

Appendix 2

| ID | Task Name | Qtr 4, 2004 | | | | | | | | | | | | Qtr 1, 2005 | | | Qtr 2, 2005 | | | Qtr 3, 2005 | | | Qtr 4, 2005 | | | Qtr 1, 2006 | | | Qtr 2, 2006 | | | Qtr 3, 2006 | | | | | |
|----|--|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|-------------|-----|-----|--|--|--|
| | | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | | | |
| 2 | Communication | [Black bar spanning Dec 2004 to Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 | Response to National Press Launch | [Blue bar: DAC Bryan, Dec 2004 - Jan 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | Internal communication, targeted communication with: Boro Cdrs, Control Room and CMU staff | [Blue bar: Force Crime Registrar, Dec 2004 - Jan 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | Ongoing communication - improving awareness of NCRS, crime data quality issues, links to Citizen Focus | [Blue bar: Force Crime Registrar, Feb 2005 - Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 | Achieving compliance with NCRS Tests | [Black bar spanning Dec 2004 to Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | Test 1 | [Black bar spanning Dec 2004 to Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9 | Active supervision process for Test 1 (regular reporting of results) | [Blue bar: TP, Dec 2004 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | Intervention activity to address continued non compliance | [Blue bar: TP, Jan 2005 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | Audit to assess compliance with Test 1 | [Blue bar: Inspectorate, Feb 2005 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | Test 5 | [Black bar spanning Dec 2004 to Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | Introduction of policy to restrict numbers of staff who can no-crime | [Blue bar: Cdr Crime, Dec 2004 - Jan 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15 | Monitoring compliance with policy | [Blue bar: Crime Integrity Team, Jan 2005 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 | Monitoring and reporting levels of compliance with Test 5 | [Blue bar: Crime Integrity Team, Feb 2005 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | Compliance with Tests 1 and 5 | [Black bar: 01/04, Jan 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 20 | Improving Compliance across all tests (incl further co | [Black bar spanning Dec 2004 to Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21 | Review test 1 and 5 performance, planning to improve compliance across all tests | [Blue bar: Force Crime Registrar, Jan 2005 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22 | Implementation of further actions to improve compliance across all tests | [Blue bar: Force Crime Registrar, Feb 2005 - Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23 | MPS compliance across all NCRS tests | [Black bar: 31/03, Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 24 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 25 | Planning and Implementation of longer term framework | [Black bar spanning Dec 2004 to Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26 | MB paper outlining longer term framework | [Black bar: 17/12, Dec 2004] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 27 | Planning of longer term improvements to data quality | [Blue bar, Dec 2004 - Mar 2005] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 28 | Implementation of longer term improvements to data quality | [Blue bar, Apr 2005 - Mar 2006] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |