



# British Transport Police Authority

## Dip-Sampling of Complaint Files Protocol

|                            |                         |
|----------------------------|-------------------------|
| <b>Author</b>              | L Barrick               |
| <b>Date approved</b>       |                         |
| <b>Date last reviewed</b>  | March 2009              |
| <b>Date of next review</b> |                         |
| <b>Reference number</b>    |                         |
| <b>Protective marking</b>  | Not Protectively Marked |
| <b>RES assessed</b>        |                         |
| <b>DDA assessed</b>        |                         |

## **1. Why Police Authorities should dip sample complaints files**

Under s77 of the *Police Act 1996* and s15 of the *Police Reform Act 2002*, Police Authorities are required to keep themselves informed of the handling of complaints by their Forces. This is part of the general responsibility that Authorities have to ensure that their Forces are efficient and effective. As such, when conducting dip-sampling, Authorities are not performing a line management function but fulfilling an oversight responsibility.

The aim of the dip-sampling is to help to ensure public confidence in the police complaints system. This will be achieved through a formal structured process of reviewing a sample of completed complaint cases to identify whether or not proper procedures are being followed, whether an appropriate, proportional and timely approach is being taken by the Force and whether a culture of learning and improvement is being fostered. Dip-sampling allows the Authority to monitor the performance of the Force in this area and make an assessment about the degree to which it is satisfied by the Force's complaint management processes. It is essentially a risk management process.

## **2. Who should conduct dip-sampling?**

The review of files will be conducted by members of the Authority's Professional Standards Committee (PSC). The Force will provide all complaints files completed during the review period, normally 3 months, split into the various complaints categories, i.e local resolution, dispensations, withdrawn, substantiated/unsubstantiated.

The Authority will clearly identify and communicate the roles and responsibilities of those members conducting the review and provide training/mentoring where necessary. The Authority will ensure the review is conducted and that it receives a report via the PSC meeting minutes.

If a Member involved in dip-sampling believes a perception could arise that they have a relationship with the people or events involved in the complaint, and could influence the complaints process, they should excuse themselves from scrutinising that particular file. Dip-sampling is an oversight process. However, some members of the public may not understand that the process is separate from that which determines the outcome of a complaint. Therefore, as perceptions have as much influence over public confidence as do facts, dip-samplers may occasionally see merit in excusing themselves from the review of a particular case. Their decision is a matter of judgement which should be informed by local circumstances.

### **3. Which files should be reviewed?**

#### ***Proportion of files***

*The PSC will look at 20% of completed files which it believes to be justifiably representative of the total. The Committee will regularly consider whether the number/percentage of files reviewed remains proportionate to the total.*

#### ***Representativeness of files***

*The sample should not be random. The Committee will aim to review 20% of each category of complaint file. However there is little point in reviewing files of cases investigated/managed by the IPCC (other than to consider lessons learned or to inform further thematic review). Additionally the Committee will vary the percentage of files reviewed in each category as it considers appropriate in order to monitor areas of concern, conduct a thematic review or review trends.*

#### **Frequency of File Reviews**

*File Reviews will be conducted on a quarterly basis prior to the quarterly PSC meeting. Should the Committee consider it necessary the Chair of the PSC will review any completed case which is considered to be high risk.*

*The Chair of the PSC conducts six monthly reviews of complaints classified as direction and control issues to ensure they are correctly classified and to identify any trends that might provide useful feedback on force operational policies.*

#### **What to look for**

When reviewing files you should consider:

- Whether the complaint was dealt with by the appropriate authority under the legislation;
- Whether the agreed policy/process was followed and correctly documented;
- The degree of responsiveness of the Force to the complainant and the officer/s involved:
  - Whether the investigation commenced and concluded in a reasonable time under the circumstances;
  - Whether the Force communicated clearly, regularly and accurately with the complainant and the officer, gave them regular status reports and advised them of the outcomes of the investigation in the agreed timeframes;

- Whether the Force accounted for any unique needs/circumstances of the complainant or the officer/s (e.g. illness, member of a transient population)
- Whether the time and other resources devoted to the investigation were proportionate to the nature of the complaint;
- Whether the approach, review and conclusion is appropriate and supported by evidence;
- Whether any learning issues were identified in relation to either an individual's performance or the Force's performance and whether these were communicated to the relevant personnel.

A checklist to aid scrutiny is attached at Annex 1.

### **What to do with the information**

Following the review the Head of PSD will be requested to attend a meeting with the Committee to review the findings of the Committee and provide any additional information required to help reach a conclusion on the appropriateness of the process. If it is not possible to provide the information at the meeting then the query will be noted in the minutes of the Committee meeting for follow up.

Once Members are satisfied that they have all the required information to make a judgement they can then state whether they feel the process had been satisfactory. This decision will be recorded on the dip-sampling form for the particular case and will be filed in the Dip Sampling Record Book. This record will be signed only when the when the process is complete and there is no outstanding information or lines of enquiry.

### **Statement to the Authority**

Following the Review the findings of the Committee members including any recommendations will be included in the minutes of the Committee meeting.

After each dip-sampling process, the Members involved will discuss the findings at the PSC, to say that the Force's complaints files have been dip-sampled, and indicate whether the results lead them to believe the Force's complaints management processes is operating effectively and whether they are confident there are no shortcomings in the Force's operations in that area.

The Members who participated in the file review will recommend any improvements that should be made as a result of the dip-sampling process and include lessons learned for individual officers, the complaints process and wider organisational processes. Those members responsible for dip-sampling should also actively seek evidence of the implementation of the recommended changes until they are satisfied that the changes have been made.

## **Annual summary of complaints issues**

An annual summary of findings will be sent to the APA Secretariat for consideration and information sharing among Authorities at the Professional Standards Network meeting once a year. This will facilitate the identification of systemic problems or opportunities for improvement from which all Authorities/Forces could benefit.

## Annex 1

### Sample checklist for completed complaints files

|    | <b>Area to review</b>  | <b>Checks to make</b>   |
|----|--|---|
| 1  | Whether the complaint addressed correctly under the relevant legislation   | Should it have been referred to the IPCC?   |
| 2  | Complaint form   | Completed correctly with sufficient information?  |
| 3  | Covering report submitted by officer completing complaint form   | Is there sufficient information to detail the complaint and the officer if identified?  |
| 4  | Acknowledgement of receipt of complaint  | Letters to complainant on receipt – timely and responsive in terms of process description, rights and force standards? Is the investigating officer identified to complainant?  |
| 5  | Subject officer issued with notice detailing what they can expect from the investigation and how it will be handled? | Timely? Is sufficient detail on notice to reflect the nature of the complaint? Is the officer advised personally that a complaint has been made prior to him/her receiving official notice?                                     |
| 6  | Initial contact with complainant by investigating officer  | Timely, sufficient and appropriate communication, responding given any particular needs of the complainant (e.g. illness, language)?  |
| 7  | If locally resolved or dispensed   | Was process followed and fully documented?<br>Was decision to resolve locally justified?  |
| 8  | If withdrawn   | Was it appropriate to withdraw? Did the complainant understand the complaints process?  |
| 9  | Complainant's concerns   | Are these clearly defined along with the complainant's wishes?  |
| 10 | Investigating officer's report   | Is it structured, concise, balanced and fair? Is it an accurate account of the complaint and investigation? Does it address the complainant's concerns and key issues? Does the report pick up the appropriate learning issues? |
| 11 | The final response to the complainant and the officer  | Timely, responsive, conclusive? Whether they have an appeal right?  |
| 12 | Quality audit/service delivery/human rights  | Any learning issues identified? Were they properly addressed and actioned?  |

|    |  |   |
|----|--|---|
| 13 | Number of days to complete investigation from 'live' date              | A reasonable period since commencement? Reason for delay?   |
| 14 | Does the complaint or the way it was investigated indicate any trends? | Are there opportunities to improve police service delivery either in the complaints management process or broader? Has the Force identified and actioned those opportunities?   |
| 15 | Was the process proportionate to the complaint?                        | Considering the seriousness of the allegations were the appropriate number of witnesses identified and interviewed; were sufficient enquiries carried out; was the level of resources used appropriate; was sufficient physical and medical evidence collected; were the decisions explained and justified? |
| 16 | Justification of the outcomes of the complaint process?                | Are the approach, review and conclusion appropriate and supported by evidence?  |

**Inspection of Police Complaint File**

This complaint file has been reviewed by the Professional Standards Committee at their meeting of \_\_\_\_\_

Comments by the Panel/Committee are appended below:

Requests for additional information from the Professional Standards Department, if any, are below:

Response from the Professional Standards Department to any requests for additional information:

Signed: \_\_\_\_\_

Name: \_\_\_\_\_