THE POLICE AND CRIME COMMISSIONER FOR NORTH YORKSHIRE POLICE AND CHIEF CONSTABLE OF NORTH YORKSHIRE POLICE

Follow Up

REVISED FINAL

Internal Audit Follow up report: 7.15/16

31 May 2016



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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. Therefore, the most that the internal audit service can provide is reasonable assurance that there are no major weaknesses in the risk management, governance and control processes reviewed within this assignment. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

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We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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1 EXECUTIVE SUMMARY

1.1 Introduction

As part of the approved internal audit periodic plan for 2015/16 we have undertaken a review to follow up progress made by the organisation to implement the previously agreed management actions.

Our review focused on the following closed amber and red HMIC risks:

- Risk 1 Quality of Investigations fails to meet the standard expected for victims and the Criminal Justice System, and could lead to significant reputational damage for the force.
- Risk 2 Partnership working may be inhibited.
- Risk 3 Inconsistent Integrated Offender Management (IOM) Services across NYP.
- Risk 4 Quality of the service received does not meet the victims' needs.
- Risk 5 Opportunities will be missed to provide victims and members of the public with crime prevention advice.
- Risk 6 Officer knowledge in relation to Organised Crime Groups (OCGs) and disruption of.
- Risk 7 NYP will not disseminate information and share good practice from its problem solving database throughout the force, to local authorities and other relevant organisations, thus reducing the enhancement of future prevention initiatives.
- Risk 8 Potential for adverse publicity in failing to meet legal requirements in respect of disclosure.

The eight management actions considered in this review comprised of two 'red' and six 'amber'. Concentrating on the actions classified as 'red' and 'amber', the focus of this review was, to provide assurance that all actions previously made have been adequately implemented.

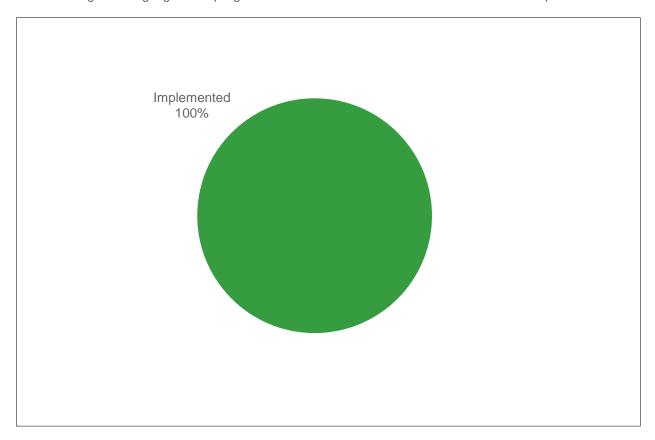
1.2 Conclusion

Taking account of the issues identified in the remainder of the report and in line with our definitions set out in Appendix A, in our opinion the Police and Crime Commissioner for North Yorkshire and Chief Constable of North Yorkshire Police has demonstrated good progress in implementing agreed management actions.

1.3 Action Tracking

Action tracking enhances an organisation's risk management and governance processes. It provides management with a method to record the implementation status of actions made by assurance providers, whilst allowing the Audit Committee to monitor actions taken by management.

The following chart highlights the progress made on the actions that have been followed up.

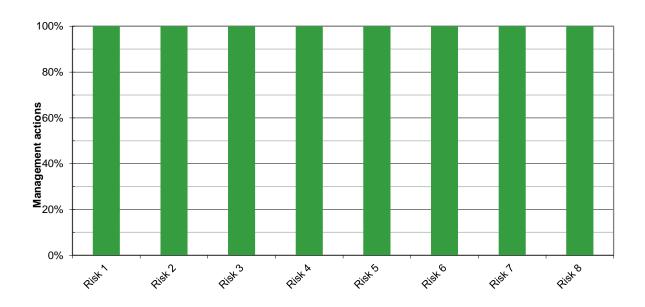


As part of our review we have undertaken testing to verify that the status of management actions, as reported to the Joint Corporate Risk Group via the internal action tracking process via ARM, is accurate for the following management actions. We have verified that the status of implementation of management actions, as reported to the Joint Corporate Risk Group via the internal action tracking process ARM, is accurate for the following risks:

- Risk 1- Quality of Investigations fails to meet the standard expected for victims and the Criminal Justice System, and could lead to significant reputational damage for the force.
- Risk 2- Partnership working may be inhibited.
- Risk 3- Inconsistent Integrated Offender Management (IOM) Services across NYP.
- Risk 4- Quality of the service received does not meet the victims' needs.
- Risk 5- Opportunities will be missed to provide victims and members of the public with crime prevention advice.
- Risk 6- Officer knowledge in relation to Organised Crime Groups (OCGs) and disruption of.

- Risk 7- NYP will not disseminate information and share good practice from its problem solving database throughout
 the force, to local authorities and other relevant organisations, thus reducing the enhancement of future prevention
 initiatives.
- Risk 8- Potential for adverse publicity in failing to meet legal requirements in respect of disclosure.

The following graph highlights the number and categories of actions issues and progress made to date:



Risks Followed Up

■ Implemented ■ Implementation Ongoing / Not Implemented ■ Superseded / Not Yet Due

1.4 Progress on Actions

Implementation status by risk	Number		Status of Manage	ement Actions	
	of actions agreed	Implemented (1)	Implementation ongoing (2)	Not implemented (3)	Confirmation as completed or no longer necessary (1)+(4)
Risk 1- Quality of Investigations fails to meet the standard expected for victims and the Criminal Justice System, and could lead to significant reputational damage for the force.	1	1	-	-	1
Risk 2- Partnership working may be inhibited.	1	1	-	-	1
Risk 3- Inconsistent Integrated Offender Management (IOM) Services across NYP.	1	1	-	-	1
Risk 4- Quality of the service received does not meet the victims' needs.	1	1	-	-	1
Risk 5- Opportunities will be missed to provide victims and members of the public with crime prevention advice.	1	1	-	-	1
Risk 6- Officer knowledge in relation to Organised Crime Groups (OCGs) and disruption of.	1	1	-	-	1
Risk 7- NYP will not disseminate information and share good practice from its problem solving database throughout the force, to local authorities and other relevant organisations, thus reducing the enhancement of future prevention initiatives.	1	1	-	-	1
Risk 8- Potential for adverse publicity in failing to meet legal requirements in respect of disclosure.	1	1	-	-	1
Total	8 100%	8 100%	-	-	8 100%

Implementation status by	Number	Status of Management Actions			
management action priority	of actions agreed	Implemented (1)	Implementation ongoing (2)	Not implemented (3)	Confirmation as completed or no longer necessary (1)+(4)
Red	2	2	-	-	2
Amber	6	6	-	-	6
Total	8 100%	8 100 %	-	-	8 100%

2 FINDINGS AND MANAGEMENT ACTIONS

2	FINDINGS AND MANAGEMENT ACTIONS		
As al	As all eight recommendations have been implemented, we have no revised or reiterated any recommendations.		

APPENDIX A: DEFINITIONS FOR PROGRESS MADE

The following opinions are given on the progress made in implementing actions. This opinion relates solely to the implementation of those actions followed up and not does not reflect an opinion on the entire control environment

Progress in implementing actions	Overall number of actions fully implemented	Consideration of high actions	Consideration of medium actions	Consideration of low actions
Good	75%	None outstanding	None outstanding	All low actions outstanding are in the process of being implemented
Reasonable	51 – 75%	None outstanding	75% of medium actions made are in the process of being implemented	75% of low actions made are in the process of being implemented
Little	30 – 50	All high actions outstanding are in the process of being implemented	50% of medium actions made are in the process of being implemented	50% of low actions made are in the process of being implemented
Poor	< 30%	Unsatisfactory progress has been made to implement high actions	Unsatisfactory progress has been made to implement medium actions	Unsatisfactory progress has been made to implement low actions

APPENDIX B: SCOPE

Scope of the review

Our review focused on the following closed amber and red HMIC risks:

- Quality of Investigations fails to meet the standard expected for victims and the Criminal Justice System, and could lead to significant reputational damage for the force.
- · Partnership working may be inhibited.
- Inconsistent Integrated Offender Management (IOM) Services across NYP.
- Quality of the service received does not meet the victims' needs.
- Opportunities will be missed to provide victims and members of the public with crime prevention advice.
- Officer knowledge in relation to Organised Crime Groups (OCGs) and disruption of.
- NYP will not disseminate information and share good practice from its problem solving database throughout the
 force, to local authorities and other relevant organisations, thus reducing the enhancement of future prevention
 initiatives.
- Potential for adverse publicity in failing to meet legal requirements in respect of disclosure.

Limitations to the scope of the audit assignment

- The review only covered audit recommendations previously made, and we have not reviewed the whole control
 framework of the areas listed above. Therefore we have not provided assurance on the entire risk and control
 framework.
- We have only considered closed amber/red risks and have not considered green rated risks.
- We have not reviewed the Follow Up undertaken by WYPA which considered closed risks between February and October 2015.
- We have ascertained the status of recommendations through discussion with management and review of the recommendation tracking.
- Where the indication is that recommendations have been implemented, we have undertaken limited testing to confirm this.
- Where testing has been undertaken, our samples have been selected over the period since actions were implemented or controls enhanced.
- Our work does not provide any guarantee or absolute assurance against material and/or other errors, loss or fraud.

APPENDIX C: ACTIONS COMPLETED

From the testing conducted during this review we have found the following actions to have been fully implemented and are now closed:

Risk	Management action		
Risk 1- Quality of Investigations fails to meet the standard expected for victims and the Criminal Justice System, and could lead to significant reputational damage for the force.	Within 3 months NY Police should develop and commence 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 standard required and have the professional skills and expertise to fulfil their duties; b) supervisors know what is expected of them in driving up standards; and c) there is appropriate monitoring and oversight of investigative quality		
Risk 2- Partnership working may be inhibited.	Information Sharing Agreement		
Risk 3- Inconsistent Integrated Offender Management (IOM) Services across NYP.	Within 3 months, North Yorkshire should review the operation and resourcing of the integrated offender management scheme and by March 2015 should develop and have commenced the implementation of an action plan to improve performance against prolific offenders.		
Risk 4- Quality of the service received does not meet the victims' needs.	Develop and commence implementation of an action plan to improve the quality of victim service and contact.		
Risk 5- Opportunities will be missed to provide victims and members of the public with crime prevention advice.	Not later than 1 September 2015, all forces should provide and periodically refresh basic crime prevention training for officers and staff who come into contact with the public.		
Risk 6- Officer knowledge in relation to Organised Crime Groups (OCGs) and disruption of.	Within three months North Yorkshire Police should ensure that there is clarity in relation to the management of tackling of organised crime groups (OCGs). The force should take steps to communicate to relevant staff, especially within Neighbourhood team, the tasks and responsibilities they need to perform in order to disrupt and dismantle the group's criminal activity.		
Risk 7- NYP will not disseminate information and share good practice from its problem solving database throughout the force, to local authorities and other relevant organisations, thus reducing the enhancement of future prevention initiatives.	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 to local authorities and other relevant organisations involved in community.		
Risk 8- Potential for adverse publicity in failing to meet legal requirements in respect of disclosure.	Disclosure is a complex area which requires a meticulous and accurate approach. Following some recent issues a training need has been identified across the directorate.		

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