

**Warwickshire Police and West Mercia Police**

**Police and Crime Commissioners**

**Joint Audit Committee 18<sup>th</sup> March, 2019**

**Assurance Audit Progress Report**

**Background**

The Force Crime & Incident Registrar (FCIR) continues to work to develop a continuous improvement function whereby a team of auditors will carry out audit and assurance activity. There is one joint FCIR's audit & assurance schedule which will comprise of Crime Data Integrity (CDI) audits and assurance audits, based on force priorities and areas which pose higher risk to members of the public.

**Planned Arrangements**

The 2019-20 schedule will be presented to Service Improvement Board in March for final sign off. It will provide an element of flexibility to enable a response to emerging threat, harm and risk. The FCIR will consider:

- FCIRs crime data integrity audits, having regard for the modules contained in the Home Office Data Quality Assurance Manual (DQAM) and align to alliance priorities.
- FCIRs assurance audits as commissioned by Chief Officers concerning compliance with force policy and procedures and having regard for audits carried out by the Internal Audit & Insurance service.

The FCIRs team will continue to carry out daily Transactional Validation Monitoring checking staff are accessing force systems for a legitimate policing purpose. Systems include – Automatic Number Plate Recognition (ANPR), Athena, Driver Validation Service (DVS), General Nominal & Intelligence Enquiry (GENIE), Police National Computer (PNC) and the Police National Database (PND).

Head of Analysis & Service Improvement (ASI) and FCIR meet quarterly with the Internal Audit & Insurance Auditors prior to Joint Audit Committee to promote synergies between both organisations.

Her Majesty's Inspectorate of Constabulary and Fire & Rescue Service (HMICFRS) are currently undertaking a rolling programme of crime data integrity inspections of all police forces in England & Wales. Warwickshire Police & West Mercia Police are expecting their announcements for the inspection in 2019. This will be a back to back inspection which will run for 4 – 6 weeks. During that time the FCIR and audit team will be heavily involved in the process and the audit function is likely to be paused.

## **Governance Arrangements**

CDI audit reports are presented to the quarterly Crime Data Integrity Core Group, chaired by the Deputy Chief Constables. Findings and recommendations are discussed in conjunction with the CDI Action Plan. Areas of greatest risk are raised at Service Improvement Board to maintain executive oversight and service delivery. Audit reports and auditors workbooks are also discussed at the quarterly CDI Tactical Group, chaired by Head of ASI and attended by the FCIR and appointed CDI Single Point of Contacts (SPOC) from each local policing area. The Core Group will task the Tactical Group to undertake pieces of work on its behalf, including that SPOCs ensure key messages from the audit are disseminated to staff and errors identified are subject of a correction process.

Assurance audit reports are shared with the relevant business leads who are required to respond to the audit recommendations. Any immediate actions that require correction are subject of a correction process. Following the business leads response, recommendations will be shared with the Service Improvement Board and taken to the Joint Audit Committee, where appropriate.

## **Assurance Audits**

Police forces are required to ensure that data held within Police Information systems are obtained, used and disclosed in accordance with the EU General Data Protection Regulation (GDPR) & UK Data Protection Act 2018, other relevant legislation and both national and local policy and procedure.

Since November 2018, there have been 3 assurance audits.

## **Violent & Sexual Offenders Register (ViSOR)**

ViSOR is graded as a 'high risk' system and subject to an annual audit. ViSOR records are updated and maintained on each local policing area by the respective Management of Sexual Offenders and Violent Offenders (MOSOVO) Teams. The aim of the 2018 audit was to assess whether Registered Sex Offender details updated onto ViSOR and PNC complied with national policy.

Findings found that there were significant data quality errors and missing information in the form of Police Information Reports. Audit reports have been shared with Head of Vulnerability & Safeguarding, and the alliance Multi Agency Public Protection Arrangement lead (MAPPA). The MAPPA lead has agreed to own the recommendations and provided the management response.

## **Recommendations**

1. Vulnerability and Safeguarding Strategic Team to develop a quality assurance process to provide reassurance for future data quality.

Response: Data quality is a continuous challenge in relation to all systems and not just ViSOR. The importance of data quality was stressed to all staff during the implementation of Athena. Quality cannot be assured through a process and needs to be monitored by key individuals involved in ViSOR management. As such, a directive will be produced and circulated to all personnel in the Management of Sexual Offenders and Violent Offenders Unit (MOSOVO) for

compliance. Where data quality proves to be a performance issue, appropriate action will be taken.

2. Consider the opportunities to review the remaining 2112 nominal ViSOR records for data quality issues, currently being managed in the two forces.

Response: The workload involved in reviewing 2112 nominal ViSOR records is deemed to be too great when considering the level of risk regarding this area. Therefore, records will be the subject of on-going data quality reviews at the time of their 12 monthly review. A directive to this effect will be produced and forwarded to (MOSOVO), Detective Inspectors (DIs) and Detective Sergeants (DSs) for compliance.

3. Ensure Police National Systems Bureau (PNSB) receive the Certificate of Conviction on Sentence / notification, and the end date is calculated correctly in accordance with the sentence received.

Response: Directive to incorporate the content of Rec 3 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

4a. It is essential that the actual Archive Date / Life Registered details are accurately calculated, recorded and correspond on ViSOR and Police National Computer (PNC) to prevent either a nominal archiving prematurely, or being managed when they are no longer subject to registration.

Response: Directive to incorporate the content of Rec 4 will be produced and forwarded to MOSOVO DSs for compliance.

4b. When updating a Sexual Harm Prevention Order (SHPO) on ViSOR ensure the 'Archive date' has been calculated correctly to include the SHPO where the date is longer than the sentence notification period.

Response: On going monitoring of this area will be delivered by MOSOVO DSs.

5. It is essential that all relevant Convictions on ViSOR are recorded and include Conviction and Sentence Dates and Sentence (if imprisonment). Sentences that result in Community Orders must be recorded in Supervisory Instruments and linked to the conviction. The conviction modus operandi should also be linked to the conviction.

Response: Directive to incorporate the content of Rec 5 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

6. Ensure the Police National Database (PND) checks are carried out for all ViSOR nominals and provide evidence in an Activity Log.

Response: Directive to incorporate the content of Rec 6 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

7. Notifications and current registered address must be accurately recorded on ViSOR and PNC taking into account the 'date of notification' rather than the 'effective from date'.

Response: Directive to incorporate the content of Rec 7 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

8. The need for descriptive information / tattoos / marks and scars to be accurately recorded across agreed systems, these are currently PNC / ViSOR, the General Nominal & Intelligence Enquiry system (GENIE) and Athena, however if recommendation (12) is agreed the systems would be only PNC and ViSOR.

Response: Directive to incorporate the content of Rec 8 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs. (Rec 12 – not agreed).

9. Ensure the relevant statutory requirements are obtained and relevant details updated on the relevant systems. If the National Insurance Number is on the notification form this should be part of the process for PNSB to update on PNC.

Response: Directive to incorporate the content of Rec 9 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

10. Ensure relevant Information / Warning markers are updated on ViSOR / PNC / GENIE / Athena.

Response: Directive to incorporate the content of Rec 10 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs. Warning markers are to be finalised by Nicky Oakley, ViSOR central point of contact (CPC).

11. It was agreed in previous audits that to comply with the Common Law Police Disclosure Scheme the Employment information, inclusive of Unemployed / Retired must be recorded and correlate on all systems.

Response: Directive to incorporate the content of Rec 11 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

12. Vulnerability & Safeguarding Strategic Team to re-evaluate the process regarding information update on local force systems and consideration made to only update the information on PNC and ViSOR. This would help to eliminate triple keying the same information across systems and assist ViSOR administration staff to concentrate on data quality when updating ViSOR and PNC. In the event of an investigation PNC and ViSOR would be the first port of call if an offender description is provided.

Response: It is important that Athena and GENIE are updated to include all relevant information and intelligence. Athena and GENIE are the primary databases for the workforce to research nominals and acquire available intelligence and information. A default position should

not be implemented whereby PNC and ViSOR become the first port of call for ViSOR offenders. As Such, Rec 12 is not supported.

13. Utilise the 'Documents' attachment on ViSOR to store small size documents such as Certificate of Conviction, Notification forms and Sexual Harm Prevention Orders.

Response: Current national directive states that only certificates of conviction can be recorded as an attachment due to ViSOR storage capacity. This position is being addressed by the Home Office. Appropriate directive to incorporate the content of Rec 13 will be produced and forwarded to MOSOVO DSs for compliance. On-going monitoring of this area will be delivered by MOSOVO DSs.

14. Utilise ViSOR to record the management / contact of the nominal and their notification requirements. Violent Offenders are managed jointly with Police and Probation who both have access to the nominals ViSOR records to update the information.

Response: Directive to incorporate the content of Rec 14 will be produced and forwarded to Integrated Offender Management (IOM) Managers for compliance. On-going monitoring of this area will be delivered by IOM Managers.

15. Resolve technical issues in Athena relating to the links between beat profiles and information markers. This will assist local Safer Neighbourhood Teams visibility of RSOs' on their area by way of self-briefing.

Response: Rec 15 is agreed. This issue has already been raised with relevant individuals in order to identify a solution. Progress is slow and a number of working groups / boards are involved. Nicky Oakley, ViSOR (CPC) is representing the MOSOVO business area in these discussions and updating the Alliance IOM Scheme and MAPPA Manager re developments. This action is on-going.

#### Supervisor audit (West Mercia only)

In November 2017 the ACC for local policing commissioned an audit of criminal investigations carried out by patrol officers. This was following implementation of Athena and officers voicing concerns with having a high number of investigations in their work trays. The audit found a high volume of investigations had not been appropriately supervised with crimes not being resolved in a timely manner. A Supervisor Review Guidance was developed by the continuous improvement team, Athena team and local supervisors prior to being issued and implemented.

The 2018 audit was to re-visit of Patrol Officer's investigations to assess whether the Supervisor Review Guidance had been adopted by officers and supervisors involved in criminal investigations.

The audit found that whilst some officers used the SOLVE IT FIRST acronym for their investigation plans, this was inconsistently applied. Other key areas of concern were Supervisors not carrying out an initial review, a lack of rationale why a victim had opted 'out' of the victim's contract for Victim Support and insufficient evidence that victims had been informed that the OIC had concluded the investigation (this is a statutory requirement under the victim's code).

## Recommendations

1. Review of the Supervisor Review Guidance, specifically, the value in requiring officers to select individual enquiry log headings for their investigation plans.

Response: The Continuous Improvement Team are reviewing the document with a view to promoting consistency across the forces and reduce bureaucracy.

2. Consideration be given to further clarifying the ATHENA process for recording –

- i) The initial supervisor review on allocation of a crime
- ii) Recording of the rationale for applying an outcome to a crime report
- iii) Where published ATHENA advice already exists, embed 'e' links into the documents

Response: The Continuous Improvement Team are reviewing the document with a view to adopting best practice. 'E' links will be embedded within the document.

3. Review the quality assurance and linking process in IMU in an effort to reduce duplicate nominals.

Response: Crime Bureau Manager is reviewing Q.A & Linking process in Athena to reduce duplication of nominals.

## Threat, Harm, Risk, Investigation, Vulnerability & Engagement (THRIVE)

In December 2018, HMICFRS attended Operational Command & Control (OCC) at Hindlip as part of the insight work in preparation for the risk based Integrated Police Efficiency, Effectiveness & Legitimacy (PEEL) Assessment in January and March 2019. Their work found there was some confusion around the application of THRIVE and little substance to articulate the Threat, Harm and Risk. Following the hot debrief, both DCCs commissioned a full audit of THRIVE in OCC reviewing incidents considered of higher risk. This entailed a review of command & control systems logs opened as Domestic, Sexual, Rape, Threats to Kill & Concern for Safety.

Key themes identified that not all OCC operators provided a quality rationale for applying THRIVE on the log, that there was a lack of rationale for down grading of an incident and not all logs had any supervisory oversight.

## Recommendations

No recommendations were made in the report as the OCC Service Development Manager had recently developed and implemented an improvement plan for all OCC staff. It is anticipated improvements in the quality of THRIVE would be seen by May 2019. This will be subject of reality testing by the FCIRs team later in the year.

The next planned assurance audit will be a Taser audit, assessing policy and procedure at the operational level. The terms of reference and methodology are currently being planned with the audit undertaken during April and May.

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