



CLEVELAND POLICE

Directorate of Standards and Ethics

Report from: Deputy Chief Constable Ian Arundale, QPM
To: Chair and Members of the Audit Committee
Date: 30th May 2022
Status: For information
Executive & Presenting Officer: Superintendent John Miller

1 Purpose

- 1.1 This report is to update members on the work of Cleveland Police Directorate of Standards and Ethics (DSE) and to provide an overview of the efficiency and effectiveness of the main DSE functions during the period 30th November 2021 to 1st June 2022.
- 1.2 The department has 3 sections: -
 1. Complaints and Conduct.
 2. Counter Corruption Unit (CCU)
 3. Information Management Unit. (Data, information security, vetting and DBS)
- 1.3 An update is provided below for each section. We have now received accurate National data from the IOPC, the first since the new 2020 regulations were implemented. The data is referenced within the complaints and discipline section of the report.
- 1.4 Implementation of a DSE Wellbeing strategy
- 1.5 A wellbeing strategy has now been developed and fully implemented within DSE. The success of the strategy and the ethos behind it has been highlighted as good practice and we have seen other teams within the force implement similar policy.
- 1.6 The Main objectives are:
 - Managers, supervisors and Blue Light Champions/Accredited Mental Health First Aiders' within DSE will take the lead on delivering the strategy, ensuring the creation of a positive culture in which all staff can talk about their mental and physical health confidently to their supervisor or nominated representative.
 - Create a culture that supports the wellbeing of all DSE employees
 - Staff are supported to invest time in raising their awareness and learning about health and wellbeing in the workplace.
 - Managers are equipped to recognise and address health issues sensitively and professionally.
 - Mandate all supervisor/manager attendance at mental health first aid training
 - The working environment promotes physical activity and healthy lifestyles.

- Staff with any mental or physical health issues will have the support, guidance and access to the right services they need at the right time.
- The Directorate of Standards and Ethics will complement and work in conjunction with the services of the Employee Relations and Wellbeing team.
- Equip DSE employees with the skills to support their own mental health
- Assist those returning to work after a period of either physical or mental ill health, making any necessary adjustments to the role/environment

1.7 DSE as a department will continue to engage with the process to best look after our people to allow them to be the best that they can be.

2 Violence against Women and Girls (VAWG)

2.1 The members of the committee will be aware of some of the recent national cases and ongoing intense media and public scrutiny regarding the police response towards VAWG both externally and internally. A VAWG Gold Group is now in place and embedded. The group oversees the adopted National recommendations. Cleveland Police continue to review processes and procedures and implement the recommendations made. There are numerous Local and Nationally driven reviews of force investigations to ensure this area remains an area of focus and priority. An update is provided within the CCU section specifically focused on the ongoing work to address abuse of position for a sexual purpose (APSP) and Sexual Harassment.

3 Ethics and Culture HMICFRS areas for improvement (AFI) and cause for concern.

- 3.1 In August 2021, Cleveland Police received feedback from HMICFRS following a progress review carried in May 2021.
- 3.2 The review found improved leadership and governance of ethics and standards across the organisation. The Code of Ethics was found to be evident through all recruitment, on-boarding, induction and promotion processes and most officers and staff knew the force values and behaviours expected of them.
- 3.3 The review found that people performance framework reinforced leaders responsibilities and a performance culture enabled officers and staff to raise issues about negative performance.
- 3.4 Comment was made that the workforce is raising concerns through the anonymous reporting line, regardless of how minor or serious. This is resulting in action being taken when inappropriate behaviour and misconduct is substantiated. Inappropriate behaviour was also noted as being addressed and challenged.
- 3.5 The review report concluded by praising the progress made and signing two of the four recommendations off.
- 3.6 The raising and discussion of ethical dilemmas is something the organisation is actively encouraging. Twelve ethical dilemmas have been discussed in the various forums (Ethics and Standards Board, Independent Ethics Committee, Ethics Advocates, Youth Commission).
- 3.7 As a result, decisions have been informed, there have been policy changes, and reassurance has been given to the level of ethics in actions and decisions made.
- 3.8 The methods by which dilemmas are recorded has been enhanced to create awareness of both the views put forward, but also of the ethical dilemma process itself.

- 3.9 An initiative has recently been introduced to improve all staff awareness of the ethical dilemmas discussed. The dilemma is stored on a communal intranet page. This is separate to the minutes and focuses solely on the discussions and lessons from ethical dilemma analysis, and what is implemented as a result.
- 3.10 There has been a significant increase in Ethics Advocates. This represents an increase in the organisational awareness of ethics generally, as well as ethical dilemmas. They are asked to discuss dilemma's, cascade learning, and actively seek ethical dilemmas in their area of business to raise and examine. The number of members has grown from 11 in December 2021 to 54 in April 2022. This has increased departmental representation from 8 in December 2021 to 27 departments in April 2022.

4 Complaints & Conduct

- 4.1 The key areas of note for this period are
- An update on the Police Regulation Reforms
 - Implementation of local command complaint investigations and Performance
 - Performance
 - Operation Assurance
 - Transition to model 3 complaint handling

Regulation reforms

- 4.2 A new College of Policing e-learning package has been designed to train supervisors in the regulatory processes of management led reflected practice created under The Police Conduct Regulations 2020.
- 4.3 This training package has now been implemented as compulsory learning within Cleveland Police. The package will be mandatory for all supervisors.
- 4.4 It is anticipated that the training will reinforce and refresh previously delivered inputs by the Directorate of Standards and Ethics at the launch of the regulatory reforms.
- 4.5 The newly appointed Supt, John Miller, has attended regulatory training. Cleveland Police are hosting a tri-force 1-week regulatory training course in June. The course will be attended by a number of newly appointed investigators and supervisors from DSE, in addition to Police Federation, Supt Association and legal department representatives. This will enable staff associations to better understand misconduct processes for their representatives and hold DSE to account if they feel processes adopted during investigations depart from the regulatory regime. Training will ensure legal services are better placed to provide legal advice in Misconduct processes. DSE are currently presenting training to new supervisors across the IRT commands during dedicated development days.

Implementation of local command complaint investigations and performance

- 4.6 The implementation of command complaint handling is now completed across all business areas within Cleveland Police. In the reporting period 865 complaints against Police were received. This equates to 376 complaints per 1000 employees. 32 of these were allocated to the local command. The forces complaints per 1000 employees remains high in comparison to national forces. Work is ongoing to understand the reasons for this. The volume of crime and calls to service received by the force and high level of public interaction and the recording methods are believed to be a factor.
- 4.7 Recording decisions were made at an average of 16 days. Average time to finalise complaints took 41 days outside of schedule 3 and 98 days inside. The investigation time for both complaint and conduct matters have been significantly reduced. DSE are working closely with the OPCC to ensure Model 3 is successfully embedded, seeking to minimise the impact of timeliness of complaint resolution outside of schedule 3.

- 4.8 The IOPC have recently obtained data for annual national reporting and comparison to our most similar forces and national statistics. It's likely this data will be published in the early summer.

Operation Assurance

- 4.9 In response to a 'super-complaint' made by the Centre for Women's Justice (CWF) in relation to 'Police Perpetrated Domestic Abuse', DSE initiated Operation Assurance. The initiative is managed by a Detective Inspector and stakeholders are Domestic Abuse Unit, Counter Corruption Unit and Human Resources.
- 4.10 Cleveland Police has invested in College of Policing training to all staff within DSE on Police Perpetrated Domestic Abuse. Feedback has been provided following the training that Cleveland Police appear to be leading on national best practice in the manner in which it handles and investigates allegations of domestic abuse perpetrated by Police officers and staff.

An ethical dilemma was raised to discuss an Operation Assurance related matter. The dilemma was based on what should the organisation do in the circumstance where a serving officer / staff was victim to domestic abuse. Discussions examined whether failing to disclose the abuse, or refusing to support prosecution, was against the Code of Ethics, particularly when the offending party was also an officer / staff.

The dilemma was discussed internally and externally and the safeguarding and wellbeing aspects in place were also examined and the committees were reassured of the process in place.

Transition to Model 3 Complaint Handling

- 4.11 On February 1st 2020 as part of the regulatory reforms the IOPC introduced options for forces in the initial handling of complaints or dissatisfaction. The three options available were model 1 to model 3. Ranging from model 1 with minimal involvement of OPCC to model 3 where the OPCC have a greater level of involvement and responsibility allowing the police to deal with investigations only.
- 4.12 In August Mr Turner made the decision that Cleveland Police would adopt model 3 and a process is underway for the transition to model 3.
- 4.13 The target date for the launch of model 3 was January 1st 2022. Following significant planning and work, the launch was implemented on January 31st 2022. The implementation is embedding well. The process is under constant review, seeking to streamline processes and improve service. The newly appointed OPCC staff have all undertaken regulatory training.

5 Counter Corruption Unit (CCU)

- 5.1 The key areas of note for this period are:
- CCU demand
 - Sexual Harassment and Abuse of Position for Sexual Purpose
 - Whistle blowing
 - HMICFRS update

CCU demand

- 5.2 The CCU establishment has now increased to 2 Detective Sergeants which will assist in managing demand.

- 5.3 The I-base system data covers the financial year periods of 2020 to 2021 and 2021 to 2022 and shows a 15% year on year increase in demand.
- 5.4 CCU currently have 119 live investigations. The demand on CCU is consistently high. The total number of live misconduct investigations is 33.
- 5.5 The Corruption Unit has a comprehensive strategic assessment in place based on the unit's demand over the previous 12 months. The assessment is used to draw inferences and make recommendations for prevention, intelligence, enforcement and prevention priorities, and influence the Counter Corruption Control Strategy. The strategic assessment is an integral part of the business planning process and is created to:
- *Drive the business of the strategic tasking and coordination group (ST&CG)*
 - *Assist strategic business planning and enable resources to be allocated*
 - *Assist the development of a control strategy*
 - *Define an intelligence requirement*
- 5.6 The newly implemented Counter Corruption Control strategy has been developed from the strategic assessment and embedded within the unit. The strategy is based on Prevent, Prepare, Protect, and Pursue and has an associated action plan managed by the CCU Detective Chief Inspector.

Sexual Harassment and Abuse of Position for Sexual Purpose Activity (APSP)

- 5.7 Sexual harassment and misogyny pose a significant threat to policing. These attitudes and behaviours not only impact within the service but also spread and permeate within our communities, manifesting in other related behaviours and conduct such as abuse of position for a sexual purpose (APSP), which significantly damages and undermines public trust and confidence in policing. Recent national events have made it increasingly important for forces to review their current policy and practice to ensure they are in a healthy position to robustly deal with all instances of sexual harassment. Cleveland Police are in the process of developing the following activity:
- A Sexual Harassment policy with associated guidance has been drafted.
 - Cleveland Police have entered into a partnership with the Sexual Violence Charity ARCH Teesside, to provide a confidential, independent support service designed specifically for victims and survivors of sexual harassment and sexually harmful behaviours within Cleveland Police
 - The CCU Prevent Officer has recently expanded the 'Prevent Corruption' training inputs, which now includes Sexual Harassment awareness raising as well as Abuse of Position for Sexual Purpose (APSP). All new starters and student Officers have, and will continue to receive, the SH training as part of a rolling programme. Various departments and teams are also in receipt of this training, including CID, IRT, OCU, etc.
 - Separate and specific sexual harassment training has been developed by the Prevent Officer and is in the process of being rolled out to specific groups and departments within the organisation.
 - Cleveland Police are currently represented at the NPCC Sexual Harassment working group, leading on the 'Effective Intervention' strand to the national work plan. It is anticipated that Cleveland will become early adopters of the draft NPCC Sexual Harassment Effective Interventions checklist for forces.

- Operation Beacon is the force approach to the management of intelligence which primarily relates to sexual misconduct and APSP and now includes Sexual Harassment.
- Cleveland Police are re-launching their involvement in the United Nation's Scheme HeForShe. This is an invitation for men and people of all gender identities to unite with women in the fight for gender equality.
- Cleveland Police are also utilising best practice shared from South Wales Police: Operation Oak. This operation is designed to ensure that supervisors of teams where there is a notable gender imbalance understand and mitigate risks.
- The Prevent Officer has initiated a relationship with the Organisational Development team. Two master classes will now be offered as part of the Organisational leadership development strategy for the force. The first is a master class on 'Ethical Leadership and Corruption Prevention'. The second is a 'Sexual Harassment and Upstander' master class.
- The Prevent Officer undertakes Interventions with officers and staff members whereby concerns/intelligence about their conduct or behaviour has come to light. The Prevent Officer has created a lesson plan and ground rules document which guides the sessions. The aim of the Interventions are reflective learning, so the officer or staff member can understand the impacts of their conduct on their colleagues and the wider organisation.
- APSP continues to be a priority for Cleveland Counter Corruption Unit, and rigorous review and oversight processes are in place to ensure all instances of both internal and external APSP are thoroughly and professionally investigated. Whilst all APSP investigations are subject to continual review, a further review following a national directive linked to the VAWG national action plan is underway.
- The Home Office have recently mandated a new requirement in relation to victim satisfaction surveys. Cleveland Police have extended the scope of our existing Domestic Abuse (DA) survey to include victims of non-DA stalking. A process has been agreed that provides an update to CCU should any APSP issues be identified.
- Counter Corruption continue to improve the investigation and management of victims and suspects within the organisation. Cleveland's CCU intends to replicate both Operation Oak and, the South Wales approach to APSP proactive auditing. Cleveland intend to expand Operation Oak and will seek to include internal APSP, sexual harassment, sexist attitudes and behaviours and other toxic misogynistic cultures.
- In addition, the CCU have adopted the NPCC APSP Checklist for Forces, committing the Checklist to a comprehensive action plan which is managed by the CCU Detective Chief Inspector.

Protected Disclosure

- 5.8 Cleveland Police Protected disclosure and Whistle Blowing Policy details and encourages the workforce to have the confidence to speak up, and to know that those raising a genuine concern will not suffer any detriment. Employees reporting a genuine concern of wrongdoing will be afforded the protection under the Act and will not be at a detriment for doing so.

- 5.9 This policy sets out the procedure for receiving concerns of workers about malpractice or wrongdoing and provides clear guidance on how reports are to be managed, recorded and communicated to individuals.
- 5.10 It is important that the force is aware of malpractice or wrongdoing as soon as possible, so that, where appropriate, it can act quickly and effectively to put matters right.
- 5.11 To add additional scrutiny the Policy has also been subject to review and feedback from members of the External Ethics Committee and an external auditor resulting in 5 recommendations, all of which are in the process of being actioned and completed via the DSE SMT Meeting.

HMICFRS Areas for Improvement

- 5.12 The CCU currently have two outstanding HMICFRS Areas for Improvement (AFIs 444 and 571) which are as follows:
- 5.13 AFI 444 - The force should improve the way corruption intelligence is assessed, graded and stored.
- 5.14 AFI 571 - By April 2020, all forces that haven't yet done so should:
- record corruption using the national corruption categories
 - produce a comprehensive annual counter-corruption strategic threat assessment, in line with the authorised professional practice
 - establish regular links between their counter-corruption units and those agencies and organisations who support vulnerable people
 - Where forces are yet to implement an effective ICT monitoring system that allows them to monitor desktop and handheld devices, they should do so as soon as reasonably practicable
 - By September 2020, all forces should have completed a review of their use of encrypted apps on police ICT systems to understand the risk they pose and to take any necessary steps to mitigate that risk
- 5.15 Significant improvements and progress has been made against all AFIs, all of which are currently subject to HMICFRS review and consideration for formal sign off. All AFIs that remain live will be subject to formal review as part of the 2022 HMICFRS review of CCU in September.

6 Information Management Unit (IMU)

- 6.1 The key areas of note for this period are
- Update on Information Governance, Information Asset Owners (IAOs) and Peer Review
 - NEP project progress and challenges
 - DBS are "outstanding"
 - Records Management and Data Quality
 - Data Protection
 - Information Rights
 - Vetting
 - Information Security

Information Governance, IAOs and Peer Review

- 6.2 The Information Security Board has been rebranded as the Information Assurance Board (IAB) with a refined terms of reference and membership, encompassing not only the information security assurances but also wider assurances relating to our information. A standing agenda has been formed along with some key performance indicator reports. In January 2022, a paper was approved by the IAB to formally disband the IAO Board to remove unnecessary duplication of governance.
- 6.3 The Head of IMU and Data Protection Officer has reviewed the structure and resourcing of the Information Management team and fed in some additional requirements to the FMS process. Some job descriptions have been amended to provide greater resilience among the teams, they have also been brought up to date to reflect current demands and focus of work. The proposed peer review of IMU has not progressed as the perspective of the new Head of IMU's coming in from another force has been utilised. They have effectively commenced this review and continues to do so. IMU have been successful in the growth bid for an Information Governance Manager – this role is formally being graded before going to advert.
- 6.4 All outstanding IMU actions within the Audit action plan have now been updated and requested to be closed as completed.

NEP project challenges

- 6.5 Progress on the National Enabling Programme (NEP) Microsoft 365 project has continued since the previous report. Sensitivity labelling and data labelling policies have been implemented to reduce the likelihood and impact of data loss through email. Full roll-out remains dependent on ICT capacity. Related requests, such as better use of eDiscovery and access to the "lite" version of Microsoft 365 are demanding on information security and IMU resources.
- 6.6 The IMU are split into 6 functions
- Disclosure and Barring Service (DBS)
 - Records Management and Data Quality
 - Data Protection
 - Information Rights – including subject access requests and Freedom of Information
 - Vetting
 - Information Security

Disclosure and Barring Service (DBS)

- 6.7 As the DBS have maintained their "good" grading from the National DBS centre for 4 consecutive years, National DBS have graded the DBS team as "outstanding" for the disclosure element of the work. The team have also been rated as "good" for the barring element of work. This highlights the consistent performance of the department. All vacant posts have now been filled, however given the significant delays to fill vacancies, a backlog of DBS applications has mounted. Solutions are being explored to fund overtime to clear the backlog.
- 6.8 The implementation of a new case management system is underway that will replace an aged system whose support is due to end. The target implementation date is September 2022.

Records Management and Data Quality

- 6.9 The Experian project and work relating to Niche/Minerva upgrades continue to improve the data quality work and automation of data cleansing. This will require ICT support and we

recognise the demand already on ICT staff. A data protection impact assessment is being drafted, that will support the upgrade to the Golden Nominal work.

- 6.10 Work is commencing towards assessing the pre-requisite work needed across the organisation in order for us to implement the Niche eRRD (electronic retention, review and deletion) tool when it is released. The pre-requisite work will have a significant impact throughout many departments, key stakeholders are being identified and brought together to discuss the impacts.
- 6.11 The Records Manager is aligning the Cleveland Police retention schedule more closely with the NPCC National Retention Schedule and will work with Information Asset Owners to align their sections of the retention schedule. Approval has been given to apply a 2 year retention period to emails, the Records Manager is currently working with stakeholders to devise a delivery plan.

Data Protection

- 6.12 The Head of IMU / Data Protection Officer has assessed Cleveland Police's compliance with the Information Commissioner's Office accountability self-assessment toolkit which detail the ICO's 338 expectations they have of data controllers. Cleveland Police are fully compliant with approximately one third of the expectations, and either non-compliant or partially compliant with the remaining two thirds of expectations.
- 6.13 The GDPR Auditor is revisiting each IAO to review the Audit Register, which doubles up as our Record of Processing Activity (it's a legal requirement to have this), to both update and ensure the register is complete, this assists with some of the aforementioned ICO expectations. This work will also identify where data processing contracts, information sharing agreements and data protection impact assessments are needed.
- 6.14 A new post of Information Governance Manager has been established, recruitment activity to fill this post is underway. The Information Governance Manager will assist the Data Protection Officer in achieving compliance with the ICO expectation toolkit and will also support the work to fulfil the findings from the aforementioned Audit Register work.

Information Rights – inc. Subject Access Requests and Freedom of Information

- 6.15 Subject Access Requests (SAR's) show an increase in demand. Employee and ex-employee SAR's constitute 19% of the total SARs received. These requests remain significant in relation to complexity and size. Since 2018 when the data protection legislation reformed, removing the £10 fee per request and reducing the statutory time to respond to these requests, numbers of requests received have doubled. To address this the Information Rights team are now multi-skilled, so that each Decision Maker is allocated an equal share of SARs and FOIs, this is providing greater resilience and will allow us to focus resource on peaks in demand for each type of request. SARs are becoming increasingly complex in terms of the context surrounding some requests, including the various types of media that individuals are requesting for example BWV, CCTV and audio recordings.
- 6.16 Freedom of Information requests have now returned to pre-Covid levels. We continue to see peaks in types of requests that attract local and national media coverage, an example being the number of Police Officers with criminal convictions, the number of drink spiking incidents, the numbers of attacks on females and racial related crimes. The use of publication strategies very rarely assists, given that related requests almost always ask for slightly different information. We do re-use past information that has been published or released under FOI if applicable.

Vetting

- 6.17 The Vetting Unit have faced significant demand given the high rates of recruitment campaigns, including the Officer Uplift Programme. The Vetting Unit are only just meeting this recruitment demand.
- 6.18 Vetting clearance decisions have now moved to a tiered system to prevent a bottle neck in decision making, effectively moving the decision making of 'no trace' vetting applicants to the Vetting Researchers. Approval has been given to uplift one of the Vetting Researcher roles to a Senior Vetting Researcher who will contribute to more complex decision making and provides resilience to the Vetting Supervisor.
- 6.19 Social media checks performed within the vetting checks have been developed following some best practice from other forces. The Intel Hub are exploring software that searches open source data, Vetting Unit intend to be users of this system to automate the checks and perform deeper dives than our existing manual checks.
- 6.20 The Vetting Unit are currently not resourced to meet the demand for vetting renewals generated each month. In turn a backlog of expired clearances has developed over time. Approval has been given to establish an additional 2 x FTE Vetting Researchers that will allow us to meet the demand for renewals on a monthly basis, and also progress the backlog of already expired clearances on a risk based priority.
- 6.21 Northumbria Police Vetting Unit have recently peer reviewed us. We are taking forward a number of best practice items to improve our process, including: an adjustment to the annual reviews of those who are MV vetted, more pro-active work during recruitment with vetting process awareness, tools to identify and manage our 'Designated Posts' that require higher vetting levels and managing the retention of vetting records.

Information Security

- 6.22 The force's five strategic information security risks remain unchanged. Work has been undertaken to develop a wider information security strategy (presented to the Information Assurance Board of April 2022). An implementation plan to deliver the associated objectives is being produced.
- 6.23 Demand remains high, particularly around staff education, compliance monitoring and ICT projects.
- 6.24 The annual IT Health Check (penetration test) was carried out during November 2021, with the report received before Christmas 2021. The necessary ICT remediation action plan has not been produced due to limited ICT resources, although some remediation has been carried out. This has been recorded as a risk.
- 6.25 The force estate has received a new set of security signage, reinforced by messaging around tailgating and the potential for intruders. Information security staff continue to deliver training and support to new intakes of officers and staff.

7 Finance

- 7.1 There are no financial implications arising from the content of this report.

8 Diversity and Equal Opportunities

- 8.1 There are no diversity or equal opportunity implications arising from the content of this report.

9 Human Rights Act

- 9.1 There are no Human Rights Act implications arising from the content of this report

10 Sustainability

- 10.1 Sustainability implications have been addressed throughout this period. The additional resourcing will ensure the professional standards function operates at the right capacity and capability.

11 Risk

- 11.1 Although the backlog of vetting renewals is being addressed, this is an area of risk. A resourcing uplift has been approved and when in place, will allow us to meet the demand. The backlog will be prioritised and addressed as part of the long-term plan.

12 Conclusions

- 12.1 This report provides members with an update in relation to the priorities and ongoing demand of the Force's Directorate of Standards and Ethics during the reporting period.
- 12.2 The department continues to evolve, and the additional resources secured through the FMS process will ensure performance improvement.
- 12.3 The highlight in the reporting period are the positive conclusions contained within the HMICFRS update report.