



POLICE AND CRIME COMMISSIONER FOR NORTH YORKSHIRE

Commissioning

FINAL

Internal Audit Report: 8.16/17

15 December 2016

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Debrief held	20 October 2016	Internal Audit team	Daniel Harris, Head of Internal Audit Angela Ward, Senior Manager Philip Church, Client Manager Ellie Acton, Managing Consultant
Draft report issued	04 November 2016		
Revised draft issued	01 December 2016		
Responses received	14 December 2016		
Final report issued	15 December 2016	Client sponsor	Jenni Newberry (Head of Commissioning & Partnership)
		Distribution	Jenni Newberry (Head of Commissioning & Partnership)

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1 EXECUTIVE SUMMARY

1.1 Background

The Police and Crime Commissioner for North Yorkshire (PCC), via the Commissioning and Partnerships Team, has commissioned a number of services to support victims to cope and recover after crime utilising the Ministry of Justice Victims' Services Grant. This includes a centralised telephone based victim needs assessment and referral service, Supporting Victims. An in-house Supporting Victims team has been in place since the 1st of August 2016. From 1st April 2015 to 31st July 2016 a local Supporting Victims contract was held with provider Victim Support, following the pass porting of the Ministry of Justice funding historically used to commission the national Victim Support contract locally to PCC's. In addition to this, the Commissioning and Partnerships Team, on behalf of the PCC also commission or co-commission Community Safety, Youth Offending, Substance Misuse, Mental Health, Hate Crime and Forensic Examination & Crisis after Sexual Abuse services.

This audit has examined evidence based decision making, effective contract management, evaluation of outcomes and evidence of Value for Money across the five highest value commissioned services (the Independent Domestic Violence Advisor and Independent Sexual Violence Advisor Service; Youth Offending Services, Substance Misuse Services and the Restorative Justice Service). In addition all other domestic and sexual abuse support services (although some contracts were very new or yet to commence) were examined; the Voluntary Domestic Abuse Perpetrators Programme, Domestic Abuse Early Intervention Service; Child Sexual Exploitation Support Service; Parent Liaison Service for Child Sexual Exploitation Victims; Respect Young People's Service and the Domestic Abuse Self-Referral Service (DASRS). We have also reviewed the in-house Supporting Victims' Service to ensure compliance with the Code of Practice for Victims' of Crime and where relevant the related European Directive.

1.2 Conclusion

The Police and Crime Commissioner for North Yorkshire can take assurance that the evidence gathered shows the organisation is commissioning effectively and there is evidence of Value for Money across the highest value contracts. The domestic abuse services show effective commissioning from the PCC's perspective. However across the whole portfolio, joint or co-commissioning by the City and County local authorities, and the PCC could bring additional savings.

The Supporting Victims team evidenced best practice and effective data collection; however, there is limited current understanding of the time it takes a member of staff to make a call to a victim in terms of detailed projected / future demand in relation to the resources required for this victim needs assessment and referral service.

We have identified some areas for improvement that need to be addressed in order to ensure that the PCC is confident that Value for Money is being achieved and services are being commissioned with appropriate capacity to meet forecasted demand.

1.3 Key findings

The key findings from this review are as follows:

- Our testing and observations found that most internal processes and controls were satisfactory and were being complied with in the majority of cases (see scope in Appendix A for details).

We have however identified a number of control design weaknesses that require strengthening in order to provide further assurances that quality commissioning and evaluation is evidenced. We have also made a number of suggestions where the control framework or compliance with it could be enhanced further. In particular:

- We found during the **highest contract value** area review there was an identified need to investigate the performance information provided to support the progress of the substance misuse contract to ensure transparency **(Suggestion)**.
- Within the **Supporting Victims** team review there was a requirement for a better understanding of the utilisation, capacity and therefore requirement for staffing **(Medium)**. The procurement of a case management system would assist with the efficiency of the Supporting Victims team in particular when producing performance information **(Low)**.
- Within the **domestic abuse** commissioned services, information in relation to named staff fulfilling the IDAS contracts should be obtained from the provider **(Suggestion)**, including their DBS checks and qualifications **(Medium)** and the company's insurance certificates obtained as per the contract requirements **(Medium)**.

In addition, a number of contracts have had their start delayed due to the in-house vetting process. The organisation should investigate where these delays lie **(Suggestion)**.

The ineffectiveness of the secure email system currently used is causing the duplication of effort and costly inefficiencies. The organisation should investigate a more effective secure system **(Medium)**.

Performance measures for the IDVA service are numerous and not necessarily required at this level to evidence service impact. There is an ongoing piece of work to review these measures to ensure, whilst the organisation is receiving the information they need, the requirement on the provider is not needlessly onerous **(Suggestion)**.

1.4 Additional information to support our conclusion

Area	Agreed actions		
	Low	Medium	High
Evidence based decision making, ongoing contract management and evaluation of outcomes and ultimately evidence of value for money across five highest value contracts.	-	-	-
Evidence that the in-house Supporting Victims team meets the needs of victims and is compliant with the Victims' Code and European Directive.	1	1	-
Evidence that there is evidence based decision making, effective contract management and evaluation within domestic abuse commissioning.	0	3	0
Total	1	4	0

* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area

2 DETAILED FINDINGS AND MANAGEMENT ACTIONS

2.1 Highest Value Commissioned Services

The review found that there was a transparent and documented process for the allocation of funds across the five service areas. In a number of contracts where there were performance issues there was robust contract management arrangements in place including corrective action plans being prepared. Whilst the contract managers were supportive to enable the provider to achieve their objectives where there was no improvement financial penalties were in place.

- There are some difficulties regarding data sharing from local authorities to the PCC, where the PCC is not the contract holder. However, this is a widespread issue across many PCCs and by no means an issue isolated to North Yorkshire.
- There are low numbers of referrals to the Restorative Justice Service. The approaches other PCCs have taken were discussed and the possibility of a pay by request option.

Management actions

Check the performance data provided to evidence the performance of the substance misuse contract to ensure that the reduction in reoffending figures do not include individuals that are either in custody, out of area or deceased. **(Suggestion)**

2.2 In-House Supporting Victims team

There was clear evidence from the organisation's service provision perspective that this service met the requirements of the Victims' Code. Whilst the service currently uses excel to record information, they were able to quickly recall all data and provide performance data when required during the review. There was frustration from the staff regarding the amount of time it took to correct data input errors at the month-end; however, the procurement of a case management system will commence once sign off to progress is achieved.

From a commissioning perspective, there is little understanding of how long it takes for a Victim Coordinator to make or take a call on average, therefore how many cases they can manage in a day and ultimately how many staff are required for this service. This level of analysis could help with the design and development of the Supporting Victims team.

The training package provided to new members of staff within the team was excellent along with the handbook provided. This will further ensure the service provided meets the needs of victims through the quality of skills developed and tools available to staff.

Management actions

Procure case management system. **(Low)**

Understand utilisation and capacity of team to ensure evidence based recruitment and performance management of staff. **(Medium)**

2.3 Domestic and Sexual Abuse Commissioned Services (DV)

The current domestic abuse support services commissioning approach is disjointed across Commissioning and Partnership and local authorities. Whilst there is clear evidence of a competitive and transparent tender process there are multiple contracts managed separately led by both the Commissioning & Partnership Team and local authorities. There is evidence one provider dominates the domestic abuse services arena in North Yorkshire, whilst there are no areas of concern with their performance there are clear opportunities for financial efficiencies through joint or co-commissioning and / or the creation of a larger area wide contract.

A larger area wide contract may open up the marketplace and encourage the collaboration of smaller organisations to apply to provide services as a consortium or from other regional or national providers. This is an area the Commissioning and Partnership Manager had already identified and has drawn up a schedule for re-contracting in relation to, with the plan of redesigning domestic abuse commissioning, ideally in partnership with local authorities.

The following areas were highlighted of note:

- There were a large amount of performance measures across the IDVA/ISVA contract, and there was an acknowledgement that whilst they were included, they were not necessarily needed on a regular basis. The Commissioning and Partnership Manager had already identified this as an area to refine and had already begun this process with an analyst.
- There was duplication of process due to the unreliability of the CJSM email system in relation to IDVA referrals. These difficulties required resource from a member of the team to double check all information had been sent and received. This process is currently being investigated for future refinement and the procurement of a case management system will be considered for sign off, once additional information is made available, which would support process efficiencies.
- The standard contract states that the provider should share copies of their insurance certificates: these are not currently held by the organisation.
- Vetting is causing delays in contract start dates. Investigation as to why these delays are taking place may be beneficial to ensure the timely start of contracts.
- The Commissioning and Partnership Manager evidenced clear and logical methodology when assessing increases in funding.

Management actions

Ensure where the organisation is paying for FTE posts that they receive information specific to all named employees. This will ensure that there is no duplicate funding of posts across contracts. **(Suggestion)**

Obtain copies of the providers employees DBS vetting & CAADA qualifications. **(Medium)**

Review performance measures to meet the needs of the contract. **(Suggestion)**

Ensure email systems used are fit for purpose both from a security perspective, functionality and reliability. **(Medium)**

Obtain copies of provider's insurance certificates. **(Medium)**

Investigate vetting delays. **(Suggestion)**

3 OUR INTERNAL AUDIT FINDINGS AND THE RESULTING MANAGEMENT ACTIONS & SUGGESTIONS ARE SHOWN BELOW

Ref	Findings summary	Priority	Agreed (Y/N)	Actions for management	Implementation date	Responsible Owner																								
1	<p>The organisation does not perform dip sampling on the quality of the performance submitted re. Substance Misuse Services.</p> <p>In addition, no specific checks have been made to ensure reduction in re-offending figures do not include individuals who are either in custody, out of area or deceased.</p>	N	Y	<p>Check the performance data provided to confirm the performance of the Substance Misuse contracts.</p> <table border="1"> <thead> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> </thead> <tbody> <tr> <td colspan="3">There is a potential reputational risk to the programme if the success measures are based upon those who are "unable to re-offend".</td> <td colspan="3">Organisation is provided with data by the police and providers and there is no current dip sampling by the organisation.</td> </tr> <tr> <th>Probability</th> <th>Financial</th> <th>Reputational</th> <th>Operational</th> <th>Legal</th> <th>Rating</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Risk Exposure*			Root causes			There is a potential reputational risk to the programme if the success measures are based upon those who are "unable to re-offend".			Organisation is provided with data by the police and providers and there is no current dip sampling by the organisation.			Probability	Financial	Reputational	Operational	Legal	Rating							April 2017	Steve Harrison
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2	<p>Management time being spent amending data errors to produce performance measures.</p>	N	Y	<p>Launch procurement process for case management system.</p> <table border="1"> <thead> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> </thead> <tbody> <tr> <td colspan="3">There is an operational risk with data quality due to human inputting errors.</td> <td colspan="3">Currently there is no case management system in place.</td> </tr> <tr> <th>Probability</th> <th>Financial</th> <th>Reputational</th> <th>Operational</th> <th>Legal</th> <th>Rating</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Risk Exposure*			Root causes			There is an operational risk with data quality due to human inputting errors.			Currently there is no case management system in place.			Probability	Financial	Reputational	Operational	Legal	Rating							April 2017	Jenni Newberry
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3	<p>High-level understanding of staff utilisation and capacity of Supporting Victims staff, what is missing is the detail in relation to time spent per case to assist with performance management,</p>	Y	Y	<p>Measure utilisation to understand demand against capacity – eventually automated via CMS.</p> <table border="1"> <thead> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> </thead> <tbody> <tr> <td colspan="3">Operational risk as the utilisation and capacity of the team is not known in</td> <td colspan="3">Limited analysis of utilisation</td> </tr> </tbody> </table>	Risk Exposure*			Root causes			Operational risk as the utilisation and capacity of the team is not known in			Limited analysis of utilisation			April 2017	Wendy Green												
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4	Where a provider holds multiple contracts there is currently a lack of assurance that the provider hasn't recruited / assigned an individual to fulfil FTE requirements across contracts.	N	Y	<p>Ensure where the organisation is paying for FTE posts that they receive information in relation to named employees. This will ensure that there is no duplicate funding of posts across contracts.</p> <table border="1"> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> <tr> <td colspan="3">The organisation maybe duplicating funding for posts.</td> <td colspan="3">There is no current contractual requirement for the provider to name staff fulfilling posts.</td> </tr> <tr> <th>Probability</th> <th>Financial</th> <th>Reputational</th> <th>Operational</th> <th>Legal</th> <th>Rating</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Risk Exposure*			Root causes			The organisation maybe duplicating funding for posts.			There is no current contractual requirement for the provider to name staff fulfilling posts.			Probability	Financial	Reputational	Operational	Legal	Rating							April 2017	Sarah Arnott
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5	Evidence of qualifications are not held for provider staff in relation to IDVA/ISVA, Early Intervention and RESPECT by the organisation.	Y	Y	<p>Obtain copies of the providers employees Saving Lives IDVA qualifications. These are required for the provision of this service.</p> <p>Whilst the contract states that the provider must have qualified staff, RSM accept there is no legal requirement to check the qualifications of the provider staff. However the risk should those staff not be qualified could have an impact on the reputation of the organisation as the provider is working on behalf of the PCC with vulnerable adults and young people. It is accepted the likelihood of this is low hence the risk has been categorised as medium.</p> <table border="1"> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> <tr> <td colspan="3">The organisation must ensure that the staff providing the service are qualified as they work with vulnerable adults.</td> <td colspan="3">There is no requirement to provide actual evidence of</td> </tr> </table>	Risk Exposure*			Root causes			The organisation must ensure that the staff providing the service are qualified as they work with vulnerable adults.			There is no requirement to provide actual evidence of			April 2017	Sarah Arnott												
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6	<p>Some performance measures in place are not necessary to evidence the impact of the service.</p> <p>Domestic and sexual contracts should be reviewed first and then results rolled out to all contracts.</p>	N	Y	<p>Review performance measures to ensure they are providing evidence as to whether the key objectives of the service are being met.</p> <table border="1"> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> <tr> <td colspan="3">Due to the length of time taken to fulfil performance requirements rather than service objectives.</td> <td colspan="3">There has not been a recent review into what data is necessary rather than desired.</td> </tr> <tr> <th>Probability</th> <th>Financial</th> <th>Reputational</th> <th>Operational</th> <th>Legal</th> <th>Rating</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Risk Exposure*			Root causes			Due to the length of time taken to fulfil performance requirements rather than service objectives.			There has not been a recent review into what data is necessary rather than desired.			Probability	Financial	Reputational	Operational	Legal	Rating							April 2017	Sarah Arnott
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7	Inefficiencies and unreliability from current secure email system.	Y	Y	<p>Ensure the system used to make secure provider referrals for IDVA/ISVA is fit for purpose both from a security perspective, functionality and reliability.</p> <table border="1"> <tr> <th colspan="3">Risk Exposure*</th> <th colspan="3">Root causes</th> </tr> <tr> <td colspan="3"> <p>There is a risk that referrals are not being received.</p> <p>The organisation is having to resource a member of staff to complete manual checks to ensure these have been received.</p> </td> <td colspan="3">Ineffective secure email system.</td> </tr> <tr> <th>Probability</th> <th>Financial</th> <th>Reputational</th> <th>Operational</th> <th>Legal</th> <th>Rating</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Risk Exposure*			Root causes			<p>There is a risk that referrals are not being received.</p> <p>The organisation is having to resource a member of staff to complete manual checks to ensure these have been received.</p>			Ineffective secure email system.			Probability	Financial	Reputational	Operational	Legal	Rating							April 2017	Sarah Arnott
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8	<p>Provider's insurance certificates are not held.</p> <p>Domestic and sexual contracts should be obtained first and then process rolled out to all contracts.</p>	Y	Y	Obtain copies of provider's insurance certificates.	April 2017	Sarah Arnott																								
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9	Delays in vetting are causing delays in contract start dates.	N	Y	Raise issue internally re. impact of vetting delays.	April 2017	Jenni Newberry																								
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APPENDIX A: SCOPE

Scope of the review

To evaluate the adequacy of risk management and control within the system and the extent to which controls have been applied. The scope was planned to provide assurance on the controls and mitigations in place relating to the following areas:

Objective of the areas under review

To review the five highest value commissioned / grant funded services in 2015/16 to establish whether there is evidence based decision making, ongoing contract management and evaluation of outcomes, and ultimately Value for Money has been achieved.

To review processes in place for monitoring the new “in-house” victim support service to ensure it meets the needs of victims and complies with Victims’ Code and European Directive.

To review the current domestic abuse / violence commissioned/grant funded services to ensure evidence based decision making, contract management and evaluation is in place.

To understand the contract duration and renewal process to identify points of potential co-commissioning.

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

Areas for consideration:

The Police and Crime Commissioner for North Yorkshire has responsibility for a number of funding streams including those to provide victims’ support service. The purpose of this review is to establish whether there is evidence of Value for Money in their commissioning and ensure compliance with relevant legislation. The review will also provide access to consultancy staff who will offer support and advice on best practice in relevant areas. Our review will consider:

High Value Commissioned Service

We will examine the organisation’s priorities and the funding streams to support the achievement of these priorities. We will inspect funding applications and any internal decision making frameworks or tools. We will identify key outcomes from the funding applications and search for evidence to illustrate whether the contracts have ultimately supported the organisation’s priorities. In addition, we will explore contract management arrangement and where necessary provide support and guidance.

Victims Code

We will study the policies and procedures produced by the victims’ support service. We will explore whether these are compliant with the Victims’ Code and European Directive. We will interview the project manager / service manager to examine the current monitoring of the service and share best practice from our experience of working with other victims’ support services.

Domestic Violence

We will examine each domestic abuse funded service agreement or / and contract to understand the scope of the service being commissioned. We will identify whether evidence based decision making is illustrated, ongoing contract management is recorded and whether there are key outcome measurements linked to priorities.

The following limitations apply to the scope of our work:

- Only the five highest value contracts will be assessed by RSM. RSM will not comment on whether the contract does provide actual Value for Money.
- Any additional support for victim services will be outside of the scope of this audit and can be provided by the consultancy team under a separate agreement.
- The reviewing of additional domestic abuse contracts funded by other commissioners will be outside of the scope of this review, and a separate proposal will be submitted as agreed with the Head of Commissioning and Partnerships.
- We will only review the controls in operation at the time of the audit.
- This review will be carried out by a managing consultant and is therefore an advisory review.
- Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

APPENDIX B: RESOURCES UTILISED FOR THE AUDIT

Persons interviewed during the audit:

- Sarah Arnott, Commissioning and Partnership Manager
- Steve Harrison, Commissioning and Partnership Manager
- Wendy Green, Commissioning and Partnership Manager

Documentation reviewed during the audit:

- Tender documentation
- Scoring matrix for tender
- Performance information across contracts
- Electronic filing system for contract information

FOR FURTHER INFORMATION CONTACT

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