

**M O P A C**MAYOR OF LONDON  
OFFICE FOR POLICING AND CRIME

## MPS-MOPAC JOINT AUDIT PANEL

### 29 March 2021

### Met Audit & Inspection Report

Report by: Director of Strategy & Governance

Non-restricted paper

#### Report Summary

##### Overall Summary of the Purpose of the Report

This report provides Audit Panel with a summary position of DARA and HMICFRS activity and engagement over the last quarter.

Since last quarter's report, the Met has received 14 new DARA actions that meet this monitoring threshold. During the same period, 48 actions were implemented and are now proposed as closed. Of these, 36 are from original audits and 12 from follow-ups.

HMICFRS has commenced its 12-month continuous assessment for the PEEL inspection and announced a new custody related inspection focused on mental health that will take place in the first quarter of the new financial year.

##### Key Considerations for the Panel

The Panel is asked to consider the breadth of audit activity taking place by DARA. The concerted efforts by colleagues to address their outstanding audit actions in all business groups continues to have a positive impact. The delays due to Covid-19 have significantly reduced to just 4 actions relating to 2 audits and the ongoing activity undertaken to address the key risk themes. Finally note the continued collaborative approach between the Met and DARA to address older outstanding actions and activity to add further insight and value to future audit reports.

##### Interdependencies/Cross Cutting Issues

By the very nature of the audit and inspection regime, there are considerable cross-cutting elements across the Met.

##### Recommendation

The Audit Panel is recommended to note the progress being made to track and monitor audit actions centrally that meets the agreed threshold.

## 1 Risk and Assurance Board update

Risk and Assurance Board met on 2 March 2021 where they considered the significant progress against outstanding actions and notably the improvements being made before follow-up audits which is resulting in an increase in adequate ratings.

## 2 Internal Audit update

Strategy and Governance monitor Met progress on all high-risk actions from internal audits, as well as the medium-risk actions of any audit receiving a “limited” grading. Responsibility for monitoring implementation of all other lower risk actions sits with leaders locally.

Since last quarter’s report, the Met has received 14 new actions that meet this monitoring threshold. During the same period, 48 actions were implemented and are now proposed as closed. Of these, 36 are from original audits and 12 from follow-ups. Of the 48, 40 were from Limited audits. DARA have now access to our monitoring system and can use this information to assist with formally closing actions in follow up audits and allow for any challenges to be raised.

The total number of outstanding actions is now 111.

15 of the 48 actions recommended for closure were from Corporate Services, with 11 from Limited Follow-up audits, demonstrating commitment to address areas that have been identified as high risk.

### Actions delivered this quarter

Audit Title	Audit received	Actions closed
BOCU Follow Up of Criminal Exhibits	15/16	1
Management and Control of Inventories	17/18	1
Management of End User Systems	17/18	2
Offender Management Framework	17/18	2
Preparation for Data Protection Changes - General Data Protection Regulations (GDPR)/Law Enforcement Directive	17/18	1
Basic Command Unit (BCU) Child Safeguarding Information Sharing Framework	18/19	2
Framework Supporting Data Protection Compliance	19/20 Q2	2
ICT Access Control Framework	19/20 Q3	1
Online Child Sexual Abuse and Exploitation	19/20 Q3	3
Security Clearance & Vetting - Effectiveness & Efficiency	19/20 Q3	8
Smarter Working Asset Management	19/20 Q4	12
PSOP Access Controls	20/21 Q1	2
Public Order – Deployment and Cost Recovery	20/21 Q2	1
B/OCU Budgetary Control Framework	20/21 Q2	6
Key Financial Systems – Accounts Payable	20/21 Q2	1
TSG Use and Deployment of Resources	20/21 Q2	2
Framework Supporting Management of Notifications on Missing Person and Linked Indices (MERLIN)	20/21 Q3	1

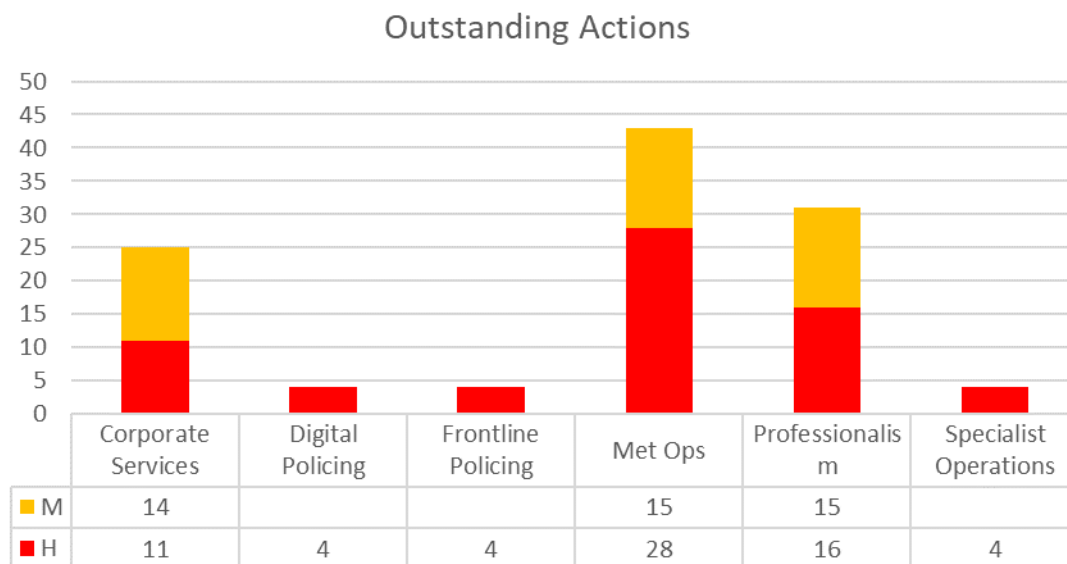
To ensure a continued focus on audits with a limited grading, all leads for limited audits provide Risk and Assurance Board with a one page brief. This details current and planned activity to address the risks and recommendations from the audit and to provide assurance to board on the way ahead for this area

Processes remain in place to ensure COG meetings and Risk boards are sighted on outstanding actions. All Chief Officers receive a list of outstanding actions as part of the update cycle and remain ultimately responsible for the timely updates and action progress. Risk and Assurance Board representatives have continued to support the engagement in this process to reflect the work happening in the business to address these risks and ensure we hold the most current update for each high risk action.

**Agreed actions by business area**

The 111 outstanding actions pertain to 21 audits. 44 are in response to medium-risk in “limited assurance” reports and 67 to address high-risk actions from all reports. Whilst we do not monitor audit activity within Specialist Operations, there are 4 key actions within the *Framework Supporting Data Protection Compliance* audit that sit with SO but are intrinsically linked to the Corporate services audit. These have been included in the total number of outstanding actions but separated from the business group totals within the report.

Distribution by business group is as follows:



Met Operations have the most outstanding actions. This rise in actions can be explained by an increase in audit activity in this area resulting in 25 actions identified during Q2 and Q3 reporting period from 4 separate audits. Progress is being made to deliver on these actions within the required agreed timeframes.

Corporate services continue to reduce their actions and now have 25 outstanding. This business area encompasses some of the most focused audit risk areas in the Met (Finance, Commercial, and Safety & Health) so to have reduced the amount of outstanding actions is commendable. There has been an ongoing commitment to review and address outstanding actions as well as a targeted exercise with audit leads to review all recommendations and close those that have met the required activity.

During this quarter we have worked with DARA to review all actions with a view to ensuring those remaining as outstanding are still relevant. Whilst we only closed 5 through this process, a large number were scheduled to be followed up shortly (some within the next quarter) or a similar audit conducted which would capture some of the older actions. This will provide us with a refreshed view of what remains outstanding.

### Overdue actions by business area

Met Operations have 39 overdue actions and an additional 4 due by the end of March. Chief Officers in MO have been tasked by the AC to review all of the outstanding recommendations to ensure that the most up to date activity is reflected in the updates and where the agreed action has been met the action is closed. Strategy and Governance are working with MO action owners over the next quarter to see how we can assist to address the risks identified and reflect these within local risk registers to provide a more joined up approach to the management of these risks.

Corporate Services have 11 actions due in April with 10 of those from the MPS Counter Fraud Arrangements Limited follow up audit. Their planned activity is included within the one page brief in the appendices.

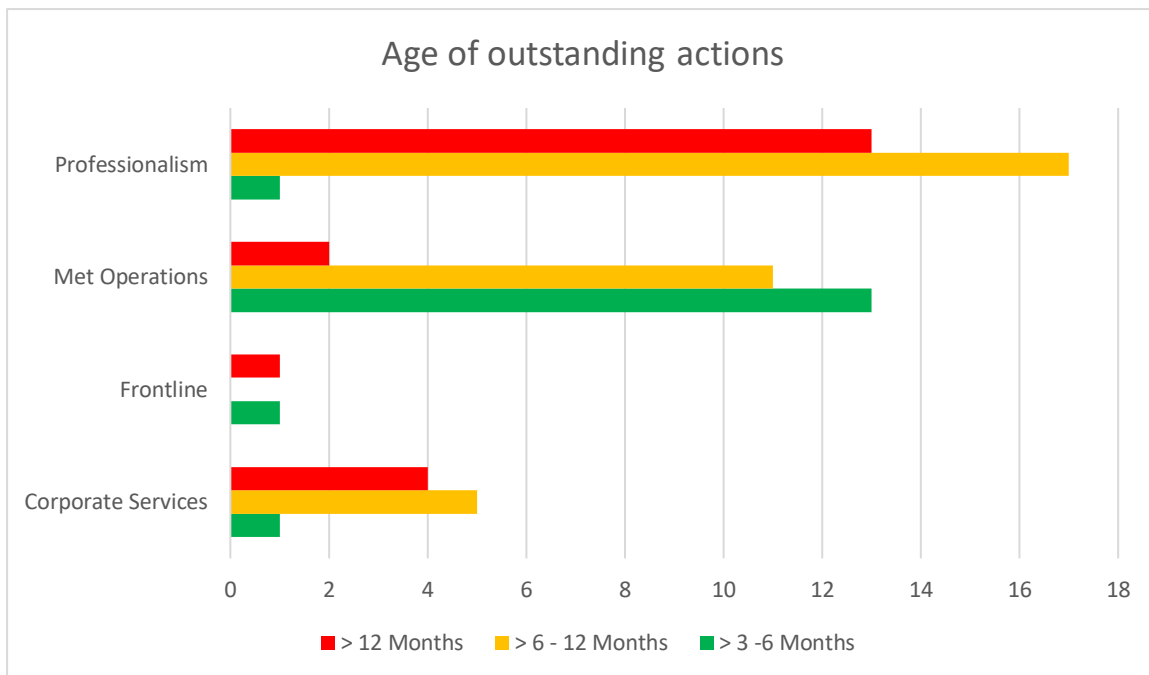
We have agreed with DARA that during the next quarter we will concentrate on obtaining revised due dates for all outstanding actions past their due dates so we focus less on what we didn't manage to achieve and provide a renewed focus on achieving the revised due dates.

*2020/21 Q4 current position – March 2021*

Business Group	Actions past due date (Q4)	
	Total actions outstanding	% overdue
Corporate Services	25	40
Digital Policing	4	0
Frontline Policing	4	33
Met operations	43	91*
Professionalism	31	100

All of the outstanding actions for Professionalism are now past their original due date, however 13 of the 29 (45%) of these are related to training and form part of the Learning and Development Transformation programme. Following discussions with our internal auditors and Professionalism we have agreed that these will be addressed as part of the wider programme and monitored through the programme governance processes. They will remain included in the quarterly figures but there will be a reduction in the frequency of requests for updates given the long term nature of the actions.

We now have 86 outstanding actions (past their original due dates), which is a reduction of 25 since last quarter. We continue to see a reduction in the number of significantly older actions.



Leads have proposed revised implementation dates for those actions where we are confident that appropriate activity has been identified and plans are in place to address the outstanding risks (43 of the 86). Strategy and Governance will work with the business before the next board in June to obtain realistic revised expected completion dates together with the reasons for the delay. This can be used to provide analysis of why we are missing agreed due dates and a better picture of when recommended activity will be in place. We will also assist with guidance on local action planning and monitoring to ensure where possible the future due dates are achieved.

**Delays in meeting due dates including the impact of COVID-19**

As part of the quarterly update we have the option for leads to provide us with the reason for any delays they experience meeting the original agreed action deadlines. To better understand the most notable delay themes and identify any potential themes we continue to review the delays reasons of both currently delayed and delivered (but delayed) actions. Since starting to collect this data in January 2020 we have had 105 responses (including those that are now shown as delivered). Next quarter we will actively encourage all action owners to provide this detail for any overdue action.

The most frequently cited reason for a delay for all actions (outstanding and delivered) is still COVID-19 related. This was a new category introduced in quarter 1 in light of the pandemic which had some impact on achieving agreed completion dates for certain actions due to postponed meetings, reporting delays and the prioritisation of activity elsewhere. It is worth noting that this despite being the biggest category, it related to just 22 actions.

When looking at the current picture for outstanding actions (30 responses), COVID-19 related delays reduce to 4 which, based on the data we have, suggests the initial impact on deadlines has now been addressed.

Those that remain outstanding and have experienced Covid-19 related delays are from the *Review of Framework Supporting released Under Investigation* and the *Review of Custody Healthcare Practitioners - Use and Deployment* audits. The Covid

19 pandemic coupled with the Met's determination to maintain business as usual and seize the opportunity to arrest high harm offences presented much of the organisation, and in particular Met Detention, with unprecedented demand. This increase in demand has been met with increases in staff abstractions across the custody command. The MO9 RUI team significantly reduced in number owing to sickness but this was exacerbated by staff returning to front line duties without the capacity to replace them. As a result closure of stock and opportunities to train and work with FLP colleagues to progress this area were reduced. This is also true of decision makers that were often engaged in Covid related activities which needed to be prioritised over slower paced work such as RUI.

There have also been COVID-19 delays impacting some actions within the *Review of Custody Healthcare Practitioners - Use and Deployment* audit due to absence and shielding of staff and effects on nurse recruitment. The pandemic has also created procurement issues with potential suppliers of the new Electronic Medical Records System (EMRS). Despite the delays the MPS will be launching our Nurse-led model in May 2021 when FME provision in its current form will be discontinued.

The largest delay reason cited this quarter (7) is that the action is 'dependent on another review (either internal or external)'. 6 of the 7 related to the actions associated with the Learning and Development Transformation programme which we know will be a longer term project.

Actively encouraging action owners to provide the reason for delay should provide us with the data to gain valuable insight into areas that may need further attention or any other changes we need to make in our approach to internal audit and the management of audit actions. It will also enable us to assist with identifying underlying issues, such as effects of organisational change or the impact of National or Governmental requirements that could affect the delivery of actions within agreed timescales.

### **Forthcoming actions**

The current picture shows that 25 actions need to be implemented within the next 12 months (compared to 46 last quarter), of which 20 are due by the end of May 2021 (11 within Corporate services, 4 in Met Ops). Strategy and Governance will highlight these to the relevant Chief Officers to ensure, where possible, these are addressed within due date.

### **Key Audit Themes**

We have aligned the key themes arising from the audits with the DARA auditor descriptors. Across all actions, a thematic analysis draws out the following recurring themes in terms of risks identified.



Over half of the key themes fall into Policy and Process and Management Oversight and reporting. We continue to regularly meet with our internal auditors and have agreed that going forward they will:

- Endeavour to write the risks in a way that they are clear and specific, so that these can be easily lifted to appear on business area risk registers where appropriate (and managed as part of risk management processes).
- Clearly identify which risk theme each risk sits within so we can start to understand what areas we incur the most risk so we can look to put more internal controls in these areas.

This should allow us to gain more insight into specific issues and identify activities to address these moving forward.

The three predominant themes are Policy and Process, Management Oversight and Capability and Capacity. There is activity happening across the business to address these themes, highlights include:

#### **Policy and Process:**

- Identification of and business justification papers submitted for improved system to enable data sharing to be more effective.
- Templates created with local councils for Data Sharing Agreements and DSAs across BCUs continue to be signed by both parties
- Fraud 'Whistleblowing Policy' has been put in place and is established. A new 'Raising Concerns Policy' has been drafted and is now at consultation stage with staff associations.

#### **Management and oversight and reporting:**

- The governance around fraud in the MPS has been reviewed and enhanced.
- MO7 have devised and implemented a new performance framework to support Met Direction objectives, with PDRs introduced for all levels of rank to reflect

key priorities. Monthly performance meeting via SLT governance supported by local performance meeting structure.

- M07 report into SX Violence Group and joined up tasking process with VCTF and MetCC and other specialist commands
- Corporate MetOps Violence performance review now implemented via ECOG governance.
- Introduction of the EMRS in April/May 2021 will provide an IT platform for the recording of detainee assessments which will eradicate issues around data protection and allow for greater scope for reporting and compliance management.

### **Capacity and Capability:**

- M07 is no longer an armed command which has increased capacity and capability given the reduction in armed training requirement abstractions therefore more able to focus on MPS priorities re violence reduction, more proactive tasking and deployment in line with corporate intelligence tasking, reintroduction of dedicated crime week with alignment to high crime volume BCUs.
- 40 on loan posts on transfer from M019 have enhanced TSG capability to meet MPS specialist uniform demand in support of Frontline Policing and Specialist Crime and Public Order Operations commands.
- Training delivery across the nurse workforce has begun to increase their capability and capacity.
- The ongoing Learning and Development Transformation programme should address a number of the key capability risks identified in a number of the audits.

The risk themes for current outstanding actions have been broken down into business areas and shared with audit owners. When viewed as a collective there are additional themes and commonalities that are over- reaching across several, if not all business groups.

- **Data Protection, data handling and retention within legal guidelines** - In recent years Data Protection and data handling have come to the forefront of the MPS' responsibilities. Consequently, several business groups are examining the best means of protecting data, data retention on police systems and adhering to the data protection guidelines whilst ensuring effective use of data in the legal arena and fight against crime. This is particularly pertinent with the increase in cybercrime and police data being a highly sought commodity.
- **Training and training capabilities for police personnel** - Several actions across business groups highlight training requirements to improve efficiency, using new IT systems, better use of police systems and adherence to national standards as stipulated by the college of Policing. Furthermore, improved training capability will maintain standards with a roll out of a uniformed approach and assist in minimising data breaches (where the training relates to use of IT systems).
- **Technology and monitoring software** – New IT systems for better and increased data retention, efficiency and monitoring capability have been stipulated as required across several business groups. This also feeds into data



handling and training actions and requirements. A number of these are in the process of being acquired so this should see an improvement in this area.

- **Corporate strategy** – A small number of actions relate to the creation and establishment of a corporate strategy for specific areas within business groups. Whilst this is not a high risk action, a corporate strategy provides clarity and to some extent a plan for addressing issues contained within.

Work will be done with business groups at a local level to identify where activities or improvements to existing processes can minimise risk in these areas.

### **New Audits received last panel:**

Since the last Risk and Assurance board we have received the findings from the following audits:

- Wellbeing strategy Development and Implementation
- Smarter Working Asset Management
- MPS Counter Fraud Arrangements

Both the Wellbeing Strategy and Smarter working follow ups were rated adequate with no high risk actions.

The MPS Counter Fraud Arrangements follow up was graded limited. The leads for this audit have provided a brief of current and planned activity to address the audit risks and recommendations and to provide assurance on the way ahead for this area. This has been included within the appendices.

## **3 HMICFRS update**

### **Covid-19 – HMICFRS position**

HMICFRS continue to operate remotely due to coronavirus restrictions. There remains a number of challenges to facilitate inspections in this way, particularly given the increase in demand we have experienced at what has been a very busy period. Since appreciable inspection activity resumed in October 2020 until the end of March 2021, the Met will have had five inspections:

- Covid-19 (which included an additional significant data request);
- Public protest;
- National Child Protection;
- Fraud;
- Sensitive Intelligence.

Running alongside these inspections, there has also been the usual bi-annual data returns to collate, a substantial review of stop and search data previously submitted and, as the national lead for on-line crime reporting, participation in two virtual workshops which includes a significant data return.

In addition, and as detailed below, activity related to the PEEL inspection process has also begun and in the forthcoming financial year we have been notified of a custody related inspection which further intensifies the demand on the Met.

### **Force Management Statements**

**FMS3** –Work has now recommenced. The formal submission date is May 2021. HMICFRS’s FMS template and guidance sent in January 2020 remain the same, only the submission date has changed. A draft is planned to go to Board 23 March 2021 for feedback and Board members’ steer.

### **PEEL Inspection**

The PEEL inspection programme is moving to an intelligence-led continuous assessment approach with a rolling programme of evidence collection – the 12-month evidence collection for the Met began at the end of January.

The new approach will see HMICFRS use evidence from the PEEL assessment, including the FMS; findings from thematic inspections; crime data integrity findings; progress against causes of concern and areas for improvement; and in particular Force Liaison Lead (FLL) knowledge and insight.

We have received early notification of onsite activity related to vetting and counter corruption:

- Vetting - this will include some reality testing in relation to the vetting data that was submitted to HMICFRS as part of the data return in December 2020.
- Counter corruption - this insight work will take the form of file reviews. HMICFRS will review 60 items of corruption related intelligence to see how these were handled and where possible developed. To assist this process, they will request 100 items of intelligence working backwards from a date yet to be set. Only items from the corruption intelligence collection categories (as defined in the counter corruption authorised professional practice) will be included. They will also review the capacity and capability of the unit.

The date for the Met’s insight activity has not yet been determined although we do not anticipate it before the summer.

### **Thematic inspections**

#### **National child protection inspection (lead AC Ephgrave)**

Due to coronavirus restrictions, the inspection was held remotely; Met laptops were provided to the inspectors for the duration of the inspection and all interviews, focus-groups and reality-testing during fieldwork were remote.

Phase one of the inspection (case audits) took place between 11 – 22 January. The second phase took place between 1 - 12 February.

The ‘hot-debrief’ for the inspection took place on 2 March.

### **Covid-19 Policing Inspection (Lead DAC Matt Twist)**

A '*spotlight*' report on the impacts to the criminal justice system was published in January. This is an aggregation of themes and issues from all forces; it does not have any graded judgements.

The report detailed their 'grave concerns' about the potential long-term impact of Covid-19-related court backlogs on the criminal justice system across England and Wales. In the report all four of Her Majesty's Justice Chief Inspectors spell out how the Covid-19 pandemic has affected the work of the police, prosecutors, prisons, probation and youth offending teams. They point to difficulties and lengthy waits at all stages of the criminal justice process that "benefit no one and risk damage to many".

The report highlights some positive initiatives during the Covid-19 pandemic, including the acceleration of digital working, and they praised the commitment of staff.

The date for publication of the final report has not yet been determined

### **Public Protest inspection (lead Deputy Commissioner):**

The Met was selected as one of ten forces for this short-notice urgent inspection commissioned by Home Secretary. HMICFRS were asked to identify how effectively the police manage protests and provide their independent view on protest-related issues (including proposals for additional police powers e.g. to seize 'lock-on' equipment).

The draft report was received in late January for critical read; factual inaccuracies and some concerns have been raised back to HMICFRS and are currently being considered.

The national thematic report was published on 11 March 2021.

### **Fraud revisit inspection (lead AC Louis Rolfe):**

This was a revisit to the 2018 inspection and HMICFRS reviewed progress against the recommendations that emanated from it. The inspection began on 22 February 2021 and consisted of a number of interviews and several focus-groups all of which were held remotely.

We are not yet aware of the timetable for publication, but leads will be informed as soon as this is confirmed.

### **Sensitive Intelligence inspection (Lead AC Louisa Rolfe):**

The Met is one of 12 organisations (six forces, five regional organised crime units (ROCU) and the NCA) being inspected on the 'journey' of sensitive intelligence products from the point of collection (though not the collection itself) to and through the SIU and to an eventual 'recipient' be that investigator or SIO in Force, ROCU etc.

The inspection took place w/c 8 March and consisted of a number of virtual interviews and reality-testing discussions.

We are not yet aware of the timetable for publication, but leads will be informed as soon as this is confirmed.

**Op Larimar (lead DAC Matt Twist):**

HMICFRS are yet to determine how they will ‘reality check’ the work that has been done. However, this is not specific to this inspection as this is a challenge for all inspections in the current climate of the pandemic. Solutions are being sought as to how our Force Liaison Lead may be able to conduct the reality testing needed.

**Inspection of suspects with mental health conditions within the Criminal Justice System (Lead AC Louisa Rolfe)**

The Met has been selected as one of a number of forces for a joint HMICFRS inspection led by HMI Probation (also involves HMI Prisons, the Care Quality Commission and HMCPSP) assessing the effectiveness of dealing with suspects with mental health conditions within the Criminal Justice System. This inspection will take place w/c 10 May 2021 and will focus on Croydon borough.

The scope will include strategic leadership in this area; policies, practices and structures; effective partnerships; risk assessment and issue identification; diversion opportunities; staff understanding; and decision-making.

The inspection involves a sizeable document request, interviews and focus groups in addition to a significant case audit of around 200 investigations across a full range of offence types where the offender / suspects has a mental health marker. HMICFRS will also supplement those case audits with additional case reviews on voluntary attendance and adult cases where suspects have entered or discharged custody under s.136MHA or another mental health order.

**Stop and search review**

HMICFRS published a thematic report “*Disproportionate Use of Police Powers: A report on stop and search and the use of force*” on 26 February 2021.

This report is based upon the stop and search review conducted across all forces in 2020 (on all stop and search records 2019). There are a total of 8 recommendations made, 6 specifically for forces. These are currently being assessed to determine where our current work (through existing action plans) is already addressing the recommendations.

It is not usual practice for HMICFRS to single out forces for anything negative but they are starting to highlight areas of positive practice for which the Met is highlighted in relation to innovation in stop and search external scrutiny.

**HMICFRS Monitoring Portal**

**Current position**

The Monitoring Portal holds all recommendations and now areas for improvement (AFI) identified from inspections from 2018 onwards.

The Monitoring Portal currently shows 118 open recommendations / areas for improvement.

<b>Inspection theme</b>	<b>Total</b>
Vulnerability (including 13 specifically related to the NCPI programme)	43
PEEL	10
Stop & Search	1
Information management	1
Undercover Policing	17
Fraud	2
Integrated Offender Management	4
Roads Policing	6
CT	1
Review of investigations into allegations of non-recent sexual abuse by prominent people	11
Police Collaboration	1
ROCU	2
CPS	4
Police Integrity & Corruption	3
Online ( all 6 recommendations have been put forward for closure)	6
Bail (New on the portal)	2
Super complaints	4

As part of the 12-month continuous improvement approach for the PEEL inspection, our Force Liaison Lead is reviewing all previous PEEL entries and the most recent update presented.

Since the December report, 7 recommendations have been submitted to our Force Liaison Lead for consideration for closure and HMICFRS has added new recommendations from national thematic reports.

HMICFRS will not formally close any entries on the Monitoring Portal until they are satisfied the recommendations against causes for concern or area for improvements have been fully met; this is usually when it can be tested by way of an inspection.

### **Current open recommendations and AFIs – Met tracker**

We are undertaking a focused exercise to review and rationalise current open recommendations and AFIs within our tracker. We are actively working with recommendation and AFI owners so they can prepare 'closing' statements if they believe the recommendation or AFI has been addressed. This will then be submitted to HMICFRS via the Monitoring Portal for them to review.

## **4 Equality and Diversity Impact**

This paper outlines HMICFRS inspection activity and DARA audits. Any significant programmes of work undertaken to implement recommendations will be subject to equality impact assessment.

## **5 Financial Implications**

There are no direct financial implications arising from this report. Any additional financial implications from the findings of audits and inspections will be subject to normal investment processes.

## **6 Legal Implications**

There are no direct legal implications arising from this report.

## **7 Risk Implications**

Inspections can highlight significant corporate risks. These are analysed by the Planning and Risk Team and included in the Met's risk management framework where applicable. This paper has no direct health and safety implications.

## **8 Contact Details**

Report author: Tracy Rylance and Rosiân Jones, Planning, Risk and Assurance, Strategy & Governance

## **9 Background papers:**

None