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

Follow Up of Previous Internal Audit Recommendations – Visit 1

FINAL

Internal audit follow up report: 2.19/20

4 July 2019



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1 EXECUTIVE SUMMARY

1.1 Introduction

As part of the approved internal audit plan for 2019 / 2020 we have undertaken a review to follow up progress made by the organisations to implement the previously agreed management actions.

The scope of the review covers recommendations closed from 1st January 2019 to 1st May 2019, and as such the audits considered as part of the follow up review were:

- Code of Practice Victims of Crime;
- Follow Up of Previous Internal Audit Recommendations Visit One;
- Crime Data Integrity Action Plan;
- Bail Management;
- Transport: Hire and Pool Vehicles; and
- Subject Access Requests.

The 17 management actions considered in this review comprised of **two high** and **15 medium** actions. 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, Fire and Crime Commissioner for North Yorkshire and the Chief Constable of North Yorkshire has demonstrated **little progress** in implementing agreed management actions.

Of the 17 management actions considered in this review, we confirmed that 12 had been fully implemented, and we have categorised three management actions as ongoing, this includes two high priority actions and these have impacted the opinion above.

We have also categorised two medium priority management actions as superseded:

• Code of Practice - Victims of Crime

It was agreed in this review that North Yorkshire Police conduct a training day(s) for all officers to ensure awareness of the Code. A review of the training budget by the Training Development Department found that there is no available budget in place to hold training days; the action has therefore been superseded.

• Follow Up of Previous Internal Audit Recommendations – Visit One;

In this review, it was agreed that FCIR reminds CMU when crimes need to be referred to the DDM. Updates to the Home Office Counting Rules in April 2019 removed the DDM review requirement, therefore this action is no longer applicable.

We have made new management actions where appropriate; these are detailed in section two of this report.

1.3 Action tracking

Action tracking is undertaken at the Police, Fire and Crime Commissioner for North Yorkshire and the Chief Constable of North Yorkshire and reported to the Joint Independent Audit Committee. Management actions are detailed within the audit management tracking software which details which actions are completed and outstanding for each internal audit review.

1.4 Progress on actions

| Implementation | Number of | | Status of manage | ement actions | | | |
|---|-------------------|--------------------|----------------------------------|---------------------------|-------------------|--------------------|---|
| status by review | actions agreed | Implemented (1) | Implementation ongoing (2) | Not implemented (3) | Superseded (4) | Not yet due (5) | Completed or no longer necessary (1)+(4) |
| Code of Practice - Victims of Crime | 3 | 2 | 0 | 0 | 1 | 0 | 3 |
| Follow Up of Internal Audit Actions – Visit 1 | 1 | 0 | 0 | 0 | 1 | 0 | 1 |
| Crime Data Integrity Action Plan | 1 | 1 | 0 | 0 | 0 | 0 | 1 |
| Bail Management | 8 | 5 | 3 | 0 | 0 | 0 | 5 |
| Transport: Hire and Pool Vehicles | 3 | 3 | 0 | 0 | 0 | 0 | 3 |
| Subject Access Requests | 1 | 1 | 0 | 0 | 0 | 0 | 1 |
| Implementation status by | Number of actions | Status of man | agement actions | | | | |
| management action priority | agreed | Implemented (1) | Implementation ongoing (2) | Not implemented (3) | Superseded (4) | Not yet due (5) | Completed or no longer necessary (1)+(4) |
| Medium | 15 | 12 | 1 | 0 | 2 | 0 | 14 |
| High | 2 | 0 | 2 | 0 | 0 | 0 | 0 |
| Totals | 17 | 12 (70%) | 3 (18%) | 0 (0%) | 2 (12%) | 0 (0%) | 14 (82%) |

2 FINDINGS AND MANAGEMENT ACTIONS

This report has been prepared by exception. Therefore, we have included only those actions graded as 2 and 3. Each action followed up has been categorised in line with the following:

| Status | Detail |
|--------|--|
| 1 | The entire action has been fully implemented. |
| 2 | The action has been partly though not yet fully implemented. |
| 3 | The action has not been implemented. |
| 4 | The action has been superseded and is no longer applicable. |
| 5 | The action is not yet due. |

| Ref | Management action | Audit findings and implications | Current status | Updated management action |
|-----|---|--|----------------|---|
| 1 | Further guidance and specific processes to be developed in relation to released under investigation to include monthly reviews by OiC and supervisor reviews. Original priority: Medium | The Operational Guidance for Pre-Charge Bail and Released under Investigation sets out what is considered good practice with regards to review dates for RUI category cases. However, discussions with Criminal Justice Department (CJD) Policy Development confirmed that this is a larger issue within police forces. CJD Policy Development further explained there is some scope in the process to tailor length of time for reviews to be appropriate for specific cases. CJD are in the process of ascertaining how to apply a consistent approach in reviewing all cases. CJD Policy Development confirmed this is still an ongoing task. We understand that North Yorkshire Police are looking to contact other forces to | 2 | Reiteration of management action Further guidance and specific processes to be developed in relation to 'released under investigation' to include monthly reviews by OiC and supervisor reviews. Responsible Officer: Head of Criminal Justice CJD Policy Development |
| | | consider methods put in place to ensure consistency. CJD have assigned a Custody Sergeant the task of reviewing cases within NICHE to ensure consistency of recording process. | | Priority: Medium Implementation date: 30 September 2019 |

| | | | Risk Exposi | ıre | | Root causes | | | |
|----------------|---|---|---|-------------------|--------------------------------------|--|----------|--|---|
| | | Risk that cas | | eing reviewed | No fully documented reviews of cases | | | | |
| | | Probability | Financial | Reputational | Operational | Compliance | Rating | | |
| | | Probable | Negligible | Minor | Minor | Minor | 5:8 | | |
| 2 | All released under investigation cases will be reviewed to ensure | From discussions with CJD Policy Development, we confirmed that a Custody Sergeant 2 has been assigned the task of reviewing all RUI records within NICHE. | | | | | | | Reiteration of original management action: |
| | that where no further action has been conducted that the suspect has been informed. | A Custody Sergeant is manually going through each individual record in NICHE and following up on any incomplete cases with appropriate officers where necessary. From a walkthrough of the process, we confirmed that outstanding cases to review have reduced from over 3,000 to approximately 2,000 still to check. | | | | | | | All released under investigation cases will be reviewed to ensure that where no further action has been conducted that the suspect has been informed. |
| | Original priority: | As the review of cases is still ongoing, we have reiterated the original management action. | | | | | | Responsible Officer: | |
| | High | gh Risk Exposure Root causes | | | Head of Criminal Justice | | | | |
| | | Risk that suspects are not being made No fully documented investigation | | | | | | CJD Policy Development | |
| | Risk that suspects are not being made aware that their case has been No fully documented investigation conclusions. | | | | Priority: | | | | |
| | | completed a be. | s they are le્ | gally entitled to | | | | | High |
| | | Probability | Financial | Reputational | Operational | Compliance | Rating | | Implementation date: |
| | | Probably | Negligible | Minor | Minor | Minor | 5:8 | | 30 September 2019 |
| 3 | As part of the review mentioned above, a C investigation cases will be reviewed to ensure record has been updated and Police Nation | | | | | | of all 2 | Reiteration of original management action: | |
| that where the | | | cer is contacted, and information appropriately | | | All released under investigation cases will be reviewed to ensure that where the investigation has been concluded that the | | | |

been updated and the PNC amended.

Probability

Probably

Financial

Negligible

We undertook a walkthrough of this process and confirmed that a Custody Sergeant has reduced outstanding cases from over 3,000 to approximately 2,000 cases.

custody record has been updated and the PNC amended.

Original priority:

High

We noted the national NPCC Practitioner Guidance has now been released and includes specific recommendations for RUI, particularly around reviews and records. CJD are working with NICHE Development Group and Crime and Custody to address this.

As CJD are still in the process of undergoing review Niche cases, we have reiterated the original management action.

| Risk Exposure | Root causes |
|---|---|
| Risk that suspects information is not being destroyed when they have been told no further action is to be taken against them. | Custody record is not finalised in a timely manner. |

Operational

Minor

Reputational

Minor

Responsible Officer:

Head of Criminal Justice

CJD Policy Development

Priority:

High

Implementation date:

30 September 2019

Compliance

Minor

Rating

5:8

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 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 percent | None outstanding | None outstanding | All low actions outstanding are in the process of being implemented |
| Reasonable | 51 – 75 percent | None outstanding | 75 percent of medium actions made are in the process of being implemented | 75 percent of low actions made are in the process of being implemented |
| Little | 30 – 50 percent | All high actions outstanding are in the process of being implemented | 50 percent of medium actions made are in the process of being implemented | 50 percent of low actions made are in the process of being implemented |
| Poor | < 30 percent | 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

The internal audit assignment has been scoped to provide assurance on how the Police, Fire and Crime Commissioner for North Yorkshire and the Chief Constable of North Yorkshire manages the following objective:

Objective of the area under review

We will confirm the actions closed on the audit management software are supported by appropriate evidence to reflect what has been reported to management and the Joint Independent Audit Committee.

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

Areas for consideration:

- Internal Audit will undertake a review of agreed high and medium priority management actions which have been closed on the audit management software.
- We will also consider recommendations classified as 'fundamental' or 'significant' raised by the previous internal auditors which have been closed on the audit management software.

We will review closed actions on the audit management software covering the following period: 1st January 2019 to 1st May 2019.

Limitations to the scope of the audit assignment:

- The review will only cover audit recommendations previously made, and we will not review the whole control framework of the areas listed above. Therefore, we will not provide assurance on the entire risk and control framework.
- We will only consider closed high and medium priority management actions and closed fundamental and significant recommendations.
- We will ascertain the status of recommendations through discussion with management and review of the recommendation tracking.
- We will not consider HMICFRS recommendations.
- Where testing is undertaken, our samples will be selected over the period since actions were implemented or controls enhanced.
- Our work does not provide any guarantee or absolute assurance against material errors, loss or fraud.

APPENDIX C: ACTIONS COMPLETED OR SUPERSEDED

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

| Assignment title | Management actions |
|--|--|
| Code of Practice - Victims of Crime | North Yorkshire Police will ensure there is a consistent approach to recording victim's contact details and their preferred means of contact. |
| | A communication will be issued, or inclusion with relevant training, to this effect which also stipulates the retention of contact agreements on NICHE. |
| | The implementation of this management action will be directly linked to the roll out of mobile working. |
| Code of Practice – Victims of Crime | North Yorkshire Police will conduct a training day(s) for all officers to ensure awareness of the Code, including the following: |
| | VCAs; |
| | VRAs; and |
| | • VPSs. |
| | The police will consider incorporating a Q & A session into the training day(s) as well as test or quiz at the end to highlight any areas where officers may require further information or clarification. |
| | The training day(s) will be in detail and walk through the step by step processes which answer the following questions in relation to the areas mentioned above: |
| | what is it; |
| | when is it completed; |
| | why is it completed; |
| | who completes it; and |
| | how is this recorded and stored. |
| | The training will clearly outline processes and the requirement to maintain Niche with all case documents. |
| | The implementation of the management action will be dependent on the available training budget. |
| Code of Practice - Victims of Crime | A clear process will be put in place for when officers should ask a victim for a VPS or remind them of their entitlement to a VPS as well as recording communication and responses. |

officer has had an experience of completing one. Management will also consider introducing a guideline or briefing note which specifies to officers and victims what is to be included in a VPS. Review existing process for the recording of crime in the VAT and MAST. Crime Data Integrity Action Plan **Bail Management** A reminder will be circulated to officers that all Inspector Application Forms need to be fully signed and retained on the case management system. Bail Management Reminder to be issued to all staff that all actions taken to be appropriately documented on the case management system. Immediate action will be taken to establish the progress of this investigation. Bail Management Further guidance and specific processes will be developed in relation to the **Bail Management** released under investigation category. All officers will be reminded that there is a requirement to clearly document the **Bail Management** rationale and reasoning for releasing under investigation. Transport: Hire and Where staff appear to fail to cancel car hires this will be followed up with them and

their line manager to identify reasons why. Appropriate action will be taken with

Regular reports of vehicle use will be prepared and reviewed to understand the

Include the transport decision tree as part of an enhanced Use of Vehicles

As per the FOI process, Subject Access Requests should be reported to the

aware of issues relating to compliance (or non-compliance) with legislation.

demand for vehicles. The fleet list and transport data will be reconciled to ensure that the information is consistent and that the utilisation reports are being used

Part of original management action restated: The FCIR will remind CMU when

Executive Board on an exception basis to ensure that the Executive Board are fully

Training in relation to VPS as referred to in management action three above,

Furthermore, the training should include the completion of a VPS to ensure every

should focus on this process.

the individual.

correctly.

Procedure.

Audit Actions – Visit 1 crimes need to be referred to the DDM.

Pool Vehicles

Pool Vehicles

Pool Vehicles

Subject Access Requests

Transport: Hire and

Transport: Hire and

Follow Up of Internal

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