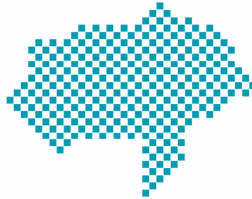


Police and Crime  
Commissioner  
North Yorkshire



## Commissioning Final Report

<b>Auditor</b>	Alice Gibson/Michael George
<b>Contact Details</b>	01924 294061
<b>Date of Review</b>	October to November 2014
<b>Draft Report Issued</b>	December 2014
<b>Final Report Issued</b>	January 2015

## **1 Executive Summary**

In 2014 the Office of the Police and Crime Commissioner (OPCC) invited organisations to tender, to provide various services across the county to Enhanced Entitlement Victims. The victims are identified through an assessment in line with the Ministry of Justice's Code of Practice for Victims of Crime. Such victims include the persistently targeted, the vulnerable, the intimidated and those who have suffered the most serious crime. The following services were considered by the audit. They have been set up to offer support in coping and recovery to:

- High and medium risk domestic and sexual abuse victims through an Independent Domestic Violence Advisor Service (IDVA) and an Independent Sexual Violence Advisor service (ISVA). The Independent Domestic Abuse Service (IDAS) will provide this service throughout North Yorkshire as part of a joint commissioning process with North Yorkshire County Council and City of York Council.
- Victims of crime, at any stage through the criminal justice system, through a Restorative Justice (RJ) process with the aim to bring victims and offenders into a safe environment for contact to help both the victim, to deal with the effects and aftermath of the crime and also to reduce reoffending from the offender. The RJ provider – Remedi will work across North Yorkshire and the City of York.
- Victims of crime, at any stage through the criminal justice system with counselling/talking therapy services with multiple providers, Aegis, Community Counselling, Victim Support and St Michaels Hospice.

Funding for the three commissioning services has been provided by the Ministry of Justice (MOJ) through a Victim Support Grant. A signed grant agreement is in place for this funding, with a mutual agreement on how the funding will be allocated and distributed fairly across the providing services to maximise the potential level of support to the highest capability. Funding is also available from the Victims Services Commissioning Budget.

Internal Audit found that detailed analysis and planning had been undertaken for the newly commissioned services which provides strong assurance for delivery going forward. The framework that has been put in place is comprehensive, and well thought through. It focuses on outcomes and should allow the OPCC to obtain sufficient evidence to determine the effectiveness of provision. The function is well resourced and indicates the level of importance accorded to this area by the OPCC. The expertise and knowledge of the Commissioned services are fundamental to the success of the project but it is also imperative that the OPCC is able to assure itself that its own delivery expectations and statutory requirements are achieved.

A small number of concerns have been raised, which have been documented in section 4 of this report with regards to the approach to payments for counsellors, vetting of the staff employed by the commissioned bodies and the advisability to develop a complaints handling process.

Overall, Internal Audit found satisfactory evidence that the key risk areas have been

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considered and are being appropriately managed. The small number of concerns have been discussed with the Commissioning and Partnerships Manager and has resulted to change that was implemented as the review was underway.

	<b>Commentary</b>
<b>Effectiveness of Risk Management Approach</b>	The risks associated with the Commissioning services are being effectively managed. There are effective means in place of allocating limited funds to those in most need. Outcomes have been based around victim's needs, with cope and recovery needs as a priority. These are measured by reliable mechanisms to monitor the outcomes of each service that fall in line with the Ministry of Justice funding.
<b>Efficiency of Risk Management Approach</b>	Reasonable assurance can be provided in respect of the efficiency of the commissioning services. The OPCC have established an organised and structured processes with good performance measures in place to analyse and evaluate the commissioned services. The arrangements are intended to balance victims concerns and encourage their coping and recovery needs to feel safe in their environment. However Internal Audit advise a review of how payments are made to reduce the risk of unnecessary expenditure.
<b>Assurance Level</b>	<b>1 Reasonable Assurance with Good Practice</b>
<b>Overall Risk</b>	<b>5:10</b>

## 2 Scope and Approach of the Audit

Internal Audit have worked with the OPCC to provide advice on the introduction of suitable assurance mechanisms for commissioned services and grants. These need to be proportionate to the value of the contract and the risk inherent in the process. This has included consideration of the reliance that has been placed on a recipients existing assurance arrangements and how this has been evidenced.

Consideration was given to the measures necessary to ensure the levels of probity required for the expenditure of public monies, as well as how the OPCC can be assured that the desired outcomes have been achieved.

The funding of partners was intended to be outcomes based and Internal Audit have also worked with the OPCC to consider the suitability of outcomes, to ensure that they have been realistically measured and their achievement evidenced.

Each recommendation is accompanied by an assessment of the likelihood and impact of the risk identified, to North Yorkshire Police/The OPCC as a whole.

## 3 Report Distribution

Name/Role	Draft	Final	Final with Response
Jenni Newberry, Head of Commissioning & Partnerships	✓	✓	✓
Sarah Graham, Commissioning & Partnerships Manager	✓	✓	✓
Julia Mulligan, Police and Crime Commissioner	✗	✓	✓
Joanna Carter, Chief Executive Officer	✗	✓	✓
Michael Porter, Commissioners Chief Finance Officer	✗	✓	✓
Risk and Assurance Unit	✗	✓	✓

## 4 Observations

### 4.1 Payment Approach for Counselling

Risk Exposure			Root causes		
Unnecessary expenditure may be incurred			Payments to counselling providers are based on an average of 10 sessions delivered per victim rather than the actual number of sessions		
Probability	Financial	Reputation	Operational	Legal	Rating
Probable	Negligible	Minor	Minor	Nil	5:8

The Commissioner has adopted an outcomes framework showing their priorities for the Communities of North Yorkshire. The overarching outcome is to ensure that the victims of crime in North Yorkshire can cope and recover from the effects and aftermath of crimes and with the overall aim to make victims safe and feel safer in the future.

A review of the information and budget allocation documents provided to Internal Audit by the OPCC demonstrates a well thought out allocation of resources. However, the method of allocating payments to counselling providers increases the risk of unnecessary expenditure being incurred by the OPCC.

After research, the OPCC calculated an average cost per victim for an hour's session to be £35. This budget includes location and travel expenses. Research also highlighted that each victim, on average, would require 10 counselling sessions each. That being so, the agreement between the Counselling providers and the OPCC states that a unit cost of £350 will be paid quarterly per victim using the counselling service. Whilst this does simplify payment methods, it also works on the assumption that some victims will require more sessions than others, anticipating the sessions to balance out over time. However this imposes the risk that payments will be made for sessions that do not happen.

If the service is not used as anticipated, unnecessary expenditure may be incurred. If a victim came for the counselling sessions, but didn't feel the scheme suited them, they may only attend one of the ten allocated sessions. Payment for victims is paid on referral, therefore the provider would be paid for in full, leaving 9 sessions unused.

Working on this basis, it relies on trusting counsellors to use the sessions wisely and to provide accurate monthly reports to monitor how many sessions have been provided per victim.

#### Recommendation 1

**The OPCC should keep the payments and sessions used under close review. Consideration should be given for the OPCC to pay for each individual session used per victim, with up to 10 sessions allocated to each victim, still working on the £35 average cost basis. This would reduce the risk of unnecessary expenditure being incurred for unused sessions.**

## 4.2 Monitoring the Provider's Vetting of Employees

Risk Exposure			Root causes		
Victim details containing sensitive information not being correctly managed			Insufficient management of appropriate vetting checks for all service provider employees		
Probability	Financial	Reputation	Operational	Legal	Rating
Unlikely	Minor	Significant	Minor	Significant	5:10

IDVA/ISVA employees must all be qualified and experienced per CAADA guidelines. RJ service staff must all be registered practitioners with the Restorative Justice Council and Counselling providers must be registered with a relevant professional bodies.

Counsellors delivering the talking therapy must have over 100 hours experience working with vulnerable people, including young adults and children.

Upon signing the tender agreement, the providers have confirmed that all staff for each service are appropriately qualified to provide the correct support for North Yorkshire Victims with the overall outcome in mind and in line with the above qualifications and experience.

All counsellors, working for a counselling body, must undergo a Disclosure and Barring Service (DBS) check for working with vulnerable people. As stated at tender, all staff for each service provider must undergo a Force Vetting Check before proceeding to work with the Enhanced Entitlement Victims. This is due to the sensitivity of the information involved and the joint information agreement in place; allowing the sharing of relevant victim information between providers upon referrals. The OPCC are informed by the Vetting Team directly of each person successfully vetted in respect of this contract.

To ensure all employees have been vetted; the OPCC request a full list of relevant employees that will be involved as part of their delivery of each service. It is the provider's responsibility to provide a full list of employees to be vetted. However there are no current checks in place to provide assurance that all employees employed by the service providers have been vetted. Audit have also been made aware that the counselling providers recruit volunteer counsellors to help with the high workload. The volunteers will also need to be vetted appropriately.

Audit have made the OPCC aware of this issue. Having reviewed the concern, they have assured audit that there will be an additional check amongst the 6 month dip sampling, that the member of staff completing and signing the needs assessments and reviews with clients have been vetted against the documented list of all provider staff cleared through vetting delivered by each service provider.

### Recommendation 2

**Consideration should be given to reviewing the vetting checks before sensitive information is handled by employees. Any new counsellor should not be handling**

NOT PROTECTIVELY MARKED

**Final**  
**any data without undergoing a force vetting check and will not gain access or be able to access systems before checks have been assured and verified.**

### 4.3 Complaints Procedure

Risk Exposure			Root causes		
Lack of victim/client relationship affecting a victims' trust in service, resulting in poor attendance for support services			Weak complaints procedure in place		
Probability	Financial	Reputation	Operational	Legal	Rating
Unlikely	Negligible	Significant	Minor	Minor	5:10

Reliance is currently placed on complaints handling within each provider, with no established publicised avenue to the OPCC. The OPCC would only hear any complaints that were raised directly to them, even then the complaint would be directed back to the service provider.

A differently structured complaints procedure would help with the development of a new service as it will highlight any weakness that have been experienced by a victim showing where extra attention and resourcing may be required.

Audit are aware of the victim feedback questionnaire and satisfaction survey undertaken at the end of a victims support, however this could be too late and a problem is best to be highlighted in the early stages.

With a publicised ability for complainants to raise issues with the OPCC, service users may feel more reassured of independent handling of their complaint and also the use of such a complaints procedure will give the OPCC assurance over the service quality and effectiveness of local complaints handling.

#### Recommendation 3

**Consideration should be given to establishing a complaints procedure to allow service services to complain to the OPCC, if they are unhappy with the local handling of their complaint.**



## 5 Recommendations

#	Recommendation	Category of Rec.	Management Action	Action Manager & Completion Date	Satisfactory Response (IA View)
1	The OPCC should keep the payments and sessions used under close review. Consideration should be given for the OPCC to pay for each individual session used per victim, with up to 10 sessions allocated to each victim, still working on the £35 average cost basis. This would reduce the risk of unnecessary expenditure being paid for unused sessions	Significant	<ol style="list-style-type: none"> <li>1. Monthly monitoring reports submitted by each Counselling provider providing details of all new referrals accepted into service alongside the total number of sessions used per closed case to be carefully scrutinised by the C&amp;P Team to monitor the actual number of sessions used per client and the average across all services.</li> <li>2. Bi-monthly (every 2 months) spot checks of client case files identified by the C&amp;P Team.</li> <li>3. 6-monthly reviews of the Budget Spend Profile for each Counselling provider to be completed by the C&amp;P Team including any necessary adjustments to re-profile payments and/or number of sessions.</li> </ol>	<ol style="list-style-type: none"> <li>1. Forward Plan of Monthly Performance Monitoring, Sarah Graham by 31<sup>st</sup> December 2014</li> <li>2. Sarah Graham/Wendy Green by 31<sup>st</sup> March 2015</li> <li>3. Sarah Graham/Wendy Green by 30<sup>th</sup> April 2015</li> </ol>	Yes

NOT PROTECTIVELY MARKED

					<b>Final</b>
#	Recommendation	Category of Rec.	Management Action	Action Manager & Completion Date	Satisfactory Response (IA View)
2	Consideration should be given to reviewing the vetting checks before sensitive information is handled by employees. Any new counsellor should not be handling any data without undergoing a force vetting check and will not gain access or be able to access systems before checks have been assured and verified.	Merits Attention	<ol style="list-style-type: none"> <li>List of all provider's staff and volunteers that have been successfully vetted by NYP to be maintained by the C&amp;P Team.</li> <li>Bi-monthly (every 2 months) spot checks of staff completing client case files as identified by the C&amp;P Team to ensure only successfully vetted staff/volunteers are working with victims and/or accessing their personal information.</li> </ol>	<ol style="list-style-type: none"> <li>Wendy Green by 31<sup>st</sup> December 2014</li> <li>Sarah Graham/Wendy Green by 31<sup>st</sup> March 2015</li> </ol>	Yes
3	Consideration should be given to establishing a complaints procedure to allow service services to complain to the OPCC, if they are unhappy with the local handling of their complaint	Merits Attention	<ol style="list-style-type: none"> <li>Complaints Policy to be developed and agreed with all providers to allow for complaints from service users to be escalated up to the OPCC where necessary.</li> </ol>	<ol style="list-style-type: none"> <li>Sarah Graham/Wendy Green by 30<sup>th</sup> April 2015</li> </ol>	Yes

<b>Classification of Recommendations</b>	
<b>Fundamental</b>	Action is needed to address risks that could impact on the organisation's ability to achieve its objectives. Action will typically be organisation-wide and be necessary at the highest level. Other fundamental recommendations will be made in regard to potentially serious breaches of statutory obligations.
<b>Significant</b>	Action is needed to address risks that impact primarily on one major business area or to address lower risks on an organisation-wide basis.
<b>Merits Attention</b>	Action is advised to enhance control, remedy minor breaches of current controls or to improve efficiency.

## 6 Appendix: Assurance Level

Internal Audit assesses the effectiveness of internal control, within the scope of what is audited. This measure is therefore a relative one.

Category	Description
1	Reasonable assurance can be provided that the main risks considered are being effectively managed; action may still enhance the management of risk in a small number of areas. In addition Internal Audit has identified that the approach taken to address risk as representing good practice in this area.
2	Reasonable assurance can be provided that the main risks considered are being effectively managed. Limited management action may be required to address a small number of significant issues.
3	Limited assurance can be provided that the main risks considered are all being effectively managed. Significant management action is required to address some important weaknesses.
4	Inadequate assurance can be provided that the risks identified are being effectively managed. Significant weaknesses have been identified in the risk management action, these are likely to involve major and prolonged intervention by management. These weaknesses are such that the objectives in this area are unlikely to be met.

## 7 Appendix: Overall Assessment Criteria

Risks in this report have been assessed using the following criteria. It is the same criteria as that used by North Yorkshire Police to assess risk for the Risk Register.

Probability	Highly Probable	Nil	5:7	4:12	2:14	1:16
	Probable	Nil	5:4	5:8	3:13	2:15
	Unlikely	Nil	6:2	5:5	5:10	4:11
	Highly Improbable	Nil	6:1	6:3	5:6	5:9
	Nil	Nil	Nil	Nil	Nil	Nil
		Nil	Negligible	Minor	Significant	Catastrophic
			Impact			

Probability	Nil	< 20% Highly Improbably (HI)	20% - 40% Unlikely (UL)	40% - 60% Probable (P)	> 60% Highly Probable (HP)
Impact Categories	Nil	Negligible	Minor	Significant	Severe
Financial (£)	Nil	0 => 100k Increased financial impact less than £100000	100k => 250k Increased financial impact between £100k and £250k	250k => 2.5m Increased financial impact between £250k and £2.5m	2.5m => 3.75m Increased financial impact greater than £2.5m
Reputation	Nil	Negligible adverse publicity. Minimal impact upon public perception	Localised adverse publicity. Minor/transient impact upon public perception of Force or PCC	Criticism at local level. Lasting impact upon public perception of Force or PCC	Intense national media. Criticism at national level
Operational	Nil	Negligible impact upon ability to deliver service and meet Force targets	Minor impact upon ability to deliver service and meet Force targets	Significant impact upon ability to deliver service and meet Force targets	Catastrophic impact upon ability to deliver service and meet Force targets
Legal/Compliance	Nil	Negligible prospect of legal challenge	Minor/Transient prospect of legal challenge	Serious non compliance. Litigation/challenge.	National legal issue.