



# CHIEF CONSTABLE OF NORTH YORKSHIRE

Management of Police Information (MoPI): MMI Project

FINAL

Internal Audit Report: 7.16/17

18 November 2016

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<b>Draft report issued</b>	27 October 2016		Angela Ward, Senior Manager
<b>Revised draft report issued</b>	7 November 2016		Philip Church, Manager
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# 1 EXECUTIVE SUMMARY

## 1.1 Background

We carried out an audit of Modernising the Management of Information ('MMI') project as part of the agreed internal audit plan for 2016/2017. As part of this audit, we reviewed the project controls over the Force's in-house project, with a view to ensure that the project is being effectively managed and the Force is complying with any revised associated policies and procedures, including data retention.

An assessment of North Yorkshire Police information assets undertaken by the Head of Information Management identified opportunities in relation to improving the way it manages information throughout its lifecycle through creation, processing, transfer, storage/archive, and disposal. Following a business case formally approved by the Police and Crime Commissioner during February 2016, a programme of work has started to review and modernise business processes in addition to digitising the records, where required, and identifying records that can be disposed of where it is no longer required for them to be retained.

The MMI project does not involve procurement or development of new systems or interfaces. However, as the project completion date is tied to the Force's Head Quarters relocation project, any delays to project tasks could directly impact the ability of the project to deliver all of its stated objectives. This in turn could result in the Project Board considering splitting the project into phases.

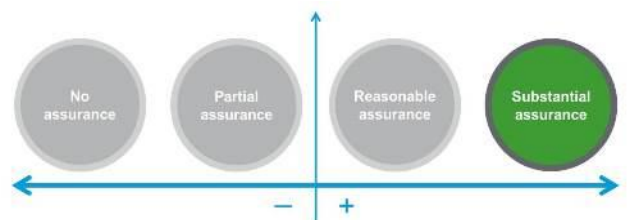
At the time of the review, a project initiation document ('PID') detailing the project definition, scope, project organisation structure, project planning and project controls had been documented awaiting its formal approval by Information Assurance Board. Our review focussed on the existence of controls and appropriate supporting documentation. In addition we carried out meetings with key staff associated with the project such as the Project Lead, Project Manager, Business Analysts, Records Managers, and Senior Application Support Engineer. Where required, we performed specific testing on key controls such as project meetings, updates to procedures documentation, periodic review and oversight of the project plan in the light of project specific risks, issues and dependencies.

## 1.2 Conclusion

The audit confirmed that there are adequate controls in place around the MMI project at the Force. Although still early days and a number of project activities have yet to progress over a further 12 month period, the project controls reviewed appeared to have been designed correctly. Our review of the project controls and the progress of specific project tasks to-date does not indicate the need for splitting the project into phases. We have agreed one medium and one low priority management action in relation to the oversight of key milestones completion or slippages if any, and a clarification over the role of the Project Board within the PID.

### Internal Audit Opinion:

Taking account of the issues identified, the Chief Constable can take **substantial assurance** that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and operating effectively.



## 1.3 Key findings

The key findings from this review are as follows and have resulted in **one medium priority** and one low priority management action being agreed:

- Our review of the record of project meetings noted that key milestones completed and slippages are not specifically included within project meeting discussions ( Medium priority).
- The project organisation structure within the PID lacks clarity regarding the function and responsibilities of the Project Board or overall decision making authority for strategic and policy issues.

We noted the following areas of well-designed controls:

- The MMI business case has followed a structured approach and includes key details such as other options considered, contribution to Police and Crime Plan priorities and resourcing implementation. The document also includes an audit trail of consultations held with key stakeholders, proposed timeline, staffing requirements, and summary of investments.
- An internal presentation to key stakeholders provided a clear summary of the business case including key stages of the proposed project activity and cost benefits. Importantly, these include cashable and non-cashable cost benefits, which will enable the measurement of actual benefits at a later stage of the project.
- We were provided with a formally documented PID, which follows the PRINCE2 recommended format. The PID provides a good degree of clarity and direction to the various activities within the project. We noted that the PID was not formally approved at the time of our audit; we were advised that the October meeting of Information Assurance Board will complete the review and approval of the PID. We have raised one low priority observation in relation to a lack of clarification over the role of Project Board within the PID which can be rectified before final sign-off in October.
- A project plan has been drawn and this makes use of MS project software. We performed a walkthrough and confirmed the project tasks align with the PID and dependencies such as pre-requisites of a specific task has been deployed within the project plan.
- Centrally held project documentation follows a structured approach involving periodic version upgrade:
  - The project plan is under version control and a system of audit trail for major changes to the plan has been retained;
  - When documents have been updated on SharePoint the system provides alerts to project team members to be aware of the changes;
  - There is a periodic update of the project status and we confirmed that the key members of the project team have supplied updates relating to their areas of responsibility.
  - Project meeting notes (record of meeting) contain formally documented minutes, AIRQ log, and an update on project progress.
- The procedure documentation covering collection and recording, operational paper file management, information sharing, review, retention and disposal of information and confirmed the documents were reviewed in 2015 and are subject to version control. We confirmed the project scope included a review of these areas and corresponding updates to policy and procedure documentation.
- The Information Management Strategy ('IMS') has been compiled in compliance with Management of Police Information ('MoPI') Code of Police specifications. We noted a number of policy and procedures referred within the IMS have been formally documented and are subject to version control. Our walkthrough testing of the project plan confirmed that the documentation upgrade has been identified as a required task within the scope of the project.

## 2 DETAILED FINDINGS

### Categorisation of internal audit findings

Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
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#### Area: Project Controls – PID

1	Our review of the record of project meetings noted that key milestones completed and slippages are not specifically included within project meeting discussions.	No	n/a	We confirmed that formally documented meeting minutes have been retained within the project documentation folder. Our review of meeting notes of 21 June 2016 and 05 July 2016, as well as the agenda for the project team meeting on 27 September 2016, confirmed that project milestones are not included within the project team meetings.	Medium	Key milestone completion and slippages will be included as an agenda item for the Project Team meeting. The relevant action log will be updated to reflect the assigned action to address the project implications.
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Risk Exposure*			Root causes		
There is a risk that slippages of key milestones are not captured at the appropriate time resulting in project delays or inaccurate estimates of overall completion of project tasks.			The bigger picture on the project status including critical tasks completion does not get appropriate inputs from the project team.		
Probability	Financial	Reputational	Operational	Legal	Rating

Responsible Officer: Project Manager

Implementation date: 31st December 2016

\* The rating of risk (probability, financial, reputation, operational, legal) has been undertaken by the area owner based on the Force's risk matrix.

2	The project organisation structure PID lacks clarity regarding the function and responsibilities of the Project Board or overall decision making authority for strategic and policy issues.	Yes	No	<p>Our review of the PID noted that although the appendix B explaining roles and responsibilities including references to CRDP Board and Information Assurance Board, it is not clear what specific role is assigned to each of these from a project governance point of view.</p> <p>We were advised by the Project Lead and Project Manager that the CRDP Board taking the role of overall decision making authority for strategic issues is an approved project methodology for NYP.</p> <p>In addition we acknowledge that Exception Management (including tolerance levels) within section 7.8 in PID has reference to exceptions for time, budget, risk and benefits being referred to monthly CRDP meeting for approval / decision.</p> <p>We noted that the PID has not yet been formally approved, however our review of the agenda of Information Assurance Board during October 2016 confirmed the review and approval of PID has been included.</p>	Low	<p>The details surrounding project board function assigned to CRDP and Information Assurance boards will be clarified within PID and the relevant information will be propagated to the project team and relevant stakeholders.</p> <p>Responsible Officer: Project Manager</p> <p>Implementation date: 31st December 2016</p>
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Risk Exposure*			Root causes		
There is a risk that the project team is not aware of the arrangements for strategic decision making within the project.			The project documentation assumes that certain aspects forming part of the Project Methodology common for the Force is known to all project members.		
Probability	Financial	Reputational	Operational	Legal	Rating

# APPENDIX A: SCOPE

## Scope of the review

Our review linked with the Force's in-house project that is ongoing around information and the ability to recover historical information (both electronic and paper based). The scope was planned to provide assurance on the controls and mitigations in place relating to the following area:

### Objective of the area under review

The Force has a duty to obtain and use a wide variety of information (including personal information), in order to discharge their responsibilities effectively.

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When planning the audit, the following areas for consideration and limitations were agreed:

### Areas for consideration:

Our review has considered the following:

- A business case has been developed, including key deliverables, which has been appropriately approved.
- Review of the governance arrangements to manage the archiving and restoring of both electronic and paper based information.
- Policies and procedures have been updated to reflect changes made. We will perform sample testing to validate compliance with the revised policies and procedures covering collection, assessment and analysis, composite records and linking, information sharing, and review, retention and disposal of information.
- Review of the information management strategy (IMS).
- Central oversight of all information held.
- Milestones that have been achieved in the project.
- Data retention protocols have been revised and adhered to for paper and electronic records.
- Archiving and transferring of records of interest and value have been identified and held in an appropriate repository.
- Evidence supporting areas/actions categorised as implemented.
- Adherence to Code of Practice on MoPI.

### Limitations to the scope of the audit assignment:

- The review was limited to identifying the existence of controls in the areas for review, and obtaining supporting documentation. Testing was carried out on a sample basis and assessed the framework that is in place but did not provide assurance that all aspects of the policy and guidance are being complied with by all staff.
- Conclusions were based on our assessments made through discussions with management, assessment of the current framework of controls and an initial review of relevant documentation available, either internally or externally generated.



- This review only covered those areas identified and scored as being implemented by North Yorkshire Police and submitted within the Force Action Plan. Our review was limited to a review of the file of evidence and did not test actual controls at operational level. Where applicable recommendations are based on the findings of samples selected for review therefore our work does not provide any guarantee against material errors, loss, or fraud or provide an absolute assurance that material error, loss or fraud does not exist.

# APPENDIX B: FURTHER INFORMATION

## Persons interviewed during the audit:

- Project Lead, Sarah Wintringham
- Project Manager, Mel Stabler
- Business Analysts , Jo Whyte, Michelle Bennett
- Senior Application Support Engineer, Tracey Arnell
- Records Manager- MMI Team , Colette Easton
- Record Manager, Jo Edgar
- RRD Manager, Alistair Dodds
- Review Retention Disposal Officer, Sharon Graham
- Police Lawyer ( Civil Disclosure ) , Ashley Malone

## Documentation reviewed during the audit:

- Modernising the management of information – business case dated 09 February 2016 ( inclusive of appendices covering proposed timeline, Staffing requirements, and summary of investment)
- MMI Project proposal – internal presentation, October 2015
- MMI Project Initiation Document, v1.0, May 2016 ( inclusive of a number of appendices covering project controls)
- Information Assurance Board Meeting notes ( including MMI Project progress report ) 12/05/2016, 03/02/2016
- MMI Project Progress Report May-August 2016
- Final Report – APP review , 26/11/2016
- Information Management Strategy 2014 – 2019, v3, October 2015
- MMI Project requirements specification document templates – Template specific SOR v0.1, Template Generic SAOR v0.4
- Collection and Recording of |Police Information Procedure ( Niche RMS ) v3.0
- Collection and Recording of |Police Information Procedure ( Command and Control - STORM ) v3.0
- Operational Paper File Management Procedure v3.0
- Information Sharing Procedure v2.0
- Review, Retention and Disposal of Information procedure v3.0
- Civil Disclosure subsite
- Multi Agency overarching information sharing protocol, v5.0 June 2016
- MMI Project plan – as updated on 26/09/2016
- MMI Project Team Meeting Notes April – August 2016

- MMI Project Team Meeting Agenda 27.09.2016
- MMI Project AIRQ log – 27/09/2016
- Retention and Disposal schedule : Evidential and Operational records v2-4
- RRD Action log – Archiving , Retention and Disposal of information assets

# FOR FURTHER INFORMATION CONTACT

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