Appendix A

SUMMARY OF RECOMMENDATIONS

Audit Report & Recommendations	Priority 1 or 2	Timescale for completion of Recs.	Manager Responsible	Date of JIAC Mtg Recs. Presented To
Property Management – May 2019 – Rec 4.2 The issue of counting cash that has been seized was raised in the previous audit report where, due to the need to forensically preserve evidence, the instruction was to not count seized case. This issue, together with its impact on adherence to insurance levels, should be reviewed. **Management Response** – The POCA Policy (PD207, reviewed 14 Jan 2019) refers to detained money and the Appendix attached clearly states that cash is not being counted. **Managers Update As At 03.10.19** – A review of the policy has commenced and this recommendation is on track for completion by January 2020. **Managers Update As At 09.12.19** – The policy has been reviewed and amended to address the concerns raised whilst maintain national guidance. The policy has been uploaded to the Force intranet. This recommendation is now complete.	2	**Original Timescale** Review POCA Policy – 31.01.20 **COMPLETE**	Head of Crime	08.07.19 19.11.19 27.01.20
Property Management – May 2019 – Rec 4.3 Staff should be reminded to update Niche when items are moved from one location to another or if an item is disposed of. Where required, staff should be trained on how Niche should be updated. **Management Response** – All property staff are trained on NICHE. All staff will be reminded about the need for accuracy and this will also be included in the updated training guides. The introduction of bar coding at main stations should also help reduce errors. **Managers Update As At 31.05.19** – Reminders have been sent to staff. This part of the recommendation is now complete. **Managers Update As At 08.09.19** – Barcode scanning is now in place at Lincoln, Gainsborough, Grantham and Spalding. Boston and Skegness are still to be done and IT has been chased, it is anticipated that this will be completed by 31.11.19. **Managers Update As At 31.12.19** – Training guides have been updated. The move to South Park had a knock on effect and delayed some of the work being carried out, this is now back on schedule and the barcode scanning will be implemented at Boston and Skegness by 31.01.20.	2	**Original Timescale** Reminders to staff by – 30.04.19 **COMPLETE** Bar coding & Scanning introduced at all main stations by – 31.08.19 **Revised Timescale** 31.11.19 31.01.20 Training Guides updated by – 31.11.19 **COMPLETE**	Business Support Manager, Support Services	08.07.19 19.11.19 27.01.20

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Recruitment Follow-Up – June 2019 – Rec. 4.2 The details of the ex-gratia payment made should be shared with the OPCC CFO in line with agreement in previous audit report. The Force should ensure that a process is put in place for future ex-gratia payments that includes the correct authorisation levels. **Management Response** – The management response in the previous report stated "*Agreed. The Force will provide the documentation in respect of this payment to the CFO for retrospective consideration. The force will be requesting to the PCC that a change in the delegated levels are increased for ex-gratia payments as the Chief Constable believes that the current £10k level is too restrictive and a restriction on his statutory powers as a corporation sole.*" The outstanding issue is that the full details have not yet been shared with the PCC CFO because the CC believes this is not appropriate as the issue involves a previous employee of the CC. This is subject to ongoing discussion between the PCC and CC. The Chief Constable will then take advice on the matter. In terms of the process, the FCFO is the authoriser on t-Police for the relevant cost centre for ex-gratia payments. In future, where an ex-gratia payment has been submitted to Finance for entry on t-Police, those over the £10k limit will be flagged. The FCFO will refer on to the OPCC for further approval before authorising on t-Police. **Managers Update As At 10.09.19** – This recommendation is partially complete – the process change has been implemented, the PCC and CFO still hasn't been provided with the documents for retrospective authorisation. **Managers Update As At 31.10.19** – The PCC CFO still hasn't been provided the documentation but this will be addressed as part of the review of the Integrated Scheme of Governance currently taking place by the Governance Working Group. **Managers Update As At 17.12.19** – Governance review is in progress. No further update at this time.	1	**Original Timescale** Immediate	FCFO	19.11.19 27.01.20

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Business Continuity – June 2019 – Rec. 4.1 The Force should carry out testing/exercising of all Business Continuity Plans on a regular basis to ensure they remain fit for purpose. **Management Response** – The observation is accurate. The recommendation is valid and reflects a desire for good practice to be applied. However, implementation of the recommendation will entail additional resource input by relevant departments already under significant operational demand and completion of such exercises will need to remain secondary to maintaining core operational services. The Force will seek to implement the recommendation as far as practicable seeking to achieve a target of 50% of BC plans having been exercised every 2 years and 100% exercised every 5 years. The report to COG will include updates on completion within each periodic BCM report. **Managers Update As At 07.10.19** – A draft business continuity programme has been compiled, this is an embryonic business case exercise schedule which will be developed further, once responses to the ongoing review of business case plans prior to Brexit is complete. Also, awaiting information on future planned ICT tests and future planned testing dates for back-up generators. All plans should be reviewed by 30 November 2019. **Managers Update As At 20.12.19** – It has been agreed that each year two business continuity table-top style exercises will be facilitated. Each exercise will be designed to validate plans for a range of impactive scenarios. Planned responses will be presented to exercise facilitators, one of whom will be a Chief Officer to ensure the responses are fit for purpose. Each exercise will be subject to a de-brief and plans will be amended accordingly. This recommendation is complete.	2	**Original Timescale** Exercise Plan in place – 30.09.19 **Revised Timescale** 30.11.19 **COMPLETE** **Original Timescale** 100% of plans exercised – 01.10.24 **COMPLETE**	Emergency Planning Officer	19.11.19 27.01.20
Collaboration – Risk Management – February 2019 – Rec. 4.1 The EMSOU unit should establish a Risk Management Policy or Strategy to formally document their existing system for managing risk. This should include, but not be limited to: Individual Responsibilities for Managing Risk; The Forums/Group Responsibilities for Managing Risk; Process for risk identification; Process for risk scoring; Process for risk escalation; Review of risks; and Process for adding/removing or rescoring existing risks on the risk register. **Management Response** – Agreed. A risk management policy will be formulated for EMSOU. **Managers Update As At Oct 2019** – A Risk Management Policy has been drafted for EMSOU – this will be introduced at the next meeting of the Risk and Board (18/07/19) before wider circulation. **Managers Update As At Nov 2019** – The original deadline was not met, as we were awaiting some feedback from the Regional Leads to help develop and write the policy. The new Risk Policy was introduced in December 2019 and was circulated to members of the Risk and Assurance Board.	2	**Original Timescale** 30.06.19 **COMPLETE**	Jon Peatling	19.11.19 27.01.20

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Collaboration – Strategic Financial Planning – February 2019 – Rec. 4.4 The Resource Board should determine a consistent approach to budget underspends and efficiency savings to ensure each collaboration unit is engaged and incentivised to deliver efficiency savings. Moreover, there should be clarity when savings are being prepared and proposed so that it is understood what type of saving are being proposed and the impact for all stakeholders. **Management Response** – This recommendation has become more topical in light of the 2019/20 regional budget settlement and is agreed. Under the settlement agreed by PCCs for 2019/20, the underspends for all regional collaboration will be carried forward (with correct accounting principles) into the EMSOU budget to offset cost pressures. A risk inherent in that approach is to reinforce a 'spend it or lose it' mentality in the other collaboration units. The East Midlands CFOs/FDs will discuss this issue at their next meeting (8th April 2019) and make recommendations through the CFO representative to the Resources Board (or future equivalent) for consideration. Those recommendations will include clarity over carry-forward arrangements (as informed by the respective s22 agreements) together with how sound financial management principles will be reinforced. **Managers Update As At Oct 2019** – This has been discussed but it is subject to a proposal that will be tabled to the Resources Board and then agreed with PCCs/CCs. **Managers Update As At Nov 2019** – This has been discussed but it is subject to a proposal that will be tabled to the Resources Board and then agreed with PCCs/CCs.	2	**Original Timescale** 08.04.19 **Revised Timescale** 30.04.20	East Midlands CFOs/FDs Leading to: East Midlands Resources Board (or equivalent)	19.11.19 27.01.20

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Collaboration – Business Planning – March 2019 – Rec. 4.1 **4.1a** – The EMSOU collaboration unit should progress plans to adopt business plans for the four main areas of operation – Serious Organised Crime, Major Crime, Forensic Services and Special Branch. A timetable should be established to ensure these business plans are put in place in a timely manner. **4.1b** – The EMOpSS collaboration unit should ensure an appropriate business plan is adopted once the new format of the unit has been established. **Management Response** – Accepted. EMSOU is publishing a refreshed business strategy for 2019-21, including the Medium Term Financial Plan, in February 2019. It will be supported by a more detailed EMSOU Delivery Plan, which will be the units Business Plan. This will cover the four areas of operation identified in the audit. The EMOpSS Strategic Management Board considered the structure and operating practices of the unit on 08.02.19 and agreed to move to an enhanced local footprint model. The Board requested an updated costed business case to be produced for the next Board meeting. An agreed implementation date for the new model and the development of a new business plan will follow. **Managers Update Oct 2019** – No current update received. **Managers Update Nov 2019 4.1a** – An EMSOU Strategy 2 year plan is in place. **4.1b** Business Plan has been written and approved for EMOST. This recommendation is now complete.	2	**Original Timescale** March 2019 **COMPLETE** May 2019 with implementation to follow **COMPLETE**	Jon Peatling Kerry Smith	19.11.19 27.01.20
Collaboration – Business Planning – March 2019 – Rec. 4.2 The Collaboration Units should ensure that there is an agreed business planning process that is scheduled annually. The planning process should include - Coverage of both the current year but also includes future year considerations. - The assessment of resources to achieve the stated objectives / priorities. **Management Response** – Accepted. This recommendation is agreed and will be considered in conjunction with the recommendation at 4.3 that: *Forces should consider if a template/format for collaboration business plans should be established.* **Managers Update Oct 2019** – No current update received. **Managers Update Nov 2019** – As with 4.3 this will need to be a Force lead process and as such discussions are taking place regarding the allocated lead to ensure this person can progress that action.	2	**Original Timescale** April 2019 **Revised Timescale** 30.04.20	Regional Collaboration Manager	19.11.19 27.01.20

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Victims Code of Practice – Oct 2019 – Rec. 4.1 Policies and procedures should be reviewed and, where necessary, updated. These policies and procedures should accurately reflect that of the Code of Practice and should be communicated to all relevant staff / officers. All updated policies and procedures should be held in a central location that can be accessed by all relevant staff. **Management Response** – Agreed. However with the Ministry of Justice opening a consultation on 22nd July 2019 which is open until 11th September 2019, the completion of the updated policies and procedures will be made when the results of this consultation have been published. The review of the Lincolnshire Police policies and procedures has been tasked to Detective Superintendent Mark Kirwan. **Managers Update As At 13.01.20** – A Lincolnshire Policy will be ready for Lincolnshire consultation by 17.01.20. If circulated at this time, the Force could adopt the policy by the end of January 2020. D/Supt. Kirwan has liaised with the office of the National NPCC lead on the subject, DCC Emma Barnett (Staffordshire). DCC Barnett has just completed a consultation phase with the MoJ and it is likely that the revised Victim Code of Practice will be circulated for consultation within the next 4 weeks which will lead to a revised national policy. D/Supt. Kirwan suggests that Lincolnshire await the draft version of the revised policy to understand how significant any changes are. Going to consultation now on the 'old policy' and then publicising the updated policy could cause confusion.	2	**Original Timescale** 11.09.19 (Following the Ministry of Justice Consultation) **Revised Timescale** 31.03.20	D/Supt. Mark Kirwan	27.01.20
Victims Code of Practice – Oct 2019 – Rec. 4.2 **Rec 4.2** – Management should consider how the closure process should include a check on the five key entitlements to ensure compliance with the Code of Practice. **Management Response** – Agreed. These will be in place in all reported cases and the OPCC will be requesting quarterly compliance data, in line with the Ministry of Justice victim grant requirements. This is being incorporated into the EOEL that will shortly be rolled out. The process for quarterly compliance data to the OPCC has been agreed.	2	**Original Timescale** 31.03.20	Ch. Supt. Nicola Mayo	27.01.20

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Victims Code of Practice – Oct 2019 – Rec. 4.3 A compulsory field within the 'Pronto' questionnaire should require the officer to record whether a Victim Personal Statement has been offered. This should then be logged onto Niche to make it clear that a VPS has been offered in all cases. **Management Response** – Agreed. PC Chapman of the tech futures team is establishing a predefined template on Niche, which will automatically take the victim to the VPS completion page. **Managers Update As At 4.3** – PC Chapman believes that this recommendation is worded incorrectly. The agreements were all around changes to Pronto, which have all been done and are being used by officers. VCOP is now a mandatory field in the crime report process. VPS is now mandatory in the statement process if the victim statement is taken via Pronto. This recommendation is complete.	2	**Original Timescale** 31.01.20 **COMPLETE**	Ch. Supt. Mayo	27.01.20
Victims Code of Practice – Oct 2019 – Rec 4.4 The Force should consider how best to monitor performance against the Code. Once established, the Force should determine the most appropriate forum for the reporting of performance. **Management Response** – Agreed. Some of this will be monitored via the quarterly audit detailed above – liaison is required with the OPCC as to how we utilise the data from the audit. **Managers Update As At 14.01.20** – C/I Pearce has submitted the first VCOP dip check for assurance purposes which has been forwarded to MoJ by the OPCC. The data will also be considered at the next Victims' and Survivors Strategy Board (formally Victims' Commissioning Group) chaired by the PCC, this information will also be considered at the Force Quality of Service Board. C/I Pearce and the OPCC Service Delivery Manager will meet next week to agree dates for future dip checks.	2	**Original Timescale** Immediate **COMPLETE**	Ch. Supt. Mayo & Service Delivery Manager (OPCC)	27.01.20
Victims Code of Practice – Oct 2019 – Rec. 4.5 The manner in which feedback is sought, reviewed and communicated should be reviewed. **Management Response** – Agreed. The OPCC, through discussions with the Head of Strategic Development, is progressing the introduction of the use of a n automated victim satisfaction survey.	2	**Original Timescale** 30.04.20	Ch. Supt. Mayo	27.01.20