is also looking at governance structures with

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						partners and Tac Ads to influence strategy and behaviours. Specifically relating to Section 136, Birmingham partners are struggling and legislation being appropriately applied it is increasing the demand with partners. This is then having implications on the CCG's and the resilience beds available. WMP guidance documents have been shared so partners are aware of the shift in responses. More work is to be undertaken on investigations relating crimes being committed in a clinical setting on colleagues and WMP's processes and whether they are appropriate in achieving the outcomes and making sure officers don't pre-empt decisions that the courts or CPS will decide. Further follow up due August 2020
30	Dec 2019	IT Strategy	Following completion of the new Synergy strategy, the strategy and any supporting plans should be formally approved by the Force Executive Team. Thereafter, all documents should be reviewed and updated on at least an annual basis as part of Governance arrangements to help ensure that the strategy is kept up to date and relevant. Following approval of the Synergy strategy, it should be communicated to all relevant stakeholders. Decisions therefore should be made around what internal communication methods will be used and who the target audience will be. As a corporate strategy, all WMP employees should be made aware of the purpose and expected outcomes of the strategy.	These recommended actions are part of standard practice and will automatically be completed as part of the process.	Dec 2019 *Assistant Director IT&D*	<u>Update provided June 2020</u> This work was drafted and then paused in line with the work commissioned by the CC to produce a new post 2020 force wide strategy. Now that the force wide strategy is published, the IT&D strategy will be aligned and issued. Further follow-up due Sept 2020
31	Dec 2019	IT Strategy	The new IT strategy/vision should include clear milestones, performance targets and measures that will help assess whether the objectives have been met and outcomes achieved in future. An action plan would be beneficial to clearly set these out together with timescales for completion. These actions should also be reviewed and updated periodically via the TDA/ IT&D SLT with any updates/amendments being approved	These recommendations are part of standard practice and would be automatically included as part of any strategy – there is nothing new here	Dec 2019 – ongoing *Assistant Director IT&D*	<u>Update provided June 2020</u> This work was drafted and then paused in line with the work commissioned by the CC to produce a new post 2020 force wide strategy. Now that the force wide strategy is published, the IT&D strategy will be aligned and issued. Further follow-up due Sept 2020

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			appropriately. Any outstanding recommendations and measurable outcomes from the existing Infrastructure strategy and Technical Blueprint should be reviewed with decisions made on whether to carry them forward into the new Synergy Strategy, and thereby incorporate them into any supporting plans. Decisions on any recommendations from the current strategy that are considered as no longer applicable should be documented.			
32	Dec 2019	IT Strategy	The Technical Design Authority (TDA)/ IT&D SLT should periodically assess the overall progress of implementing the new strategy and any supporting plans when completed. Remedial actions should then be agreed where actions from the strategic plans have not been completed or desired outcomes/targets not achieved.	Tis is standard practice and will be automatically completed	Dec 2019 *Assistant Director IT&D*	<u>Update provided June 2020</u> This work was drafted and then paused in line with the work commissioned by the CC to produce a new post 2020 force wide strategy. Now that the force wide strategy is published, the IT&D strategy will be aligned and issued. Further follow-up due Sept 2020
33	Sept 2019	Force Response	Prior to implementation of the new systems it should be established how affiliation processes will operate and be recorded going forward and any revision to existing arrangements should be communicated to officers and Force Contact to ensure there is a consistent approach to provide status updates, with the Airwave policy also updated. Force Response Management should also consider and define the reporting requirements within the new systems so accurate and reliable information can be obtained to review compliance rates for officers affiliating from the point the tour of duty commences, and status updates are being provided throughout tours of duty. It should also be ensured that when officers provide status updates via soft keys, that they will be shown in the new system in real time to the Resource Allocators (RA's) to reduce the	WMP is currently driving the BOBO concept (Book On, Book Off) and we are receiving weekly management data. We are improving in this area which impacts on affiliation. We are currently piloting the use of soft keys on D Unit BE however early indication is that the data coming back from the soft keys is not necessarily correlating with the information shown on the Oasis Log. This also links into Ref. 2 where the Accenture Telematics solution would contribute massively to Force Response efficiency and productivity via the Resource Allocator.	Accenture IT solution dependent, review progress on 01/09/2019 *Head of Force Response*	<u>Update provided January 2020</u> The use of soft keys is still an issue with FR officers despite concentrated work within this area. Again, the introduction of Control Works will mitigate against this in terms of the technological advances in being able to track officers. Further follow-up underway

Ref	Original Report to JAC	Audit	Recommendation	Action to be Taken to Implement Recommendation	Target Date /Responsible Officer	Latest position based on responses provided by management
			requirement for RA's to request verbal status updates from officers, which will also encourage officers to use soft keys for updates.			
34	Sept 2019	Force Response	To improve performance and usage of mobility devices and apps: • Management should review the mobility data that is now available, and establish benchmarks/monitoring arrangements to set the expectations of usage. • Any deviations from the benchmarks established, should be investigated further and shared with the relevant Inspector to understand the reasons for the deviations and determine what actions should be undertaken. Management should also establish the reasons for non-secure and non-operational devices and also the completion of the PNC NCALT courses and the download of the app onto the devices, and encourage usage.	WMP have traditionally been data rich however information poor. Accenture have acknowledged that there is a major absence of individual officer performance data and that any individual officer statistics need to be manually searched. Force Response have benchmarked 'what good looks like' through dip sampling a top performing officer vs. a lesser performing officer thus providing a starting point towards Sergeant to PC performance conversations. Accenture have stated that they can automise this data within an App available to each officer. This will have a huge impact on managing individual officer performance. A full review of PNC app usage has been conducted following the presentation of these audit results and we are now confident that non-users are absent from work (e.g. maternity or long-term sickness).	Accenture IT solution dependent, review progress on 01/09/2019 *Head of Force Response*	Update provided January 2020 OCB authorised scoping for the introduction of a Performance App for FR officers. This scoping is on-going. Further follow-up underway