



THE POLICE AND CRIME COMMISSIONER FOR CLEVELAND AND THE CHIEF CONSTABLE OF CLEVELAND

Complaints

Internal Audit Report 5.21/22

Final

24 September 2021

This report is solely for the use of the persons to whom it is addressed.

To the fullest extent permitted by law, RSM Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party.

1. EXECUTIVE SUMMARY

With the use of secure portals for the transfer of information, and through electronic communication means, remote working has meant that we have been able to complete our audit / assignment and provide you with the assurances you require. It is these exceptional circumstances which mean that 100 per cent of our review has been conducted remotely. Based on the information provided by you, we have been able to sample test the control framework.

Why we completed this audit

The Police (Complaints and Misconduct) Regulations 2020 (the Regulations) came into force on 1 February 2020. This new legislation was introduced in order to simplify the complaints system, making it easier to navigate, and puts a greater emphasis on handling complaints in a reasonable and proportionate manner, along with an enhanced role for police and crime commissioners to strengthen independence.

There has been a recent change of Commissioner as a result of the local elections in May 2021, so the roles and responsibilities of the Office of Police and Crime Commissioner (OPCC) and Cleveland Police (the Force) are in the process of being reviewed.

Currently complaints are dealt with within the Force's Directorate of Standards and Ethics (DSE), however the OPCC fund two full time complaint handlers who undertake the triage process and deal with low level service recovery complaints.

Triage cases are classed as either service recovery cases or a formally recorded case. Service recovery cases are handled by contacting the complainant by telephone to explain the issue whereas formal cases are investigated.

All complaints that come through the DSE are logged on the Centurion system and the system is updated throughout the process. If there are any complaints in relation to the Chief Constable or OPCC staff, then these are handled solely by the OPCC and logged on the Iken system.

Conclusion

Our review found that while the Force and OPCC follow the Independent Office for Police Conduct (IOPC) Statutory Guidance for managing complaints, there is no overarching policy which details the internal processes as well as the responsibilities of the individual organisations. Both organisations have, however, published on their respective websites how members of the public can make a complaint and how their complaint will be managed, and there is an internal intranet site which walks staff through the District Complaints Process and where relevant documentation can be found such as template letters and the Policy Log, on which the entire complaints handling process is recorded.

We confirmed that while there is sufficient reporting on the number, types, and causes of complaints, there is currently no analysis undertaken of themes and/or trends emerging from the investigation and outcomes of complaints and any lessons learned.

We tested samples of 10 closed and 10 live complaints, as well as of 10 expressions of dissatisfaction resolved through service recovery, the result of which was that the organisations are mostly meeting their requirements under schedule three of the regulations, with the following exceptions:

- We noted two instances where, when reviewing the information recorded on Centurion, it appears that a complainant who had requested a review of the outcome of their complaint by an independent adjudicator had not been contacted within the required 28 days, either to acknowledge their request for a review or of the progress of their review.

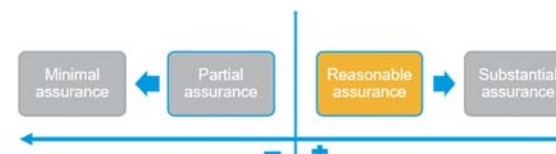
- Review, however, of a spreadsheet maintained by the OPCC Scrutiny Manager confirmed that in the latter case, there had been an email sent to the complainant within the 28 day timeframe which had not been recorded on Centurion, while it was noted in the former case that the request for review was received into a different department at the Force and not forwarded to the OPCC until 49 days after receipt, upon which time it was acknowledged the same day and the review undertaken and an outcome issued in a timely manner (15 days); and
- We noted an example where a complaint was not assigned to an Investigating Officer until 83 days from it being recorded under schedule three during which time the only contact with the complainant from issuing of the acknowledgment letter was 69 days after the letter was sent.

The detailed results of our testing can be found in section two.

Internal audit opinion:

Taking account of the issues identified the Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland can take **reasonable assurance** that the controls upon which the organisations relies to manage this area are suitably designed, consistently applied and effective.

However, we have identified issues that need to be addressed in order to ensure that the control framework is effective in managing the identified area.



Key findings

We identified the following exceptions with the Force's and OPCC's established control framework resulting in two medium actions being agreed:



In our testing of live complaints, we noted an example where a complaint was not assigned to an Investigating Officer until 83 days from it being recorded under schedule three during which time the only contact with the complainant from issuing of the acknowledgment letter was 69 days after the letter was sent. There is a risk the organisations are not compliant with schedule of three of the regulations and its statutory responsibilities. **(Medium)**



Currently, there is no analysis undertaken of themes and/or trends emerging from the investigation and outcomes of complaints and any lessons learned. There is a risk if learning from complaints is not being shared among the wider organisation, there is an increased potential for a repeat of the same events which resulted in the complaint being raised. **(Medium)**

We have agreed a further seven low management actions which can be found in section two of this report.

Our audit identified that the following controls are suitably designed, consistently applied and are operating effectively:



Both organisations have published on their respective websites how members of the public can make a complaint and how their complaint will be managed, and there is an internal intranet site which walks staff through the District Complaints Process and where relevant documentation can be found such as template letters and the Policy Log, on which the entire complaints handling process is recorded.



Review of the delegate slides from an external Sancus training course, 'Investigations in Professional Standards', confirmed it is a five day course which thoroughly details the process and the requirements within the IOPC guidance. It also refers to other guidance such as the Home Office Guidance for Officer Misconduct and Police Regulations. We were able to confirm with Sancus for a sample of 10 staff that they had completed the complaints handling training.



A review of a sample of 10 expressions of dissatisfaction resolved through service recovery confirmed that this was appropriate in all instances.



A review of a sample of 10 correspondences received directly into the OPCC (taken from the Iken system), confirmed that they had either been appropriately escalated for recording on Centurion (three cases) or had been dealt with locally (i.e did not concern the Force) (six cases). In the remaining case, the correspondence related to a pre-existing complaint already recorded on Centurion.



We confirmed with the DSE Officer Manager that there is a bi-monthly meeting of the Tactical Coordination Group (TCG). A review of the presentation which goes to each meeting confirmed the sufficient information is provided for discussion regarding the number, types, and causes of complaints.

2. DETAILED FINDINGS AND ACTIONS

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 testing undertaken.

Area: Complaints			
Control	Partially missing control	Assessment:	
	The organisations adhere to the IOPC Statutory Guidance in place.		
	There is an internal policy which details the operational process to the dealing with expressions of dissatisfaction / complaints. However, there is no policy in place in relation to complaints which covers both the Force and OPCC and their respective involvement in the process.	Design	×
	Details of how the OPCC and Force deal with complaints is detailed on the respective website.	Compliance	-
Findings / Implications	<p>The Force and OPCC follow the IOPC guidelines for dealing with complaints and does not feel there is a need for an additional policy as it is a requirement that they follow the IOPC which are very detailed. Although there is the IOPC guidance in place there is nothing to outline what various departments within the Force and OPCC are responsible for. For example at other forces we have seen a document which outlines a brief overview of who can complain and how and then the role of everyone across the Force, the role of the department that owns the complaints process, so the DSE in this instance, the role of the OPCC, the role of the IOPC and what the process is if you are the person the complaint is made against.</p> <p>Review of the Force website established that there is information published detailing what a complaint is, how to make one, how they are investigated and information for the public to inform them what to do if they are not happy with the outcome of the complaint, but this is not detailed in a specific internal policy.</p> <p>It was noted in discussion with the DSE Office Manager that the roles and responsibilities of staff in relation to complaints handling are outlined in the relevant role profiles and that these are documented in the DSE Performance Framework, a copy of which was provided.</p> <p>The OPCC have a process document in place 'process for dealing with PCC correspondence regarding complaints and casework'. This document was due for review in October 2019 and discussions with the Senior Complaints Advisor established that since the new Commissioner has been appointed there are plans to change the process and this document is being updated in line with this. Also an email from the Scrutiny Manager to complaints service team on 26 May 2021 highlighting key things to consider when determining whether to log formally on Centurion a matter received as an expression of dissatisfaction (and potential complaint).</p> <p>Review of the OPCC website established that their complaints procedure is available to all on the website. The procedure was updated from February 2020 when the OPCC took responsibility for the independent review of new complaints about the Force.</p>		

Area: Complaints

If there is not a central policy in place then the roles and responsibilities of staff and departments within the Force/OPCC structure in relation to complaints may not be clearly outlined.

Management Action 1	The Force and OPCC will develop an internal policy with flow diagrams to detail the processes to follow when receiving, recording and processing expressions of dissatisfaction and complaints including the respective roles and responsibilities of both organisations.	Responsible Owner: DSE Office Manager and Senior Complaints Advisor (OPCC)	Date: 31 December 2021	Priority: Low
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Area: Complaints

Control	All staff that are involved with the complaints process have received external training from Sancus in managing complaints in line with relevant regulations.	Assessment:	
		Design	✓
		Compliance	×
Findings / Implications	<p>The DSE Office Manager confirmed that all staff dealing with complaints have attended external-ran training (Sancus) in complaints handling in line with applicable regulations.</p> <p>Through review of the delegate slides we confirmed that the Sancus training is a five day course which thoroughly details the process and the requirements within the IOPC guidance. It also refers to other guidance such as the Home Office Guidance for Officer Misconduct and Police Regulations.</p> <p>We were able to confirm to the internal employee training records (held on Oracle) that the Senior Complaints Handler (OPCC) had attended the course; however, internal records for the DSE Office Manager did not confirm attendance at the Sancus course. Furthermore it was noted in our conversations with management that external courses are not recorded on internal employee training records as standard.</p> <p>We were able to confirm with Sancus for a sample of 10 staff that they had completed the complaints handling training; however, these records should be retained internally by the Force and OPCC respectively in the event that the training provider goes out of business and these records are lost.</p> <p>The Force also has CPD days that are delivered by Sancus to ensure that all staff are kept up to date with any changes and they act as refresher courses.</p>		

Area: Complaints

Management Action 2	Attendance at training courses in relation to complaints handling will be recorded on internal employee training records.	Responsible Owner: DSE Office Manager and Senior Complaints Advisor (OPCC)	Date: 31 December 2021	Priority: Low
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Area: Complaints

Control	All expressions of dissatisfaction (including potential formal complaints) are recorded on Centurion.	Assessment:	
	Expressions of dissatisfaction are allocated to the triage - work pending work group, managed by the OPCC complaints service team, who contact the complainant and make initial investigations to determine whether an expression of dissatisfaction can be resolved through service recovery or is to be logged formally under schedule three.	Design	✓
		Compliance	×
Findings / Implications	<p>We reviewed a sample of 10 expressions of dissatisfaction which were resolved through the service recovery process. Our testing noted all ten had been correctly resolved through service recovery (i.e. the outcome is ‘proportionate’ to the matter raised by the member of the public). Our testing identified the following:</p> <ul style="list-style-type: none">• In seven instances, it was recorded that the complainant was satisfied with the outcome of the initial investigation into their matter.• In one instance the matter had been referred to another department within the Force to be pursued as a criminal matter.• In the remaining two instances, it could not be determined whether the complainant was satisfied with the outcome of the investigation into their matter and the matters were finalised on Centurion the same day as and four days respectively after contact with the complainant. This was discussed with the DSE Office Manager who noted that as there was no further correspondence with either individual it is taken that the matters were acceptably resolved through service recovery (the outcome was ‘proportionate’ to the matter). Review of the two related matters and the respective outcomes would suggest this inference is correct. <p>Furthermore, in discussion with the Senior Complaints Advisor (OPCC) it was noted that it is not a requirement for closure of an expression of dissatisfaction through service recovery to have first obtained consent to do so from the complainant. This could result in a higher number of expressions of dissatisfaction being escalated under schedule three if the Force is not confirming with the complainant their consent to resolve their matter through service recovery. Review of the service recovery letter also noted that it does not explicitly state that the complainant has the option to reject this outcome and can record a formal complaint (escalate under schedule three) if they are unhappy with the outcome at this stage.</p>		

Area: Complaints

Of the ten cases, initial contact with the complainant was made on average 8.1 working days after receipt of the correspondence (ranging from 0 to 37 working days; four were within the five working days as specified on the Policy Log). In the latter case, it was noted in Centurion that four attempts to contact the individual had been made and a no contact letter sent, as well as the date on which the individual made contact again with the Force. There is a risk should complainants not be contacted in a timely manner that this causes further grievance, increasing the likelihood of a complaint being formally raised under schedule 3.

Management Action 3	We will update the service recovery letter template to make it clear to complainants their option to reject service recovery and for their matter to be formally recorded under schedule three.	Responsible Owner: DSE Office Manager and Senior Complaints Advisor (OPCC)	Date: 30 November 2021	Priority: Low
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Area: Complaints

Control	Schedule three complaints are managed by the DSE.	Assessment:	
	For complaints recorded under schedule three, the DSE would issue an acknowledgement letter and take over responsibility for investigation and resolution and must either resolve the complaint within 28 calendar days of sending the acknowledgement letter or make contact with the complainant every 28 days while a complaint remains unresolved.	Design	✓
		Compliance	×

Findings / Implications	<p>We reviewed a sample of 10 live complaints at as 6 August 2021. Our testing noted:</p> <ul style="list-style-type: none"> In only two of 10 instances was the complainant contacted within five working days after receipt of the correspondence (as specified on the Policy Log). The average across the 10 complaints was 7.7 working days (ranging from 1 to 11 working days). Of the 10 instances, five had been resolved through service recovery but were yet to be marked as finalised on Centurion and as such were still showing as live cases (ranging from 08 April 2021 to 03 August 2021). In relation to the case resolved in April, which has been resolved but not finalised for 119 days, it was discovered that the case had been allocated to the 'finalise cases work group' on 16 July 2021 (n.b. the service recovery letter was sent to the complainant on 08 April 2021). However, when the case worker created the task to close the case through service recovery they had entered a completed date – this results in the task not appearing in the respective work group queue as 'to be actioned'. <p>There is a risk that the number of live cases is over-inflated due to cases not being marked as finalised in a timely manner.</p> <ul style="list-style-type: none"> In one of the five cases resolved but yet to be marked as finalised, review of the case details confirmed that while a service recovery letter had been issued, the complainant had not confirmed their approval of the outcome, and no contact had been made with the complainant between the initial contact and issuing of the service recovery letter, which was 60 days. Also, the case had been marked as 'to be finalised' on the same date as the service recovery letter was issued.
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Area: Complaints

Although under service recovery, there is no requirement to update the complainant at set intervals (such as every 28 days under schedule three) not doing so could result in increased levels of dissatisfaction among complainants and the potential for an increased level of complaints being escalated under schedule three when these could have been resolved through service recovery.

- Two instances had been escalated as a formal complaint under schedule three. In one instance, we confirmed that contact was made with the complainant at least once every 28 days (the complaint was formally recorded under schedule three on 22 April 2021) and investigation by the DSE was ongoing.

In the other instance, the complaint had been resolved by the DSE on 3 August 2021. The final letter was sent the same day, and the Force is waiting on the deadline for requesting a review by the independent adjudicator to pass (31 August 2021) before being marked as finalised. In this instance, the complaint was formally recorded under schedule three on 6 April 2021 and it was not allocated to an Investigating Officer until 28 June 2021 (83 days), during which time the only correspondence with the complainant was made on 14 June 2021, 69 days from the acknowledgement letter (formally recording of the complaint) being sent.

Once the case was allocated, contact was made with the complainant at least once every 28 days until resolution of the case (i.e the final letter was sent). Under schedule three regulations, contact must be made with complainants at least once every 28 days, even if the case is still to be allocated to an Investigating Officer.

Of the remaining three instances:

- The complainant was still to be contacted (six working days from receipt of their correspondence);
- The DSE Case Managers are to confirm with the complainant their approval to close the case (21 days from initial contact with the complainant); and
- The Senior Complaints Advisor is to confirm with the complainant their approval to close the case (two days from initial contact with the complainant). The DSE Office Manager noted when collating evidence for our testing that no contact had been made with this individual, 15 working days from receipt of their correspondence, so the DSE Case Managers had added a task to the top of the triage – work pending work group queue to remind the OPCC complaints service team to make contact).

There is a risk should complainants not be contacted in a timely manner that this causes further grievance, increasing the likelihood of a complaint being formally raised under schedule three.

We reviewed a sample of 10 closed complaints as at 6 August 2021. Our testing noted:

- In only three of 10 instances was the complainant contacted within five working days after receipt of the correspondence (as specified on the Policy Log). The average across the 10 complaints was 5.9 working days (ranging from two to nine working days). Discussions with the DSE Office Manager noted that although this is specified on the Policy Log, it is not currently a requirement nor performance against this metric monitored.

Area: Complaints

- Of the ten instances, eight were escalated as formal complaints under schedule three. Of the remaining two, one was referred to the Force's Counter Corruption Unit (CCU) and as such they assume responsibility for the investigation, including maintaining contact with the complainant, while one was resolved by a Sergeant as it related to a matter of conduct regarding a fellow Sergeant, rather than a complaint from a member of the public. As a result, a final letter was issued in place of the acknowledgement letter. Both these complaints were resolved within the required 28 days.
- Of the eight complaints managed by the DSE case workers, the time taken for an expression of dissatisfaction to be escalated as a formal complaint under schedule three averaged 7.9 calendar days (range 0-17 days), while the average days between a formal complaint being recorded under schedule three and the acknowledgement letter being sent to the complainant was eight calendar days (range 0-13 days).
- Of these eight complaints, three were resolved within 28 days of the acknowledgement letter being sent, while in one other instance, the initial expression of dissatisfaction, received 23 November 2020, had been held 'sub judice' (i.e. relating to a current or pending court case) and as a result no investigation into the complaint could be undertaken until the respective court case had been concluded. An 'end of sub judice' letter was sent to the complainant on 01 February 2021 requesting that should they wish to proceed with their complaint they had 28 days in which to notify the DSE. As no response was received, a final letter was issued 28 days latter (01 March 2021).
- Of the remaining four complaints, we confirmed in three instances that the complainant was contacted at least once every 28 days. In the remaining instance, the complaint was resolved 35 days after the acknowledgement letter was sent, during which no contact was made with the complainant. Also the case worker had incorrectly included a completed date in the task for ratification of the final letter by the Detective Sergeant and as such the respective task did not appear in the Detective Sergeant's work group queue on Centurion. A new task was initiated on 19 January 2021, and the final letter was eventually sent to the complainant on 20 January 2021, 71 days after the acknowledgement letter was sent.

Management Action 4	We will undertake a deep-dive review of all live cases to ensure that they are ongoing investigation or can be marked as finalised.	Responsible Owner: DSE Office Manager	Date: 30 November 2021	Priority: Low
Management Action 5	We will remind staff to ensure they clearly document any contact with the complainant during the initial investigation stage including consent from the complainant to either resolve through service recovery or escalate under schedule three.	Responsible Owner: DSE Office Manager and Senior Complaints Advisor (OPCC)	Date: 31 December 2021	Priority: Low
Management Action 6	We will remind staff to ensure that complainants are contacted every 28 days of open schedule three complaints, even if not allocated to an Investigating Officer.	Responsible Owner: DSE Office Manager	Date: 30 November 2021	Priority: Medium

Area: Complaints

Control	When a schedule three complaint has been resolved, complainants have 28 days in which to request review by an independent adjudicator.	Assessment:
	Requests for review should be acknowledged in a timely manner and resolved within 28 days; if this is not possible, the complainant should be contacted at least once every 28 days informing them of the progress of the review.	<div data-bbox="1646 391 1980 454">Design ✓</div> <div data-bbox="1646 454 1980 534">Compliance ×</div>
Findings / Implications	<p data-bbox="331 534 1980 614">In three of the ten complaints tested, a request for review by an independent adjudicator of the original schedule 3 outcome was made by the complainant within the 28 day deadline from issuing of the final letter.</p> <p data-bbox="331 614 1980 837">Review of the information recorded on Centurion for each of the three instances noted that while the DSE were providing the OPCC complaints service team with the relevant information in a timely manner, upon acknowledgement of the request for review to the complainant by the OPCC, there had been a delay in the OPCC requesting the DSE forward the information to the independent adjudicator (n.b. this primarily affects the two most recent instances, during which time the independent review had been outsourced to Sancus (from February 2021), having previously been in-house at the OPCC). Prior to the outsourcing of the reviews, there had been a small backlog of requests needing review. The delays had been 62 days (CO/01694/20 and 25 days (CO/01638/20) respectively.</p> <ul data-bbox="331 837 1980 1077" style="list-style-type: none"> <li data-bbox="331 837 1980 917">• In the former case, from receipt of request for review to outcome was 79 days in total. We confirmed the complainant was contacted a number of times informing them of the progress of their review (each time was within 28 days of the last contact). <li data-bbox="331 917 1980 1077">• In the latter case, the outcome letter was issued eight days after the information was forwarded to the independent adjudicator at Sancus (33 days in total from receipt of request for review to outcome). During the 33 days, per the information recorded on Centurion no contact was made with the complainant.. We confirmed, however, with the OPCC Scrutiny Manager that an email was sent on the 22 April 2021 (28 days from acknowledgment of the request) updating the complainant on the progress of their review. <p data-bbox="331 1077 1980 1125">In these two instances, acknowledgment of the request for review to the complainant was made by the OPCC the same day as receipt.</p> <p data-bbox="331 1125 1980 1370">In the remaining instance (CO/01273/20), when independent review was in-house, acknowledgement of the request for review was not sent to the complainant until 49 days after the complainant had sent their request (21 September 2020). The delay in acknowledgement, as confirmed in discussion with the OPCC Scrutiny Manager and review of emails, was caused by the delay in the request being received by the OPCC as the request came in via the Force's Professional Standards department and related to a complaint involving potential misconduct of an officer; however, the request for review related to how the related complaint had been handled. Once the request was forwarded to the OPCC (09 November 2020), acknowledgement was sent to the complainant the same day and the review was undertaken in a timely manner and the outcome issued (24 November 2020) – 15 days.</p>	

Area: Complaints

Discussion was had with the OPCC Scrutiny Manager who noted that she maintains a separate spreadsheet to track the progress of the IA reviews from request to outcome and is dependent on the DSE to update Centurion with the progress of any reviews. There is a risk if Centurion does not accurately reflect contact with the complainant during the IA review that it appears the Force and OPCC are not meeting their requirements.

Management Action 7	We will remind staff to keep Centurion up-to-date with progress of Independent Adjudicator reviews (i.e. meeting/exceeding 28 day deadlines).	Responsible Owner: DSE Office Manager and Senior Complaints Advisor (OPCC)	Date: 30 November 2021	Priority: Low
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Area: Complaints

Control	<u>Partially missing control</u>	Assessment:		
	Lessons learned are recorded on Centurion against an individual complaint.			
	A report of all lessons learned recorded within a defined timeframe can be pulled from the Centurion system. However, the lessons learned reports are not communicated / circulated in the wider organisations to identify potential themes / trends.	Design		×
		Compliance		-
Findings / Implications	<p>We confirmed during our walkthrough of the Centurion system that there is a dedicated Lessons Learnt tab within each complaint file in which the investigating officer can document the learning details, outcome, and action taken.</p> <p>We confirmed with the DSE Office Manager that currently officers are not required to attach evidence confirming completion of action(s) taken. The DSE Office Manager noted that there is the capability to pull off a report of all lessons learned recorded in Centurion over a defined timeframe and that while currently this is done a monthly basis, nothing is done with this report (i.e. review to identify themes and trends to share across the wider organisation). It was noted in our discussions that a Prevent Officer is commencing employment at the Force from the end of August and will be responsible for disseminating lessons learned, looking at themes/trends etc. We confirmed this to the role profile for this position.</p> <p>There is a risk if officers are not actually taking the actions recorded within Centurion that learning from complaints is not being shared among the wider organisation, potentially resulting in a repeat of the same events which resulted in the complaint being raised.</p>			
Management Action 8	We will request that investigating officers attach within the documents tab on Centurion evidence confirming completion of actions relating to lessons learned resulting from the investigation of a complaint.	Responsible Owner: DSE Office Manager	Date: 31 December 2021	Priority: Low

Area: Complaints

Management Action 9	The Prevent Officer will produce monthly reports identifying trends and themes emerging from the investigation and outcomes of complaints and any lessons learned. These reports will be shared among the wider Force, as well as presented at the bi-monthly Tactical Coordination Group meetings.	Responsible Owner: Prevent Officer	Date: 31 December 2021	Priority: Medium
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APPENDIX A: CATEGORISATION OF FINDINGS

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 following table highlights the number and categories of management actions made as a result of this audit.

Area	Control design not effective*	Non Compliance with controls*	Agreed management actions**		
			Low	Medium	High
Complaints	2 (10)	4 (10)	7	2	0
Total			7	2	0

*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.

**Multiple actions may have been raised against one control.

APPENDIX B: SCOPE

Objective relevant to the scope of the review

The internal audit assignment has been scoped to provide assurance on how the Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland manage the following area.

Objective of the area under review

The organisations have an appropriate framework in place for receiving, recording and resolving expressions of dissatisfaction from the public.

Scope of the review

The Police (Complaints and Misconduct) Regulations 2020 (the Regulations) came into force on 1 February 2020. This new legislation was introduced in order to simplify the complaints system, making it easier to navigate, and puts a greater emphasis on handling complaints in a reasonable and proportionate manner, along with an enhanced role for police and crime commissioners to strengthen independence. Our review will consider the control framework in place for receiving, recording and resolving expressions of dissatisfaction from the public.

Our review will focus on the following areas:

- Whether the organisations have a policy in place for the receiving, recording and resolving expressions of dissatisfaction from the public which is in line with the Regulations and available to all relevant staff.
- The policy is supported by written procedures and processes which are known and understood by all relevant staff.
- All relevant staff have had appropriate training in complaints handling to ensure that they can perform their duties.
- The complaints process is well communicated within and outside of the organisations so that:
 - Members of the public know how to lodge a complaint.
 - Other functions within the organisations know how to recognise a potential complaint and pass it to the correct team.
- Complaints are logged and tracked on an electronic register which enables users to identify and report upon the status of all cases.
- We will select a sample of completed cases to determine whether the cases have been dealt with:

- To the satisfaction of the complainant.
- In accordance with the requirements of the policy.
- In accordance with the requirements of the Regulations.
- Any exceptions will be reviewed to determine whether the causes have been identified and appropriately reported / dealt with.
- We will select a sample of currently open cases to determine whether:
 - The case is within the timescales set in the policy.
 - There is a valid reason for the case being open.
 - The complainant has been communicated with in accordance with the policy.
 - Any exceptions will be reviewed to determine whether the causes have been identified and appropriately reported / dealt with.
- We will select a sample of “service recovery” cases to determine whether they have been correctly categorised or whether they should have been escalated to a formally recorded complaint case.
- There is sufficient reporting on complaints and the causes of complaints to ensure that the organisations place an appropriate level of priority on complaints.
- Themes or trends are identified from regular analysis of complaint cases to inform a “lessons learned” approach to drive future improvements in service.

The following limitations apply to the scope of our work:

- The scope of this audit is limited to those areas examined and reported upon in the key risks and control objectives in the context of the objective set out for this review.
- Any testing undertaken as part of this audit will be compliance based and sample testing only.
- We will not comment on the adequacy of responses to complaints as part of this review.
- We will not consider whether or what actions have been taken as part of any lessons learned exercises following conclusion of a complaint or responses from the independent adjudicator.
- We will not consider the security or adequacy of IT systems or applications used to process complaints during this review.
- Our work does not provide an absolute assurance that material errors, loss or fraud do not exist.

Debrief held	6 August 2021
Draft report issued	17 August 2021
Revised Draft report issued	18 August 2021
Responses received	24 September 2021
Final report issued	24 September 2021

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 Chief Constable's Chief Finance Officer
 Superintendent (Cleveland Police)
 DSE Officer Manager (Cleveland Police)
 Senior Complaints Advisor (OPCC)

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The matters raised in this report are only those which came to our attention during the course of our review and are not necessarily a comprehensive statement of all the weaknesses that exist or all improvements that might be made. Actions for improvements should be assessed by you for their full impact. This report, or our work, should not be taken as a substitute for management's responsibilities for the application of sound commercial practices. We emphasise that the responsibility for a sound system of internal controls rests with management and our work should not be relied upon to identify all strengths and weaknesses that may exist. Neither should our work be relied upon to identify all circumstances of fraud and irregularity should there be any.

Our report is prepared solely for the confidential use of **The Police and Crime Commissioner for Cleveland and the Chief Constable of Cleveland**, and solely for the purposes set out herein. This report should not therefore be regarded as suitable to be used or relied on by any other party wishing to acquire any rights from RSM Risk Assurance Services LLP for any purpose or in any context. Any third party which obtains access to this report or a copy and chooses to rely on it (or any part of it) will do so at its own risk. To the fullest extent permitted by law, RSM Risk Assurance Services LLP will accept no responsibility or liability in respect of this report to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by any person's reliance on representations in this report.

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We have no responsibility to update this report for events and circumstances occurring after the date of this report.

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