



## POLICE AND CRIME COMMISSIONER FOR CLEVELAND

### Complaints

**FINAL**

**Internal Audit Report: 12.16/17**

**6 March 2017**

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<b>Responses received</b>	6 March 2017		Eddie Ndhlovu, Senior Auditor
<b>Final report issued</b>	6 March 2017	<b>Client sponsor</b>	Simon Dennis, Chief Executive and Monitoring Officer
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# 1 EXECUTIVE SUMMARY

## 1.1 Background

The Chief Executive and Monitoring Officer is the delegated appropriate authority for dealing with any Chief Officer or OPCC staff complaints. The Office of the Police Crime Commissioner (OPCC) use the IKEN case management system for recording and keeping an audit trail of all complaints against the Chief Officer and OPCC staff. The Triage team (employed by the OPCC) deal with all operational complaints made against police officers and police staff but sit within the Force's Professional Standards Department (PSD). The Senior Complaints Officer from the Triage team, in conjunction with the Force's Professional Standards Department (PSD) investigation managers, undertake an assessment of each complaint so the following resolutions can be achieved:

- **Immediate resolution (triage):** If a person's complaint can be dealt with there and then, to the satisfaction of the person making the complaint, there is no need to record it under the Police Reform Act 2002. The Triage team aim to contact all complainants within 24 (working) hours, and aim to resolve all complaints of this nature within 48 (working) hours.
- **Disapplication:** To stop the complaints process before an investigation. The complaint must meet specific criteria set out within the IPCC guidance, such as the complaint can be disapplied on the grounds of it being vexatious or repetitious. Please note: we have not reviewed this process.
- **Record a complaint:** A record is made of the complaint giving it formal status as a complaint under the Police Reform Act 2002. This means that it has to be handled as follows:
  - Local resolution (LR) - dealing with complaints against the police at a local level, for example, through the involvement of an inspector at a police station. The local resolution of a complaint does not involve the disciplinary process and will not result in misconduct proceedings against an officer or member of police staff.
  - Where a complaint is not suitable for local resolution due to the severity of the complaint (potentially resulting in misconduct / gross misconduct) it must be investigated by the appropriate authority, as set out in the statutory guidance. Complaints of this nature are handed over to the PSD investigations team.

During the period September 2015 to September 2016, there were 779 complaints of dissatisfaction recorded, of which 754 (96.8%) complainants were contacted within 24 hours. This figure included complainants that the Triage team were unable to contact despite every effort being made.

To improve the independence of the complaints system, the Government has proposed to enable a greater role for directly-elected Police and Crime Commissioners (PCCs). The proposal is due to be implemented in May 2018. Of particular interest, the consultation proposes giving a PCC responsibility for key stages in the complaints system.

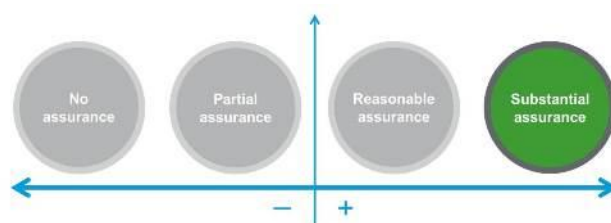
The proposed changes will broaden the current definition of complaints to make it clear that complaints can be about customer service and policing practice issues, not just conduct matters. This means that all complaints will be treated in the same way. The changes in the complaints definition will potentially mean an increase in complaints being recorded.

## 1.2 Conclusion

Our review of evidence and discussions with key staff has confirmed the OPCC and Triage team have in place processes which enable them to respond to complaints in a timely manner and achieve suitable standards in the handling of complaints. We have identified one medium priority management action which relate to the Triage team having the scalability and the resilience to cope with potential increased demand. We have also agreed three low priority management actions which are detailed in section two and three this report.

### Internal Audit Opinion:

Taking account of the issues identified, the Police and Crime Commissioner for Cleveland can take **substantial assurance** that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and operating effectively.



## 1.3 Key findings

The key findings from this review are as follows:

### Chief Officer or OPCC staff complaints

- Through discussion and observation we found that the OPCC has a system in place to record Chief Officer or OPCC staff complaints. At the time of the audit, there was only one OPCC staff complaint which was being handled by the Legal Team. Testing of a sample of Chief Officer complaints also confirmed the following:
  - There was evidence of an in-depth understanding into the complainant claims / allegations by the Chief Executive and Monitoring Officer, acting as the appropriate authority delegate.
  - In all cases, handling of cases had transitioned to the IKEN case management system which was used for correspondence and for retaining any other documented evidence in respect of the specific case.
- We confirmed through our testing that complaints received a bespoke letter from the Chief Executive and Monitoring Officer explaining the decision and within that complainants were notified of their ability to appeal to the IPCC.

We however found within our sample that complainants had not always been given regular updates on the progress of their complaint due to the complexities surrounding the cases.

### Triage team

- For a sample of 10 complaints we confirmed that there was a complete audit trail of the progress, actions undertaken and details of individuals assigned to the case. All of which were documented within the Centurion complaints system.
- Testing of 10 complaints confirmed that the assessment made at source by the Senior Complaints Officer, in conjunction with the PSD investigation managers, was appropriate and had been done in accordance with IPCC guidance.

- We confirmed through review of the Force intranet site that any training and lessons learnt were shared with officers and their supervisors to enable officers to keep in line with the standards of policing.
- Review of the local resolution and triage reports confirmed that these were prepared and reported to the Head of PSD and the Chief Executive and Monitoring Officer for review and information.

We have however identified that within the Triage team there is no scalability or resilience to meet potential increased demand associated with the adoption of a future IPCC model. We identified a need for an immediate review of the structure of the Triage team, along with their responsibilities, in order that they can deal purely with the triage of complaints rather than undertaking the investigation for local resolutions.

## 1.4 Additional information to support our conclusion

Area	Control design*	Compliance with controls*	Agreed actions		
			Low	Medium	High
Complaints	0 (10)	4 (10)	3	1	0
<b>Total</b>			<b>3</b>	<b>1</b>	<b>0</b>

\* Shows the number of controls not adequately designed or not complied with. The number in brackets represents the total number of controls reviewed in this area.

## 2 ACTION PLAN

Categorisation of internal audit findings	
Priority	Definition
Low	There is scope for enhancing control or improving efficiency and quality.
Medium	Timely management attention is necessary. This is an internal control risk management issue that could lead to: Financial losses which could affect the effective function of a department, loss of controls or process being audited or possible reputational damage, negative publicity in local or regional media.
High	Immediate management attention is necessary. This is a serious internal control or risk management issue that may lead to: Substantial losses, violation of corporate strategies, policies or values, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

The table below sets out the actions agreed by management to address the findings:

Ref	Findings summary	Priority	Actions for management	Implementation date	Responsible owner
<b>Area: Complaints</b>					
1	We found that within the Triage team there was currently no scalability and resilience required for potential increased demand.	Medium	<p>The OPCC will ensure:</p> <ul style="list-style-type: none"> <li>The approach to the triage process will be reviewed to ensure that Triage staff primarily undertake triage work and do not undertake investigation or 'mainstream' local resolution work unless they have capacity to do so.</li> <li>Business continuity arrangements will be put in place to ensure that triage is not compromised by planned or unplanned absence.</li> <li>The OPCC will explore the potential of collaborative options with other OPCCs operating similar models.</li> </ul>	31 December 2017	Joanne Hodgkinson, Assistant & Deputy Monitoring Officer

Ref	Findings summary	Priority	Actions for management	Implementation date	Responsible owner
2	In the testing of Chief Officer complaints we found within our sample a recording decision had not been made and communicated to the complainant within the recommended IPCC 10 working day guidance.	Low	The OPCC will take steps, which will include creating workflows to enable a reminder system, to ensure that the time period recommended in the IPCC guidance is met.	Ongoing	Simon Dennis, Chief Executive & Monitoring Officer
3	We found as a result of complexities with the Chief Officer complaints the OPCC was unable to provide regular structured updates to the complainants.	Low	The OPCC will ensure that the workflow functionality of IKEN is used to streamline the process and provide regular updates to complainants.	30 June 2017	Simon Dennis, Chief Executive & Monitoring Officer
4	We found in two instances out of 10 that the complainant had not been contacted by the Triage team in accordance with the internal target of 24 hours.	Low	The Triage team will ensure that all complainants are contacted within 24 hours, complaints are resolved within 48 hours and that where a decision to record a complaint has been made this is done in accordance with the IPCC guidance.	On-going	Andrew Woodcock, Senior Complaints Officer
5	The use of two case management systems for the recording of complaints going forward may not be suitable or efficient when a complaints model has been adopted.	Suggestion	The OPCC will consider the approach to be taken to the appropriate case management system to suit the future operating model.	31 December 2017	Joanne Hodgkinson, Assistant Chief Executive & Deputy Monitoring Officer

### 3 DETAILED FINDINGS

This report has been prepared by exception. Therefore, we have included in this section, only those areas of weakness in control or examples of lapses in control identified from our testing and not the outcome of all internal audit testing undertaken.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
<b>Area: Complaints</b>						
1	A Triage team has been put in place by the PCC to assess all Force complaints and to deal directly with any low level complaints which do not require in-depth investigation.	Yes	No	<p>Through discussions with the Head of PSD and the Detective Inspector for Complaints and Discipline, we identified that currently the Triage team were supported by other members of staff within the PSD team. This was to enable the Triage team to clear a significant backlog of complaints on a weekly basis and also to deal with some investigations suitable for local resolution.</p> <p>We noted that the Triage team dealt with all low level complaints which were resolved at source; however, a significant number of complaints were recorded and classified as being suitable for local resolution. The added pressure of addressing and resolving complaints within 48 hours has a risk that complaints are not dealt with in the most appropriate way.</p> <p>Furthermore, we identified a lack of resilience within the Triage team. This was due to the team only having two members of staff and we found there was no business continuity plan in place for ensuring that cover was available if one or both members of staff were not able to perform their duties.</p> <p>If the OPCC were to take whole ownership of all complaints made by the public the PSD team</p>	Medium	<p>The OPCC will ensure:</p> <ul style="list-style-type: none"> <li>The approach to the triage process will be reviewed to ensure that Triage staff primarily undertake triage work and do not undertake investigation or 'mainstream' local resolution work unless they have capacity to do so.</li> <li>Business continuity arrangements will be put in place to ensure that triage is not compromised by planned or unplanned absence. The OPCC will explore the potential of collaborative options with other OPCCs operating similar models.</li> </ul>



Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
				<p>would not be able to support the Triage team which would result in the PCC requiring the following:</p> <ul style="list-style-type: none"> <li>• The need for more resources to take details of complainants from the 101 system (where currently 90% of complaints are received from) and inputting to the Centurion system.</li> <li>• The need for a team of experienced staff who can assess complaints.</li> <li>• The need for a team to deal with low level / customer service complaints that can be dealt with at source.</li> <li>• The need for a team of experienced investigators to deal with more complex complaints which could be time consuming.</li> </ul> <p>There is therefore currently a risk that complaints are not dealt with in a timely manner and a further risk of the inability to meet any increased demand following the reform of the complaints system.</p>		
2	<p>Complaints against the Chief Officer are usually complex and are received via several sources including:</p> <ul style="list-style-type: none"> <li>• Directly to the OPCC via email</li> <li>• Via PSD</li> <li>• Via the IPCC as a referral</li> </ul>	Yes	No	<p>Testing of a sample of Chief Officer complaints found the following:</p> <ul style="list-style-type: none"> <li>• There was evidence of an in-depth understanding in to the complainant claims / allegations by the Chief Executive and Monitoring Officer.</li> <li>• In all cases handling of cases had transitioned to the IKEN case management system which is used to for correspondence and any other documentation in respect of the specific case.</li> </ul>	Low	The OPCC will take steps, which will include creating workflows to enable a reminder system, to ensure that the time period recommended in the IPCC guidance is met.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
	<ul style="list-style-type: none"> <li>Via the Force</li> </ul> <p>Where a complaint qualifies in line with IPCC guidance then a Decision to Record (DTR) is made by the Chief Executive and Monitoring Officer. A bespoke letter is sent to the complainant and this is held on IKEN.</p> <p>The Chief Executive and Monitoring Officer can also assess the complaint and therefore decide that the complaint does not fit within the IPCC guidance. A bespoke letter is sent to the complainant detailing reasons why the complaint has not been formally recorded with information given about their right to appeal within 28 days.</p> <p>When the Chief Executive and Monitoring Officer make a recording decision / non-recording decision this is communicated with the complaint within 10 working days.</p>			<p>In one case we sampled, the recording decision had taken longer than 10 working days. We found that this had been due to the complexity of the case and the amount of material that had to be studied before making the decision. Although this had not been compliant with the IPCC guidance we noted that the reason for not meeting the deadline was communicated with the complainant and clearly documented within the IKEN system.</p> <p>Furthermore, the IPCC had upheld the way that the OPCC had determined the complaint overall. There is however scope for improvement in ensuring that complainants are contacted within the recommended 10 working day IPCC guidance.</p> <p>In cases which are clearly often complex and require the personal attention of the Chief Executive and Monitoring Officer, there is a risk that the recommended period for decisions about whether to record a complaint cannot be met.</p>		
3	Once the Chief Executive and Monitoring Officer has made the decision to record a complaint he must then take an active role in addressing the case. The Chief Executive and Monitoring Officer ensures that the case is investigated / examined. The audit	Yes	No	The samples we examined revealed a similar risk in respect of regular updates to complainants. It does not always appear to be possible due to the complexity of the cases and the requirement for personal attention to the casework by the Chief Executive and Monitoring Officer for complainants to be provided with regular structured update.	Low	The OPCC will ensure that the 'workflow' functionality of IKEN is used to streamline the process and provide regular updates to complainants.

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
	<p>trail and updates of the case is documented within IKEN.</p> <p>Complainants are updated and communicated with in a timely manner and in accordance the IPCC guidance.</p> <p>Complainants are updated every 28 days and contacted throughout the investigation stage.</p> <p>The Chief Executive and Monitoring Officer may also choose to refer the case to the IPCC where they can decide the following:</p> <ul style="list-style-type: none"> <li>• If the case needs to be investigated.</li> <li>• Refer it back to CEO - where the CEO can find/assign an investigator to look at the case.</li> <li>• Manage and supervise the investigation.</li> <li>• Investigate independently.</li> </ul>			There is a risk that complainants are left dissatisfied with the outcome of an investigation due to the lack of regular updates.		
4	<p><b>Triage team</b></p> <p>The team deal with all Force / operational complaints which are received from various sources which include:</p>	Yes	No	<p>Testing of 10 complaints received via letter into PSD, PSD email, control room and IPCC referral found the following:</p> <ul style="list-style-type: none"> <li>• In eight cases the complainant was contacted within 24 hours.</li> </ul>	Low	The Triage team will ensure that all complainants are contacted within 24 hours and complaints are resolved within 48 hours and that were a decision to record a complaint has been made, this is done in accordance with the IPCC guidance

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
	<ul style="list-style-type: none"> <li>Letters</li> <li>Emails</li> <li>101 system (which accounts for approx. 90% of complaints)</li> <li>In person</li> <li>Solicitors</li> <li>Guardians</li> <li>Social media</li> <li>IPCC referrals</li> </ul> <p>When members of the public ring the control room staff take brief details of the complainant and input the details on an AD4 electronic form. The AD4 form is sent as an email to the mailbox. The PSD pull off emails from the PSD mailbox when a file is generated and added to the Centurion system. The complaint then sits on the Triage inbox awaiting initial assessment by the Triage team.</p> <p>The complaints are then assessed / triaged by the team. The team has an internal target of communicating with complainants within 24 hours, and resolving all complaints suitable for triaged within 48 hours.</p>			<ul style="list-style-type: none"> <li>In two cases the complainant had not been contacted within 24 hours. This was not in line with the Triage Team's set internal targets.</li> </ul> <p>We also noted that in one of those instances the complainant had not been notified of the decision to record until 16 working days after receipt of the complaint. This was not in line with the IPCC 10 working day guidance.</p> <p>There is a risk that complainants are not contacted within the 24 / 48 hours resulting in dissatisfied members of the public and the Triage team not being able to meet its internal targets.</p>		

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Actions for management
5	<p>The IKEN case management system keeps a record of all complaints made against the Chief Officer and OPCC staff.</p> <p>The IKEN system is used for recording when the complaint was received, progress and any documentation scanned into the system.</p>	-	-	<p>We identified through our testing that on the whole there were systems in place to record complaints against the Chief Officer and OPCC staff. We also noted that the progress of the complaints was documented within the IKEN system. We also identified that cases reported against the Chief Officer had restricted access on IKEN and the evidence was accessible only to the Chief Executive and Monitoring Officer.</p> <p>The PCC Triage team currently use the Centurion system for documenting complaints and for the audit trail. We found that both systems had their merits which included the ability of creating workflows and reminders for contacting complainants, restricted access for users and the ability to keep records embedded within the system. However, the Triage team were more familiar with the Centurion system and less so with the IKEN system used within the OPCC.</p> <p>With the impending legislation change it would be ideal / desirable that the OPCC use a single case management system for recording complaints and ensuring that all historic complaints are kept for trend analysis.</p> <p>There is a risk of not having an effective system for handling complaints could lead to a decreased reputation of the organisation and weakened public confidence in the administrative process.</p>	Suggestion	The OPCC to consider the approach to be taken to the appropriate case management system to suit future operating model.

# APPENDIX A: SCOPE

## Scope of the review

To evaluate the adequacy of risk management and control within the system and the extent to which controls have been applied, with a view to providing an opinion. The scope was planned to provide assurance on the controls and mitigations in place relating to the following areas:

### Objective of the area under review

The Office of the Police and Crime Commissioner and Triage team respond to complaints in a timely manner and achieve high standards in the handling of complaints.

We will consider the scalability of the Triage team going forward to reflect the increased responsibility of the Police and Crime Commissioner (PCC) for complaints following the issue of improving police integrity: reforming the police complaints and disciplinary systems consultation document by the Home Office.

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The following areas were considered as part of the review:

### Chief Officer or Office of the Police and Crime Commissioner staff

- Systems are in place to record complaints against the Chief Officer or Office of the Police and Crime Commissioner staff, the progress of a complaint and a review of the accessibility of that data.
- An audit trail for complaints is formally recorded, and / or includes how it has been treated.
- Handling of complaints complies with IPCC guidance.
- The appeal process has been appropriately followed.

### Triage Team

- Systems are in place to record communication with complainant, the progress of a complaint and a review of the accessibility of that data.
- An audit trail for complaints is formally recorded, and / or includes how it has been treated.
- Performance monitoring and trends analysis of complaints is reported and appropriate lessons learned identified.
- We have considered the scalability of the Triage team to meet the potential increase in demand / responsibility following the reform of the police complaints system and the model adopted by the Police and Crime Commissioner. The review has focused on the systems and controls in place for adequacy.
- We have selected a sample of complaints and completed substantive testing to ensure these have been handled in line with the guidance.

## **Limitations to the scope of the audit assignment:**

- We have not reviewed complaints made against the PCC.
- We have not supported or provided an opinion on the complaint model adopted by the PCC going forward.
- We have not confirmed the Triage team will be able to meet future demands going forward.
- We have not provided assurance that complaint records are complete.
- We have not confirmed as part of this review that lessons learnt have been fully implemented, only that they have been identified and escalated for consideration.
- We have not commented on individual cases or the outcome of any complaint.
- Our work does not provide absolute assurance that material errors, loss or fraud do not exist.

## APPENDIX B: FURTHER INFORMATION

### **Persons interviewed during the audit:**

- Simon Dennis, Chief Executive and Monitoring Officer
- Beverly Gill, Head of PSD
- Detective Inspector Jonathan Stansmore, Complaints and Discipline
- Detective Superintendent Mark Earl, PSD Investigations Manager
- Andrew Woodcock, Senior Complaint Advisor
- Emily Thornton, Complaints Advisor
- Jayne Harpe, PA and Support Officer OPCC

### **Documentation reviewed during the audit:**

- Local resolution report, May 2015- May 2016
- Triage report, September 2015- September 2016
- Review of the lessons learnt bulletins
- IPCC guidance, May 2015



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