



Assurance Group

Annual report on Police data quality

Offence and Incident Recording

July 2021 to June 2022

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Purpose



High quality data is critical to providing the policing services New Zealanders expect and deserve.

Data is an asset that not only helps Police provide a service to victims and the wider public, but also to better understand and respond to demand. Patterns in data allow Police to identify opportunities to prevent and reduce harm.

Police recognises that consistent, accurate, timely and reliable data can only be achieved if it is actively monitored and managed. In 2015 Police created a central Data Quality and Integrity Team (DQIT)

based at Police National Headquarters, and entrusted this new team to lead that work.

DQIT's work focuses predominantly on the accuracy of Offence and Incident data. The team's work delivers an evidence based, end-to-end view of systems and processes utilising a defined *Quality Assurance Operating Model*. Our latest annual report summarises progress made by DQIT in realising its data quality and assurance aims over the period July 2021 to June 2022.



Introduction

Report Structure

This report starts with a short introduction outlining how the DQIT approach their work. This is followed by an update describing how the team have progressed against the aims stated in the last annual report. A core part of DQIT's work is to deliver audit and quality assurance activities, with a risk and continuous improvement focus. The detail of this activity is described in the team's annual *National Audit Plan* (NAP), which is approved at Executive level.

Our report describes activity completed against each strand of the NAP highlighting key findings and trends as well as improvement opportunities. This year, the report separates the business as usual NAP 1-5 activities and results, from NAP 6 (Thematic Reviews) where the findings of four detailed reviews are summarised.

The report then summarises the key activities delivered by DQIT last year, highlighting identified opportunities for system, process and practice improvements as well describing planned actions (aims) for the coming year.

In closing, the report looks to the future – identifying emerging topics, as well as describing, at a high level, the 'next steps' direction for the DQIT.



Introduction - How we work

The Data Quality and Integrity Team (DQIT) has three broad objectives:

Championing Data Quality

Embedding an ethical recording culture, which is underpinned by efficient and effective data quality systems and processes.

Evolving the *National Recording Standard* (NRS)

Maintaining the NRS and related Offence, Incident and alert metadata, as well as management tools and associated education resources.

Providing Organisational Assurance

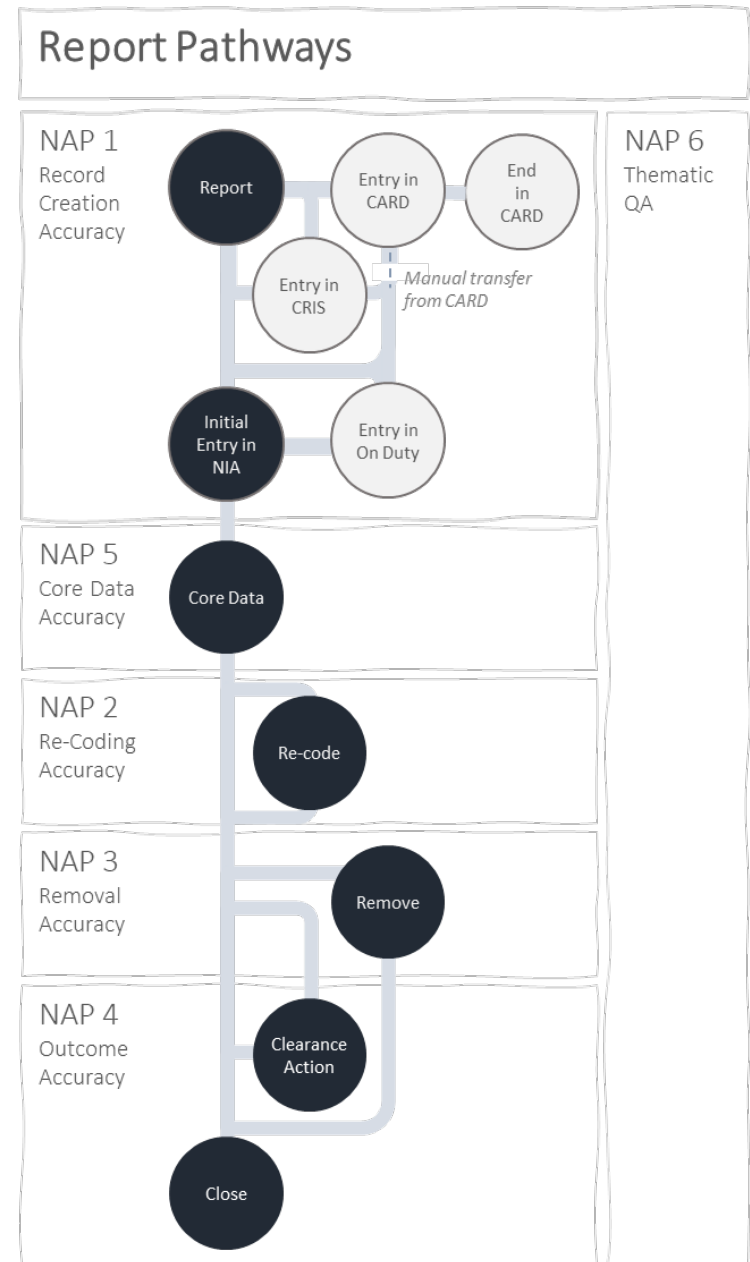
Delivering an annual risk-based *National Audit Plan* (NAP), as well as promoting the development of quality assurance capability within Districts and workgroups; focused on understanding performance and identifying improvement opportunities related to Leadership and Governance, Systems and Processes, and People and Skills.

The Role of the *National Audit Plan*

When a report is made to Police, the recording pathway varies depending on the channel it was received in, and the technology available to staff.

Information recorded initially, and at key points along a given pathway, is used to inform decisions about deployment and prevention activities, determine case management assignment and investigation priorities, and is pivotal to the successful collation of accurate national statistics.

Through the NAP, the DQIT monitor the quality of data at each critical stage of the end-to-end (report to resolution) process. In particular the team look at the extent to which reports are lost or misclassified as they travel through the different pathways, outlined in the adjacent diagram.



Introduction - Operating Model

The adjacent *Three Lines of Defence Assurance Framework* and *Assurance Operating Model* shows how DQIT works to promote assurance across New Zealand Police, with a risk and continuous improvement focus, based on evidence.

Quality management occurs in the ‘Monitoring and Testing’ (Detect) stage. It includes automatic and manual checking including quality assurance, audit, and other ‘test’ or ‘review’ activities.

These activities routinely occur within a *Three Lines of Defence Assurance Framework*, which draws the line between functions that own and manage risks (the ‘hands-on’ operational activity - first line), functions that oversee risks (offering organisational oversight - second line), and functions that provide arms-length assurance (the independent or third line perspective).

The *National Audit Plan* (NAP) sets out the intended scope of the national, risk-based, internal audit programme for Police covering Offence and Incident recording.

When undertaking audits, the team identify issues and examine underlying causes – grouping them under three broad headings:

- I. Leadership and Governance
- II. Systems and Processes
- III. People and Skills.

When publishing audit results, the team present findings using those headings with aligned improvement opportunities or recommendations.

The team also work with Districts, Service Centres and PNHQ Workgroups to embed the findings from their reports and to promote activities and actions that improve data quality outputs and outcomes.

This includes improvements to policy, system and process functionality and architecture, as well as increase awareness of, and compliance with the *National Recording Standard* (NRS).

Three Lines of Defence Assurance Framework



Assurance Operating Model



Progress Against Aims

In 2020/21 we said our broad aims were:

- To support and enable organisation-wide transformational change associated with the Reframe and Supported Resolutions projects, as well activity to refresh our Victim Operating Model.
- To promote the benefits of an effective Quality Assurance framework, as a method of achieving the goals of *Our Business*.
- To expand the number, outreach and influence of our network of District Crime Registrars; and
- To evolve the *National Recording Standard* and the *Legislative Reference Table Codebook* (LRT) so they enable effective recording practice.

About Progress Against Aims

In the 2020/21 Annual Report we outlined a number of aims for the coming year. This was divided into activities that; *Maintained the Framework, Built on Progress made*, as well as delivering *New Aims*.



Leadership and Governance

Support Organisational Change

This year the team appointed a second Principal Advisor. Those individuals routinely represent the interests of Data Quality and adherence with the *National Recording Standard* at strategic meetings i.e., for Reframe, Supported Resolutions, NIA Reference Group, the Operational Performance Framework Steering Group, as well the Disability Data Governance Group.

Similarly, extensive support has been provided to the Te Raranga Advisory Group, in the form of attendance at meetings and regular reporting about the issues and risks identified in the national Hate Crime QA activity.

Promote Quality Assurance Framework

The *Assurance Operating Model* continues to be woven into support and training material produced by the DQIT and formed the backbone of the workshops delivered at the 2022 Service and Data Quality Conference.

A range of leadership resources have been created and published including an updated Data Quality Maturity Matrix. These resources commonly encourage understanding (and application) of our *Assurance Operating Model*, working within a *Three Lines of Defence Assurance Framework*.

Furthermore, NIA enhancement to add an automated QA checking capability within NIA have been successfully progressed with three delivery phases having been completed.



Progress Against Aims



Systems and Processes

Delivering Audits, Updates and Manuals

The team have delivered a number of audits, in line with the NAP, and updated and expanded the NAP for the coming year.

The *National Recording Standard* was updated in March 2022, including clarifications for the recording of Offences in transit and on public transport and the recording of stolen e-Bikes and e-Scooters.

Work has been done to evolve audit templates and guidance and linked performance reporting that will underpin the delivery of the Data Quality Assurance Manual.

Performance Reporting and Dashboards

The team has refreshed a Performance Dashboard that covers the key recording processes and outcomes.

Richer Picture of Hate Crime

The team is evolving a Hate Crime Insights Report, intending to inform staff with up-to-date insights

about local Hate crime demographics and trends. HCQAT also introduced a regular 'free-text' search capability, allowing them to pick up on reports received by Police that should be flagged as Hate Crime, but were not.

Grow DCR Outreach

The appointment of two DCRs based in Te Waipounamu has delivered an improved focus on data quality risks and issues in the South Island. The appointment of an Assurance Manager has created the ability to provide oversight and continuity to the DCR's collective work.

NRS and LRT Offence Codebook

Last year DQIT processed a total of 958 LRT updates. This included the creation of 234 new Offences – notably relating to rationalisation of codes ahead of the new drug driving legislation, and ongoing changes to COVID legislation.

Additionally, 1,400 additional minor amendments to codes and their attributes were made.

There is a need to enable better recording of victims of public order-related offending, and more accurate recording of historical sexual

assault Offences. To prepare for that some exploratory work was done to ensure Sexual Assault and Public Order Offences are supported by the LRT framework.

Alerts

The Data Quality Team has not progressed activity to improve Alerts insights reporting, as other project work took precedence. This work will be revisited.

NIA Enhancements

Requested enhancements to our NIA QA Capability have progressed more slowly than anticipated. Initial trials were completed in early 2022 and further change requests forwarded. These changes were programmed for mid 2022, but have now been deferred until late November. Work to support SAS reporting capability, working with EBPC, for our new QA resource is due to get underway in February 2023.

Work to enable recording of the use of s.9(1)(h) of the Sentencing Act in NIA for Hate Crime files, is also anticipated to be actioned in early 2023.



Progress Against Aims



People and Skills

Continuous Education Programme (CEP) Training

In March 2022 the team re-launched CEP training resources aimed at frontline officers and supervisors. The updated material was made available on a new platform that can track the extent to which the training is viewed, and report the test results attained by individuals.

Other Training Resources

Alongside the CEP update, the team Intranet training page was also refreshed, where appropriate, linking people to the updated resources within CEP.

Other presentations and posters have been reviewed and refreshed to ensure they align with the new 'look and feel' of our updated CEP resources.

DQ Conference and Roadshows

Covid again delayed the DQ Conference, which eventually was held in September 2022. Sixty people attended, attracting overwhelmingly positive feedback. This year's theme was 'Back to Basics'.

A one page report was produced and circulated following the Conference (see adjacent diagram) describing progress made and improvement opportunities planned for 2022/23.

Planning for District Roadshow is well underway with the first due to occur early in the new year.

Share Baseline Audit Work

The Baseline Audit has recently been completed and initial findings are described in this report. More detailed reporting will follow.

Manager Level Training

A number of Management Resources were refreshed and others have been created and published. These have been circulated and promoted as part of a two monthly 'DQ Update' process (see adjacent visual).

Service and Data Quality Conference 2022: Feedback

What Attendees Said At The Last Hui

Our 'People' focused hui was attended by 50 individuals representing Service Group and every District Leadership Team. The key messages from that group were:

Identify an Executive champion for Data Quality

- Enabling stronger governance and leadership
- Clarify expectation that DLT's know how well they are managing their end to end process
- Need nominated DQ leads within DLT's
- Need regular and detailed reporting to DLT
- Need active/effective co-ordination of effort
- Need a DQ improvement plan
- Need effective mechanisms for issues to be raised through leadership groups.

Resource QA Activity and arbitrate between Districts, Service Group and DQIT

- Increase the number of DCR's and broaden their sphere of operation/influence.
- Explore how we automate QA activities

Support and prioritise national training and ICT changes – to help Districts and workgroups

- In particular training for PST and QA staff.

At the next Conference

- Broaden the hui audience – to engage more resources from various workgroups

What We Delivered Since The Last Hui

Our 'Back to basics' focused hui was attended by 60 individuals representing District Leadership Teams, PHQ2 workgroups, as well as IOS/CRU and district PM&T teams.

Tracking progress

- Governance Group established in TWP and Eastern Districts – more governance happening
- DQ Dashboard developed and launched, providing risk based insights to the business
- Investment occurred in SAS DQ infrastructure to support the business's reporting needs
- Resource QA Activity and arbitrate between Districts, Service Group and DQIT
- DCR's appointed in Ta Wai Pounamu
- DQIT team grown by two
- Hate Crime Quality Assurance Team created

Training and ICT changes

- CEP training refreshed – frontline and supervisor
- Stage 1 - QA checking introduced to NIA
- Input and influence in NIA stabilisation and modernisation programmes

At this Conference

- Invited representation from a wider range of workgroups

Feedback This Hui

Our attendees said...

Follow the Data Strategy

- There's no silver bullet. System and process issues are interconnected and complex. Take small steps aligned to the Data Strategy
- Simplify policy wording, and operational codes.

Connect better with people

- Stress the 'why', tailored messaging needed for different roles.

Our Opportunities...

Training and ICT changes

- More training – induction resources needed
- More training for Supervisors and Managers
- Stress the 'why' - make it relevant for people
- Simplify policy wording and the codes we use, focus on 'Core Data' and basic CM processes.

Leadership

- Understand and address factors related to legacy culture and attitudes.

Resourcing

- We need enabling DCR's in every District.

This Conference Was

- Enjoyable, with lots of helpful networking
- One learning, worth repeating, learning

Trying to Lead Data Quality Improvement?

Resources to Help (click the links)

Data Strategy

The [Data Strategy](#) must drive iterative change related to the collection and management of data.

Data Strategy - Success Factor 1.2

"We emphasise quality and collect the minimum amount of data necessary to enable us to carry out our functions and deliver outcomes"

Resources

[Leadership Resources](#) have been developed to support a continuous improvement 'Assurance Model' - Prevent, Detect, Respond (see overleaf).

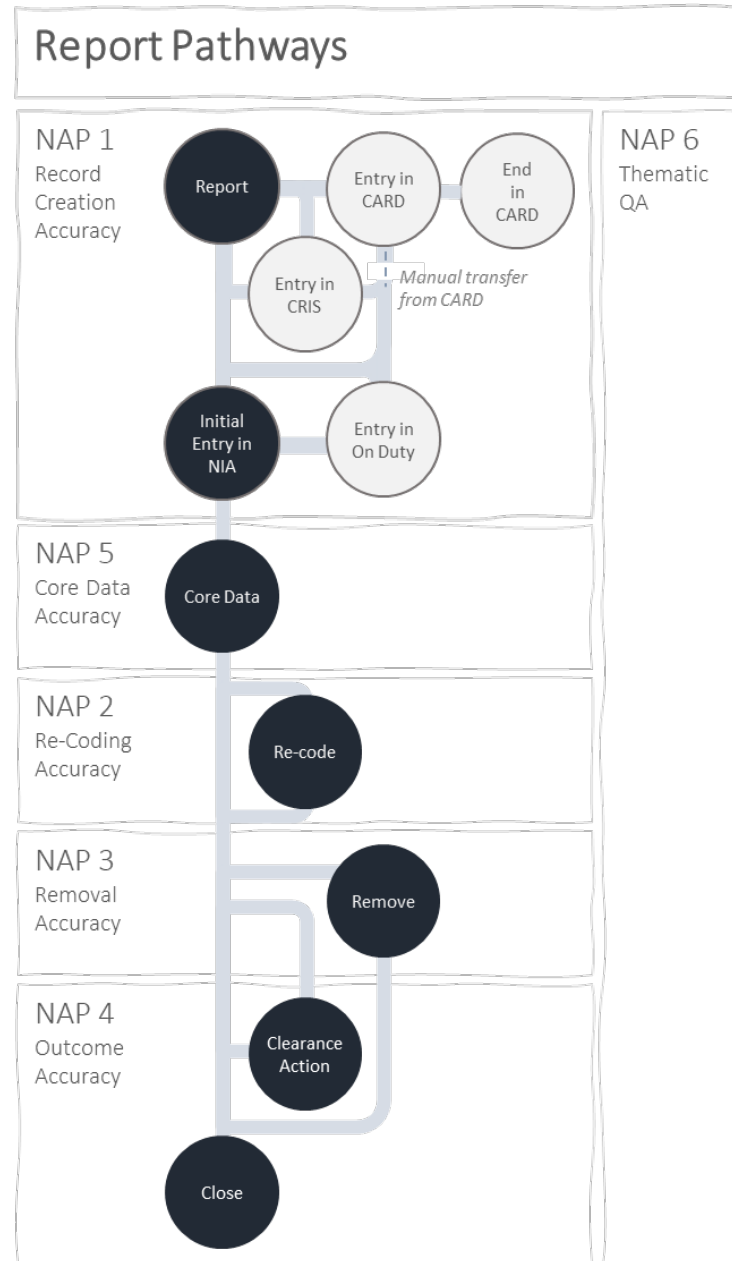
[Minimise Risk](#) – an A3 guide for Districts.

Leadership - Culture and Incident Response

Minimise Risk

Leadership Resources

National Audit Plan Strands 1 to 5



Strand 1

Accuracy of Record Creation

About Record Creation

Record Creation examines the extent to which an initial report ends in an accurately coded NIA Occurrence Record as required by the *National Recording Standard*.

The NRS specifies certain types of reports must be recorded as a NIA Occurrence i.e. a NIA Required Record (NRR). NIA records are required because the CARD despatch system - is not able to capture people's details in a structured way, so without a NIA record these people's details are effectively 'lost'.

When a report is received by the non-emergency channel a record is created in applications that automatically transition the details to NIA, capturing the details of any people involved. This accounts for the majority of victim Offences reported to Police.

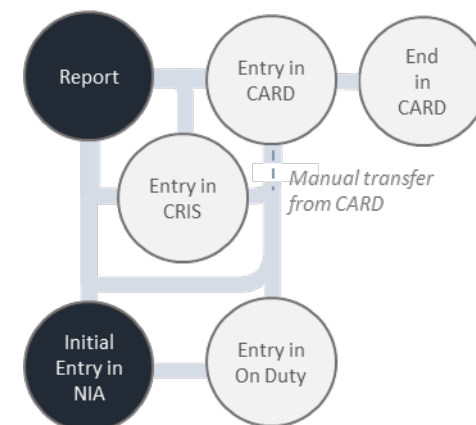
However, when people report Offences or Incidents to Police through the emergency channel, initially information about that report is recorded in the dispatch system (CARD). Despite some inter-operability between systems, unless a NIA record is created, not all required data is captured.

NIA Required Offences and Incidents

- All Victim Offences
- Non Victim Offences - known suspect / offender
- Family Harm
- Missing Person
- Suicide Attempt
- Pursuit

NAP 1

Record Creation Accuracy



Key Questions

- Does the report require a NIA occurrence record?
- Has the required report been recorded in a NIA occurrence?
- At initial entry, is the NIA occurrence accurately coded?



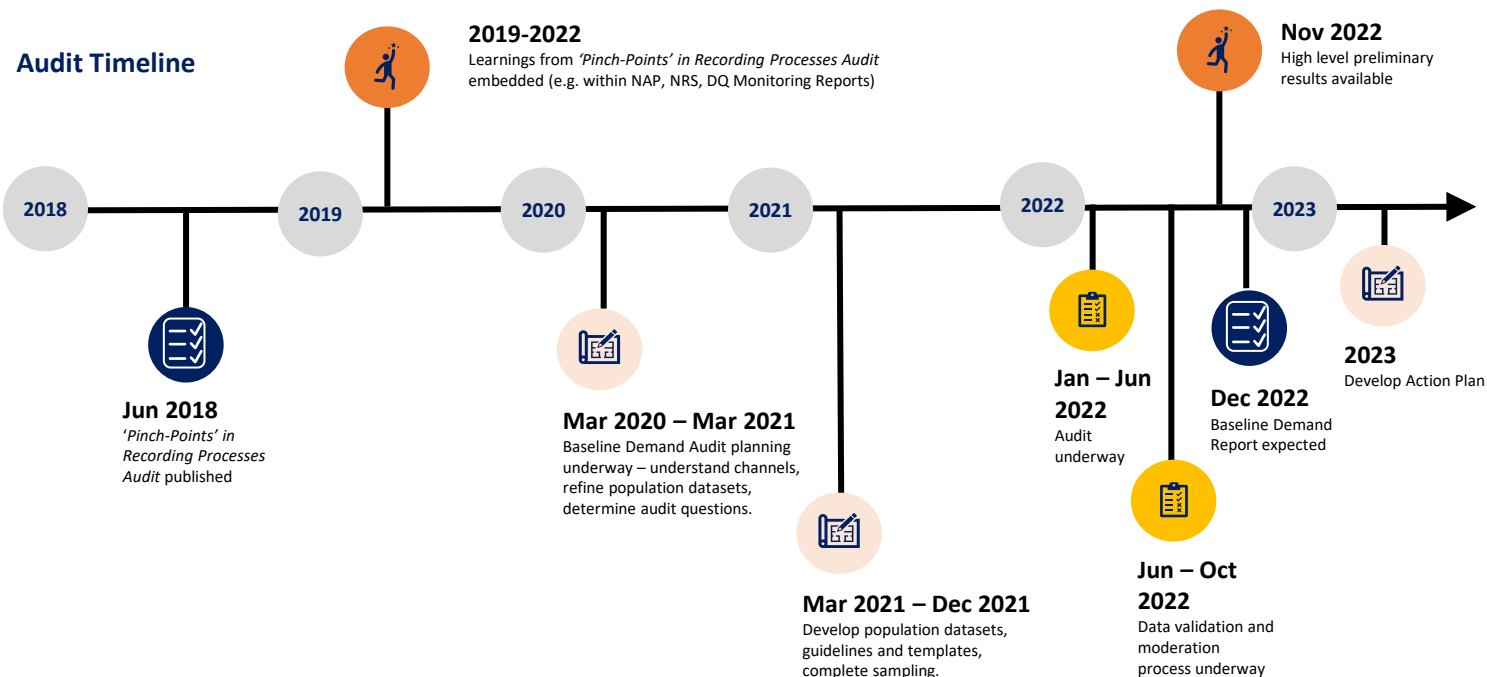
Baseline Demand Audit

This year DQIT completed the planning and audit phase of a comprehensive Baseline Demand Audit. This tells us how well reports, from any channel, translate into NIA, when they are required to. The audit considered ways that reports are received by Police, and where these were most likely to not translate into a NIA record.

This audit explored demand in the following channels:

- Reports entered into the CARD system only
- Reports entered in the Custody Module that did not have an associated NIA Occurrence or CARD Event
- CRIS 'Advice' Service Requests
- Intelligence Notings
- OnDuty records that were 'Abandoned'/'Incomplete'/'With Supervisor for sign off'

For those that did end up with a NIA record we also reviewed if they had been correctly linked to a CARD event (if there was one), and whether the initial code recorded in NIA accurately reflected the circumstances of the report to Police.





Baseline Demand Audit – Preliminary Findings

Our preliminary findings address the primary audit objectives, which were to investigate the extent of:

- Occurrences: based on what was initially reported, was a report required in NIA? Was that report an offence or an incident?
- NIA Required Records: if a record was required, was it accurately recorded and coded (based on the circumstances of an initial report)?
- Victims: were all victim offences and victims recorded accurately?

Occurrences

Of 2,299 records audited, 3% were assessed as requiring a NIA Occurrence, but one did not exist. These not entered records included matters assessed as being: either a victim Offence, missing person, family harm, attempted suicide, fleeing driver, or describe circumstances where a suspect/offender was identified.

As might be expected, the majority of missing Occurrences (87%) were identified within the 'CARD Only' audit pot. While a record of what was reported to Police exists, CARD does not have the ability to capture the core detail about an event - as required for a NIA record.

In addition, the audit found a small number of reports contained references to subsequent offences (or incidents) that should have been recorded separately, but were not.

Records

Where a NIA record existed, or was found as a result of audit checks, auditors assessed the accuracy of initial coding on that record, based on the facts established and recorded at the point of report. In total, 755 NIA records were audited.

Following initial data validation and moderation, work is continuing to generate audit results from this part of the Baseline Demand Audit. Initial indications are that a relatively small minority of audited NIA records suffer from some form of coding inaccuracy. As noted earlier, final results are expected to be available in December 2022.

Victims

While, overall, data quality auditing work points to improvements in getting the right things recorded, first time, preliminary results from the Baseline Demand Audit identified 111 instances where victim offences were not recorded as required by policy.

However, it's worth noting that for approximately 40% of the missing/inaccurate records the details of the people involved (i.e., the victim, suspect or offender) was not known or established at the time of reporting – meaning it was impossible to include complete information in the initial record.

This finding will be the subject of further discussion as to whether reports of this nature should require recording in the *National Recording Standard*, as well as how they should be treated within official statistics.



Data Trends








Emergency Channel - Dispatched

Positively, District staff dispatched to CARD events are complying with NRS rules more often now, than in the past.

The proportion of CARD events dispatched to District staff and coded a 'NIA Required Record' (NRR) at closure, that are linked to NIA – has been increasing. (see diagram top right).

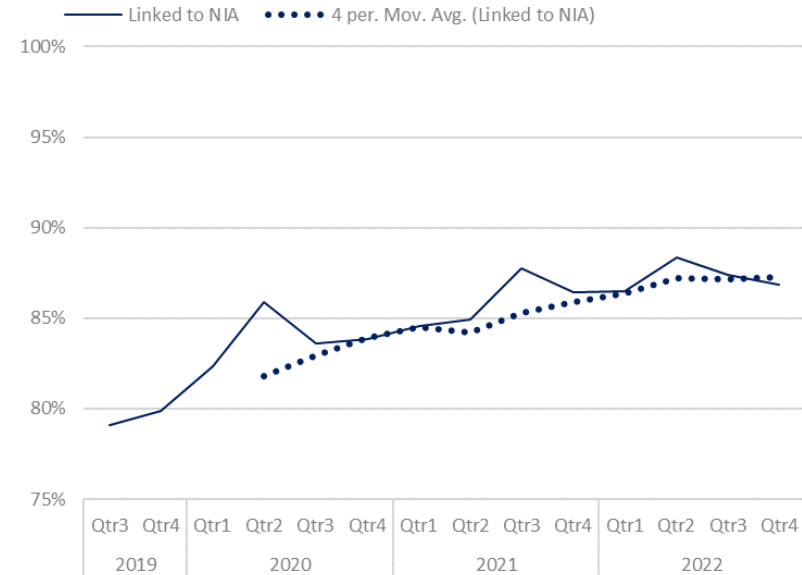
At closure, if there is evidence that what occurred was not an offence, no NIA record is required. Officers indicate this by using the result code K3. K3 use is relatively low and has remained stable since mid 2020 (see adjacent diagram). The rise in late 2019 is believed to be due to improved staff understanding of what K3 means and how to use it accurately. This trend suggests staff are more aware of rules relating to the use of Result Codes in CARD.

NIA Required Records

Based on Code		Based on Flag	
Victim Offences	 All Victim Offences	 Family Harm All Offences and Incidents	
Non Victim Offences	 All Offences with a known Suspect / Offender	 Hate / Prejudice All Offences and Incidents	
Incidents and Tasks	 All 1X Attempted Suicide		
	 All 2M Missing Person		
	 All FLEE Fleeing Driver		

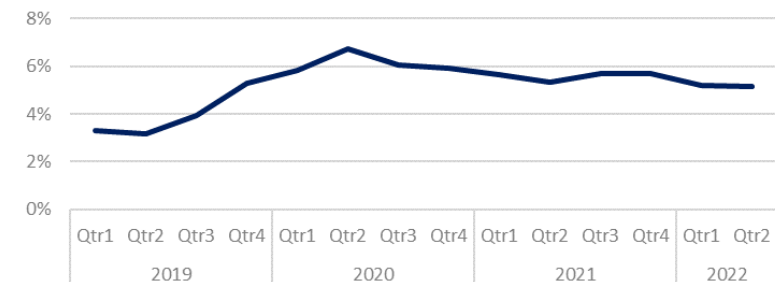
CARD Events: % NRR Dispatched, Linked to NIA

The proportion of CARD events closed 1, 6 or 9, coded 'NIA Required' Offence or Incident Codes at Closure, that are linked to a NIA Occurrence



Source: DQ Performance Report as at 8 November 2022

CARD Events: % Victim Offences that are K3 and not linked to NIA



Source: CARD Data, Events closed as a 'Victim Offence' code, K3 Result code and not linked to NIA, as a proportion of all CARD events closed as a Victim code.



Trends

Emergency Channel – Not Dispatched

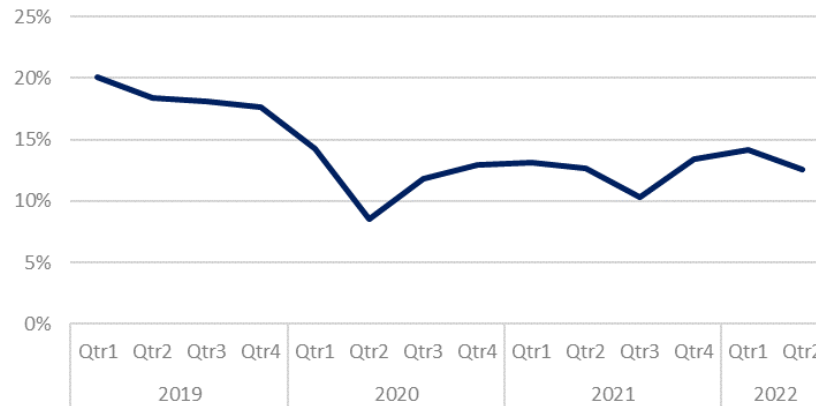
The proportion of CARD events, coded as a 'NIA Required Record' that are not dispatched to Districts – declined from late 2019 and has been fairly flat since late 2020 (after the initial national COVID lockdown period).

While almost no Fleeing Driver or Family Harm (5F) are Cancelled, high proportions (40 to 45%) of CARD events closed Missing Person are.

While operational practice has not been officially audited, where District QA checks have been done, they indicate these reports almost exclusively relate to people who are initially thought to be missing, but either were not, or were found before Police initiated a missing persons investigation.

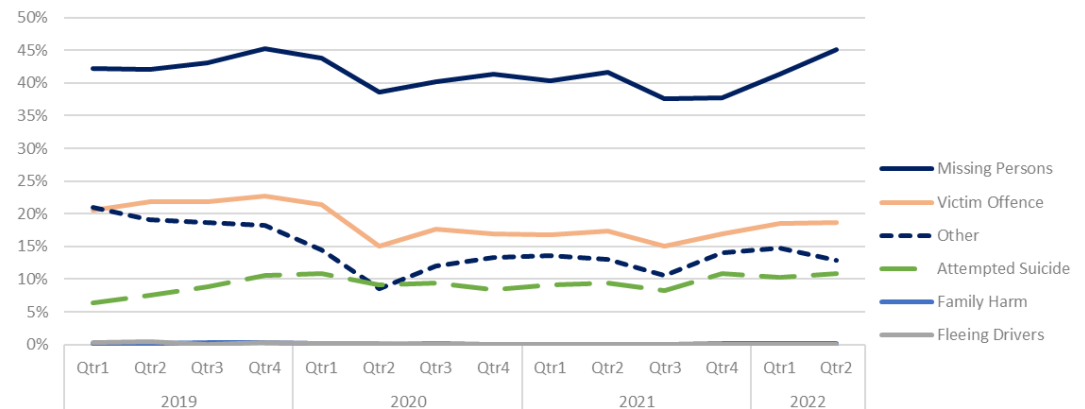
DQIT is partnering with the Missing Persons Unit (MPU), reviewing the current recording rules to clarify whether a detailed entry is required in NIA, and if so, what information must be recorded. It is anticipated that a change will be made to the NRS during 2023.

CARD Events: % NRR codes that are Cancelled and Not Linked to NIA



Source: CARD Data, Events closed as a 'NIA Required Record' code, Cancelev Result code and not linked to NIA, as a proportion of all CARD events closed as a NIA Required Record code.

CARD Events: % NRR codes, that are Cancelled (by Code Type)



Source: CARD Data, Events closed as a 'NIA Required Record' code, Cancelev Result code and not linked to NIA, as a proportion of all CARD events closed as a NIA Required Record code. (I.e. approximately 40 to 45% of CARD events closed Missing Person - are Cancelled)

Accuracy of Record Re-coding

About Record Re-coding

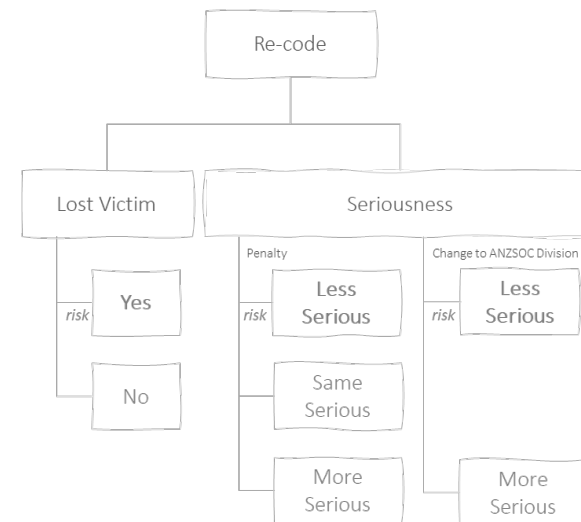
A NIA record can and should be re-coded when evidence exists that the existing code does not accurately reflect what occurred. Re-coding can be triggered when it is determined the originally recorded code is inaccurate, or when new evidence is received about that report.

DQIT focuses its audit on risky re-code transactions. Three risky re-code outcomes are targeted as described below.

Lost Victims

Where a victim Offence has been re-coded to a non-victim Offence, a person who was considered a victim is no longer recorded or recognised as a victim. They stop receiving any victim centric response functions provided by Police; for example, victim contacts are not completed, and their victim history score is affected.

This year Offences re-coded to Incidents are discussed and reported on in Strand 3.



Less Serious (Downgrade)

Where an Offence has been re-coded to an Offence that is 'less serious', this can affect operational decisions such as prioritisation, assignment and file retention periods. It can mean an investigation is delayed, assigned to the wrong team, or closed when it should be assigned. It also affects a range of calculated scores used to assist assessment of future risk or harm, such as risk matrix scores, victim history scores and crime harm index scores.

Lower ANZSOC Category (Downgrade)

Where an Offence has been re-coded to an Offence that sits within an ANZSOC category which is 'less serious', this can affect official statistical counts, i.e., our Recorded Crime victimisations Statistics (RCVS).

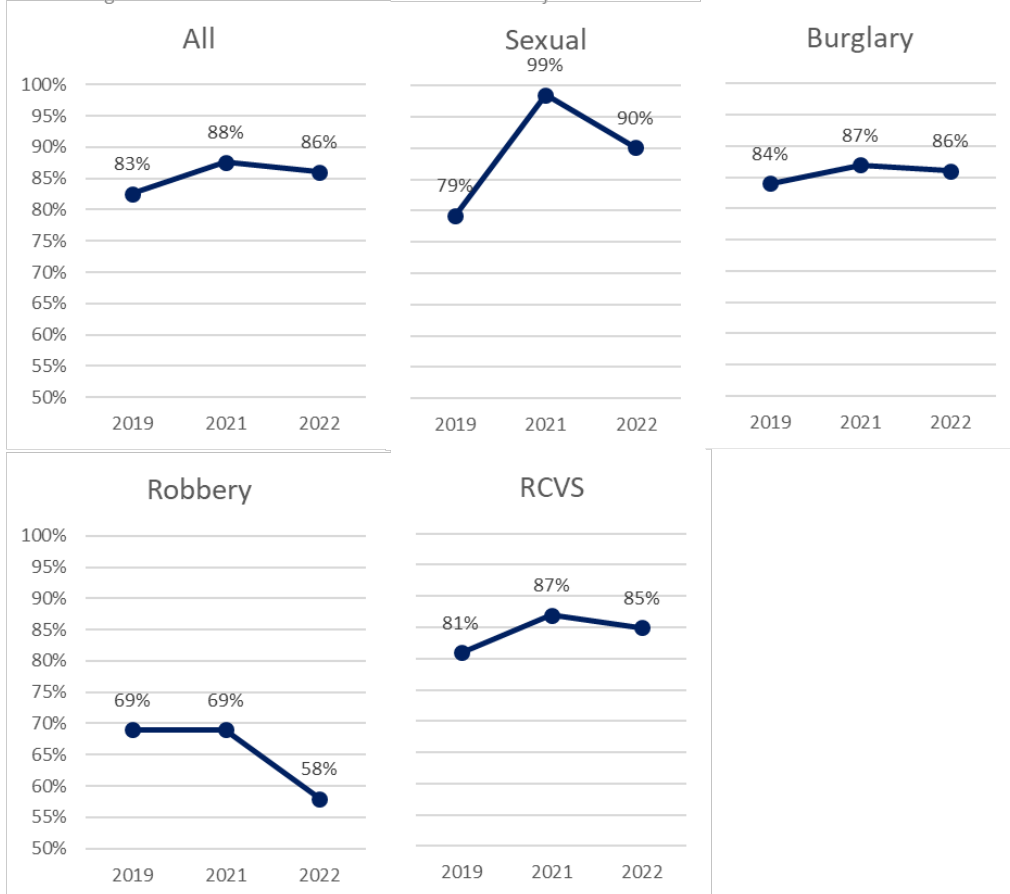


Re-Code Audit

An audit of Re-coded Offences from January to March 2022 found overall accuracy rates were broadly similar to those previously reported. While the results did evidence stability (rather than continued improvement), all but one indicator compared favourably to results from our 2019 audit results. Overall national accuracy was assessed to be 86%. Pleasingly, the most accurate re-coding practice continues to be seen when reviewing Sexual Offences.

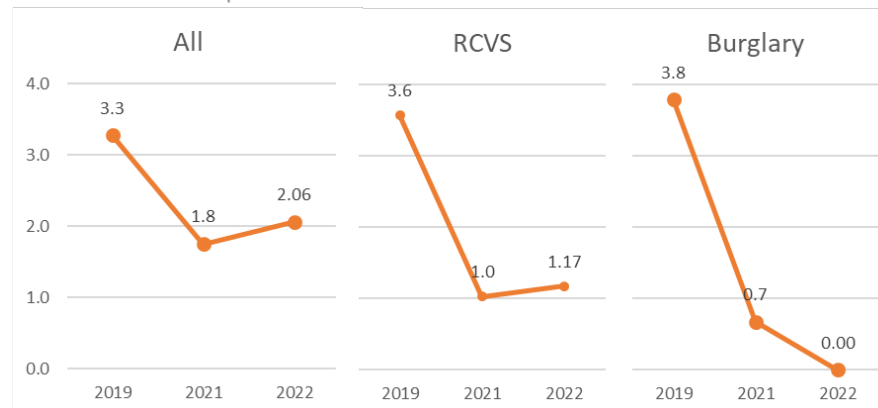
Re-coding Accuracy

Percentage of re-coded offences where the re-code was justified



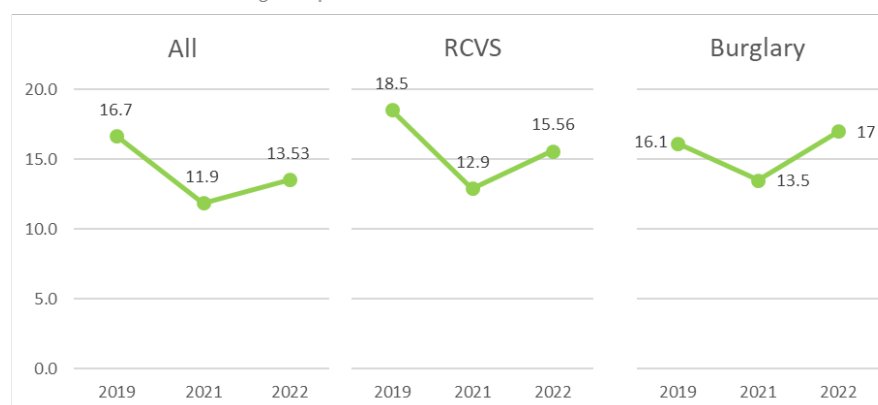
Re-coding Rate of Lost Victims

Number of Lost Victims per 100 Re-coded Offences Checked



Re-coding Rate of Inaccurate Downgrades

Number of Inaccurate Downgrades per 100 Re-coded Offences Checked



Accuracy of Offence Removal

About Offence Removal

DQIT audit ‘Removed Offences’ practices each year, to check for accuracy. This includes reviewing staff decision making and ensuring that “credible and verifiable evidence” to support the use of Removed Offence has been documented in NIA as required by Policy.

Within NIA, five Closure Reasons enable the ‘Removal’ of an Offence from official statistics. Those removal reasons are described as:

- Not an Offence
- Duplicate
- Error
- Prosecution by Other Agency
- Purged.

Similarly, the practice of re-coding an Offence to an Incident also has the effect of removing that Offence from NIA and ours associated statistical counts. Given the risk poor practice leading to the loss of victim reports, the re-coding of Offences to Incidents has been incorporated into our analysis of Removed Offence practices – in Strand 3.





Audit – Removed Offences

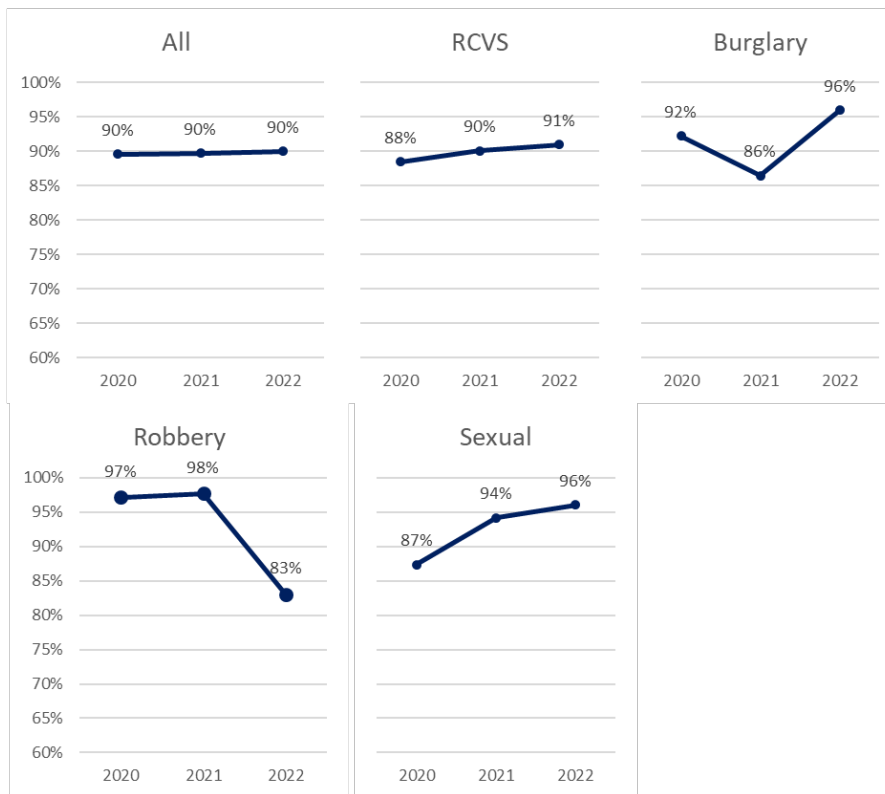
An audit of Removed Offences, covering the period January to March 2022, found accuracy levels were unchanged, when compared to audit results from the same period in the prior two years. Nationally, when a 'removal' Closure Reason was used or an Offence was re-coded to an Incident, the overall accuracy remained at 90%. Burglary accuracy improved by 10%, which translates to a lower rate of lost victims within Burglary - per 100 Removed Offences checked.

The accuracy of removal of Sexual Offences improved again, to 96% accuracy, the highest rate seen since auditing started in 2015. This rate that aligns with international best practice.

Meanwhile, the accuracy of removal of Robbery Offences dipped, a trend that was also noted in the Re-code audit (see page 17 prior). With comparatively low numbers involved, it may be that this is a one-off anomaly; however, the lesson to be taken from improvements in Sexual Offence and Burglary (re-)coding is that regular review and support from DQIT can and does help lift accuracy. For this reason, DQIT will initiate enhanced checks for Robbery records from 2022/23 onwards.

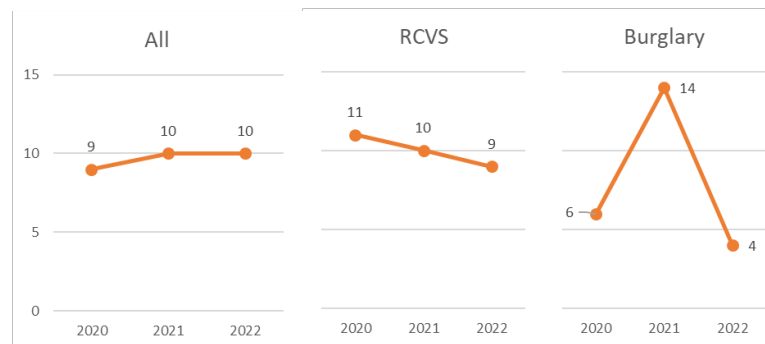
Removal Accuracy

Percentage of removed offences where the removal was accurate (Jan to Mar 2020, 2021, 2022)



Removed - Rate of Lost Victims

Number of Lost Victims per 100 Re-coded Offences Checked





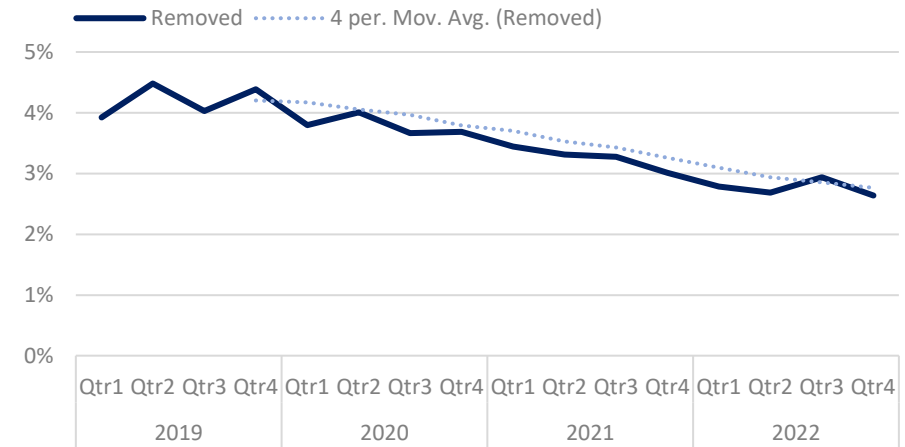
Trends

The volume of Removed Offences in NIA has been declining for some time – as shown in the adjacent diagrams. This may be due to process changes that have restricted the number of staff that have access to remove Offences in NIA, as well as improved knowledge of the staff authorised to complete the removal transactions.

The proportion of Removed Offences that are closed ‘Not an Offence’ accounts for most Removal transactions and thus dominates the trend over time. The remaining four ‘Removal’ reasons are used less frequently, and our analysis hasn’t identified specific issues (trends) relating to recording practices.

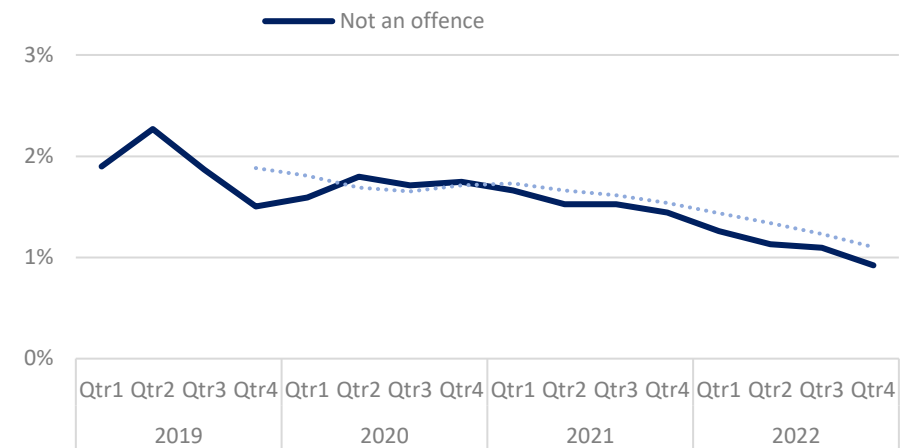
Pleasingly, the rates of removal are low and stable over time and broadly in line with good practice seen in other comparable jurisdictions.

% of Removed Offences in NIA



Source: NIA Data, NIA Offences (not Incidents) that are closed using Not an Offence, Duplicate, Error, Prosecution by Other Agency or Purged as a proportion of all Offences in NIA,

% of Offences Closed 'Not an Offence' in NIA



Source: NIA Data, NIA Offences (not Incidents) that are closed using Not an Offence, in NIA,

Strand 4

Accuracy of Outcomes

About Outcomes

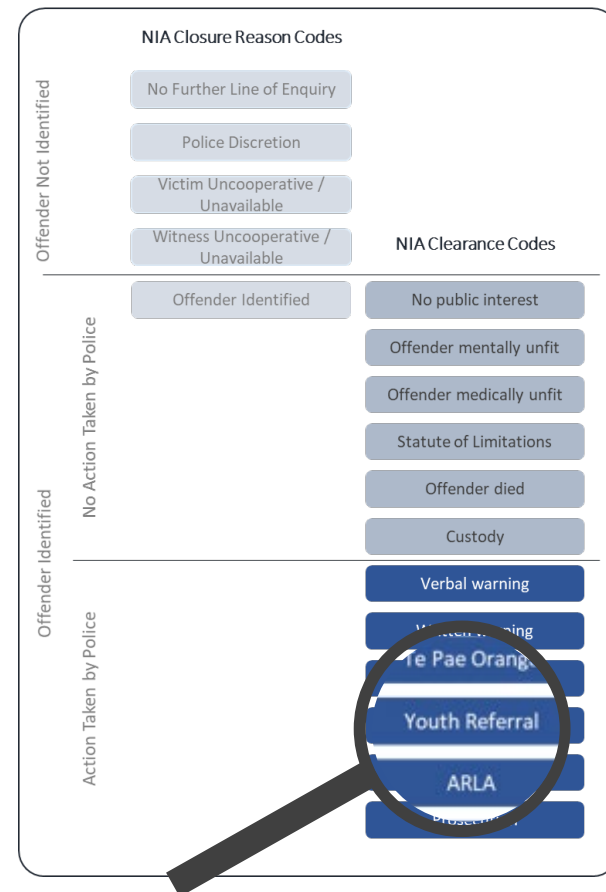
Strand 4 examines the recording of Police Closure Reasons and Clearance Codes, which together indicate the ‘outcome’ of Police enquiries about reports made by the public.

Police’s Reframe programme is focused on improving our responsiveness to victims, delivering consistent, transparent and accountable outcomes by applying an end-to-end Resolutions Framework.

DQIT continues to work with and contribute to the Reframe programme of work to ensure the range of Closure and Clearance options is fit for purpose, and to promote accurate recording of Offences, Closures and Clearances.

This year, DQIT undertook a Review of Outcomes for Children and Young People (CYP). This explored underlying systems and processes, to identify the extent to which that they impact on the consistency of recording practice(s) and service outcomes. Findings and improvement opportunities from this report are discussed on the following pages.

During 2022/23 DQIT will undertake an audit of outcomes recorded for sexual offending, and we will update our existing ‘Recording Offenders Guide’, in order to improve the advice available to staff about Closure and Clearance practices.





CYP Review – Key Findings

The *Review of Outcomes for Children and Young People (CYP)* looked at the accuracy of coding, linking of CYP, case management practices, accuracy of outcomes (Closure Reason/Clearance Type), and the appropriateness of the Youth Interventions recorded.

This review was the first of its kind to be completed in conjunction with subject matter experts (from the Youth team), and was preceded by an extensive desktop review of existing policy, processes and reporting. A honed audit process was developed enabling better understanding of issues and risks, as well the identification of 28 wide ranging improvement opportunities. Key findings from the activity include:

- 93% of the time the Offence/Incident code recorded accurately reflected what occurred. This reduced to 84% when taking into account Offence/Incident codes that were missing from the record (i.e. reported, but not recorded).
- The audit found that where an Offence/Incident was recorded, Closure Reasons were accurate 67% of the time. Errors were mostly due to officers not creating a Youth Referral Clearance Type

when there was clear evidence a CYP was responsible.

- The audit found that while most Clearance Types were recorded accurately, there are some inconsistencies in recording practice, depending on the 'referral process staff used.
- Auditors assessed that Youth Intervention outcomes were appropriate 80% of the time. Generally, Youth Aid staff do a good job at accurately recording Court, Family Group Conference (FGC) and Alternative Actions, but further guidance is required for use of Warnings, No Further Action and Child Wellbeing interventions. This is likely because the *Youth Resolutions Model* is sufficient for Youth Justice related matters, but currently there is no similar guidance for the appropriate action to be taken for Care and Protection (wellbeing) matters involving CYP.

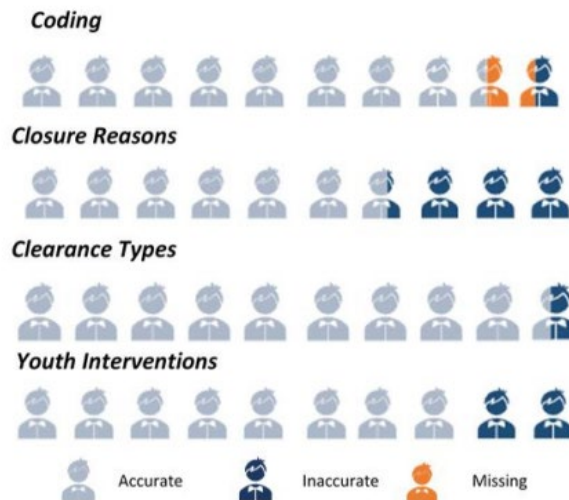


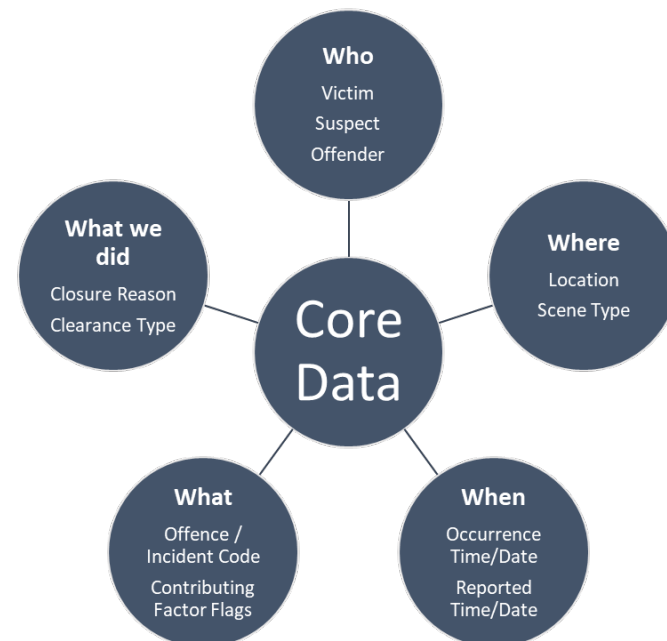
Figure 12: Summary of Key Audit Results

Core Data

About Other Core Data

Core Data is a term used to describe NIA data fields that are critical to many aspects of policing. Core Data includes Incident and Offence codes and the Closure Reason codes that are reported on in detail in NAP strands 1 to 4, but expands beyond that (as shown in the adjacent diagram) to include aspects such as; Scene Type, Injury Type, Location, and Contributing Factor Flags

Police's evolving range of Performance dashboards includes measures that utilise Scene Type, Weapon Code and Contributing Factor flags (i.e., Family Violence and Hate Crime). As such its important this core data, being used for performance purposes, can be shown to be consistently and accurately recorded.



Checking the Flags

The Hate Crime QA Team continues to check all Hate Crime flags and a DQIT audit of Family Harm included checks for the accurate use of the Family Violence flag. Reporting on both these topics is described in NAP 6 – Thematic Reviews (see page 24).



Thematic Reviews

About Thematic Reviews

Thematic reviews involve a ‘deep dive’ into a topic, generally focused around a specific Offence type. These reviews generally examine all of the NAP strands for that topic, effectively looking at the end-to-end (report to resolution) process.

In 2021/22 DQIT undertook three significant thematic reviews relating to Hate Crime, Identity Data and Family Harm.

In addition, DQIT specialists also contributed to broader internal audit work which provided independent assurance around Police’s management of statistical data for performance reporting purposes.

Hate Crime

The Hate Crime work was an extension of work done in earlier years and has now attracted funding to enable ongoing routine checks of Hate Crime reports to occur.

Identity Data Review

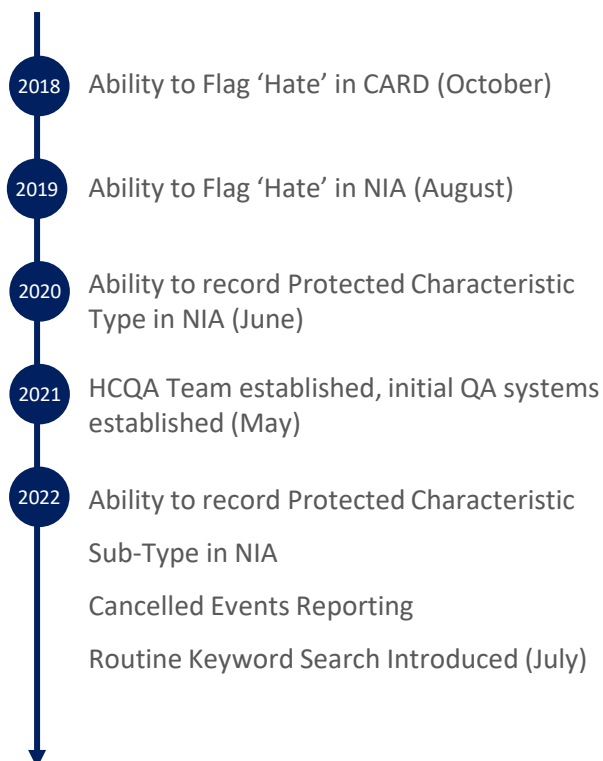
Concerns were raised about issues with identity data, and a lack of action to address them. A review was undertaken to try to identify and quantify issues within Police identity data and highlight opportunities to improve if needed.

Family Harm

In 2020 a comprehensive audit report was published about the accuracy of codes and flags for Family Harm. This year a follow up audit was completed both to track progress and get a more Up-to-date sense of the quality of these codes and flags.

Hate Crime Quality Assurance

The Hate Crime QA team (HCQAT) have built on the foundation laid earlier by the DQIT, in particular to establish effective systems and processes to recognise, record and respond to reports of Hate Offences and Incidents.



The 4 member Hate Crime Quality Assurance Team has been in place since May 2021. Since that time they have been:

- Reviewing and fixing 'Hate' flagged CARD and NIA records
- Building a robust end-to-end response process
- Identifying and referring risks to District, Firearms, MPES and National Security where necessary
- Providing a monthly QA updates to the Te Raranga Advisory Group (TRAG)
- Designing and introducing a process for finding reports that are Hate related, but not flagged (free-text searching).

The DQIT have supported this activity by:

- Designing and delivering a range of reports e.g., listing records to check
- Working with Evidence Based Policing Centre to improve its reporting capability
- Designing and creating an 'Insights Report' that can provide demographic and trend data on recorded Hate Crime.



Te Raranga

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against hate crime



Hate Crime – Checks



Te Raranga

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The Hate Crime QA team have checked over 5,500 records in the 12 months from July 2021. With the recent addition of 'free text' searches, they now check around 1500 records each month.

Where risks are identified

- these are forwarded to District for appropriate follow up.

Where errors are found

- these are fixed immediately.

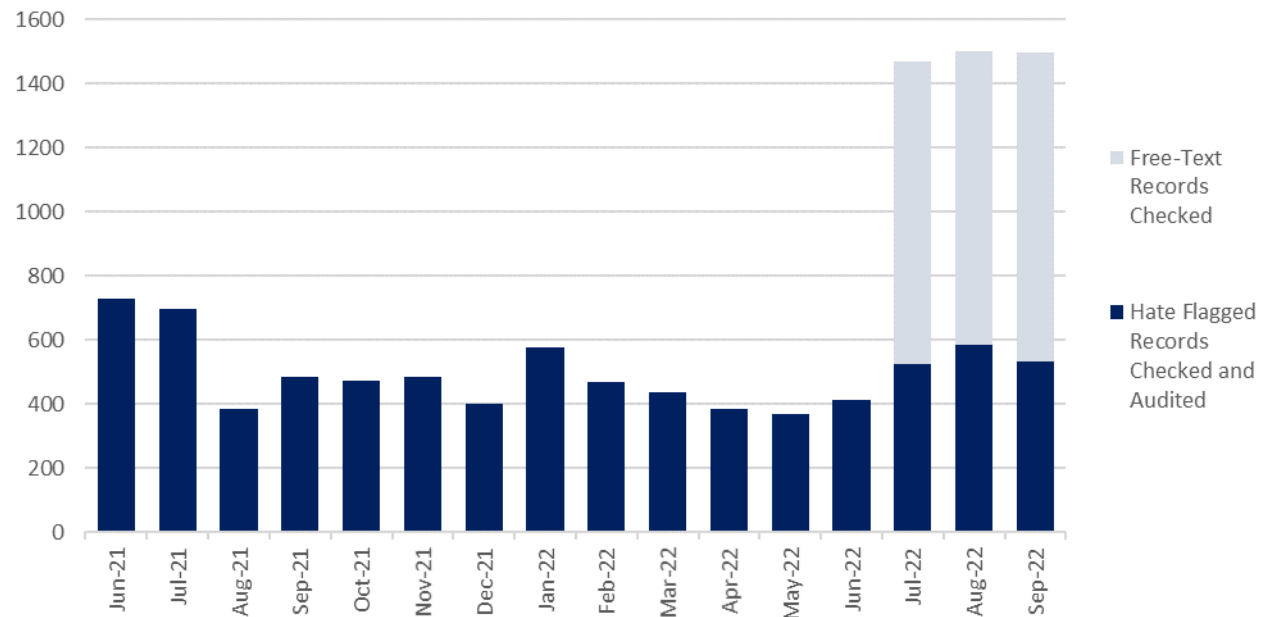
Where more information is needed

- requests are sent to staff for that information to be provided.

Where staff education or follow up is needed

- Information and/or support is provided by the team.

CARD and NIA Records Checked by the Hate Crime QA Team





Hate Crime - Code and Flag Accuracy - Before



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The long term trend shows improving accuracy of both Code and Flag use.

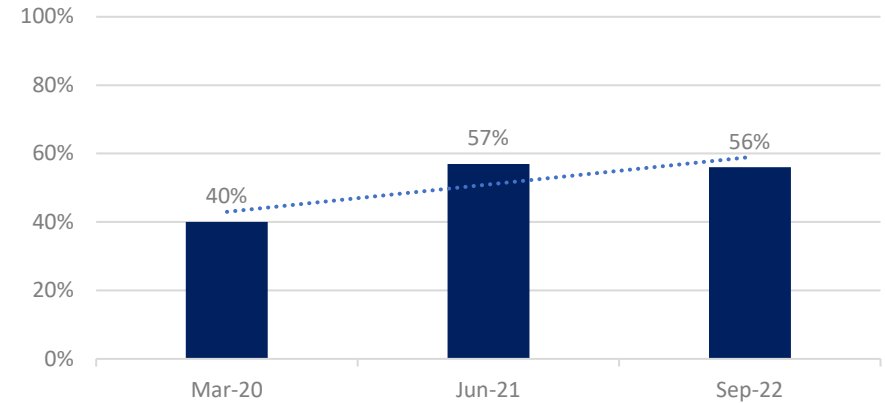
While it might appear that there has been limited progress in relation to the rate of Hate Crime flagging in the last year, the new free text QA method, used to identify missed reports (since July 2022) is believed more effective than the process used for earlier 'ad hoc' checks - in 2020 and 2021.

This would mean the accuracy proportions shown for 2022 in the

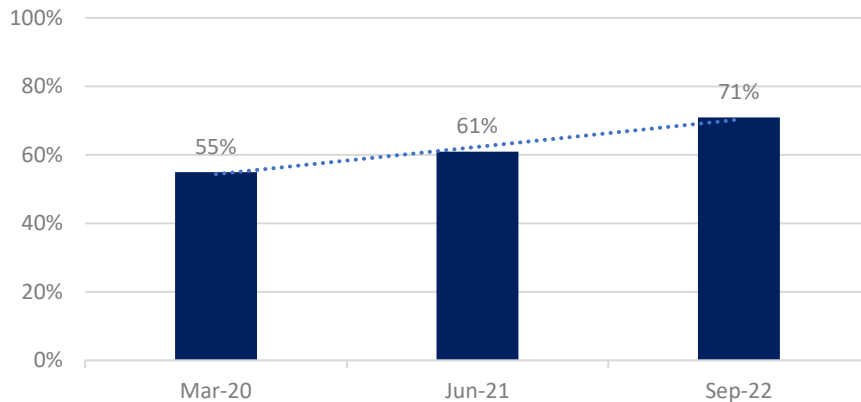
adjacent diagrams (to the right) are lower than they would have been had the methodology remained the same over time.

Interestingly, the accuracy of NIA coding is improving, over time (see the diagram below) and this increase can be attributed to the daily BAU work of the HCQA team working in conjunction with colleagues from Te Raranga, Districts and Workgroups.

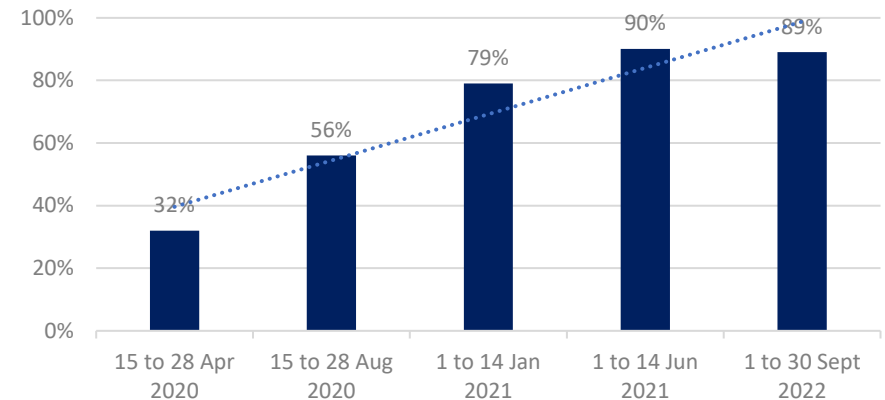
Rate of Hate Crime Flagging for Hate Records in both
CARD and NIA (before Intervention)



Offence/Incident Code Accuracy of Flagged Hate Records
in NIA (before Intervention)



Hate Crime Flag Accuracy in NIA
(before intervention)





Hate Crime - Code and Flag Accuracy - After



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Recording issues identified prior to establishing the Hate Crime QA Team included:

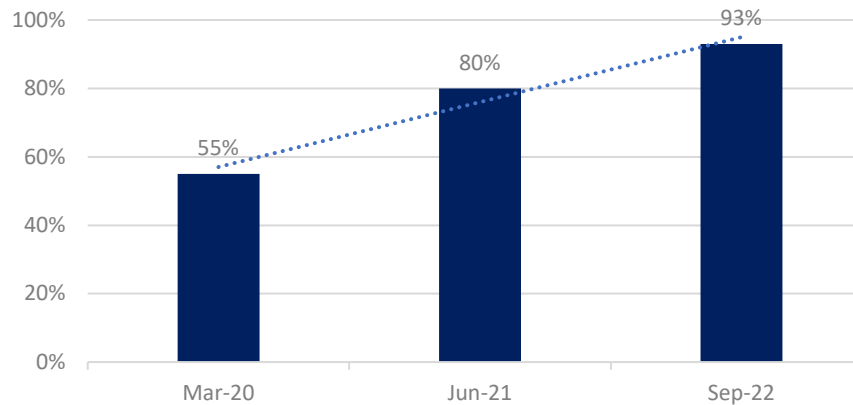
- Some reports did not transition to NIA from CARD as required by Policy
- Offence and Incident Codes were not accurate
- Flags in both CARD and NIA were not always accurate (due to missed flags and false positives).

As seen on page 27, improvements were made relating to 'flag accuracy' prior to mid 2021. Since the Hate Crime QA Team were established many more records are being checked, fixed and entered into NIA, resulting in much more complete and accurate Hate Crime data. In addition, with the introduction of Hate Crime Type and Sub-Type fields in NIA, the information that is available to Police paints a richer picture.

Some data about Hate Crime is now accessible from an evolving Hate Crime Insights Report.

The Hate Crime QA team's work has put Police in a strong position to release reliable Hate Crime data to the public in the near future.

Hate Records Recorded and Flagged in NIA
(after Intervention)



Hate Crime Insights Report

The Hate Crime Insights Report has been designed to help you answer questions such as:

- ▶ Is demand related to Hate Crime growing, shrinking or seasonal?
- ▶ To what extent are we investigating and resolving reports of Hate Crime?
- ▶ Where and when is Hate Crime happening?
- ▶ Which groups are being targeted?
- ▶ What files about Hate Crime are currently open?

Plus - If the range of charts and tables available does not answer your question, you can download lists of records and do any analysis you want.

Hate Crime Insights Report

The Hate Crime Insights Report has now been published! View it here - [Hate Crime Insights Report](#)



All charts and tables can be filtered by District

See some examples...

Family Harm Audit

In 2020 a comprehensive report on Family Harm recording practice was published - based on analysis of data from 2019.

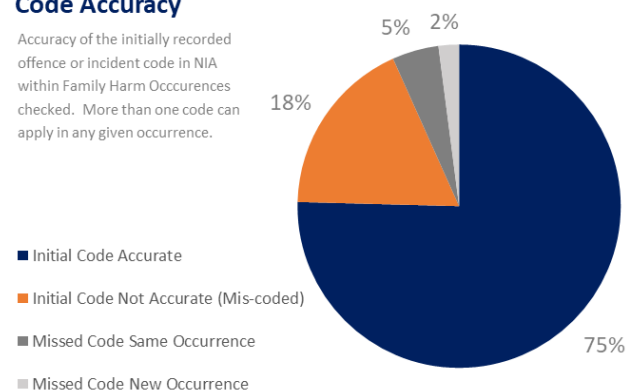
This year a follow up audit was completed to assess the extent to which the accuracy had changed. This intent was to assist the Family Harm and Evidence Based Policing teams with insights relevant to their respective workstreams. The report placed a heavier focus on the impact of coding inaccuracies.

Findings - Accuracy

- There has been some improvement in coding accuracy, although there is more work to do.
- Estimates indicate fewer 'victims were lost' from the data in the 2022 report than in 2020 report, despite rising volumes of Family Harm and offending over that time period.
- Narratives often describe the details of the offending, indicating mis-coding is not done to deliberately 'downgrade' or down play what has been reported. Mis-coding is more likely a change-over from when coding reflected charging decisions – i.e., a time when it was normal practice to code as an Incident unless someone was being charged with an Offence.

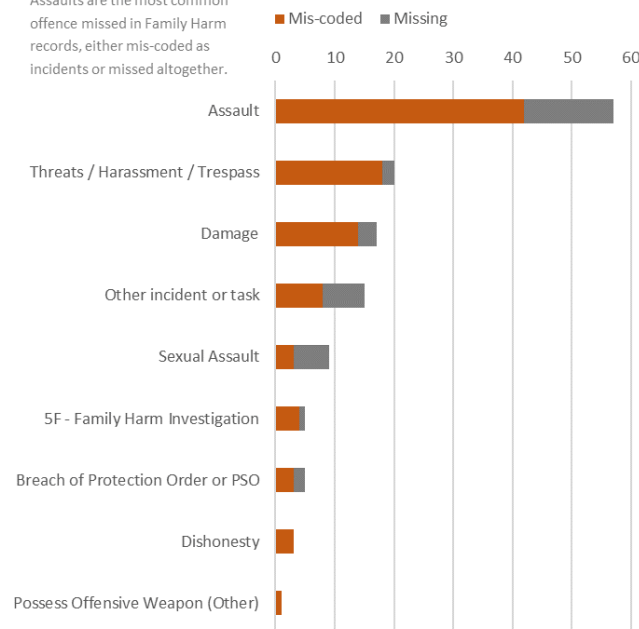
Code Accuracy

Accuracy of the initially recorded offence or incident code in NIA within Family Harm Occurrences checked. More than one code can apply in any given occurrence.



What is not being recorded, that should be?

Assaults are the most common offence missed in Family Harm records, either mis-coded as incidents or missed altogether.



Identity Data Review



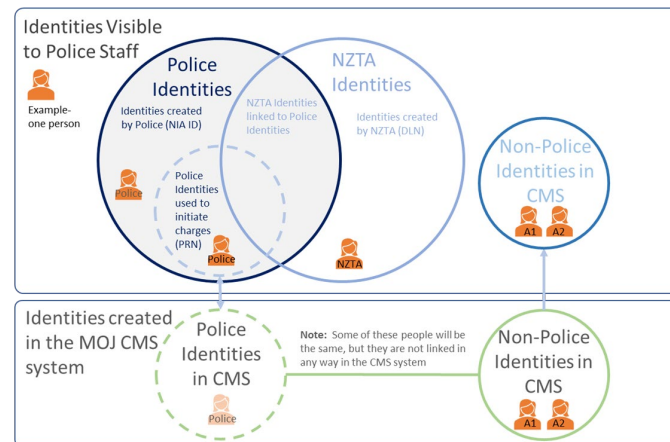
Why do the review?

Data about people and their identities is a critical enabler for delivering excellent services. It's one of a small number of core data building blocks (along with date and time, location and Offence and Incident codes), that enables us to describe what happened to who, where, when and how.

All identity data in NIA has either been manually entered as part of operational processes or been imported from other databases or systems. Both methods have created issues in the past and continue to do so.

Specific issues of concern identified were:

- inaccurate information within core identity fields (i.e., name, date of birth and gender)
- incomplete information within core identity fields
- duplicate identities; and
- wrongly merged identities.



Risks

The potential risks to Police, and our partners, arising from missing, inaccurate and/or incomplete data, include:

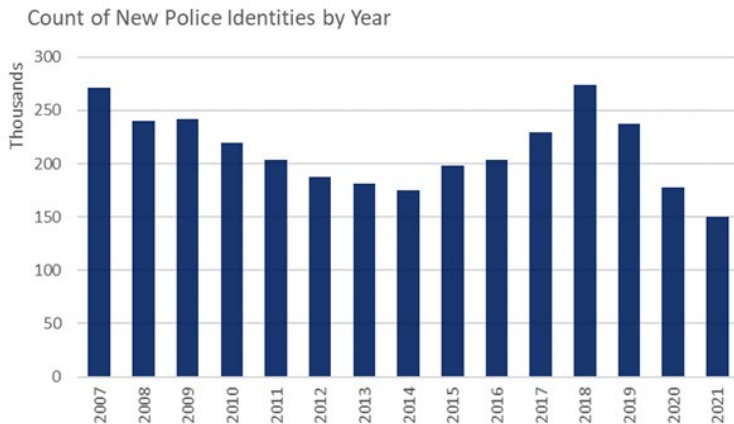
- Risk to staff safety, i.e., of the Public
- Failure to serve the interests of justice
- Legal risks e.g., relating to the Privacy Act
- Reputational damage; and
- Loss of public trust and confidence.



Identity Data Review - Scale

NIA holds more than 7 million person identities. Almost 6 million are labelled as 'Police Identities' (created by Police) and of those about a half are labelled as 'Confirmed Identities'.

The volume of new identity records created per year varies significantly ranging from over 250,000 records to fewer than 150,000 records in 2021.



Duplicates and Errors

2%

Some 2% of Police identities are 'exact match' duplicate or triplicate records.

The number of 'exact match duplicates' is higher now than in the past – the recent trend is one of increase.

25,000

Around 25,000 exact match duplicates remain in NIA from the LES migration period (more than 15 years ago).

10,000

Around 10,000 exact match duplicates were created in 2021 – that's 7% of newly created identities in NIA.

Unknown

The volume of 'non-exact matches' is not known, and further work is needed to ascertain volumes.

1,400

Some 1,400 identities were created in 2021 with either no first name, or no last name, or the name was recorded as 'unknown' or a symbol or number was included in a text field.

Fixing Mistakes

25,000

Around 25,000 duplicate identities are 'united' or fixed each year – much of that is re-work.

1,600

It's estimated that manual fixes account for more than 1,600 re-work hours per year.



Identity Data Review – Opportunities

Identified Improvement

Opportunities

Practitioners working in this field were quick to explain the issues they face and offered a wide range of ideas for process and practice improvements. Those ideas were captured in detail and summarised in the report.

Improved management of identified issues and risks requires effective information management policy and processes and strong data governance functions.

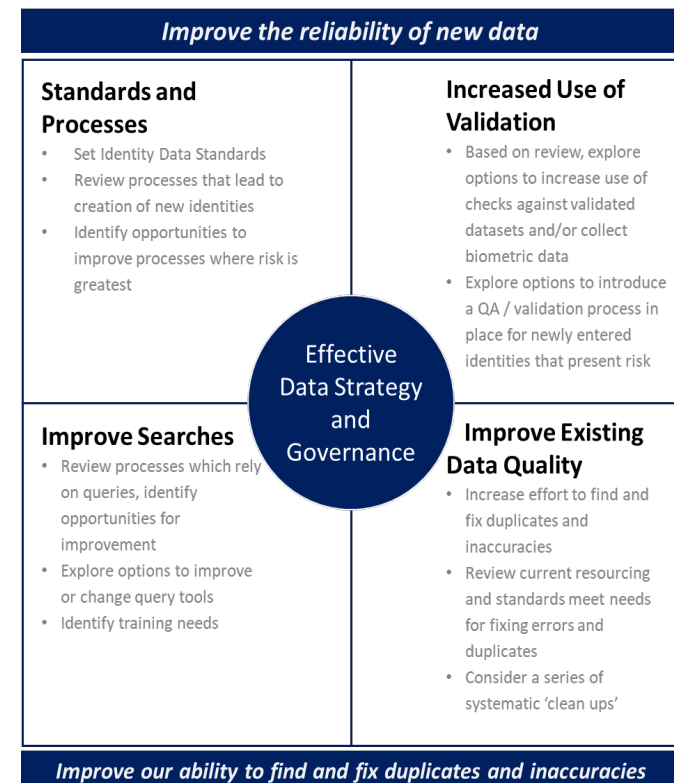
Improvements are heralded with Police's evolving Data Strategy as well as the current ICT Data and Technology Enablement activity. Both initiatives require a mature approach to data management.

Recommendations from earlier reports on Identity data that have been implemented have resulted in some improvements.

Other recommendations have not been implemented, while some activity only narrowly addressed the exact issue that was investigated, but have not looked for, or addressed the same issue for other user groups.

The Data Quality and Integrity Team's review work has flagged up particular opportunities to improve search capabilities in NIA, CRIS and OnDuty.

One suggestion in DQIT's review was to identify, prioritise and co-ordinate the introduction of a targeted QA process - as well as coordinating activity to deliver improvement initiatives. Adopting such an approach should mean it is possible to incrementally address known identity data issues. This and other ideas for driving improvements in relation to identify data are able to be taken forward by a newly-formed Executive group, the Data and Information Sub-Portfolio.



Opportunities and Actions

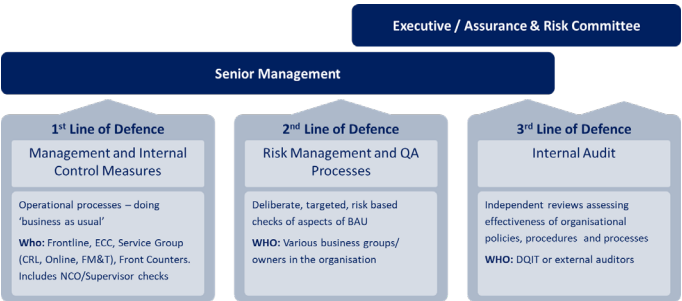
Where to next...

The DQIT are committed to delivering the *National Audit Plan*, but also undertake a number of functions and activities aimed at improving the quality of Offence and Incident data.

DQIT has continued to build on the *Assurance Operating Model*, aligned with the *Three Lines of Defence Assurance Framework*. The concepts and principles within the operating model underpin a range of Leadership Resources created by the team many of which were used to enable workshop activities at the team’s annual Data Quality Conference. Likewise, they’ve been shared with the business via ‘DQ Update’ reports.

The next part of our report walks through each section of this model, and describes:

- a summary of quality assurance related achievements in 2021/22.
- opportunities to improve identified through the team’s recent work, and
- planned next steps for the team.





Prevent - Leadership and Governance (1)

DQIT Actions This Year

Supportive Leadership and Supervision

- Created and published 'Leadership Resources', including a refreshed DQ Maturity Matrix.
- Planned for a Data Quality Conference (delivered in September).
- Supported Partners - Districts, Diversity Liaison Officer, Ethnicity and Gender NIA update, Reframe, EBPC, Te Raranga and TRAG.

Clear Standards and Priorities

- Updated the *National Recording Standard*
- Managed NRS Reference Group, reviewed and upgraded requests for system changes.
- NAP published for 2022/23 identifying audit priorities for the year.
- Maintained and enhanced the LRT-Codebook and related metadata tables.

Opportunities Highlighted

Supportive Leadership and Supervision

- The Data Strategy and Roadmap provides a solid foundation to improve data maturity (delivering better quality data about Offences and Incidents).
- Requests to create Leadership CEP training (or similar) for staff responsible for leading Offence and Incident Recording practices.
- Incorporation of NRS rules and principles into Police's Leadership qualification framework.

Clear Standards and Priorities

- Lack of clarity of core NRS principles, were highlighted in Baseline, Identity Review and Family Harm, Youth Outcomes.
- Issues with Missing Person recording requirements – we initiated a review of policy and recording practices.
- Identity data standards need to be established.

DQIT Actions Coming Year

Supportive Leadership and Supervision

- Support and promote the Data Strategy and Roadmap at every opportunity.
- Create and publish training resources aimed at those that 'lead data quality'.
- Request inclusion of data quality rules and principles into Police's promotion qualification framework.

Clear Standards and Priorities

- Significant update of NRS, addressing clarity issues identified in audit reports and stakeholder feedback.
- Evolving content for a detailed DQ Assurance Manual covering linked processes and training requirements.
- Address recording requirements for Missing Persons.



Prevent - Leadership and Governance (2)

DQIT Actions This Year

Healthy Culture Aligned with Values

- Highlighted culture as influencing recording practice when dealing with reports of Family Harm/Violence.

Resources to Match Demand

- Increased DQIT capacity, DCR coverage for Te Waipounamu.
- Promoted the need for QA resource within Districts and Service Group.

Opportunities Highlighted

Healthy Culture Aligned with Values

- The Family Harm audit identified the need for culture change – from only code Offences if filing charges, to NRS compliant recording, echoing findings of other audit and QA work from earlier years.

Resources to Match Demand

- Need for an increased number of DCR's to provide consistent levels of support to all Districts and Service Group/ECCs.
- Training gaps and mindset change opportunities exist that could be addressed with a dedicated training / communications capability.

DQIT Actions Coming Year

Healthy Culture Aligned with Values

- Deliver District 'Roadshows', aimed at improving District leadership knowledge and engagement.
- Motivate leaders to understand the need for culture change, and give them the tools they need to lead that change with their staff.

Resources to Match Demand

- Support Service Group to establish a dedicated QA team, train and accredit those staff to do QA work.
- Support Family Harm to broaden their QA process, ensuring they leverage off the existing data quality checks and identified risks.
- Support Youth team to deliver actions to improve Youth Outcomes recording.
- Grow District Crime Registrar numbers and outreach.
- Secure specialist to deliver DQ training requirements.





Prevent – Systems and Processes

DQIT Actions This Year

ICT Systems

- Maintained Offence and Incident code tables and enhanced the LRT Codebook.
- Introduced Hate Crime Sub-Type into NIA and related reporting tools

QA Reporting and Support Systems

- Maintained a suite of QA list reports, including for Hate Crime QA activity.
- Created and trialled the ability to record QA checks in NIA for all NAP strands.

QA Business Processes

- Support for evolving QA processes in TWP, and TM regions targeted at improved recording of NIA Required Records.
- Completed a review of pathways and recording 'pinch points' relating to accurately recording reports of hate crime / hate incidents. Shared the insight with key stakeholders to explore the value of a Service Level Agreement to lock in agreed roles and responsibilities.
- HCQA team added 'free text' search in both CARD and NIA to their range of checks.

Opportunities Highlighted

Supporting ICT and business change programmes (as below) present opportunities to address a number of known Offence and Incident recording issues:

- NIA Modernisation /CARD replacement
- FH Triage process
- Reframe Case Management Process
- Alternative Resolutions / Warnings.

ICT Systems

- LRT – Offence and Incident code simplification opportunities exist for both CARD and NIA
- Hate Crime Sub-type needs to be incorporated into Business reporting.

QA Reporting and Support Systems

- Efficiency can be found in QA list reports and QA processes, to reduce 'false positives' and focus QA activity and reporting more closely to risk.

QA Business Processes

- Evolve our QA check capability in NIA process, developing linked reporting and a QA manual.
- Opportunities exist to improve and better align Family Harm, Adult Sexual Assault, Child Protection internal QAIF processes.

DQIT Actions Coming Year

Contribute advice to business change programmes by supporting existing working and steering groups.

ICT Systems

- Look for opportunities to rationalise Offence and Incident codes – deliver an LRT change Strategy.

QA Reporting and Support Processes

- Create and maintain the DQAM.
- Continue to refine the DQ Check list reports to make them more efficient.
- Collaboration with EBPC on machine learning solution to potentially replace Free Text audit approach (HCQAT).

QA Business Processes

- Work with and advise ECC and Service Group to establish more robust systems for the transfer and recording of reports that are not attended.
- Work with Family Harm QAIF – Family Harm
- Progress a Hate Crime Service Level Agreement with Districts.



Prevent – People and Skills (1)

DQIT Actions This Year

Benefits and Risks Understood

- Publicised audit findings – email, News Items, one page summaries and presentations to groups.
- Publicised available dashboards and performance reports – email, News Items, and DQ Updates.
- Published resources about risk identification and targeting DQ checking activities to known risk.
- Actively participated in a range of governance and steering groups – advising on risks and issues; for example:
 - Te Raranga Advisory Group
 - Police Disability Data Governance Group
 - Reframe workshops and meetings
 - NIA Reference Group
 - Data Strategy workshops and interviews.

Opportunities Highlighted

Benefits and Risks Understood

- Create indicators and regularly report on the quality of Identity data.
- Work with EBPC to account for or caveat data quality findings into performance measures (e.g. Family Harm).



DQIT Actions Coming Year

Benefits and Risks Understood

- Continue to publicise audit findings, performance reports and dashboards.
- Deliver District Roadshows – targeting management teams and middle level managers.
- Update our DQ Intranet pages – simplifying where possible.
- Create / develop more engaging training and communication resources addressing 'the why' – for leaders and for frontline.
- Continue to support and advise governance and steering groups.



Prevent – People and Skills (2)

DQIT Actions This Year

Trained and Skilled People

- Embedded the concept of 'NIA Required Records' into NRS and into all training materials, SAS QA and performance reporting and communication tools.
- Provided 2 monthly DQ Updates – with linked resources and key – 'need to know' messages to Districts and DQ 'friends'.
- Delivered training on NRS principles to induction courses for 105 and 111 call takers.
- Communicated NRS changes to the business.
- Trained staff how to record Hate Crime / Incidents.

Opportunities Highlighted

Trained and Skilled People

Audits highlighted the need for training and improved guidance for:

- Family Harm / Family Violence coding.
- NRS principles and rules for frontline and their supervisors – what they are and how to apply them.
- Youth Resolutions – Child protection teams and youth aid staff - how to record, what to record for specific outcomes (resolutions).

Conference highlighted the need for:

- Leadership training and the leadership development programme
- Induction training to be created and rolled out.
- More engaging training targeting 'The Why'

Re-code and Removed Offence audits highlighted the need for training and guidance to deliver and moderate QA processes. .

DQIT Actions Coming Year

Trained and Skilled People

- Expand our range of online / CEP training - Leadership training / leadership development resources.
- Develop and deliver Induction training resources for all staff
- Create a Family Harm Coding Guide and support the Family Harm team design to deliver training about accurate coding
- Support the Youth team to design and deliver relevant DQ training to their staff.
- Create Data Quality Assurance Manual (DQAM), including templates and guides.
- Create training and a QA qualification process.





Detect

DQIT Actions This Year

Audits / QA Checking

- Audits were completed as outlined in this report.
- We've maintained our suite of QA list reports.

Opportunities Highlighted

Audits / QA Checking

- A common theme across audits was that following the Data Strategy principles would enable improvements in Offence and Incident data quality.
- NAP 1 - Family Harm and Baseline Audits show that CARD to NIA transition and accurate initial coding remain problematic areas resulting in a failure to record victims in NIA as required by Policy.
- NAP 2 and 3 - Re-coding and removal audits showed the need for a tighter focus on practice related to Robbery Offences.
- NAP 4 - Youth referral clearances are often missed
- NAP 6 - Family Harm recording issues are impacting on the accuracy of our official statistics.
- NAP 6 – A broad range of data quality issues exist relating to the recording of Identity data. No clear business owner has been identified to progress the required changes.

DQIT Actions Coming Year

Audits / QA Checking

- Deliver the NAP audits planned for 2022/23.
- Maintain suite of QA list reports – using a continuous improvement model. Target QA activity more to risk and provide a national structure for QA and templates by rolling out the DQAM.
- Establish a routine checking and fix process for all Robbery Re-codes and Removed Offences.
- Evolve the BAU national Hate Crime QA process to provide insights to the business relating to Investigation and resolution activities.



DQIT National Audit Plan

2022/23



Detect

DQIT Actions This Year

Scanning

- Regular 'catch up' meetings with Service Group, Mobility, OnDuty and other ICT system business owners regarding issues they face to explore data quality opportunities.
- 'DQ Issues' emails and regular District interactions – provide feedback about questions from operational and workgroup staff.
- Introduced a new platform for CEP training, creating the ability to monitor training uptake and the results achieved by participants.
- Created new capability to monitor the extent to which requests for follow up actions relating to Hate records, were actioned by Districts.

Other

- Published a new 'DQ Performance Dashboard' aligned to the NAP strands.
- Introduced 'Noise audits' to monitor and improve consistency of pass/fail coding within QA and audits.

Opportunities Highlighted

Scanning

- Better focus on risk required (reduce checking and re-work of where no lost service, or risk to reputation).
- Feedback from Districts indicate changes to recording requirements for Missing Person are needed.
- Feedback from Districts indicates changes are needed to recording of firearms seized or surrendered.

Offence and Incident Recording

DQ Performance Report Available now

The measures in this report focus on the quality of offence and incident recording, based on requirements set out in the National Recording Standard (NRS).

The report currently includes measures on:

- **Record Creation:** e.g., where occurrences have not been created or linked correctly in NIA, occurrences created after 72 hours of the initial report or where victim links are missing
- **Re-code in NIA:** highlights 'risky re-codes', e.g., where staff have re-coded from a victim offence to a non-victim offence, or to a lower category (Burglary to Theft), or lower sentence (based on max. sentence penalties).
- **Outcomes in NIA:** highlights offences that have been removed, either as 'no offence' or another closure reason that removes the offence (e.g. duplicate, error). It also checks for obvious errors such as non-victim offences with a closure reason.



[Link to Launch Page for the Performance Dashboard](#)

DQIT Actions Coming Year

Scanning

- Continue to engage with operational staff in Districts.
- Maintain and build on networks with business groups managing ICT applications and business processes involved in Offence and Incident recording.
- Review and update email 'help and advice' processes potentially re-brand and re-publicise our capability.

Other

- Evolve Data Quality performance reporting and dashboards.
- Hate Crime - extend the roll out of daily / quarterly performance reporting for wider group of District hate crime leads, etc.
- Evolve our SAS Hate Crime Insights Report to enable Sub-Type reporting (HCQAT/EBPC).



Respond

DQIT Actions This Year

Learn Lessons

- Partnered more with the Lessons Learnt team.
- Submitted examples to be included in the Lessons Learnt database.

Opportunities Highlighted

Learn Lessons

- Lessons Learnt database is a potentially helpful place to highlight operational findings from audits or other review (monitoring) activities.
- IPCA and Police Professional Conduct investigate some complaints where record keeping is an issue. Currently, there is insufficient detail in the labels used by PPC to collate these 'recording' insights.
- Reports written by DQIT provide a range of opportunities to improve that are not always followed up in formal way.

DQIT Actions Coming Year

Learn Lessons

- Create training material drawing lessons from audit and/or case study scenarios.
- Establish or join an effective recommendations database – to align/consolidate, prioritise and progress recommendations from a wide range of DQIT reports.
- Leverage opportunities presented by the Lessons Learnt team, in particular their national communication channels.



Weekly Lesson

Submit to the Lessons Learnt team:

[Debrief / Lessons identified form](#), or via Checkpoint Lessons.Learnt@police.govt.nz (email us incident details, reports, orders, debrief documents)

Useful Links:

[IPCA reports](#)



Respond

DQIT Actions This Year

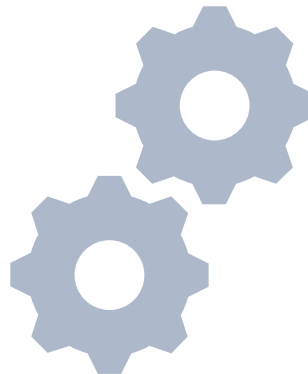
Manage Identified Issues

- District Crime Registrars – continue to support the roll out and development of Data Governance Groups across Districts, building on success in TM, TWP and Eastern Districts.
- Responded to a range of OIA questions about Hate Crime, Family Harm and Fraud data.
- Offence and Incident Code table maintenance, added new legislation and updated all our Westlaw links in the LRT.
- NZ Crime and Victimisation Survey, completed its Cycle 4 QA work and has started Cycle 5 activity.
- Supported Te Raranga team with programme deliverables related to recording, investigation and resolution e.g., incl. work on capturing s9(1)(h) use and related convictions in NIA as well as the production of a Hate Crime reporting capability.
- Supported activities related to external agencies e.g., Muslim leaders Forum and other community engagement groups, shared insights in relation to progress against RCOI Rec 42.
- Supported Understanding Policing Delivery research teams to understand Police data holdings.

Opportunities Highlighted

Manage Identified Issues

- With some Offence and Incident Codes inconsistencies, redundancies and unnecessary complexity remains.
- Audits identified that clarity is required in NRS relating to what to record when – update of some core principles is required.
- QA processes are not fully designed and communicated.
- Inconsistent responses from Districts to requests for follow up of Hate reports.
- Feedback from partner workgroups – Recording Offenders guide needs refresh.



DQIT Actions Coming Year

Manage Identified Issues

- Create an LRT strategy, and initiate work to simplify codes / prepare a rationalised coding framework (aligned to the Data Strategy principles and known business needs).
- Deliver an important update of NRS, addressing issues raised in recent audits, looking to clarify and enhance our basic recording principles.
- Create Data Quality Assurance Manual, with accompanying guides and templates.
- Embed an agreed Service Level Agreement for Hate Crime recording outlining stakeholder roles and responsibilities.
- Update our existing 'Recording Offender' guide.
- Progress ongoing Hate Crime recording enhancements in NIA.

Emerging Topics

Emerging Topics

Looking ahead, topics which have emerged in 2021/22 that will influence DQIT's future work include:

Data Management and Strategy

A recurrent theme across audit reports this year was the impact of poor data stewardship and its effect on the quality of our data.

In addition, discussions at the DQ Conference raised issues highlighted in the Data Strategy and Roadmap identifying strong support to implement recommended actions. For Offence and Incident Recording and data, this specifically related to simplification of standards, options and recording processes as well as a focus on identifying 'basics' and eliminating clutter.

Offence and Incident Codes

There is increasing interest from a range of stakeholders to simplify the range of available Offence and Incident codes. Any change would be aimed at better meeting organisational needs and more fully understand the nature of demand.

Robbery

Removed and Re-code audits both indicated concerning trends relating to the recording of

Robbery. DQIT plan to implement a routine process for checking all Robbery Offences that are Re-coded or Removed, along with delivering a feedback process for Districts.

Core Data

It has become increasingly clear that the organisation needs a small set of high quality data to manage response, investigations and understand performance (more than code alone).

As a concept – Core Data is growing in interest as a way to describe, define and put a quality framework around certain data fields about what was reported, who was involved and where it happened.

Resolutions Policy

In the long term change programme 'Reframe' and work in the Supported Resolutions and Warnings area will influence the direction of policy and processes for dealing with suspects and offenders. There is broad agreement across key stakeholders to update advice current 'Recording Offenders' guidance.

Conclusion

Conclusion

In summary, DQIT uses an operating model that detects and targets risk and promotes continuous improvement. The team use a framework comprising three interlocking themes that target improvements in:



Leadership and Governance



Systems and Processes; and



People and Skills.

The team have a range of ways to monitor both the environment they are working in, progress against aims and improvements in outcomes that supports this process.

DQIT continues to champion ethical, victim focused, recording by Police.

The overarching aim is to reduce harm and support a quality service to victims and the wider community. Accurate recording also enables performance monitoring, intelligence led deployment and initiatives, and underpins reliable victimisation statistics.

Our annual report shows how DQIT's audit and review activity results in actions and recommendations that make a real, positive, and sustainable difference to data quality and in turn, to the delivery of *Our Business*.

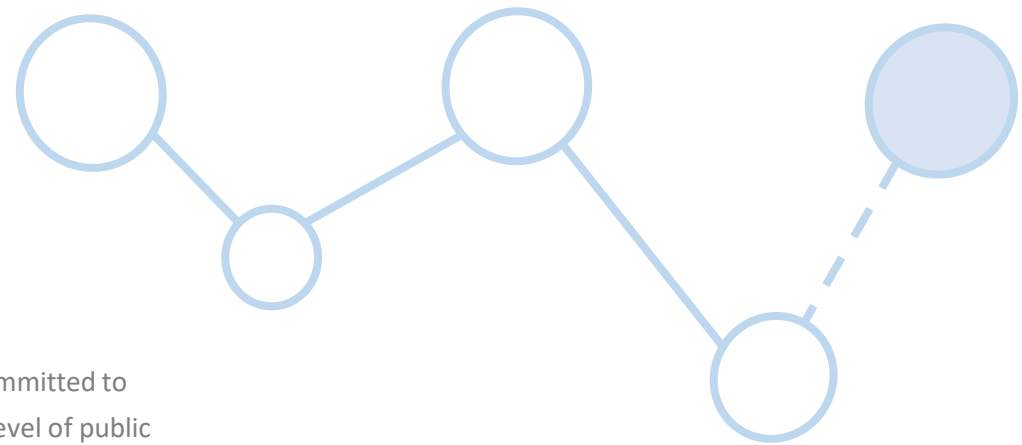
This year, as well as providing tangible support to Districts and other key workgroups, the team have completed a number of detailed audits, reviews and reports that offer deep insights into opportunities for the organisation to improve.

Gains made to the accuracy of re-codes and removed Offences have been maintained.

More excitingly, there have been signs of improvement in the area of initial recording. This is an area where a small percentage change translates to a large improvement in the number of victim reports being recorded.

While there is still some distance to travel, this year there are several indicators showing gradual improvement, e.g., more NIA required records are being created, together with evidence of improvement in coding accuracy.

Next Steps



New Zealand Police is committed to progressively lifting the level of public confidence in its data quality systems, processes and practices. In turn, this enables excellent service to victims and communities.

Police have signalled, through the Data Strategy and Roadmap, that the next steps for Data Quality will involve:

- Focus on basics - simplification, establish our core data needs and focus on getting them right
- Leverage technology - integration, automation, inter-operability
- Promote excellence of mindset

Details of the intended actions for the DQIT in coming year are outlined in the Opportunities and Actions pages (see pages 33-42 prior), but are summarised in the adjacent bullet points.

Looking forward, the DQIT aims to:

- Champion ethical offence and incident recording across Police using a two pronged approach, by
 - Engaging Operational Leaders and Leadership Teams
 - Enhancing training and communication on 'the Why'
- Increase the outreach of District Crime Registrars, so that we're have a visible presence in more Districts supporting and enabling staff to deliver our Data Quality improvement journey.
- Simplify our standards, rules and Offence and Incident codes.
- Enable a national, integrated, effective second line of defence, checking risky records.
- Continue to influence the requirements and design of national process and ICT change programmes.

Glossary / Acronyms

CARD	Communications and Resource Deployment (System) - Police's primary emergency response dispatch platform
CEP	Continuous Education Programme
CRIS	Crime Reporting Information System - Application used by Crime Recording Line to enter Offences and Incidents
CRL	Crime Recording Line (now also known as 105)
DCR	District Crime Registrar
DQAM	Data Quality Assurance Manual
DQIT	Data Quality and Integrity Team
ECC	Emergency Communications Centres
FSIP	Frontline Safety Improvement Programme
FMC	File Management Centre (District based groups, within the Service Group structure)
HCQAT	Hate Crime Quality Assurance Team
LRT	Legislative Reference Table (a database table controlling all Incident, Offence and precedent codes and their metadata)
NIA	National Intelligence Application (Police's primary Offence and Incident recording database)
NRS	National Recording Standard

