

MPS-MOPAC JOINT AUDIT PANEL

4 October 2021

MPS Governance Improvement Plans

Report by: The Director of Strategy and Governance

Report Summary

Overall Summary of the Purpose of the Report

This report provides an update on the Met's Governance Improvement Plans. The plans are attached in Appendix A. Following the areas for improvement identified in the AGS 2020/21 (tabled in July 2021 to Audit Panel) relevant teams were asked to set out their actions to address them. These plans will now be monitored quarterly – and progress reported to Audit Panel.

Key Considerations for the Panel

Most of the GIP areas are carried over from last year (such as Learning and Data as they correspond to substantial transformation areas). This explains why there are already some elements of slippage in terms of delivery dates (as actions will have been carried forward).

Interdependencies/Cross Cutting Issues

The Governance Improvement Plan sets out the Met's plans to improve governance and controls across our full range of activity. As such, it is entirely cross-cutting and has significant interdependencies with other Audit Panel agenda items – specifically HMICFRS recommendations, DARA audits, as well as our Risk Management activity.

Recommendations

The Audit Panel is recommended to:

- a. Note the new Governance Improvement Plans and the progress made as at September 2021.

1. **Supporting Information**

The AGS tabled at the previous Audit Panel reviewed governance controls in place, taking into account the opinions of the Met's internal auditor (DARA), external auditors and HMICFRS. Once it was agreed, area leads were asked to set out their plan to put in place (or set out) actions that will be taken to address the risks identified in the AGS. The Governance Improvement Plans outline what, in practice, the Met will do over the coming year to instigate improvements to the areas where higher risks were identified. The document attached sets out the identified risks and issues, and the actions proposed to strengthen controls, together with action owners and a proposed completion quarter.

There are 6 high level areas for improvements (which are set out below). Currently there are 30 work-streams captured in the plan for 2021/22. Many are a continuation of the previous year's plan, but there are a number of new work-streams under development – such as Level 1 and 2 assurance, and Competence and Standards of Professionalism.

Key findings

Plan 1: Capability, Learning and Development

The 2020/21 AGS found that significant progress has been made within the improvement plan, notably with PIB approval of the Learning Target Operating Model (LTOM) business case. The Learning Management System has been re-profiled, with a revised go-live date planned for Q1 2022/23. Resources are now mobilised. Implementation of the new L&D structures and processes is planned to commence from January 2022 however cannot be fully achieved until post LMS implementation. Activity underway to move towards a blended learning curriculum.

Plan 2: Organisational Learning (OL)

The Organisational Learning and Research function has become established within CPIC, and focused on four key areas namely implementing the OL framework; systemising information, knowledge and memory; learning from high harm/risk; and embedding a culture of learning. Work is continuing to expand OL learning hubs across BCUs, after successfully developing a number of pilot sites. The team also continue to support Gold Groups across the Met, and have been audited in this area by DARA.

Plan 3: Public and Partner Engagement

Following the 2020/21 AGS, we merged the two separate Engagement plans (public and partners) into one. The London Safety Centre has been established, and will be enhanced in 2022 by the transfer of key crime prevention and volunteer posts from CPIC. New StrIDE strategy is being launched during National Inclusion week in September 2021, and will provide a robust framework for progressing a number of actions.

Plan 4: Assurance Controls, Levels 1 and 2

The review of Public Protection policies is expected to be completed Q3 2021/22. Work also continues to embed Level 2 Assurance capability within CPIC, with the unit working closely with Heads of Profession to embed continuous improvement. CPIC supports the Data Quality Ethics Assurance Board (DQEAB) whose aim is to empower local BCUs with the tools to complete their own level one inspections. Having worked with Public Protection, the aim is now to move wider, and is currently supporting SO15 in this area.

Plan 5: Data Management

Following substantial progress last year, there has been further activity to improve the quality of data, such as the establishment of the Data Quality Board, and a refresh of the Data Board performance pack. Data standards are now monitored through the Standards and Classification Working Group. A refresh of the Data Owners process will be completed by Q4 2021/22. A Data Ethics lead is being recruited by Q4 2021/22. Work to embed data principles into Transformation programmes is also ongoing, with a target date of Q3 2021/22.

Plan 6: Competence and Standards of Professionalism

This plan has been developed to include the previous 'Compliance' GIP, and expand it to bring in other aspects of Standards, but to be clear it is not specifically targeting Professional Standards. There has been significant progress in completing the legacy backlog of vetting for an estimated 18 thousand renewals, and this should be concluded in Q3 2021/22. The new Vetting IT system is undergoing further testing and is expected to go live in Q3 2021/22. A change programme looking at the transformation of Complaints in the Met is being set up, working to a 12 – 18 month timescale: more actions are therefore expected to be set out in the next iteration.

2. Equality and Diversity Impact

The governance improvement plan contains a number of actions that aim to strengthen our engagement of communities and impact positively on equality and diversity within the Met and externally.

3. Financial Implications

There are no direct financial implications from this report. The costs associated with the areas of work identified in this report will be met from the relevant unit's budgets.

4. Legal Implications

The Mayor's Office for Policing and Crime and the Commissioner of Police of the Metropolis are relevant bodies under Schedule 2 of the Audit Commission Act 1998 for the purpose of the Accounts being subject to audit. Both are under a statutory duty to approve an Annual Governance Statement (AGS), from which this Governance Improvement Plan stems.

5. Risk Implications

The annual governance review identifies significant governance areas for improvement across the Met. These are monitored quarterly and aligned with corporate risk processes.

6. Contact Details

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7. Appendices and Background Papers

Appendix 1 – Met Governance Improvement Plans September 2021 update

GOVERNANCE IMPROVEMENT AREA 1: Capability, Learning and Development

Aim	Governance area owner	Working lead(s)
We have clear and effective governance arrangements to develop the capability we, and our workforce, need to address demand.	AC Professionalism	Director Learning

RELATED CORPORATE RISK: Risk 2 New Systems / Risk 4 People / Risk 5 Capability

CIPFA PRINCIPLE ALIGNMENT: E) Developing the entity's capacity, including the capability of its leadership and the individuals within it.

AGS 2020-21 and risks findings we are aiming to address (internal and from HMICFRS and DARA)

- Delivery of our significant **Change Programme on Learning (P8)**
- Progress implementation of the **Learning Management System**
- Met's 2020/21 Statement of Internal Control review flagged that **only 49% of respondents have "confidence that processes to identify the skills and abilities needed in my area of responsibility are effective and that our recruitment, training and learning and development processes deliver the capability and leadership we need"**

Monitoring arrangements in place

- People & Learning Board (chaired by Deputy Commissioner)
- L&D Executive Steering Group (chaired by AC Professionalism)
- P8 Programme Board (chaired by Director - Learning)
- Strategic Learning & Development Board (co-chaired by Commander L&D and Head of Curriculum / Learning Technology)
- Transformation infrastructure (Design Authority, Assurance Board etc.) supports the development of the TOM and Business case.
- Indicators monitored through Performance Framework: Number of active users on LinkedIn Learning, Completion rate for specified priority training area, Content creation, and Staff Survey.

GOVERNANCE IMPROVEMENT PLAN 1: Capability, Learning and Development

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
1. Mobilisation of new Learning Target Operating Model (LTOM) : Learning transformation programme (P8) will clarify processes, controls, ambitions and responsibilities:	Alex Walsh	Implementation in 2022/23	<ul style="list-style-type: none"> • High level and detailed designs for the new L&D Target Operating Model approved through the Business Design Authority • Full Business Case for the Learning Operating Model signed off at PIB and IAM (December 2020) • Enabling HR processes (internal and external) mobilised and in flight • Work on Business Processes and Governance due to mobilise in Autumn 2021 to tie in with new leadership appointments in to L&D SMT • Dependency with LMS implementation (see below) means that implementation of the new L&D structures and processes is planned to commence from January 2022 however cannot be fully achieved until post LMS implementation in 2022/23 Q1 	
2. Move to a blended curriculum : Creation of an infrastructure to allow learners to access digital content including on-demand at the point of need. Ability for training to be tailored to specific groups in line with assessed skills gaps. All training will be linked to master learner record in the LMS.	Alex Walsh / Myles Hannon	Implementation 2022/23	<ul style="list-style-type: none"> • New digital content rolled out for Full Access PNC, Public & Personal Safety Training and ELS (new module on Agonal breathing) • Initial curriculum review undertaken for core investigative training delivered by the Crime Academy together with the Head of Profession for Investigation. External learning partner engaged to support uplift and blend of content for the Investigative Interviewing for Suspect, Victim & Witness in Serious and Complex Investigations Course, and the Initial Crime Investigators Development Programme. • Dependency with LMS implementation means that the full impact and benefits of the work to modernise and uplift the existing core operational curriculum will not be realised until post LMS implementation in 2022/23 Q1 	
3. Implementation of an integrated corporate Learning Management System (LMS) will deliver: Introduction of a single master training record for all officers and staff / provision of accurate and fully up to date MI on skills and capabilities and where these are / ability to target, close gaps and succession plan.	Alex Walsh	Q1, 2022/23	<ul style="list-style-type: none"> • Go Live date for the corporate Learning Management System re-profiled to 2022/23 Q1 • New plan due to be formally baselined in September 	

GOVERNANCE IMPROVEMENT AREA 2: Organisational Learning

Aim	Governance area owner	Working lead(s)
We are a learning organisation. We learn from our experiences and from others to improve what we do, supported by good governance and by a culture sustaining transparency and trust.	AC Professionalism	Director, Continuous Policing Improvement Command Head of Organisational Learning

RELATED CORPORATE RISK: Risk 3 Standards / Risk 5 Capability

CIPFA PRINCIPLE ALIGNMENT: E) Developing the entity's capacity, including the capability of its leadership and the individuals within it

AGS 2019-20 and risks findings we are aiming to address (internal and from HMICFRS and DARA)

- Embedding the **new OL framework**, to help us identify, analyse and socialise knowledge and learning across the Met and with our partners, evaluating what works to improve practice
- Progress the **implementation of OL Hubs** across the Met
- **Processes for research partnerships and co-governance** including MOU, Information Sharing protocols and third party contracts, academic bursary scheme

Monitoring arrangements in place

- 1) Monthly PLB chaired by Chief of Corporate Services
- 2) Quarterly OL Board chaired by AC Professionalism
- 3) Bi-monthly Head of Profession Meetings
- 4) Local BCU/OCU OL Boards (frequency varies)

GOVERNANCE IMPROVEMENT AREA 2: Organisational Learning

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Embedding an enhanced Organisational Learning and Research function in the Continuous Policing Improvement Command (CPIC)	Paul Clarke/Ross Daniels	Q2 2022/23	The Met's Corporate Organisational Learning and Research function is established within CPIC, comprising an OL implementation team and a Research Faculty. OL implementation continues to be focused on four areas – implementing the OL framework; systemising information, knowledge and memory; learning from high harm/risk; and embedding a culture of learning. Each of these areas is covered in more detail below:	
Implementing BCU/OCU Organisational Learning Hubs across the MPS	Paul Clarke/Ross Daniels	Q4 2022/23	Implementing the OL framework , developing our model into practice, has been piloted in a number of BCUs - pilot SW; BCU implementation on AS & AW; OCU implementation at Firearms, MO6, CT, IRSC and PPEU. Significant demand with 37 OL Hubs to establish. Hubs to include Sharepoint repositories; corporate memory; OL performance; OL maturity model; change through training, policy, operational practice. Ongoing coaching to local OL leads in OL practice and pathways.	
Development of a repository to capture and disseminate OL across the MPS in a standardised way	Paul Clarke/Ross Daniels	Q4 2022/23	Systemising information is focused on information flows to capture, escalate and socialise learning and to build corporate memory. We have worked with DP, innovation, Transformation and digital specialists to develop our OL within scoped Met systems. This includes: <ul style="list-style-type: none"> Focus on automation and semi automation. Utilising existing IT – SharePoint, Power Apps and Box to make knowledge more accessible. Development of the Repository – creation of categories, subcategories of functions and key words which will enable the organising and labelling of the knowledge being created to facilitate tracking, sharing and searching. The typology is based on 17 policing functions, 19 sub-functions and 11 categories. 	
Embedding a process to capture, categorise and share learning from Strategic Gold Groups/Critical Incidents	Paul Clarke/Ross Daniels	Q1 2022/23	Learning from high harm/risk has been focused on supporting learning on gold groups, including Op Lilford thematic analysis and timeline development. The team are also supporting Daniel Morgan Enquiry. DARA have also completed a review of Gold Groups In the MPS.	
Embedding a culture of learning across the MPS	Paul Clarke/Ross Daniels	Phase 4 OU OL project completed Q3 2021	Embedding a culture of learning - acculturalisation is additionally supported through the OU OL phase 4 project (to Q3 2021). Work continues to update and socialise the 'blame to praise' model for local implementation, and to develop 'MetOL' one side summarised infosheets and online materials.	Phase 4 OU OL project completed Q3 2021

GOVERNANCE IMPROVEMENT AREA 3: Public and Partner Engagement

Aim	Governance area owner	Working lead(s)
The Met is a trusted partner, we are effective in mobilising partners to keep London safe for everyone. We build relationships and engage with communities across London, to prevent crime and inspire trust and confidence in policing.	AC Professionalism	Commander - Crime Prevention, Inclusion and Engagement

RELATED CORPORATE RISK: Risk 1 Violent Crime / Risk 8 Crime Prevention / Risks 9 Public & Local Engagement

CIPFA PRINCIPLE ALIGNMENT: B) Ensuring openness and comprehensive stakeholder engagement / C) Defining outcomes in terms of sustainable economic, social and environmental benefits

AGS 2019-20 and risks findings we are aiming to address (internal and from HMICFRS and DARA)

- Strengthen and develop the **London Safety Centre**, building on the agreed vision paper
- Establish **clear partnership priorities**, work effectively with partners to bear down on violence; and develop operational partnerships
- Roll out of **Positive Activity Initiatives** across all BCUs,
- **Increase dialogue** with communities on specific issues to build trust (e.g. tactics such as Stop and Search) and
- **Capture Engagement Activity**: The HMICFRS' 2019 Integrated PEEL inspection (Legitimacy: Good) suggested the Met did not centrally monitor engagement activity,
- Delivery and implementation of a refreshed **Inclusion, Diversity and Equality Strategy (STRIDE)** and governance mechanisms
- Roll out '**Police Encounter**' panels across London from April 2021

Monitoring arrangements in place

- STRIDE Governance structure
- Crime Prevention & Trust governance structure: Board (AC Prof) > Delivery Grps (Cmdr CPE) > Working Grps (CI CPE)
- Frontline Neighbourhood board
- A 'Use of Force Strategic Oversight Group' was formed in June 2020.
- The Deputy Commissioner's Delivery Group was established in December 2020 to consolidate oversight, and strengthen our initiatives to increase diversity and engagement with Black communities in London, and monitor the implementation of the Mayor's Action Plan.
- MOPAC scrutiny as part of the Police and Crime Plan through the Safer Children and Young People's Board.

GOVERNANCE IMPROVEMENT PLAN 3: Public and Partner Engagement

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Strengthen and develop the London Safety Centre ,	Cdr Roper	March 22	In August AC Prof agreed the transfer of key crime prevention and volunteering posts from CPIC to the LSC. These moves will be made in September onwards. Extra Mayors Precept funding of £360K PA has been secured to recruit a Band A Head of Volunteering LSC and support team. Hay review has been agreed with advert out mid September.	
Establish clear partnership priorities ,	Cdr Heydari	tbc	BCU Core commitment: <i>monthly meeting with key strategic partners such as the Chief Executive and local community safety leads.</i>	Timing to be confirmed
Roll out of Positive Activity Initiatives across all BCUs,	Cdr Roper	March 22	Now a KPI in Pillar 2 Corporate performance framework 21/22 - <i>at least 12 per year per BCU.</i> Performance managed through Crime Prevention & Trust governance structure.	
Delivery and implementation of a refreshed Inclusion, Diversity and Equality Strategy (STRIDE) and governance mechanisms	Cdr Roper	Delivery Oct 21	The new StrIDE strategy will be launched during National Inclusion Week w/c 25 th September.	
Roll out ' Police Encounter ' panels across London from April 2021	Cdr Roper	tbc	The roll out has been delayed due to the complexities of Data Protection and legal sharing of data and footage. Work continues on the next iteration of the DPIA.	

GOVERNANCE IMPROVEMENT PLAN 3: Public and Partner Engagement

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Increase dialogue with communities on specific issues to build trust	1. Cdr Heydari 2. Cdr Connors 3. Cdr Roper	1 tbc. 2. May 21 3. Jan 22	1. FLP core-commitments and an engagement action plan 2. Stop & search: a corporate narrative exists assist in community conversations and the community engagement product “A Different View” is now utilised. 3. CPIE are mapping existing engagement group against census data to identify engagement gaps. First tranche, (Jewish, youth, Trans and female) to be launched in September.	
MPS Engagement Handbook HMICFRS’ 2019 PEEL - the Met did not centrally monitor engagement activity	Cdr Roper	Nov 21	The first iteration containing FLP returns will be published on 1/11/21, this will then be followed up at monthly intervals with the SO, MO, Prof, Corp Services returns.	

GOVERNANCE IMPROVEMENT AREA 4: Assurance Controls Level 2 and 1

Aim	Governance area owner	Working lead(s)
Senior Leaders have assurance that the right controls are in place and are working effectively at all levels of the organisation.	AC Professionalism	Director, Continuous Policing Improvement Command working with Heads of Profession

RELATED CORPORATE RISK: N.A.

CIPFA PRINCIPLE ALIGNMENT: E) Developing the entity's capacity, including the capability of its leadership and the individuals within it / F) Managing risks and performance through robust internal control and strong public financial management / G) Implementing good practices in transparency, reporting, and audit to deliver effective accountability

AGS 2019-20 and risks findings we are aiming to address (internal and from HMICFRS and DARA)

- **Embed the Continuous Policing Improvement Command** (CPIC) changes and its role to strengthen the Met assurance framework at Level 2 [DARA CPIC Assurance Framework and Organisational Learning]
- **Review policies** to ensure they are up-to-date, consistent and clear (based on APPs). For example, perform a review of all Public Protection policies by the autumn. With a standard layout, this will better align to national guidance & show where, how and why we might deviate. This will support & guide frontline officers & supervisors, strengthening of Level 1 Assurance.
- Strengthening of operational decision-making and performance monitoring at command levels (**Assurance Level 1**)
- Improve consistency and management of **Disclosure**
- **Strengthen Risk Maturity** following RM survey, introducing better proportionality of decision-making in relation to risks, so the organisation's assurance capabilities can focus on higher risk items

Monitoring arrangements in place

- 1) Quarterly MPS Public Protection Board chaired by AC FLP
- 2) Risk and Assurance Board focuses on the effectiveness of controls and the feed into organisational learning.
- 3) Heads of Profession structure supports assurance in their areas.
- 4) The Director of Finance chairs a monthly meeting of relevant Directors and DAC Corporate Services. This considers investment decisions and other matters which are due to go to Portfolio and Investment Board or indeed to the Investment Advisory Meeting.

GOVERNANCE IMPROVEMENT PLAN 4: Assurance Controls Level 2 and 1

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Train key contacts in business groups to strengthen Risk Maturity following RM survey	Tracy Rylance	Q4	The risk maturity process has identified training needs which will be delivered over the next 6 months	
<p>Embedding a Level 2 Assurance capability within the Continuous Policing Improvement Command (CPIC) in support of the Heads of Profession (HoP)</p> <p>Embedding a Continuous Improvement approach across BCUs as part of Operation Aegis (Public Protection).</p>	Ross Daniels, CPIC	Q4	<p>Within the level 2 environment the core practice teams in the Continuous Policing Improvement Command (CPIC), which lead best practice, policy and improvement within their thematic areas such as Public Protection, are developing more active intervention across the MPS. Level 2 assurance activity is already integral to the Organisational Learning & Research Centre of Expertise, and in the Continuous Improvement & Policy Centre of Expertise.</p> <p>A comprehensive strategy and approach has been developed that incorporates all known Level 1 and level 2 activities and seeks to embed Continuous Improvement (CI) within each. Initially this is focussed on Public Protection, but will then expand into the other BCU strands. The strategy is aimed at building on foundations set by Operation Aegis and will help to ensure early benefits are realised and continue to be delivered.</p> <p>The focus is on the following main areas:-</p> <ul style="list-style-type: none"> • Immediate identification and grip and root cause resolution of risk – Hot review and Root Cause Problem solving • Maintain and continue to develop new ways of working – Daily process Confirmation, Improve maturity assessments and 100 day plans • Embed CI as part of what BCUs do – CI Maturity assessments, BCU Continuous Improvement Board • Develop CI capability – Accredited training and coaching in how to embed CI • Develop BCU Staff capability – DIT audit and Surge Activity, Investigative stand evaluation, coaching and support by CPIC Tactical Policy Advisors <p>The Heads of Profession are also able to commission L2 assurance activity from CPIC.</p>	In progress

GOVERNANCE IMPROVEMENT PLAN 4: Assurance Controls Level 2 and 1

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Embedding a Level 1 Data Quality Ethics Assurance process. The process to be widened to include other HoP portfolios.	Ross Daniels, CPIC	Q4	<p>The Data Quality Ethics Assurance Board (DQEAB) is a level one data assurance process which concentrates on the following public protection and related areas; Domestic Abuse, Child Abuse, Mental Health, Rape, Hate Crime, Stalking/Harassment, Missing Persons, CSE & CCE, Indecent Images of Children, Adult Safeguarding and Harmful Practices. Since July 2021 RUI has been included and in the next few months the Bail process will also be incorporated.</p> <p>One of the main ambitions of the DQEAB is to empower local BCUs with the tools to complete their own level one inspections thereby enabling local supervisors to check on what is working well and what is good practice. Since November 2019 BCU's check on a selection of the above public protection areas (no more than four at a time) on a monthly basis and feed the results into the DQEAB chaired by Commander Sue Williams.</p> <p>Moving forward work continues with SO15, the Head of Profession for Investigation - Commander Jon Savell and Met Detention to align the DQEAB process to the Met Direction and HMICFRS recommendations. The process will be streamlined from October 2021 by introducing a surveying platform which will simplify the process making it easier for BCU's to complete the reviews instead of the current process of filling out checklists on Excel spreadsheets and emailing the results to CPIC.</p>	Mostly complete
<p>Completing a review of Policies in Public Protection. This will then be widened to look at the HoP Investigation portfolio.</p> <p>A review of the corporate policy process to identify efficiencies and good practice.</p>	James Archer, CPIC	Q3	<p>Public protection policies are being reviewed with Child Abuse recently approved and published. Domestic Abuse and Hate Crime policies in the process of being finalised. Vulnerable adults, Exploitation and Harmful practice policies currently being reviewed/updated.</p> <p>Focus to move to Investigation policies. A draft 'investigation policy' intranet page has been developed. A review has begun of the General Investigation policy. There is also a review of the corporate policy process to ensure it is effective and removes any duplication or waste. A further update on progress will be available in September.</p>	Completion of PP review expected Q3

GOVERNANCE IMPROVEMENT AREA 5: Data Management

Aim	Governance area owner	Working lead(s)
We have raised the Met's data competence (the means by which we acquire, manage, share, protect, publish and use our data to improve decision making) and data culture (the way we think about and behave with regard to data and its value as an asset).	Director Strategy and Governance	Director of Data

RELATED CORPORATE RISK: Data Risk remitted to Data Board

CIPFA PRINCIPLE ALIGNMENT: D) Determining the interventions necessary to optimise the achievement of the intended outcomes / G) Implementing good practices in transparency, reporting, and audit to deliver effective accountability

AGS 2019-20 and risks findings we are aiming to address (internal and from HMICFRS and DARA)

- Continue progress in **improving central data capability** (drive data quality; access to data; data analysis; relevant and timely data)
- **Redesign the corporate data products portal** to provide the right level of data, to the right people through the portal re-design
- **Develop an Open Data Strategy**, broadening what Londoners and our partners can access directly (with relevant security measures)
- **Completion of the Information Asset Register** project driven by the Data Office, will support overall business continuity planning, and facilitate corporate oversight, via the Resilience Committee
- **Raise compliance with VCOP requirements** (supported by CRIS integration completion in Q1 2021)

Monitoring arrangements in place

- 1) Regular reporting to the Public (monthly Internet dashboards) on compliance with Information Requests (FOIA 2000) & Right of Access requests (DPA 2018). ICO monitoring no longer required.
- 2) MPS Data Strategy (underpinned by Analytics and Data Talent Strategy) launched – December 2019, sits 6 weekly. Feeds Risk & Assurance Board.
- 3) MPS Data Board established with 3 subgroups established against priority areas (Review, Retain, Disposal; Data Quality; Reporting & Analytics). Sit 6 weekly. Uses Data Strategy
- 4) Implementation Plan to drive activity. **New sub-group on Information Assurance & Security to be established October 2021**
- 5) Commenced completion of an Information Asset Register to establish what data we hold, those accountable for that information (IAOs), what assets require RRD, where DQ issues need to be addressed. Framework for Information Asset Ownership across the MPS approved in principle.
- 6) Commenced build of corporate library of data sharing agreements, live data testing, Data Privacy Impact Assessments (DPIAs) and other core data artefacts. Performance tracking of DPIAs, DSAs and 3018s (live testing) reported monthly to Data Board. Oversight of Data Processing Contracts in place with Commercial, DLS and Data Office

GOVERNANCE IMPROVEMENT PLAN 5: Data Management

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Establish purposeful links between Data Board and local Data Quality reporting such as; Data Quality and Ethics Boards on BCUs and other OCUs; key subgroups to Data Board on other capabilities; Information Asset Owners (IAO) ; SCIRG (crime data integrity)	Dir. Data (A.Reed)	tbc	<ul style="list-style-type: none"> Membership of the DQ Board by the Chair of the DQEB (BCU level). Refresh of the Data Board Performance Pack re report on key Data Quality performance across the MPS. Refresh of the IAO (to be renamed Data Owners) process to include Data Quality performance – planned establishment of an Data Owners Network with support from the Data Office Chair of the Data Quality Board is a regular attendee to the DQEB Currently scoping an escalation process from DQEB into the DQ Board and then the Data Board as needed. 	Timing to be confirmed
Build of Data Office to establish enabling capabilities for governance, analytics, service improvement & data innovation	Dir. Data (A.Reed)	April 2022	<ul style="list-style-type: none"> Refresh of the Data Owners process to build a consistent approach to the responsibilities of this role. This will include the creation of a Data Owners Network, a practitioner led working group and development of tactical guidance. The newly formed Standards and Classification Working Group will seek to create consistent data standards (including a focus on recording standards for protected characteristics) across our systems to allow data to be analysed with minimal cleaning and will align with national reporting requirements and partner standards to streamline compliance and improve wider interoperability 	
Data ethics capability build	Dir. Data (A.Reed)	Jan 2022	<ul style="list-style-type: none"> Recruitment in progress for a Data Ethics lead MPS represented at NPCC Ethics forum & with CDEI and WMP regarding national framework for data ethics on AI. 	

GOVERNANCE IMPROVEMENT PLAN 5: Data Management

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Ability to define, monitor and manage demonstrable improvements in Data Quality across core data sets	Dir. Data (A.Reed)	tbc	<ul style="list-style-type: none"> The NPCC Data Maturity Assessment will be used to conduct a baseline of organisational maturity in data quality (consistent format to other forces; enables benchmarking in future too). Four Pillars; Data, People, Process, Tech – each with a maturity assessment against them and an overall assessment Year of Quality (DQ programme) will commence in January 2022. This will enable the MPS to identify and prioritise its key data assets, define “what good looks like” across these assets, agree performance measures and build a programme of work to (a) create a culture of high quality data, (b) ensure policies and procedures reflect the needs of the organisation, (c) weave DQ principles into all L&D, and (d) work with ICT to ensure that our technologies support high quality data. Work is ongoing to determine what data about our data we can reasonably provide to Data Owners to support their data responsibilities. This will be managed through the DQ Board and will form part of the Data Board Performance Pack. 	
Data Management to be considered as a mandatory element of all transformation, change and innovation planning	Dir. Data (A.Reed) + TD	Q3	<ul style="list-style-type: none"> Work ongoing to embed data principles into Transformation processes (incl. business case & design documents). Data Office represented at Front Door & Business Design Authority. 	
Ensure all Commercial Contracts where data processing is required are DPA (2018) compliant	Dir. Commercial (M.Roberts)	FY 2021/22 Q1	<ul style="list-style-type: none"> 1049 commercial initiation form now requires confirmation that a DPIA has been completed. Skills gaps will be covered as part of MPS-wide Learning Needs Analysis for Data. 	

GOVERNANCE IMPROVEMENT AREA 6: Competence and Standards of Professionalism

Aim	Governance area owner	Working lead(s)
We are a trusted organisation: officers behave with integrity and professionalism, supported by good governance, efficient systems and robust compliance controls.	AC Professionalism	DAC Professionalism

RELATED CORPORATE RISK: Risk 3 on Standards

CIPFA PRINCIPLE ALIGNMENT: A) Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

AGS 2019-20 and risks findings we are aiming to address (internal and from HMICFRS and DARA)

- **Raise professional standards awareness** across the organisation
- **New vetting system implementation** (CycVetting management system in response to the 2019 DARA Security Vetting and Clearance review (Limited Assurance) audit)
- Supporting the **implementation of the new Anti-Corruption Strategy**
- Scope a **new model of public complaint handling** across the Met, with a focus on early resolution
- Following the **fraud risk assessment** (DARA), need to focus on wider roll out and local management ownership of fraud risks.

Monitoring arrangements in place

- 1) Gold Group on disproportionality in system reducing misconduct cases by 25%
- 2) Vetting Board chaired by DAC Professionalism
- 3) Monthly Vetting SLT Meeting
- 4) Bi-Weekly Local Vetting SLT Gold Group Meeting
- 5) Weekly Referencing and Vetting Mission Control Performance Overview Meeting
- 6) Daily Vetting Unit Information Centre Performance Overview Meeting
- 7) Daily individual Vetting Team Huddle Board Performance Overview Meeting
- 8) Monthly Vetting IT Upgrade Project Board

GOVERNANCE IMPROVEMENT PLAN 6: Competence and Standards of Professionalism

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Implement recommendations from DARA's Security Clearance & Vetting - Effectiveness & Efficiency	Bas Javid / Danny Mays	Q3	A DARA follow up report was completed in November 2020. 10 of the total 13 recommendations have been fully completed. Vetting renewals due in 2021-22 are now being processed. Vetting renewal applications due up to and including October 2021 have been sent out for completion and return for processing. Renewals due in November were due to be sent out for completion by August 2021. An escalation process has been introduced to chase up outstanding vetting renewal forms. The new IT system has a vetting portal. Vetting sponsors have been trained in its use. Testing of the new system identified some issues. User testing resumes again in September 2021 with roll out planned to start in December 2021. To address inappropriate level of vetting attached to posts, a designated post list has been produced and has now been agreed by Vetting Board. The DARA assurance rating has improved from 'Limited Assurance' to 'Adequate Assurance'.	Mostly Complete
New Vetting IT System	Bas Javid / Danny Mays	Q3	Further testing is planned on the new Vetting IT system before implementation. Business change activity continues including communication with stakeholders and training of vetting team members. The testing and implementation of the new vetting IT system continues to be governed by the Vetting IT Upgrade Project Board. Subject to successful completion of the next round of user acceptance testing, go-live of the new system is planned for December 2021	Completion expected Q3 2021-22
Re-vetting of officers and staff	Bas Javid / Danny Mays	Q3	The legacy backlog of c18k vetting renewal cases have now been processed with the exception of those long term sick, on maternity leave or on a career break. Vetting renewal forms have been sent out that are due in Jan-Oct 2021. These are currently either being completed by individuals or being processed by the vetting team. An escalation process is in place to chase up outstanding forms. A dedicated Vetting Renewal Team is in place to manage BAU vetting renewals going forward. Forms relating to vetting renewals due in November 2021 will sent out for completion on 23 rd August 2021.	Mostly Complete

GOVERNANCE IMPROVEMENT PLAN 6: Competence and Standards of Professionalism

Governance improvement & controls you are putting in place (including in response to DARA / HMICFRS recommendations)	Lead	Timescale (by when)	UPDATE ON PROGRESS TOWARDS IMPLEMENTING THESE CONTROLS (to be updated quarterly)	Status
Professional Standards Transformation Programme		12 -18 months	A change programme is now set up to look to redesign how the MPS deal with complaints and how the most appropriate model in terms of structure and resources is implemented to do this.	More detail to be included next quarter
DPS Commanders Scrutiny Board (Pre COG)		tbc	This is currently reviewing the implementation of the MPS Counter Corruption Strategy in line with the NPCC one. Consideration should be given to a wider Board for this as this is about more than just Professional Standards and DPS.	