



Republika e Kosovës

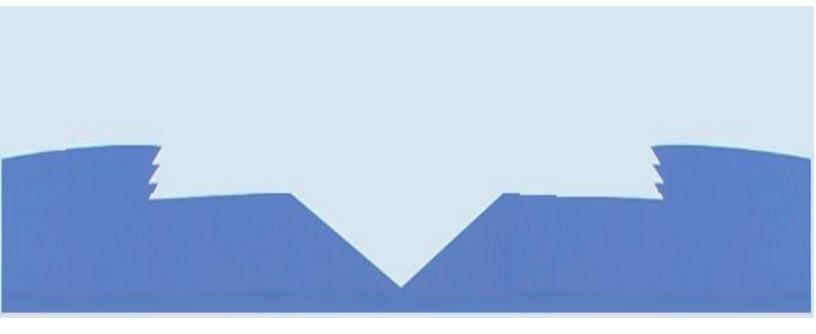
Republika Kosova-Republic of Kosovo

Qeveria-Vlada-Government

Ministria e Punëve te Brendshme-Ministarstvo Unutra**š**njih Poslova-Ministry of Internal Affairs

Akademia e Kosovës për Siguri Publike/Kosovska Akademija za Javnu Bezbednost/Kosovo Academy for Public Safety

INTEGRITY PLAN KAPS 2024 -2026



CONTENT

	1
CONTENT	2
LIST OF ABBREVIATIONS	3
INTEGRITY DECLARATION	4
INTRODUCTION	6
INTEGRITY PLAN	7
INTEGRITY MANAGEMENT PRINCIPLES	9
INTEGRITY PLAN OBJECTIVES	10
INTEGRITY PLAN DEVELOPMENT PROCESS	10
Development stages of the Integrity Plan	11
RISK ASSESSMENT METHODOLOGY	12
Risk assessment matrix	13
General risk assessment	13
Priority of risks	14
INTEGRITY PLAN IMPLEMENTATION MONITORING AND REPORTING	15
AREAS OF RISK	16
General Areas of Risk	16
Specific areas of risk	16
THE QUESTIONNAIRE	16
ACTION PLAN	16

LIST OF ABBREVIATIONS

KAPS	Kosovo Academy for Public Safety
СРА	Corruption Prevention Agency
FPS	Faculty of Public Safety
FPS	Faculty of Public Safety
IRD	Institute for Research and Development
PSI	Public Safety Institutions operating in KAPS
KP	Kosovo Police
PIK	Police Inspectorate of Kosovo
EMA	Emergency Management Agency
KCS	Kosovo Correctional Service
KPS	Kosovo Probation Service
KC	Kosovo Customs
MIA	Ministry of Internal Affairs
G.D	General Director of KAPS
DTES	Department of Training and Educational Support
DSPLM	Department for Strategic Planning and Legal Issues
IAD	Internal Audit Division
DER	Division of External Relations
HRD	Human Resources Division
DBF	Division for Budget and Finances
MEDIA	Information official at KAPS
Stakeholders	Public Safety Institutions, not limited to: Kosovo Police (KP), Kosovo Customs (KC), Kosovo Correctional Service (KCS), Kosovo Probation Service (KPS), Police Inspectorate of Kosovo (PIK) and Agency for Emergency Management (EMA)
Attendees	People who attend trainings and higher education at the Academy
International Partners	Permanent partners operating and cooperating with KAPS such as ICITAP, OSCE,

INTEGRITY DECLARATION

Kosovo Academy for Public Safety - KAPS, as an institution responsible for raising the capacities of Public Safety Institutions, considers Integrity as one of the highest human and professional values. Integrity is understood as a promoter of life which guides us in every sphere, therefore the exercise of functions and duties with integrity by AKSP officials creates credibility among citizens, stakeholders and our international partners.

This statement is intended to provide a comprehensive statement that clearly reflects our policies, procedures and operational measures regarding integrity, ethics, organizational culture, transparency and accountability.

Therefore, based on the above mentions, the work and processes of our Institution, we have tried to harmonize the activities with the principles and values proclaimed in our most important documents, ensuring their respect and making them visible..

KAPS sees this plan as a basis for continuous improvement in the management system and strengthening of the organization's resistance to corruption, and consequently to reduce the levels of corruption. This can be achieved through the establishment of mechanisms including prevention, control, accountability and transparency.

We pledge that KAPS, with all sincerity and dedication, must further develop the capacities of our personnel, to respond effectively to all challenges related to integrity, as well as to adequately manage the many risks of integrity issues that we face.

Therefore we, as KAPS, are committed to not only implement the planned measures, but also to make successful efforts to integrate the integrity risk management into the culture of the institution in a sustainable way. The approach to negative phenomena will be zero tolerance.

All of us are responsible for the effective prevention, timely detection and investigation of corruption, fraud or any other breach of integrity. We keep our commitments to our stakeholders, without excluding our responsibilities who act for us, we manage to earn trust by acting with integrity and modest behavior by living the ethics.

Finally, we thank all the members and experts of the Working Group, whose dedication and great work has made it possible to have this Integrity Plan in our hands for the next three years 2024-2026.

It remains that in the future, all the officials, stakeholders of KAPS give their maximum contribution to implement this document, which can only be achieved by strengthening and advancing the cooperation that we already have.

Respectfully

Kastriot Jashari

Deputy General Director of KAPS

INTRODUCTION

Based on Article 25 of Law no. 08/L-017 for the Agency for the Prevention of Corruption/CPA, instructions for the compilation and implementation of integrity plans determined by the Methodology for Integrity Plans approved by the CPA oblige all institutions to develop and approve integrity plans.

Therefore, based on the above-mentioned legal obligations and documents, KAPS has drafted the Institutional Integrity Plan for the years 2024-2026. KAPS is an institution responsible for offering trainings and higher education, the implementation of policies and strategies of trainings, higher education, as well as the development of capacities in the field of public safety for all Public Safety Institutions, not limited to: KP, KCS, KPS, KC, EMA and PIK.

The integrity plan is a strategic and operational document that is based on finding evidence, the results of the systematic process of assessing the risk of integrity taken within the organization. It is based on the concrete identification of risks, analysis and assessment of the level of risk, priority for intervention, and specifies the measures according to the risks to achieve its objectives.

The main goal of the Integrity Plan is to raise individual and institutional awareness as a way to prevent the phenomena that may be present. Therefore, our goal will be the construction of security walls to prevent the poor-educated and unconscionable individuals, the creation of policies for professional, intellectual and educational advancement. The Integrity Plan also serves as a preventive strategic tool to strengthen the integrity of the institution, which includes individual integrity, professionalism, ethics, institutional integrity as well as the implementation of moral values and professional standards. Considering the sustainability and long-term consequences of our actions, we balance integrity with other concerns, think broadly about all issues, and act accordingly, in accordance with the principles of our function and mandate. We strive to provide quality services in a timely, effective and efficient manner while respecting the highest standards of professional integrity. We are individually and collectively responsible for our ethical behavior.

INTEGRITY PLAN

As a document, the integrity plan defines the strategies and steps that the institution must follow to ensure integrity in its activity. This plan includes measures and policies to prevent corruption, fraud and other actions that may damage the integrity of the institution.

The Integrity Plan as a strategic and operational document will serve as an important tool for strengthening institutional integrity. This plan is understood as a direct observance of moral values, professional standards and applicable normative rules. In general, the integrity plan is an important instrument to ensure that the institution maintains a high level of integrity throughout its activities..

The integrity plan enables:

- ➤ Identification of relevant risks of corruption in different fields of work
- Assessing any type of risk that may present a risk of corruption for an organization;
- ➤ Determining measures to prevent or eliminate the risks of corruption and other unprofessional behavior;
- Strengthening the image and credibility of the Institution respecting and following the integrity plan can improve its image and credibility in relation to others;
- ➤ Staff awareness training and awareness about integrity risks help staff understand the importance of behaving in accordance with established regulations;
- ➤ Improving productivity and performance the environment that promotes integrity can positively affect the climate of the institution, bringing productivity and performance;
- ➤ Compliance with the law The drafting of the Integrity plan ensures that the acts of the institution are compatible with the relevant acts for the prevention of legal consequences;

The Integrity Plan will significantly contribute to:

- ➤ Increasing the opportunities for KAPS to achieve its organizational objectives by putting forward a proactive integrity risk management. This will improve organizational resistance to corruption and reduce opportunities for corruption;
- ➤ Focusing on priorities, based on the identification and assessment of risk that will help the institution to effectively distribute the available anti-corruption resources, to be used in the best possible way;
- ➤ Improving operational controls against integrity violations that will increase the effectiveness, efficiency and transparency of all processes
- ➤ Maintaining a system to ensure compliance with legal and procedural requirements and standards;
- ➤ Creating a favorable internal environment against corruption through targeted training and awareness, as well as encouraging a co-responsibility of all staff in the process of developing, implementing and monitoring integrity plans;
- ➤ Increasing the confidence of our employees and external stakeholders in the commitment to integrity demonstrated by KAPS.

With the implementation of this Plan, KAPS will be better placed to ensure an effective, efficient, transparent and ethical delivery of the intended results. The plan is based on the results of a comprehensive planning for integrity and a risk assessment process that KAPS has done in the period 2024 - 2026. The process has included the identification of weak points of the Kosovo Academy for Public Safety in cases of integrity violations and their assessment taking into account: (1) the material and non-material damages that cause the respective potential violations and (2) the likelihood that these events occur before the actual organizational resistance evidenced by relevant regulations, procedures, codes, practices and staff involvement.

INTEGRITY MANAGEMENT PRINCIPLES

Leadership

Senior management must visibly demonstrate an active, evidence-based commitment to integrity. This would require them to lead the process from the start, through the development of integrity policies and Codes of Ethics. It is very important that this commitment is continuous and that it is well understood and seen by all staff and stakeholders.

Staff involvement

The participation of all staff is very important in the successful implementation of the integrity management system. However, meaningful involvement requires appropriate education and training on issues related to integrity, raising awareness thereby creating trust and a positive work environment. Effective internal and external communication and coordination are important for successful teamwork so that all parties involved get and maintain the same understanding of the project as it is being implemented.

Systems approach

Identifying potential areas of corruption and managing related processes to ensure integrity requires a systemic approach. This requires KAPS to pay attention to all units and analyze the relationship and interdependence between them. Such a thing is achieved internally within the KAPS working group.

Transparency and space for reporting

Ensuring an open and transparent environment where staff have the freedom to report potential violations and these are done by raising awareness through staff training.

INTEGRITY PLAN OBJECTIVES

The main objective of the Integrity Plan is to increase and align efforts and resources to progressively and systematically prevent/eliminate the causes and destructive effects of corruption and unethical behavior in KAPS.

Specific objectives are:

- Ensuring a comprehensive mechanism, where all officials, attendees and service providers can be involved in the fight against corruption and unethical behavior in the Institution's work.
- Increase the awareness of the staff and followers on the risks of corruption and sensitize them about their role in the prevention/elimination of corruption and unethical behavior.
- Improvement and policies of mechanisms for reporting cases of corruption and unethical changes in KAPS.
- Increasing efficiency in providing services in the Institution.
- Creation and maintenance of partnerships in the fight against corruption and unethical behavior.

INTEGRITY PLAN DEVELOPMENT PROCESS

The Integrity Plan is a document that assesses work integrity, institutional integrity, compliance and the way the institution and its employees operate through self-assessment of exposure to the risks of the occurrence and development of corruption and/or other unacceptable ethical and professional behavior.

The Integrity Plan is mainly composed of:

* Registration of identified and assessed risks for all areas of KAPS operation.

❖ Definition of measures to improve integrity that describes in detail all measures to be implemented to reduce integrity risks, as well as the relevant timeline and organizational responsibilities for implementing the measures.

When developing the Integrity Plan, integrity risks are assessed for all areas of KAPS operation. All officials have had the opportunity to participate in the risk assessment of the areas of operation of the units and the Institution and to propose measures to improve the integrity and overall quality of management as well as the provision of services.

Development stages of the Integrity Plan

The development of the Integrity Plan for KAPS consists of several stages as follows:

- **Preparatory phase** The General Director has established the working group by decision where the managerial and professional level are included in the working group. Likewise, the Director by decision has also appointed the coordinator for the development of the integrity plan. This working group collected the necessary information for the development of the integrity plan as well as informing all staff of the importance of the Integrity Plan.
- Integrity risk assessment phase during this phase, the coordinator together with the working group analyzed the collected documentation (legislation and by-laws applicable to the work of the administration; job descriptions and the scope of each organizational unit as well as each process for decision-making and service provisioneve. Based on the analysis of the current situation, it has determined the risk areas and identified and evaluated the risks. Also, the involvement of participants in the process of drafting the plan (the anonymous questionnaire was also developed with the staff), consultation with actors to collect their opinions for the identification of potential vulnerable points in the Institution.

- The phase of determining priorities, and proposing measures to improve integrity this phase included the definition of areas and priorities for intervention, the definition of measures for the prevention/elimination of risks and the responsibility for implementation.
- The monitoring and reporting phase of the integrity plan includes the regular monitoring, observation and recording of activities that occur in an Integrity Plan and the process of gathering information on all aspects of the implementation of the Integrity Plan. While reporting enables the collected information to be used in making decisions that improve implementation of the objectives of the Integrity Plan.

RISK ASSESSMENT METHODOLOGY

Risk assessment methodology is a structured process that aims to identify, assess and manage potential risks in an institution.

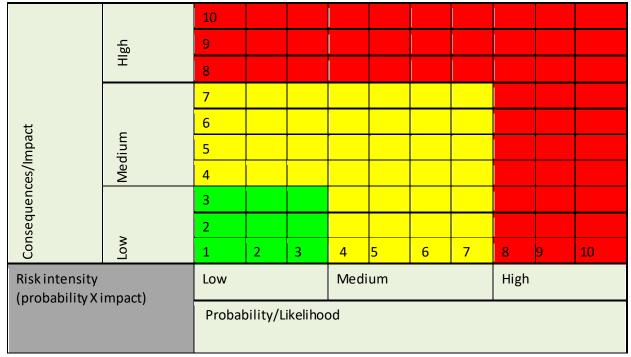
Risk assessment means the ranking of the greatest risks at the top of the list, which present substantial effects on the institutional integrity and may jeopardize the efficiency, reliability and external image of the Institution. This should be the basis for determining risk management measures. Therefore, priorities are set so that the limited resources available for treatment can be placed where they are felt to be most needed. In general, risks categorized as minor comply with risk-taking standards and do not impose the need for additional treatment measures, but require monitoring of the efficacy of existing treatment/control measures. On the other hand, major risks require immediate treatment with adequate measures.

After determining the two parameters, the probability of the occurrence of the risk and the consequences (impact) of the occurred risk, the working group has determined the level of risk for all identified and assessed risks, using the Risk Matrix. The final risk level is determined based on the Risk Matrix as a combination of probabilities and consequences.

Risk assessment matrix

The risk assessment matrix allows to calculate the risk in an area, institutional activity for a very quick time, identifying all the things that can go wrong and fishing the possible damage. This makes it easier to prioritize issues and take actions and measures where most needed to keep the field and activities on track.

Figure 1. Risk assessment matrix



The risk intensity is obtained by multiplying the probability/likelihood by the consequence/impact, using the risk matrix, "impact (1-10) x consequence (1-10)", shown in the figure above.

General risk assessment

The overall assessment of the risk of integrity violation is estimated from 1 to 100, as in the table below:

Low	Medium	High
1 – 15 points	16 - 48	49 - 100

Low intensity risk – the possibility of breach of integrity or other forms of integrity damage occurring is very small due to existing control measures, (the risk did not occur in the past or occurs very rarely, so it is unlikely for this to happen in the same time period in

the future). Assessment of the impact of the occurrence of the risk - The impact on the integrity of the institution is insignificant.

Medium-intensity risk – the occurrence of breach of integrity or other forms of integrity damage is possible, but control measures manage this risk, (the risk has occurred on a number of occasions in the past, so the probability of occurrence in the same time period in the future is moderate). Assessment of the impact of the occurrence of the risk - The impact is important for the integrity of the institution.

High intensity risk – breach of integrity or other forms of integrity damage are already present in the process or are likely to occur, (the risk has occurred frequently in the past and there is a high probability that this will occur in same time period in the future). Assessment of the impact of the risk occurrence – The impact is very important for the integrity of the institution.

Priority of risks

The priority of the risk means the ranking of the integrity risks, starting from the most primary risks that present a substantial impact on the integrity of the institution and that may endanger its effectiveness and reputation, to low risks that may not need measures, but it is enough to monitor continuously.

After determining the possibility of the occurrence of the risks and the consequences of the risks that have occurred, it is continued with the determination of the level of risk for all identified and assessed risks, according to the risk matrix (in figure no. 1).

The ranking of risks is done according to importance, and includes the assessment between the possibility of the occurrence or appearance of a risk and its impact on the integrity of the institution.

INTEGRITY PLAN IMPLEMENTATION MONITORING AND REPORTING

The implementation of the Integrity Plan will be continuously monitored with relevant mechanisms, periodically reviewed and updated in accordance with the relevant normative, institutional, procedural and personnel developments within the Institution's environment. Ongoing monitoring of implementation is important to ensure that integrity risk controls and measures are effective, both in design and operation, and that procedures are understood and the integrity plan is followed.

Monitoring should also determine whether the measures used to treat the risk have produced the planned effects, have revealed changes in the external and internal context, including changes in the risk itself, changes that require a review of risk treatment and priorities, and have identified which lessons should be learned for future planning. Regular reporting ensures that the implementation of the Plan is done in accordance with the schedule and results planned for achievement.

With the aim of ensuring the implementation of the integrity plan, mechanisms are created for monitoring and reporting on the implementation of the Integrity Plan.

Initially, *The person responsible for reporting the implementation of the Integrity Plan* is appointed by the decision of the General Director of KAPS.

The person responsible for reporting the implementation of the Integrity Plan is responsible for:

- Prepare the methodology for monitoring the Integrity Plan in accordance with the methodology for Integrity Plans from CAP;
- > To collect and analyze the necessary documentation related to the implementation of the measures
- ➤ Drafts periodical and annual reports (every 6 months) for monitoring the implementation of the integrity plan and reports to the General Director of KAPS as well as to CPA.

All employees are obliged to inform the responsible person about the situation, actions, measures for which they are committed to action. At least once a year, at the request of the General Director, the responsible person must submit a report on the implementation of the integrity plan.

AREAS OF RISK

General Areas of Risk

- Direction and management;
- Human resources policy and ethical behavior of employees;
- Financial planning and management;
- Storage and security of data and documents.
- Communication and information;

Specific areas of risk

- Internal audit;
- Public procurement;
- Higher education;
- Trainings

THE QUESTIONNAIRE

Within the framework of the development of the Integrity Plan, CPA has created an online questionnaire where it has been sent to 50 participants/employees of the Institution from different organizational levels. Members of the Working Group, managerial, professional and support level are also included. From the data that emerged from this questionnaire, it appears that CPA stands well in terms of organization and responsibilities divided into organizational units. The results obtained from the developed questionnaire are mainly reflected in the General Areas of Risk and Special Areas of Risk.

ACTION PLAN

The action plan has been drawn up within the general framework defined in the Integrity Plan in accordance with the guidelines approved by the CAP. The action plan for the implementation of this strategy contains:

The scope of the risk, the description of the risk, the existing control measures and their efficiency in overcoming the risks, the results of the assessment of the consequence and the probability of the occurrence of the risk, the measures foreseen for the elimination / reduction of the risk, the person responsible for the implementation of the measures and the deadline for the implementation of the measures.

KAPS INTEGRITY ACTION PLAN 2024-2026

Integrity Plan										
General risk areas										
Registration of the risk				an	essment d ement	Action to risk				
Risk area	Risk Description	Existing control measures	Probabilities	Impact	Risk assessment	Proposed measures to reduce / eliminate risks	Unit/ Responsible official	Implementatio n deadline		
	Inefficient supervision over the implementation of planned activities		3	8	24	Periodic evaluation of the implementation of activities - the annual plan	DSPLM / all units	Every three (3) months report		
nt	Failure to monitor and report on the implementation of the KAPS Integrity Plan	Laws and by-laws	2	3	6	Monitoring and preparation of monitoring reports	DSPLM / all units	Every 6 months reporting		
geme	Lack of internal procedures for avoiding conflict of interest		3	10	30	Drafting of the act / internal policies	DSPLM	2024		
Direction and management	Continuous information with employees regarding the processes of the institution and providing advice from the management	KAPS Integrity Plan	3	5	15	Organization of meetings and visits from management to employees	GD- managem ent	At least 4 meetings per year		
Direct		CPA procedures				Creating a gift registry	A t	2024		
1.		and legal acts	2	2 10	0 20	Informing staff about gift acceptance procedures	Asset declaratio n officer at KAPS	The month of March every year		
	Lack of anti-fraud procedures		5	8	40	Establish anti-fraud procedures/policies and sensitize staff to new policies	DSPLM	2024		
and ethics	Lack of training about the code of ethics.	KAPS code of ethics,	3	4	12	Staff training on ethics	HRD / all units	20 officers trained each year		
Human resource policy and ethics 3.	Lack of information and awareness about the existence of the code of ethics for KAPS officials and followers in KAPS.	Legislation in force	3	4	12	Distribution of the code of ethics and publication on the web page.	HRD	Every beginnin g of the year		
2. Human re	Professional development of employees' competence regarding the conflict of interest	Annual training planfor officials	3	4	12	Staff training on the field of conflict of interest	HRD / all units	20 officials trained every year		

	Not Sensitizing and informing							Policies and rules sent out
	the staff regarding the conflict of interest and corruption		3	4	12	Staff awareness through continuous announcements	HRD / all units	at the beginnin g of each year
Planning and financial management	Failure to plan the budget based on planning documents (strategies, performance plan, annual plan, etc.) and other obligations	Laws and by-laws	3	5	15	To ensure the participation of all parties in budget planning and coordination with planning documents	DBF	Planifiki mi vjetor dhe rishikimi buxhetit cdo vit
4. Plan	Inefficient asset inventory and recording		5	5	25	Updating the internal registration of assets	DBF	Çdo vit
nts	Lack of adequate archive space		8	8	64	Enrichment with shelves and creation of archive conditions	DFGS	2025
Storage and security of data and documents	Collection and not proper classification by units of documents that are sent to the archive		5	5	25	Training of staff and classification of documents for archiving	DFGS/ All units	2024
ecurity of dat	Sending archival materials to the state archive after the storage period	Laws and by-laws from the archive field	3	3	9	Creation of the commission for evaluation and classification of documents	G.D	2024
ge and s		nera				Sending materials to state archives	DFGS	2025
5. Stora	Lack of special training on how to work with personal data and protect personal data.		5	5	25	Training of 20 officials for the protection of personal data	HRD / all units	2024- 2025
ion and	Delay in updating data and information on the web page	Laws and by-	3	7	21	Updating the data according to the changes that have occurred	Media/all units	Continuit y
6. Communication and information	Failure to present the activities developed in AKSP	laws KAPS organi	3	7	21	Events and activities published on the web and social networks	Media/all units	Continuit y
6. 6. Corr	Changing the web page and enriching it with relevant documents	zation regula tion	3	5	15	Redesigned website and publication documents	Media/all units	2024/ Continuit y
					c risk ar	eas		1
Risk registration				an	ssment d ement	Action to ris	k	

Risk area	Risk Description	Existing control measures	Probabilities	Impact	assessment Risk	Proposed measures to reduce / eliminate risks	Unit/ Responsible official	Implementatio n deadline
implementation of the recommendations from the reports of the Internal Auditor	implementation of the		3	10	30	Increasing the implementation of the recommendations received by the IAU	G.D	Continuit Y
1. Internal audit	Lack of coordination for the preparation of action plans for the implementation of recommendations from the units audited by IAU.	Laws and by-laws in force	3	6	18	Organization of meetings with the units involved in the discussion of the draft report and the drafting of the action plan	G.D	After each audit
(1)	Lack of risk-based audit planning and case-by-case audits		3	8	24	Drafting of the internal audit plan based on the result of the risk assessment	IAU	Continuit y
urement	To increase transparency in the procurement process, especially during the formulation of selection criteria and the preparation of the publication of procurement plans/bids	Law on public	3	10	30	Continuous training for responsible personnel who prepare technical specifications	Procurem ent/HRD	Continuit Y
2. Public Procurement	Increasing professionalism in receiving goods and managing contracts	procurem ent PPRC rules	3	10	30	Continuous training for responsible personnel in the field of contract management and acceptance commissions	D.Proc/ HRD	Continuit Y
	Increase of participants in procurement planning		3	6	18	Organization of planning meetings	D. Proc.	Every end of the year
	Inefficiency of educational and student services		3	9	27	Identifying and increasing the efficiency of educational services based on needs	FPS/ DTES	Septemb er 2024
lucation	Insufficient inspections of the learning process	Laws and by-laws	3	8	24	To draw up the inspection plan and supervise its implementation	FPS	Each year
3. Higher education	Failure to comply with the procedures for the selection of staff and students for KAPS representation in various events of an international character such as: Exchange Program (Mobility), visits, conferences, seminars, trainings, etc.	KAPS mobility instructio n	5	10	50	Respecting the procedures for the selection of staff and students for various events with an international character such as: Exchange Program (Mobility), visits, conferences, seminars, trainings, etc.	FPS/DER	Continuit Y
Training	Prevention of interference in the testing process	Guide (KAPS) no. 02/2018	1	5	5	- Inspection and comparison of the number of tests (templates with	DTES	Every 6 months, a report

	for protocols and procedure s				uniref) and the number of participants in training. Monitoring access to the testing office according to the protocol book.		is prepared
Increased control over the use of personal data for training participants from the database (database)		1	3	3	Notification of personnel that no one should receive personal data without request and Monitoring requests in cooperation with ITD for access to the database.	DTES	- The staff is notified every year - Preparation of the annual monitoring report
Prevention of access to weapons and ammunition by unauthorized persons		1	4	4	 Inspection of the Armory regarding compliance with security protocols. Inspection of requests for weapons and ammunition according to standard procedures. 	DTES	Annual report