



Internal Audit Update Report for the Audit Committee June 2021

This document has been prepared for the Audit Committee to provide a status update in relation to the actions arising from Internal Audit Inspections.

The current register includes 57 recommendations (14 of which have been issued in the last few weeks); 11 of the actions are from the previous auditor, TIAA, with all but one having been issued during 2020. 12 recommendations were closed by RSM in their March 2021 Follow up Report.

Of the 57 recommendations a further 17 have been identified, so far, as complete by the Force; as these have to be signed off by the auditors, they will remain on the action plan as “Closed locally awaiting sign off” until this is fulfilled.

The remaining live actions continue to be monitored, with regular updates provided by their owners.

The action plan below provides details of the ‘live’ actions with status updates from the action owners.

It should be noted that the RAG (Red, Amber and Green) rating descriptors have been amended to reflect the completion status of the recommendation. The colour key and other details can be found at the end of the report.

Gill Currie
HMIC Liaison Officer
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Summary of All Outstanding Internal Audit Recommendations – Oldest Implementation Date First

No	Ref	Action Owner	Audit Finding	Implementation Date		Agreed Management Action	Priority
				Original	Revised		
355	DQ2019	Head of DSE	<p>At the Audit Committee on the 15 November 2018 the Members were informed that "Information Asset Owners have been identified across the full breadth of activity and will be important to future assurance work." Examination of two Heads of Service Job Descriptions did not identify detail of the role and expectation of being an Information Asset Owner. Given the significance of this role it is recommended that job descriptions should specifically identify this important role and that the Heads of Service should acknowledge the requirements of being an Information Asset Owner</p> <p>Recommendation All Information Asset Owners to have within their job descriptions a clearly defined role in relation to information governance. (Priority 3)</p>	Complete		<p>Report Published September 2019 Presented to Audit Committee 14/11/19</p> <p>Management Comment A Scheme of Delegation will be developed outlining the role of the IAO, this will be instead of a change in job description as the majority of IAO are police officers with no job role. This will be completed and delivered at the meeting on the 22nd</p> <p>Update October 2019 A Scheme of Delegation will be developed outlining the role of the IAO, this will be used instead of a change in job description as the majority of IAOs are police officers with no job role.</p> <p>Update February 2020 IAO Board reconvened; albeit with poor attendance. New IAO has been updated following restructure and new appointments. A date for a further IAO Board will be made and the matter addressed with the Board.</p> <p>Update April 2020 Scheme of delegation outstanding with CE. IAO Board yet to be arranged but may be impacted by Covid-19.</p> <p>Update June 2020 Following a suggestion to remove the requirement of a Scheme of Delegation and instead have the roles and responsibilities added as an objection to the IAO's Performance Development Reviews some reservations were raised. The situation is to be discussed at the IAO Board on 17th July.</p> <p>Update September 2020 IAO session to take place Friday 25th Sept. PDR to be discussed, if there is no objection then the Head of Information Management will write the objective and issue out to all IAOs.</p> <p>Information Security Board and IAO Board will be two separate board meetings as ISB deal with security risk whilst IAO deals with the lifecycle of data within the Force.</p> <p>Update May 2021 ACC Graham made an executive decision at the Information security board that the PDR was not the correct process for the management of information assets and that the IAO meeting held bimonthly will be the best format for this. IAO will be held to account within this meeting and completed work will be included in the agenda where staff will have to provide updates as to their business area. This in turn will feed into the ISB who will ensure governance of IAO. (Request Closure)</p>	
367	ICTDR20	Head of ICT	<p>It was noted that there is no regularly scheduled/ annual testing of the ability to recover key ICT systems and services currently undertaken by ICT. As a result there is limited assurance around the timescales within which key systems and services can be restored in the event of a DR scenario.</p> <p>As there is no formal/ scheduled testing for key ICT systems and services there are currently no test plans currently in place describing the detailed processes and procedures to be followed when testing the ability to recover key ICT systems and services.</p> <p>Recommendation ICT liaise with key business stakeholders within the Force to agree an approach to the regular testing of key ICT systems and services, with test plans created for key systems detailing the approach to testing.</p>	April 2021	April 2022	<p>Report Published March 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment Due to the virtualised and clustered nature of the ICT architecture, it is felt that full recovery testing with service impacts is not required as all component aspects of the recovery process are used in daily operations. However the Head of ICT will work with Force BCR/DR manager to look at this and ICT will implement his functions recommendations.</p> <p>Update June 2020 This is a complex area and requires a mix of work from both Business Continuity and ICT. A meeting has been arranged for 20th July between both parties to agree an approach and an implementation date.</p> <p>Update 24/7/2020 On 23/7/20, the Head of ICT and the BC Manager met to discuss approaches as to how the recommendation could be fulfilled whilst continuing to develop and add value to BC and DR management systems.</p> <p>Although business continuity and service continuity (disaster recovery) are exclusive in terms of delivery, they are complementary in terms of providing resilience assurance. Initial approach will be to draft a key applications assurance framework;</p> <ul style="list-style-type: none"> by expanding the key applications list containing 16 Category 1 applications to include other 	

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			<p>Test results be documented as part of a formal test report which details test objectives, outcomes, and lessons learned and be used in updating the associated ICT DR plans and supporting documents. (Priority 2)</p>		<p>emerging critical software and hardware: Enterprise Resource Planning (ERP), Remote Access System (RAS), Storage Area Network (SAN) and Cisco infrastructure;</p> <ul style="list-style-type: none"> by drafting a central incident log from the incident history of key applications and infrastructure and updating this log in line with live reporting, capturing all incidents and planned outages, collating lessons learnt to inform future associated DR response; by creating a testing schedule informed by the incident log to include at least one critical fail over per year as well as periodic testing of key applications. <p>The Head of ICT and BC Manager will meet again in September 2020 (date tba) to develop the above.</p> <p>On return of ICT services to the Force from 1/10/20, the Head of ICT and BC Manager will meet again with an ICT technical team to begin delivery of the products agreed.</p> <p><u>Update September 2020</u> As last update; on return of ICT services to the Force from 1/10/20, the Head of ICT and BC Manager will meet again with an ICT technical team to begin delivery of the products agreed.</p> <p><u>Update November 2020</u> The revised list of Cat 1 apps and systems has now been approved by the Digital Services Board; the next steps are for the mapping exercise to be done using the new Cat 1 list to review all the underpinning support contracts, documentation and infrastructure that the apps rely on to ensure they are all fit for purpose in December/January.</p> <p>Working with the BC Officer the Head of IT will look at the DR test schedule to be implemented next year from April 2021 and bring together the Cat 1 underpinning arrangements review in the new year to define a proposed DR test schedule proposal.</p> <p>As business impacts etc. need to be assessed and agreed (DR tests may invariably mean risk and service outage) this will be presented to the Senior Management Team for ratification once the draft proposal is ready.</p> <p><u>Update February 2021</u> A test of the internet link fail over is in planning at the moment for April time when a newly commissioned new internet link architecture is configured to improve resilience of the increasingly critical internet links. Further test schedules will be worked up in collaboration with the BCR manager, but there is a dependency on the full review of the newly agreed Cat 1 services DR documentation and procedures completing before more tests can be scheduled (action 368). There is also a planned upgrade of the Unify control room telephony platform in 2021 and the scope will include DR/fail over testing and documentation as part of the commissioning of the upgrade. It is likely that the DR testing of these 2 critical platforms will be the extent of the DR testing for calendar year 2021 with further testing schedules planned on completion of action 368 (update below).</p> <p><u>Update April 2021</u> The underpinning data and voice network infrastructure has been, and continues to be an area of considerable review, upgrade and refresh and new tooling is being implemented to further enhance our ability to monitor and maintain the data network infrastructure and enhance/assure and test DR and fail over processes. As this work progresses documentation is produced/updated and underpinning support contracts are reviewed to ensure they remain fit for purpose. A summary of progress and plans to date is below:</p> <ul style="list-style-type: none"> The following sites are now configured with updated device hardening configuration (except where changes are service effecting which will be planned and agreed with the business) and are now configured to use central authentication to manage the devices, rather than local device credentials. Additionally the following sites/devices have also been onboarded to Cisco Prime - this central management console offers a “single pane of glass” view and allows the devices to be monitored for health status, configuration backups, mass configuration deployment, software upgrade management & overall reporting of network device information. <ul style="list-style-type: none"> - SARC - Billingham Router (Switch using 802.1x - site visit to complete) - Loftus - Eston - Teesport - Redcar TPO 	
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						<ul style="list-style-type: none"> - St Marks House - CSH - DMZ Switch - CSH - FirePOWER External switch <p>This is an ongoing piece of work which the Network team will progress as and when time allows around other network related issues which arise.</p> <ul style="list-style-type: none"> • The remote access VPN gateways have now been upgraded from their previous 2017 software, to the latest Cisco recommended software. - M8 Remote access firewall - CSH Remote access firewall (High Availability fail over capability to be deployed here) • The operating system of the Cisco FirePOWER perimeter firewalls is in the process of being upgraded. - Central Management system - upgraded from 2018 software, to latest Cisco recommended version. - M8 Cisco Firepower Threat Defence – High Availability Pair upgraded to latest Cisco recommended version - CSH Cisco Firepower Threat Defence – Planned to be completed by May • CISCO Telephony and UC architecture review completed with documentation, enabling DR documentation to be produced. <p>In addition to the upgrades, the Network team are in the process of tidying up & consolidating the perimeter firewall policies. Currently M8 & CSH use separate policies - should we ever suffer an internet failure at one of those sites and BT re-route all traffic to the other, it will fail currently as the M8 rules don't exist at CSH & vice versa. We are in the process of creating a single policy which will be applied to both sites so regardless of where the traffic arrives. The Check Point firewalls then require the same piece of work to ensure traffic can enter/leave the network at either location.</p> <ul style="list-style-type: none"> • The operating system of the datacentre ACI fabrics (the part of the datacentre network where all servers are attached) is in the process of being upgraded. - M8 APIC x3 - Upgraded to Cisco latest recommended version from 2017 release. - M8 Switches x6 - Upgraded to Cisco latest recommended version from 2017 release. - CSH (all devices) due to be completed within the period to allow server virtualisation upgrade to latest recommended version to complete. <p>The bulk of the ICT Capital programme for FY21/22 is focussed on core infrastructure architecture refresh and upgrade and as part of the projects the DR and fail over capabilities will be assessed, enhanced and documented. This will be across FY21/22. The capital project to upgrade the Check Point perimeter defence firewalls is being planned as a priority and the splitting of the Internet links across 2 BT exchanges rather than the current single point of failure is also in planning to improve resilience in the event of an issue at the exchange. When commissioned this will be tested and contribute to the audit requirement of annual critical services DR testing.</p>	
368	ICTDR20	Service Operations Manager	It is recommended good practice that technical system recovery procedures are documented for all key ICT systems and services. These should detail the precise steps that must be taken, and any technical information required, in order to recover systems and applications successfully. It was noted during the review that technical system recovery procedures have been created for some, but not all, key Force systems and services.	September 2020	April 2022	<p>Report Published March 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment Agreed. A review will be conducted and all critical system with have documented recovery processes.</p> <p>Update June 2020 The action is on the radar, however work towards the action is still to commence as other commitments have taken priority.</p> <p>Update September 2020 The new digital services board chaired by CFO Gleeson is reviewing the Cat 1 applications list to consolidate and update – once this review/update has been completed the list will have a revised set of fail over procedures implemented.</p> <p>Update November 2020 See update at 367 above.</p>	

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						<p>Update February 2021 Review work in the DR process and procedures for Cat 1 services has been done as a first pass and gaps have been identified. Further development of the Cat 1 DR framework will now be done when new senior management ICT roles are appointed in the role of Infrastructure Manager and Information Systems/Applications Manager. Recruitment is scheduled to start in March and PDR objectives will be set to complete the review, address gaps in documentation or technology (budget dependant so some elements may need to be forecast for the FY22/23 ICT capital plan – to be assessed) and to manage the annual Cat 1 services test schedule.</p> <p>Update April 2021 The Applications Manager is continuing to review and update Cat1 application documentation and is looking to develop DR “runbooks” for step by step DR process work instructions from an application level perspective. Ongoing in conjunction with the related ongoing underpinning infrastructure review and upgrade work as detailed in 367 above.</p>	
370	L&D20	Head of HR	<p>Learning and Development is taking place within the Force and this is driven by the HR L&D team who are supported by the dedicated personnel within Sopra Steria. Two strategy documents have been produced: a) People Strategy 2017-20 and b) Leadership Strategy 2018-20. As these were produced a few years ago they need updating and reissuing to support the current direction on Learning and Development. In addition, there needs to be a clear direction of travel with regular evidencing so that as time moves forward action is being done to support the vision identified within the Strategy. Also, management and monitoring needs to be focused on the strategy with clear evidence to support the effect and outcome from the learning and development process.</p> <p>Recommendation A revised and updated People and Leadership Strategy be issued and as part of this guidance a forward action plan be in place alongside how the strategy/plan will be managed and monitored. (Priority 2)</p>	End of Q1 2021	September 2021	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment The strategic direction of Cleveland has taken shape with our Towards 2025 Plan on a page and our service improvement agenda is in final development to support its achievement. The People and Development leadership is working to revise strategy and delivery plans to meet these organisational priorities.</p> <p>Update June 2020 Implementation date revised as the new Director of HR is now taking this forward.</p> <p>Update September 2020 A planning day has been arranged for 29th September, following the Chief officer planning event the day before. This is to ensure that the people priorities are aligned to force priorities. We will also be piloting the new force strategy template. Ongoing.</p> <p>Update February 2021 The revised People Strategy will be finalised following the completion of the Force Management Statement work. It will then be subject to the usual consultation and approval process with a target date of April 2021</p> <p>Update May 2021 Actions 370, 401 and 407 have been linked together as they all require the production of a People Strategy and supporting action plan. Due to the duplication of the actions future updates will be provided under 370 only until the actions are closed.</p> <p>The development of a People Strategy is reliant on the completion of the Force Management Statement (FMS) as it will be required to address the priorities and risks identified. Once written the Strategy will require consultation and equality impact accessing before being ratified by both the People and Wellbeing assurance and delivery group, and then the Executive Management board. The FMS is in the final stages of production so work will commence soon.</p>	
371	L&D20	Head of L&D	<p>There is no corporate/coordinating arrangement/agreement in place which identifies the learning and development needs to support the operational direction of the Force. In addition, there is no system, procedure or document that demonstrates that Learning and Development is being delivered to the right people at the right time and that this supports the operational delivery of the Force.</p> <p>Recommendation Support the operational direction of the Force a corporate and coordinating arrangement/ agreement be developed which must support how learning and</p>	3rd quarter 2020 for the training plan and skills audit to be presented to COT for approval for the year 2021-22	2nd quarter 2021	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment A revised skills audit and greater dialogue with Force senior leadership is already underway. There has always been a delivery plan and this continues to be developed to support force needs. The governance arrangements have been made clear which are that the People and Wellbeing Board will provide recommendations with sign off being given by COT in time for budget planning for the coming financial year.</p> <p>Update June 2020 A review of L&D is going to be undertaken during the summer. Any recommendations from the report will be taken to the Chief Officer Team for ratification and costing.</p> <p>Update September 2020 Strategic review commenced late July 2020 for 3 months. A report updating the position on the skills audit and Force wide Training Needs Analysis is due end of September 2020 for the mid October People and Well Being Delivery and Assurance Group. Actions will be taken as above.</p>	

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			development is being delivered to the right people at the right time to support operational delivery. (Priority 2)			<p>Update February 2021 Following data collection and engagement with leaders across the Force the DCC led a training priorities meeting to identify external spend for the Force for this year. This has been completed and a final proposal for budget will be made. Senior leaders agreed the organisational priorities based on strategic risk and no further spend outside of the agreements will be made unless this is agreed via new governance group. Similarly an internal training plan is being finalised to determine delivery of in house programmes again based on strategic risk.</p> <p>Further programme of work has been identified to support the identification of Force profile to determine better understanding of force requirements and therefore the extent and whereabouts of skills gaps.</p> <p>Update May 2021 The completed External Training prioritisation continues to be refined. The planning to commence the Training Prioritisation & Strategy Group is underway and on track to go live in Summer 2021, a core function of the group will be to report on metrics that monitor how the L&D department is supporting the operational direction of the force.</p>	
372	L&D20	Head of L&D	<p>Training records are managed by Sopra Steria as part of their contractual arrangements with the Force. There is a structure for roles and responsibilities for maintaining accurate training records but currently these are very dependent upon Sopra Steria who are instrumental in managing the HR records. Opportunities for improvement and a more transparent arrangement will become possible once the contract with Sopra Steria comes to an end in September 2020.</p> <p>Recommendation Develop a modern recording system for all training and development requirements. (Priority 2)</p>	1st quarter 2021	IN CAPITAL PLAN FOR 2022/23	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment This will take place as part of the new arrangement for the service. A full business case will need to be presented and approved and due cognisance of the wider HR platform taken before any movement on this can take place.</p> <p>Update June 2020 A review of L&D is going to be undertaken during the summer. Any recommendations from the report will be taken to the Chief Officer Team for ratification and costing.</p> <p>Update September 2020 As above an update will be available at the end of October 2020. Sopra Steria staff transfer to CP on 1 October 2020. The lead on the Strategic review of L and D has already identified improvements to data capture and recording. His report will determine whether Oracle is developed to meet this requirement or whether a fit for purpose Learning Management System (LMS) is required. Any funding will form part of the 2021 22 financial planning process.</p> <p>Update February 2021 A project is required to be set up to look at exploiting the current Oracle system in the first instance as a means of delivering reliable records and skills profiles. The project is wider ranging than learning data and will require a data cleansing exercise. This is outlined as a work stream in the current project plan which is under development for delivering change into the organisation</p> <p>Update May 2021 Following the Futures board on 01/04/21 the Chief Constable has approved the commencement of the Transformation of the L&D function and associated project plan. The following action is in scope: Systems: <i>the changing of existing systems to provide the functionality of a Learning Management System</i></p>	
373	L&D20	Head of L&D	<p>The system that currently manages Learning and Development is operated by Sopra Steria and does not seem as interactive as it should be. The reporting system also does not provide meaningful output both of training provided, future training needs and those who have not had training.</p> <p>Police training records may not be totally accurate as training obtained/given outside of the corporate L&D process may not be picked up.</p> <p>Recommendation An improved method of recording training and development both given and required be</p>	Complete		<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment We will review the features of the current system to improve, but it is likely the step change and integration required would be through a modern digital system and this will need a full business case developing.</p> <p>Update June 2020 A review of L&D is going to be undertaken during the summer. Any recommendations from the report will be taken to the Chief Officer Team for ratification and costing.</p> <p>Update September 2020 As above an update will be available at the end of October 2020. The accuracy of Force training records and provision of management information reports are key elements of the Strategic Training / L and D review and part of the training records accuracy work is aligned with the Force's Service Improvement Programme. Accuracy checking is prioritised, and current focus is on Safeguarding and vulnerability,</p>	

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			implemented with assurance that all records are totally accurate and capture all training and development received. (Priority 2)			<p>Investigation and PIP accreditation, specialisms and police officer core mandatory training requirements.</p> <p>Update February 2021 Current position on understanding the position of PIP accreditation is accurate. The position of Mandatory training for operational officers has taken precedence this period to determine the state of backlogs and develop recovery plans. This has been established and recovery plans are in place.</p> <p>Update May 2021 The data review and cleanse over the previous quarter during the recovery of backlogged training has resulted in an accurate database of the PST, EFA and TL2 skills attributed to 800+ officers in the workforce. In addition, a resource has been allocated to own the now accurate PIP data profiles and quality assurance for ongoing maintenance of same. Recommend closure</p>	
374	L&D20	Head of L&D	<p>Management monitoring data is not freely available and requires a specific request to Sopra Steria to obtain this. Also the data requested will only show what training have been given and recorded and does not provide a facility to identify those who have not been trained. This should improve once the current contract with Sopra Steria is brought back in house, however, it is likely that a new HR software system will be necessary to provide a more robust and informative database for learning and development.</p> <p>Recommendation A new HR software system be resourced and acquired to provide adequate and appropriate management and monitoring data for all supervisors/managers in the Force. (Priority 2)</p>	2nd Quarter 2021	In Capital Plan for 2022/23	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment It is unlikely that a capital bid will be ready in time for the 2021 budget year but one will be developed for the coming year. In the interim we are seeking improvements in how we exploit the data in the current system.</p> <p>Update June 2020 A review of L&D is going to be undertaken during the summer. Any recommendations from the report will be taken to the Chief Officer Team for ratification and costing.</p> <p>Update September 2020 As part of the learning and development review the capabilities of the current system are also being examined as an interim solution and to maximise its capabilities.</p> <p>Update February 2021 As above</p> <p>Update May 2021 Following the Futures board on 01/04/21 the Chief Constable has approved the commencement of the Transformation of the L&D function and associated project plan. The following action is in scope: Systems: <i>the changing of existing systems to provide the functionality of a Learning Management System</i></p>	
375	L&D20	Head of L&D	<p>An example of training provided to facilitate a key initiative for the Force is in regard to the Personal Development Review (PDR) process. The Challenging Conversations training was instrumental in providing both Managers and operatives with the skills needed to assist in the development of PDR.</p> <p>The Challenging Conversations Evaluation Report (undated) identifies a) a lack of attendance at the challenging conversations training courses and b) a lack of take up on follow up initiatives. Quotes from the report include:</p> <ul style="list-style-type: none"> • “Out of 312 members of first, second and third line managers eligible to attend only 183 Officers and Staff have taken part on one or both of the days.” • Cancellation or non-attendance of day 1 has run at 30%. <p>Recommendation Attendance and follow up of all training and development be at 100%. (Priority 2)</p>	September 2020	June 2021	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment In order to improve attendance a number of actions need to be taken:</p> <ul style="list-style-type: none"> • Attendance at all courses needs to be managed at the front line through supervision. • A longer term cultural shift in attitudes to managing CPD is required which organisational changes through the service improvement agenda are aimed at. • Changes to DMS and the rostering in of training days will support the non-attendance agenda in a large group of staff in IRT and will be extended to other groups following the completion of further demand work. • Improvements in performance reporting will enable local managers to understand rates of non-attendance. This is reported monthly through contracting arrangements and can form part of HR performance packs currently being developed for commanders. <p>Update June 2020 The review is on track to take place in the next two months. Any timeslips will be reported to the Director of HR to be taken into consideration as part of the overall review of L & D.</p> <p>Update September 2020 Covid restrictions paused learning and development and a recovery plan which has identified key force priorities is in place. As part of this those courses that have priority also have priority participants and attendance is being monitored closely, with Superintendents being advised of nonattendance for local actions to be taken. The courses associated with PDR have been paused and are being redeveloped as online learning for initial delivery in October 2020.</p> <p>Update February 2021</p>	

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						<p>As a key element of our recovery plans for training the RMU is now working with training admin to abstract staff on duty days to ensure that they attend mandatory training. Reports of non-attendance are reported to superintendents for action and weekly reports are being created regarding attendance rates in these key areas where recovery plans exist. As this year progresses and RMU capability improves this will be extended out to more programmes. The ACC is updated with weekly reports.</p> <p>Update May 2021 Attendance on mandatory training is managed through RMU; where a programme is advised, not mandated, this will be on self-booking basis. Blended and online approaches to learning are being rolled out to support attendance at training events. The L&D department is working more closely than ever with heads of command to report attendance at learning events, and the establishment of the L&D Governance Group from late spring 2021, will support prioritisation of training and key messages about expectations about attendance at learning events. Currently for mandated courses non-attendance is now reported to Chief Inspectors to follow up on. Clearer messaging about mandated courses is an area which is being continually reviewed.</p>	
376	L&D20	Head of L&D	<p>Overall the effectiveness of training is not a function of the Force and therefore whether the right training is being provided to the right people at the right time is unknown.</p> <p>Recommendation Management to identify how training is measured for its effectiveness and to verify that the right training is provided to the right people at the right time. (Priority 2)</p>	4 th Quarter 2020	2nd quarter 2021	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment Developing clarity about measures of effectiveness is part of service improvement. Evaluation methods will be improved so that at the design phase of a programme the impacts and outcomes are better understood so that we can better develop measures of success.</p> <p>Update June 2020 A review of L&D is going to be undertaken during the summer. Any recommendations from the report will be taken to the Chief Officer Team for ratification and costing.</p> <p>Update September 2020 As above an update will be available at the end of October.</p> <p>Update February 2021 As part of the strategic review the need to improve evaluation and effectiveness of training interventions has been identified and this forms part of the project to deliver the strategic review.</p> <p>Update May 2021 This area of work is part of the approved project brief for transformation of learning and development as a systems approach.</p>	
377	L&D20	Head of L&D	<p>The system generates reminders but is this fool proof and does it capture every training need to be followed up? Any training not initiated by Sopra Steria currently runs the risk of not being picked up and identified on Officers/Staff training records. Also although training may be provided is this learning. I.e. what has the training done to improve Officer/Staff skills and knowledge and how is this confirmed as being learnt.</p> <p>Recommendation All training be centrally controlled to confirm that training was relevant, appropriate and that monitoring and follow up can take place. (Priority 3)</p>	4 th Quarter 2020	2nd quarter 2021	<p>Report Published April 2020 Presented to Audit Committee 29/6/2020</p> <p>Management Comment This will be impacted by the redesign of the service.</p> <p>Update June 2020 A review of L&D is going to be undertaken during the summer. Any recommendations from the report will be taken to the Chief Officer Team for ratification and costing.</p> <p>Update September 2020 Sopra Steria staff transfer to CP from 1 October 2020 and this is the right time to initiate this work .This is also an element of the strategic L and D review.</p> <p>Update February 2021 This forms part of the overall project for L&D strategic Review.</p> <p>Update May 2021 This work is underway and being mapped out.</p>	
378	SAR20	Head of Information Management / Data Protection Officer	<p>A review will be undertaken of the Force's SAR Procedure to ensure coverage is in place for all key aspects of the SAR process including conflicts of interest. (High)</p>	Complete		<p>Report Published July 2020 Presented to Audit Committee 2/10/2020</p> <p>Update September 2020 Head of Information Management to discuss with DPOs within the region to discuss conflict of interests and to agree a potential cross force agreement when this occurs.</p>	

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						<p><u>Update February 2021</u> No further progress re discussions. Where possible, conflicts are resolved internally, although there are very few staff who can carry out this work locally.</p> <p><u>Update May 2021</u> The decision has been made that there is no requirement to change the process in place for this as it occurs so infrequently. The regional working group all have good working relationships and when issues of this manner arise it is agreed that forces can approach neighbours to conduct the SAR on the others behalf. (Request closure.)</p>	
380	SAR20	Strategic HR Manager	The Force will carry out an analysis regarding the number of SARs received from existing staff members to identify any trends. Following this analysis, the Force will implement an action plan to remodel existing processes in place to improve transparency and subsequently reduce the number of requests from existing staff members. (Medium)	Complete		<p>Report Published July 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> Work on determining and analysing the number of SARs received from existing staff and understanding why is scheduled to commence from mid-October 2020. The findings will help to inform what actions need to be taken to continually improve the position. The initial analysis will include any appropriate feedback from action 381 immediately below.</p> <p>Senior Business Partner Dave Bradley will lead on this work supported by other team members.</p> <p><u>Update December 2020</u> This action remains work in progress.</p> <p>The Strategic HR Manager now has the details of SARS requests from March 20 to Nov 20.</p> <p>Some requests relate to individuals whose cases are known to us. Examples include the background being live disciplinary cases, previous disciplinary cases, ET cases, Civil proceedings, grievances and injury award requests. Some are names less well known to me at this stage. Just all needs collating and categorising as the next step.</p> <p><u>Update February 2021</u> The analysis of SARs received for the 9 month period from March to November 2020 for existing staff members has been undertaken. The findings have been forwarded to Phil Brooke to determine whether any improvements need to be made to existing processes / remodelling etc. Links to action 381.</p> <p><u>Update May 2021</u> This is a legacy issue which will take a considerable amount of time to address. This will be addressed in line with the work ongoing to improve culture and behaviour within the organisation and build trust between the staff and the senior leadership. This work is included within the leadership workstream and service improvement. (Request closure)</p>	
381	SAR20	Head of Information Management / Data Protection Officer	Closer monitoring of SARs will be undertaken to ensure they are being processed in a timely manner and in line with statutory guidelines. (Medium)	Complete		<p>Report Published July 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> Stats to be provided to Monthly DSE SMT and ISB. Statutory compliance is 100%, current compliance is between 85-94%. Exception reports for those not cleared within the statutory time frame will be provided with the stats.</p> <p>FOI and SAR is currently being amalgamated for resilience purposes.</p> <p><u>Update December 2020</u> A monthly SMT meeting is held and the stats are reported into this meeting to ensure compliance and performance is being regularly monitored with oversight from the head of department. Any cause for concern will be highlighted at this meeting and addressed accordingly.</p> <p><u>Update February 2021</u> Tracking of SARs continues. Several large and complex SARs are overdue. One complaint raised to ICO by member of staff was responded to earlier this week (w/c 8/2).</p> <p><u>Update May 2021</u> SAR requests are managed and reported on a weekly basis within the departmental weekly meeting. Any issues can be raised during this meeting. A breakdown of all stats are reported on during the DSE senior management team meeting on a monthly basis. (Request close).</p>	


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386	BC20	Business Continuity Manager	Where BC briefing or sessions are held the BC Champion will endeavour to attend. Where this is not possible, they will send either their BC Deputy or another representative. (Low)	December 2020	June 2021	<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> No BC briefings are currently planned due to the COVID-19 restrictions.</p> <p><u>Update – November 2020</u> No briefings are currently planned however this approach of ensuring a deputy can attend will be adopted once diarised for delivery. Where there is non attendance by a deputy, this will be escalated via Head of Command. Presentation slides for briefings will be distributed to BC Champions and deputies to ensure briefing material is available for future reference.</p> <p><u>Update- February 2021</u> The BC Manager is arranging a briefing session in March 2021 for staff across the Force who are new to Business Continuity and will ensure any deputies are in attendance if unavailable and briefing materials are distributed. The BC Manager is also assessing the delivery of future briefings via video conference. If this is agreed, the BC Manager will seek permission to record proceedings which can be made available thereafter to any BC Champion, especially those who may have been unavailable to attend at that time.</p> <p><u>Update May 2021</u> Deputy Business Continuity (BC) Champions have been identified for 38 of 41 units who have operational BC Plans. There are 3 units outstanding who have replied to the request and are to confirm (as at 4/5/21). Two Business Continuity briefing sessions for all BC Champions are being arranged in June 2021, where the request for deputies to attend will take effect for all units, if BC Champions are unable to attend. Briefing materials will be made available to BC Champions and their deputies on completion of the sessions. The BC Manager has recently started delivering one hour BC Champion Induction briefings to those new to the role. Inductions recently took place with 5 units however as all BC Champions were able to attend, deputies were not in attendance.</p>	
394	OpS20	Superintendent – Local Policing North	The Force will amend the draft Overtime Policy that will provide details in respect of the key Police Regulations and other internal practises that relate to administration and application for overtime. The policy will detail the actions agreed within this report. (Medium)	Complete		<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> A draft overtime policy has been written, which once it has been Equality Impact Assessed will be put out for consultation.</p> <p><u>Update April 2021</u> The policy was presented to the People and Wellbeing Board in December, approved at the Exec Board in March and has subsequently been published on the Force policy site and externally on the Cleveland Single Online Home internet site. This action is complete.</p>	
395	OpS20	Superintendent – Local Policing North L&D Manager Oracle/DMS System Administrator	The Force will outline the expected responsibilities of the first line supervisors and the Workforce Optimisation Unit (WOU). These will be included as appendices to the Overtime Policy. The Force will consider whether additional training is required for first line supervisors on the application and implications of the Police Regulations in relation to overtime. Training will be also be rolled out for staff on use of the self-service expense system. (Medium)	Complete		<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> A draft overtime policy has been written, which once it has been Equality Impact Assessed will be put out for consultation.</p> <p>An Overtime Action Plan is in operation, which will be managed as part of the DMS project. There are specific actions relating to training of First Line Supervisors. There is also opportunity for bite sized training to go out in Force publications. To be progressed.</p> <p><u>Update February 2021</u> The Force has not been able to progress training at this time due to demands for other high priority training plus, lack of an existing training package would require a new product being developed. In the meantime, Federation have circulated guidance to all Federated ranks around Regulations, including overtime. Overtime policy will be published in due course and elements will be further reinforced by Duties Policy which is under development.</p> <p><u>Update April 2021</u> The overtime policy has been published which includes details about supervisor responsibilities as well as claimants, no specific training is required; comms have been issued to All in relation to recording overtime and the existence of the policy.</p> <p>Bitesize guides have been published on the Learning and Development site to assist staff with all aspects of the new Duty Management System (DMS). Recommended for closure.</p>	

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396	OpS20	Superintendent – Local Policing North Oracle/DMS System Administrator	The Force will investigate whether working patterns and notification dates for non-working days including bank holidays, can be built into the system to allow for enhanced control of overtime claims and scrutiny by first line supervisors. In the interim, all the WOU will continue to conduct retrospective audits on overtime claims to ensure that rates of pay are being correctly applied and claimants are receiving the correct overtime benefits. (Medium)	Complete		<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> WOU are starting to make progress on the implementation of Covergraphs and auto-refusals. This in turn will increase overall resilience.</p> <p>In the meantime, Heads of Commands are given monthly management information relating to people claiming more than 32hrs per month.</p> <p><u>Update February 2021</u> Implementation of Change of Duty Notifications' (CODN) will be complete in February. This will mean that any changes to an individual's duties (including requirement to work on a non-duty day) will result in an automated notification to the individual advising them of the change and the notification date.</p> <p><u>Update April 2021</u> Individual's working patterns are built into Oracle which then feeds directly into DMS. Team duty spreadsheets used by IRT teams have been removed and IRT staff are required to use DMS to manage their duties. Change of Duty Notifications (CODN) functionality has now been implemented on DMS. When an officer's duties are changed in DMS (including bank holidays) they will automatically receive a notification informing them of the change. Previously there was not always a clear audit trail to show when an officer's duties had been changed in order to determine whether or not overtime was payable. The CODN includes the date of the changed duty and the date of notification, thereby providing clarity and an audit trail to show if overtime is payable. The introduction of CODNs has been supported by recent messaging to officers reminding them of the requirement to include accurate information within overtime claims regarding the date of notifications. In addition, the Resource Management Unit (formerly WOU) conduct retrospective audits of bank holiday working to ensure officers have correctly identified the date they were notified of the requirement to work. Recommend this action is now GREEN.</p>	
398	OpS20	CFO	The Force will enter into negotiations with Cleveland Police Federation to include a deadline for when overtime forms can be submitted for approval, to reduce the risk of 'old' overtime forms being submitted, approved and paid. This information will be codified into the Overtime Policy. The policy will also detail recommended periods between submission and approval by first line supervisors. The Force will investigate the current unapproved overtime claims and retrospectively approve or remove these from the system, where appropriate. (Low)	Complete		<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> Not yet progressed; with Federation but included in the draft policy.</p> <p><u>Update February 2021</u> Three month deadline for submission included in Overtime policy.</p> <p><u>Update April 2021</u> The policy was presented to the People and Wellbeing Board in December, approved at the Exec Board in March and has subsequently been published on the Force policy site and externally on the Cleveland Single Online Home internet site. This action is complete.</p>	
399	OpS20	Superintendent – Local Policing North CFO	The Force will establish thresholds to identify where TOIL balances have exceeded 'normal' amounts. Any excessive TOIL balances will be investigated to ensure that they have been authorised correctly, and that arrangements are in place to offset proportions of TOIL through time, rather than balances being converted to payment. The Force will consider whether the TOIL conversion for amounts of 30 hours plus is appropriate. Guidance will be provided within the overtime policy on TOIL accumulation over an extended period of time. The policy will also detail recommended periods between submission and approval by first line supervisors. (Low)	31 December 2020	August 2021	<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p><u>Update September 2020</u> Not yet progressed but guidance will be in the policy. Officers with more than 30 RDILs are currently being put onto reduction plans.</p> <p>Once RDILs are at lower levels, TOIL will be addressed.</p> <p><u>Update February 2021</u> A Duties Policy is under development. This will outline the Force approach to working hours, including rest days, TOIL, overtime etc. (all of which will be in line with Police Regs).</p> <p><u>Update April 2021</u> A draft approach to TOIL (and RDIL) management has been produced and will be presented to the COT in the near future. The proposal would see the Force move to a position more in line with Police Regulations in terms of the accrual and management of TOIL, a limit of 40 hours maximum TOIL that can be retained on an individual's balance. Prior to submission of these proposals further work is required to determine process and technology requirements to ensure individual balances cannot exceed 40 hours. In the meantime, there are around 60 officers with balances exceeding 40 hours. It would not be</p>	

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						<p>practicable to audit these balances to ensure they have been 'authorised correctly'. Officers are being routinely encouraged to reduce their outstanding leave balances albeit there is acknowledgement that there has been a reduced willingness on the part of officers to take TOIL during the current Covid pandemic.</p> <p>Update June 2021 Draft report presented to Managing Demand Board in March 2021. DCC McMillan requested additional information prior to submission to Exec Management Board. Report has since been updated accordingly and submitted to Exec Staff Officer for inclusion in next EMB (July).</p>	
400	OpS20	Superintendent – Local Policing North	The Force will reiterate the expected normal working patterns for officers. This will include rest days required for working extended periods. This information will be highlighted within the policy, including drawing officer's attention to the excessive overtime audits that are used to identify these types of working patterns. The Force will seek to transition away from over reliance for overtime on the textburst system; moving to a controlled and planned model. (Low)	31 December 2020	August 2021	<p>Report Published August 2020 Presented to Audit Committee 2/10/2020</p> <p>Update September 2020 This is included in the draft policy.</p> <p>Update February 2021 Duties policy being developed which will support the overtime policy. Duties policy will articulate Police Regulations in terms of working hours, rest days etc.</p> <p>Update April 2021 The establishment of the Resource Management Unit (formerly WOU) is enabling the Force to implement a staged approach to corporate duty management, i.e. key operational teams will have their duties managed centrally. This will allow for more effective resource management and planning and enable the early identification of resource pressures. This in turn will enable us to implement interventions (e.g. duty changes) rather than relying on overtime. A PowerBI workbook has been developed to provide a future-view of resources in FCR and IRT <u>DMS Staffing Numbers</u>. The combination of DMS to manage duties and RMU to allocate training courses means that we are able to ensure that officers receive the required rest days when moving from their normal duties onto a training course and back again, which can result in an excessive number of days worked. The DMS system can also be used to calculate hours owed by and to shift workers who have attended training courses. The Overtime Policy includes reference to the wellbeing issues associated with working excess hours and draws officers' attention to the excessive overtime audits and expected intervention by supervisors. Recommended for closure.</p>	
401	HRW20	Interim Director of HR Head of HR	The Wellbeing Strategy will be uploaded to the intranet and communicated to staff. The People Strategy will be developed and approved by the Interim Director of HR and presented to the Executive Management Board for approval. Once approved, the updated People Strategy will be uploaded to the intranet and communicated to staff. (Low)	See action 370		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p>Update February 2021 Wellbeing Strategy uploaded and publicised via messages to all in November 2020. Work still progressing re the People Strategy.</p> <p>Update May 2021 Actions 370, 401 and 407 have been linked together as they all require the production of a People Strategy and supporting action plan. Due to the duplication of the actions; future updates will be provided under 370 only until the actions are closed.</p>	
402	HRW20	Head of HR Wellbeing Manager	The Wellbeing Department will work with the People Project Manager to ensure that wellbeing is captured and recorded as part of the new induction process with sufficient records maintained. (Medium)	Complete		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p>Update February 2021 The Wellbeing team now have an input to the core module of all induction programmes and the revised police staff induction process. Wellbeing is also emphasised in the induction pack and conversations are encouraged during PDRs – evidence in file.</p> <p>Discussions are on-going with both the people project manager and the L&D department to record who the Wellbeing input is provided to so can be reported on.</p> <p>Update April 2021 The induction pack provided below requires supervisors to have wellbeing discussions with the new starter and record the outcomes. Action complete.</p> <p> Cleveland Police Induction Pack 2020</p>	

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403	HRW20	Head of HR Wellbeing Manager	The Oscar Kilo Blue Light Wellbeing Framework self-assessment (2020) will be completed by management to establish what progress has been made by the Force in its wellbeing offerings and determine any further areas for improvement. Results of the self-assessment will be reported to the People and Wellbeing Board to ensure appropriate monitoring of actions. (Medium)	31 January 2021		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Framework self assessment on going currently expected completion date of 19th February 2021.</p> <p><u>Update May 2021</u> The results of the self-assessment have been compiled and will be reported to the July P&W board</p>	
404	HRW20	Head of HR Wellbeing Manager	The Wellbeing Department will liaise with the Organisational Development Coordinator to make sure wellbeing is given enough importance and promoted in Performance and Development Review communications. (Low)	Complete		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Ongoing</p> <p><u>Update May 2021</u> The Organisational Development Coordinator continues to promote wellbeing discussions in PDRs. This is communicated via the 2 weekly E-PDR newsletters. In addition messages are communicated at key points of the year as PDR and Wellbeing conversation reminders. There is also a wellbeing conversation video tutorial for new starters and Notes embedded in the PDR system to help managers to have wellbeing conversations and how to record them. Evidence is available in support of these processes. Action to be considered for closure.</p>	
405	HRW20	Head of HR Wellbeing Manager	The Wellbeing Department will liaise with the TRiM Coordinators to ensure that effective working relationships are established, and appropriate administration protocols are put in place. The TRiM monitoring spreadsheet will be updated to include predefined values to ensure consistent recording of data to facilitate standard reporting and ensure TRiM assessments are appropriately tracked. The TRiM monitoring spreadsheet will be reconciled to ensure all outstanding TRiM assessments date are recorded. The Force will develop KPIs for TRiM. KPIs will be reported to the People and Wellbeing Board on at least a quarterly basis to ensure that the TRiM programme is efficient and functioning effectively. (Medium)	31 January 2021	July 2021	<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Wellbeing counsellors and Trim co-ordinators have established a referral process</p> <p>Wellbeing manager working with the Trim manager to develop process for standard reporting and agree the KPI which will be reported to the PWDAB on a quarterly basis as part of the Wellbeing highlight report.</p> <p>1st quarterly report will cover Q4 (2020/2021)</p> <p><u>Update May 2021</u> First quarterly report will be available in May covering Q4 2020/2021. And will be presented to the July People and Wellbeing Board as part of a wider update.</p> <p>The report will cover number the of incidents, the number of individuals offered TRiM and the number of initial and follow up referrals to wellbeing</p> <p>The Wellbeing Manager has access to the information required for reporting and the TRiM co-ordinators continue to improve the data recorded.</p>	
406	HRW20	Head of HR Wellbeing Manager	Once the new occupational health and wellbeing case management system is in place, management will review the system capabilities to determine what reporting improvements can be made to the People and Wellbeing Board reports. Key statistics will be outlined and included in monthly reports to provide up to date information. (Medium)	30 April 2021	July 2021	<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Ongoing</p> <p><u>Update May 2021</u> Data upload issue resolved so management referral module can now be progressed. Remedial work on documentation is needed(formatting).</p> <p>The last training session and build of response form will be scheduled before the end of May, dependant on supplier availability</p> <p>The ER team had an overview briefing and opportunity to feedback on the form. The Wellbeing team will develop comms regarding changes.</p> <p>Issue with CP firewall allowing access for report downloaded had been resolved but has reoccurred, issue been looked into again by the supplier.</p>	

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407	HRW20	Head of HR Wellbeing Manager	Management will consider the findings of the wellbeing questionnaire when developing the People Strategy and Wellbeing Action Plan. (Low)	See action 370		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Ongoing</p> <p><u>Update May 2021</u> Actions 370, 401 and 407 have been linked together as they all require the production of a People Strategy and supporting action plan. Future updates will be provided under 370 only until the actions are closed.</p>	
408	P&CC20	Chief Finance Officer – Chief Constable Chief Finance Officer-PCC	Section G of the organisations' Financial Regulations and Standing Orders (Delegated Limits) will be revised to ensure that the section on delegated authorities makes specific reference to authority limits by role across the organisations over commitments and payments to suppliers. (Low)	Complete		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> This will be added to the financial regulations update that will be ratified at the March 2022 audit committee.</p> <p><u>Update March 2021</u> The Financial Regulations and Standing Orders (Delegated Limits) were presented at the March Audit Committee. Action Complete.</p>	
410	P&CC20	Head of Finance and Payroll	A process should be introduced to ensure that a formal review of the supplier listing is conducted and documented on at least an annual basis. (Low)	31 March 2021		<p>Report Published November 2020 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Ongoing</p> <p><u>Update April 2021</u> There is a process in place for System administration to review suppliers, which have been in-active for 18 months, on a quarterly basis and the list of those suppliers closed is sent to AR/AP manager for information and advice. These details are held centrally. Action complete</p>	
411	DA21	Detective Chief Inspector	All domestic abuse incidents will be reviewed by a supervisor who will ensure that a DASH assessment has been completed. (High)	April 2021	June 2021	<p>Report Published January 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Frontline supervisors continue to review DASH risk assessment and endorse the PPN, this is subjected to dip sampling on a monthly basis and feedback through strategic groups and MPRs. A training package to better understand risk assessment is currently being produced for all frontline supervision and PVP Hub staff this is being managed through the SVDG.</p> <p><u>Update May 2021</u> A performance framework has been developed in force (power Bi), the tool allows identification of missing PPNs following a DA incident, this is addressed through the Safeguarding and Vulnerability Delivery Group and DA Governance meeting. CIs are addressing directly with officers in performance meetings to ensure compliance. Risk assessment training has been developed and training has begun with the PVP Hub staff (Risk Assessors). Training products are available to view and in addition a risk assessment tool kit is being produced and will be distributed to the wider workforce. DA Policy has been updated (Section 5.1 details).</p>	
412	DA21	Detective Chief Inspector	Supervisors will ensure body worn footage is attached to domestic violence incidents. The Force will review incidents from October 2020 to ensure this issue is now resolved. (High)	June 2021		<p>Report Published January 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> Following the implementation of the new body worn equipment it is now mandatory for all officers to switch on their BWC at every DA incident and mark the recording as evidential. In addition all DA retractions are to be captured on BWC. Further communication has been provided to Frontline officers to this effect. As a result Frontline Sgt's now carryout dip sampling each month of DA BWF and ensure that procedures are being followed. The dip sampling forms part of officers PDR. In addition a thematic review has been scheduled for April 2021 to review DA incidents, BWF and evidence Led prosecutions.</p> <p><u>Update May 2021</u> A thematic review took place in February 21; the recommendations following the review have been included in the DA Action plan. A further performance measure has been implemented by IRT via the vulnerability desk in March 21, all DA incidents are audited for Body Worn Footage (BWF) being marked as evidential and reviewed by the C/Insp for failures. On 26th April 21 RSM commenced an audit in relation to BWF and evidence led policing in force a report is expected in the next 3 weeks.</p>	

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413	DA21	Detective Chief Inspector	The Force will establish whether there is a fundamental misunderstanding as to the purpose of MARAC by reviewing officers. A further review will be undertaken of the public protection logs from more recent domestic abuse incidents to establish whether the development work conducted since that time has impacted positively upon this area. Where relevant, further training will be provided to relevant Officers on the purpose of MARAC. (High)	November 2021	July 2021	<p>Report Published January 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> MARAC is currently subject of a formal review Safe Lives have been commissioned to project manage having been funded by the OPCC and Local Authority partnerships. The review has commenced in January 2021 and will take several weeks to complete. All agencies, partners and police will be consulted. The findings will see a reform of current practices, training, more frequent MARAC meetings and changes in procedure.</p> <p><u>Update May 2021</u> In addition to the review by Safe Lives a new MARAC screening process has been developed. Further training has taken place with Supervisors and Hub staff with regards to MARAC and risk as detailed in action 411.</p>	
415	DA21	Detective Chief Inspector	The Force will perform a full process review into Clare's Law and Sarah's Law from application through to disclosure to identify blockages and challenges. Where required remedial action will be taken and full process notes will be developed. (High)	February 2021	July 2021	<p>Report Published January 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update February 2021</u> In February 2021 a full review of the Clare's Law process has begun and is subject to a small working group which is action plan led. Sarah's Law is also subject of review this is being headed by DCI SOMU.</p> <p><u>Update May 2021</u> A review has taken place with regards to both Sarah's Law and Clare's Law. Revised SOPs for both have now been completed however the Sarah's Law SOP has not been finalised as we are still awaiting the paper based system to incorporated into NICHE this is expected to be completed imminently, once done this action can be considered for closure.</p>	
416	ANPR21	ANPR Co-ordinator	A policy will be written and implemented to ensure that the requirements of NASPLE are addressed and tis will be communicated to all relevant staff. (Medium)	31 March 2021	End June 2021	<p>Report Published February 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update April 2021</u> The policy has been written and will be presented at the reinstated ANPR strategy meeting in May. An action plan has also been added to that group of which the Policy is part of.</p>	
417	ANPR21	ANPR Co-ordinator	A strategic assessment will be completed for all ANPR camera deployments to ensure that the placement of an ANPR camera is appropriate and, given the circumstances of the threat/problem, proportionate. (Medium)	31 March 2021	End June 2021	<p>Report Published February 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update April 2021</u> Awaiting on ICT to implement forms within Cireson (Service Desk) for tracking of requests for moveable cameras and to capture the approvals. This was originally going to be a Microsoft form on officer 365 platform, but due to full rollout not being until later this year, Cireson chosen as default request platform.</p>	
418	ANPR21	ANPR Co-ordinator	A process will be introduced to ensure that when a camera has been in place for 12 months, a DPIA will be completed on the anniversary date (12 months) of its deployment. (Low)	31 March 2021	End June 2021	<p>Report Published February 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update April 2021</u> In the future this will form part of the DPIA review process; asset tracker will be changed to allow flagging of those deployments that have been in place and are coming up to 12 month anniversary.</p>	
419	ANPR21	ANPR Co-ordinator	The ANPR Co-ordinator will ensure that the revised Request for Support document currently being drafted, is completed and implemented. This new draft will contain sections on justification, rationale, assessment of value for law enforcement and outcome. (Low)	31 March 2021	End June 2021	<p>Report Published February 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update April 2021</u> Awaiting on ICT to implement forms within Cireson (Service Desk) for tracking of requests for moveable cameras and to capture the approvals. This was originally going to be a Microsoft form on officer 365 platform, but due to full rollout not being until later this year, Cireson chosen as default request platform.</p>	
420	ANPR21	ANPR Co-ordinator	The Information Management Policy and the Information Security Policy will be revised to ensure that Cleveland Police are complying with the National Standards and then reissued. In the event a separate ANPR Policy is implemented these two policies will still need to reflect the ANPR requirements of NASPLE. (Low)	31 March 2021	End June 2021	<p>Report Published February 2021 Presented to Audit Committee 25/3/2021</p> <p><u>Update April 2021</u> The revised ANPR policy references the existing information security policy and NASPLE (national ANPR standards). No changes were required to the current policies.</p>	
421	ANPR21	ANPR Co-	The installation and testing process will be	31 March	End August	Report Published February 2021 Presented to Audit Committee 25/3/2021	

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		ordinator	revised to ensure that checks are performed in line with NASPLE, evidence of initial checks completed by the TSU team and any subsequent checks are documented and held on file for a period of two years. (Medium)	2021	2021	<u>Update April 2021</u> This issue is being discussed in the ANPR strategy meeting, the current capacity within TSU and ANPR does not allow a full NASPLE compliant test to be conducted due to the timescales involved with testing. Mitigation will be in place where possible but this is an area of risk, Head of Intelligence and CI Standards and Ethics made aware. NASPLE checks are now being conducted on each site but will take a considerable amount of time to get through each location.	
422	ANPR21	ANPR Co-ordinator	An audit plan will be developed alongside the introduction of the Auditor to ensure that all auditable areas are addressed and the procedure for auditing is documented. The audit plan will be implemented, and an audit conducted, every six months to ensure that Cleveland Police are compliant with all areas of the standards. (Low)	31 March 2021	End June 2021	Report Published February 2021 Presented to Audit Committee 25/3/2021 <u>Update April 2021</u> Auditor for NAS is in place and the national auditor has been updated with necessary request for national audit. The Force follows the guidance and audit plan document from the National Auditor.	
423	SC21	Chief Superintendent Local Policing	The Force will look to reinstate the Property User Group meetings to ensure the Central Cash Team have a mechanism to report issues and escalate concerns in relation to seized cash. Once reinstated, the request for additional training will be escalated to the Property User Group. (Medium)	31 July 2021		Report Published February 2021 Presented to Audit Committee 25/3/2021 <u>Update April 2021</u> The Force Property Management Group Meeting was held on Thursday 150421 chaired by Chief Superintendent Local Policing. A Property Management Guidance document is currently being finalised and will be published shortly on the Force policy site; which is key to this meeting. Meetings are currently planned to take place 6 weekly and will move to bimonthly once embedded. The meeting has a number of agenda items including specific updates from Key Personnel in relation to Front Desk / Cash, Tascor Property store and Forensics; via written Highlight reports so that any issues can be raised formally. There is also an Action Plan which forms part of the agenda and has a specific action regarding training. C/I Learning and Development is invited to the meeting to identify and progress any L&D issues as the meeting matures and progresses.	
424	SC21	Risk and Insurance Manager	The Risk and Insurance Manager will contact American International Group to update the insurance policy to increase the value of cash insured in transit to reflect current processes. (Medium)	Complete		Report Published February 2021 Presented to Audit Committee 25/3/2021 <u>Update February 2021</u> Action complete – insurance company contacted and cash limit increased as agreed.	
425	CDSOU21	Chief Finance Officers, Cleveland and Durham	When the current demand analysis is concluded, the unit budget will be revisited to ensure that it is a closer reflection of actual costs, subject to expected future changes. At the same time, the current arrangements of cost apportionment within each force will be reviewed to ensure that they are clear and understood by all parties. (Low)	30 September 2021		Report Published April 2021 Presented to Audit Committee June 2021 <u>Update June 2021</u> Following the announcement in May that Cleveland will be withdrawing from the CDSOU collaboration (continuing only with the firearms training element); discussions are to be held at Chief Officer level in relation to these actions and the ability to comply with the recommendations. A further update and proposals will be provided once these discussions take place.	
426	CDSOU21	CDSOU Superintendent	The unit Senior Management Team meetings will be reinstated and the format and membership revised amended to ensure that: <ul style="list-style-type: none"> • They are formally minuted. • On a bi-monthly basis unit finances are included as a standing agenda item, with finance representation at the meeting. (Low)	30 June 2021		Report Published April 2021 Presented to Audit Committee June 2021 <u>Update June 2021</u> Following the announcement in May that Cleveland will be withdrawing from the CDSOU collaboration (continuing only with the firearms training element); discussions are to be held at Chief Officer level in relation to these actions and the ability to comply with the recommendations. A further update and proposals will be provided once these discussions take place.	
427	CDSOU21	Finance Managers Cleveland and Durham	The format of the outturn report will be reviewed to determine whether it can be amended to include a projection of the likely year end split between the forces. (Low)	30 June 2021		Report Published April 2021 Presented to Audit Committee June 2021 <u>Update June 2021</u> Following the announcement in May that Cleveland will be withdrawing from the CDSOU collaboration (continuing only with the firearms training element); discussions are to be held at Chief Officer level in relation to these actions and the ability to comply with the recommendations. A further update and proposals will be provided once these discussions take place.	

Summary of All Outstanding Internal Audit Recommendations – Oldest Implementation Date First

428	CDSOU21	CDSOU Superintendent	Overall unit policies will be developed and implemented for abstractions and overtime. Each policy will cover matters such as: <ul style="list-style-type: none"> • Process to be followed when backfilling abstracted posts in order to minimise costs. • Escalation and authorisation path, in particular for longer-term abstractions and replacements (and the point at which this should be enabled). • Reporting and monitoring processes. As part of each policy, discussion of abstractions, replacements, overtime and associated costs will be incorporated into the standing agenda for unit Senior Management Team meetings. (Medium) 	30 June 2021		<p>Report Published April 2021 Presented to Audit Committee June 2021</p> <p><u>Update June 2021</u> Following the announcement in May that Cleveland will be withdrawing from the CDSOU collaboration (continuing only with the firearms training element); discussions are to be held at Chief Officer level in relation to these actions and the ability to comply with the recommendations. A further update and proposals will be provided once these discussions take place.</p>	
429	PA21	Director of P&OD, ACC Local Policing, ACC Crime, Head of HR, Recruitment Manager	The Force will develop an action and delivery plan for positive action to outline actions in respect of the NPCC toolkit. Actions will be assigned appropriate responsible owners in line with the three strategic workstreams: <ul style="list-style-type: none"> • Organisation and People; • Communities; and • Partnerships. Progress against the actions will be regularly reported to EDI Board. (Medium)	31 August 2021		<p>Report Published May 2021 Presented to Audit Committee June 2021</p>	
430	PA21	Head of HR Recruitment Manager	The Recruitment Manager will ensure that members of selection panels are documented. (Medium)	31 July 2021		<p>Report Published May 2021 Presented to Audit Committee June 2021</p>	
431	PA21	Organisational Development Manager	The promotion and utilisation of cultural exchange programs within law enforcement will be considered as part of the Force's leadership training needs analysis review. (Low)	31 August 2021		<p>Report Published May 2021 Presented to Audit Committee June 2021</p>	
432	PA21	Head of HR Organisational Development Manager	The Force are making improvements to the existing Mentor Scheme from its 'traditional' form to a 'broader' mentoring format. The Mentoring Scheme Policy will be updated and approved once the review is completed. (Low)	31 October 2021		<p>Report Published May 2021 Presented to Audit Committee June 2021</p>	
433	PA21	Head of HR Superintendent, DSE	The Head of HR will develop a confidential review process for selection, grievances and misconduct-related processes in respect of protected characteristics to ensure a lessons learnt approach is adopted and documented. Additional advice will be provided from the EDI Team. (Low)	31 December 2021		<p>Report Published May 2021 Presented to Audit Committee June 2021</p>	
434	PA21	Head of HR Senior Business Partner (ER)	The Force are currently reviewing the Exit Policy. A confidential reporting structure for exit information will be developed with the intention of ensuring that the EDI Team have access to key information in relation to protected characteristics. The EDI Team will investigate and propose whether there is further work to be done to support those with protected	31 December 2021		<p>Report Published May 2021 Presented to Audit Committee June 2021</p>	

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			characteristics from leaving the Force. (Low)				
435	HMICRT21	Force Liaison Officer	a. We will include a column to record a required or aspirational target for closure. b. We will include on the internal tracker an indicator for internal assessment (RAG) regardless of the status on the HMCIFRS Monitoring Portal. (Medium)	30 April 2021		Report Published May 2021 Presented to Audit Committee June 2021 Update May 2021 a. Columns added to show proposed HMIC completion date, where provided, and Force proposed completion date; based on progress reports and HMIC review submission dates – action complete. b. The colour coding that was already applied to the Command lists has been transferred to the central list – action complete.	
436	HMICRT21	Force Liaison Officer	As part of the ongoing action, we will ensure an update against each cause of concern / AFI / recommendation is received and the tracker updated accordingly with the date of review. (Medium)	30 April 2021		Report Published May 2021 Presented to Audit Committee June 2021 Update May 2021 The date of the latest updates was already recorded on the central tracker list as well as the individual Command lists. These are updated every time a new progress report is received. Where updates are not being pursued an explanation is provided in the box e.g. action falls within the remit of the Service Improvement Team. Updates are requested in a timely fashion to fit in with the HMIC's schedule as to when they can be reviewed for closure. Action complete.	
437	P21	Payroll Business Partner	The suite of payroll procedure notes will be reviewed and revised, where necessary, to ensure that the organisation has one single definitive list of procedure notes, and that they are complete and up to date. (Low)	30 September 2021		Report Published May 2021 Presented to Audit Committee June 2021	
438	P21	Payroll Business Partner	The payroll exception reporting process will be reiterated to ensure that a 'positive assurance' statement is recorded on the relevant checklist in the event that no exceptions are reported each period for each payroll (i.e. a nil return on an exception report). (Low)	31 May 2021		Report Published May 2021 Presented to Audit Committee June 2021	

Reference key to Audit Reports:

Reference	Report Title	Published	Presented to Audit Committee
ANPR21	Automatic Number Plate Recognition RSM	February 2021	25/3/2021
BC20	Business Continuity 2020 RSM	August 2020	2/10/2020
CDSOU21	Cleveland and Durham Specialist Operations Unit 2021 RSM	April 2021	
DA21	Domestic Abuse Review RSM	January 2021	25/3/2021
DQ2019	Data Quality / Information Governance TIAA	September 2019	14/11/19
HMICRT21	HMCIFRS Recommendations Tracker 2021 RSM	May 2021	
HRW20	Human Resources – Wellbeing RSM	November 2020	25/3/2021
ICTDR20	ICT Disaster Recovery TIAA	March 2020	29/6/2020
L&D20	Learning and Development TIAA	April 2020	29/6/2020
OpS20	Op Sandy 2020 RSM	August 2020	2/10/2020
P21	Payroll 2021 RSM	May 2021	
PA21	Positive Action 2021 RSM	May 2021	
P&CC20	Purchases and Credit Cards RSM	November 2020	25/3/2021
SAR20	Subject Access Requests 2020 RSM	July 2020	2/10/2020
SC21	Seized Cash Spot Check 2021 RSM	February 2021	25/3/2021

	Complete; awaiting sign off by the auditors
	Recommendation being progressed
	Action against the recommendation to commence

TIAA levels	
Priority 1	Urgent
Priority 2	Important
Priority 3	Routine

RSM Priorities	
High	Immediate management attention. 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.
Medium	Timely management attention. This is an internal control risk

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	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.
Low	Scope for improvement. There is scope for enhancing control or improving efficiency and quality.