



THE POLICE, FIRE AND CRIME COMMISSIONER
FOR NORTH YORKSHIRE AND THE CHIEF
CONSTABLE OF NORTH YORKSHIRE

Complaints

Internal audit report 9.20/21

Final

2 March 2021



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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 audit has been conducted remotely. Based on the information provided by you, we have been able to sample test the control framework.

1.1 Background

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. Under this new legislation the Commissioner has decided to take on the fullest responsibility for police complaints.

The Commissioner's Complaints and Recognition Team (CRT) Leader confirmed that the new arrangement and respective responsibilities for handling complaints commenced operationally from 2 March 2020. The Commissioner's CRT deal in the initial stages with all potential complaints received in the initial stages (including triaging) as well as resolution of 'lower-level' complaints (expressions of dissatisfaction) which sit outside of Schedule 3 of the Police Reform Act. Resolution of so-called 'Schedule 3' complaints which have been escalated by the CRT is overseen by the Police's Professional Standards Department (PSD).

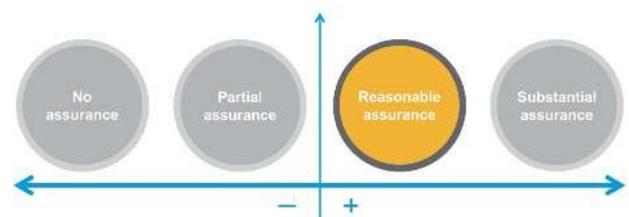
Since 1 April 2020, 340 complaints had been formally logged. As noted in the December PSD Performance Report, it took an average of 25 days in the month to log all formal complaints (from receipt of initial expression of dissatisfaction); the expected timeframe is 10 working days (32% performance in December 2020). The Commissioner and the Force both use the same complaints system to record expressions of dissatisfaction received, and to formally log and track complaints through to resolution. The OFPCC has appointed an Independent Adjudicator (IA) to provide an independent internal review of outcomes where the complainant has requested a review. As at December 2020, 30 complaints had been referred to the IA for their review, 22 of which were outstanding.

1.2 Conclusion

Our review concluded that there is a strong control framework in place covering both the Police, Fire and Commissioner and North Yorkshire Police respective responses to and management of complaints and that these frameworks are being adhered to in practice as confirmed by our sample testing. We did note, however, that there was a lack of written procedural documents at both the Force's PSD and Commissioner's CRT covering the respective complaints processes, expressions of appreciation had historically been recorded on a spreadsheet instead of on the complaints recording system, and there were a number of staff who had yet to attend the PSD and PSIU (Professional Standards Integrity Unit) Group presentation, which includes the complaints procedures.

Internal audit opinion:

Taking account of the issues identified, the Police, Fire and Crime Commissioner for North Yorkshire and the Chief Constable of North Yorkshire can take **reasonable assurance** that the controls in place to manage this risk are suitably designed and consistently applied. 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.



1.3 Key findings

We noted the following areas for improvement, resulting in **one medium** and **five low** priority management actions:

- There are a number of staff who have yet to attend the PSD and PSIU Group presentation (which includes the complaints procedures), who started their employment at the Force at the earliest in March 2020 even though these presentations have been given remotely since the start of the Covid-19 pandemic. There is a risk that should staff have not received relevant training, potential complaints are not recognised by staff and thus not referred to the CRT for consideration of being recording as a formal complaint. **(Medium)**

We agreed a further **five low** priority management actions which are detailed in section two of this report.

We have identified the following controls that were well-designed and consistently applied.

- We confirmed that the Force have published its Complaints Policy on its Sharepoint intranet site within the PSD sub-site. Both Force and Commissioner staff have access to the intranet. The complaints page on the intranet was last updated on 9 September 2020. The corresponding Complaints Policy for the Commissioner is published on its external website.
- A Disclosure Notice (DN 11/2019, The future of police complaints in North Yorkshire) was published on the Commissioner's website, which outlined changes to the way in which complaints would be handled in accordance with the Regulations (which at the time of publication of the disclosure note were still to be ratified).
- We obtained a copy of the training material for the PSD - Regulations Training for PCC Complaints Handlers course provided by Sancus Solutions and attended by the Commissioner's CRT team on 4 February 2020. Completion of the course by the CRT Leader was confirmed to a certificate issued by the training provider. It was confirmed in discussion with the Police's Head of Professional Standards that the equivalent training was given to the PSD on 16 October 2019 at a regionally held training session.
- It was noted by the Head of Professional Standards that there had been three CPD events provided by the PSD to Force supervisors, on 6 December 2019, 10 December 2019, and 8 January 2020 respectively, which captured all Sergeants and above. We were provided with copies of the attendee lists for the CPD events (244 members of staff, less any repeat attendances).
- We confirmed that since 1 April 2020, 340 complaints had been formally logged ('Case Logged'). Of these, we sampled 24 cases to test for compliance with certain requirements as laid out in the Regulations. Our testing confirmed the following:
 - We obtained the respective Case Reports from the complaints system for each of the complaints in our sample of 24. A review of these Case Reports confirmed that the use of the Progress Log to monitor the progress of the respective complaint was happening in practice. We noted in this review of the Case Reports that it is clearly noted where a request to review the outcome of a complaint has been raised by the complainant and the process the review has undertaken. It was further noted in our review of the Case Reports examples where the complainant was reminded that the respective period in which they could appeal the outcome of their complaint was due to expire.
 - Of the 24 cases in our sample, six were non-Schedule 3 complaints (i.e. managed by the CRT) and 18 were Schedule 3 complaints (i.e. escalated to the PSD for management). Of the non-Schedule 3 complaints, four were resolved within the expected 48 hours. Of the two cases which exceeded the 48 hours, one related to several previous cases which as noted in the Progress Log 'have already been addressed locally but will need collating in any response.', while resolution of the other case was awaiting the 'outcome of the payment of the ticket' (the case related to issue of a fine).

- Of the Schedule 3 complaints, 15 were escalated to the Force's PSD team within the expected 48 hours, and the average time to escalate was 1.25 days. Two cases, both from 2019/20, had been managed by the PSD team from the outset. The remaining case took 14 working days to escalate (case reference PC/00273/20); however, on review of the Case Report, it would appear the Case Logged date of 8 October 2020 is that of the individual allegations rather than the date a formal complaint was logged (as recorded in the Progress Log as 'Complaint Recorded' on 29 October 2020). The date of escalation as a Schedule 3 to the PSD was 28 October 2020.
- Of the 24 cases tested, 13 were logged as a formal complaint within 10 working days, and 21 within 30 working days, of receipt of the expression of dissatisfaction/allegation. The average time frame across the entire 24 cases tested was 23 working days, and the range was from 0 to 130 working days. The reason for the latter, however, was noted in respective Progress Log. In accordance with the SLA, complaints should be formally logged within 10 working days from the date of initial contact with the complainant; however, we confirmed that exceptions to this as reported in the monthly PSD Performance Report.
- Of the 24 cases tested, seven were resolved within 28 days. Of the remaining 17, there was evidence within the Progress Log that regular communication with the complainant was maintained in 12 cases. In the remaining five cases there were three cases where there were extended periods (over 28 days) during which no update was logged on the complaints system. For the other two cases: in one case the 28-day deadline is still outstanding at the time of the audit, while in the other case there is a related court case which is yet to take place (and is scheduled for February), and as such the Case was 'suspended'.
- We confirmed there is Standing Operating Procedure (SOP) document in place which outlines the Independent Adjudicator (IA) reviews process.
- The CRT Leader maintains a record of all referrals to the IA. In total, 33 cases have been referred to the IA, of which 21 were pending at the time of audit. Of the 24 cases tested, four had been referred to the IA on appeal by the complainant. Testing confirmed that referral to the IA on receipt of the request for review from the complainant was timely in all four cases, while acknowledgement by the IA was timely in all cases: in 0, 7 and 12 working days respectively (nb there was one case where the request for review was received on 21 January 2021 and had yet to be acknowledged by the IA). Of the four cases, three were open (i.e. pending outcome) at the time of the audit, while the outcome of the 'closed' case was communicated to the complainant six working days from acknowledgement of the appeal by the IA.
- There is monthly reporting on compliance with complaints procedures in the PSD's Performance Reports, which are published on the Sharepoint intranet, accessible by both Force and Commissioner staff. Updates on complaints go to the Police, Fire and Crime Panel as well as the quarterly Force Senior Management Team meetings.
- Monthly meetings are held between the PSD and CRT to monitor the progress and delivery of the new complaints model against areas determined within the initial review. There is a log of actions which accompanies these meetings and against each actions there is noted the most recent updates, due dates (where applicable), statuses and owners. As presented at the January meeting, only one action was overdue: 'Recruit defined resource'. The CRT Leader noted that there was a business case under review to recruit a fourth member of the CRT.

1.3 Additional information to support our conclusion

The following table highlights the number and categories of management actions made. The detailed findings section lists the specific actions agreed with management to implement.

Area	Control design not effective*		Non-Compliance with controls*		Agreed actions		
	Low	Medium	High	Low	Medium	High	
Complaints	1	(9)	2	(9)	5**	1	0
Total	5	1	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.

** More than one management action has been raised against one control.

2 DETAILED 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 regulatory scrutiny/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, regulatory scrutiny, reputational damage, negative publicity in national or international media or adverse regulatory impact, such as loss of operating licences or material fines.

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	Action for management
1	Missing control There are currently no written procedural documents covering the respective complaints processes for either the PSD team or the Commissioner's CRT.	No	-	We confirmed in discussion with the Force's PSD and Vetting Team Leader that currently there is no written procedural document in place which covers the complaints process as pertains to the PSD team's responsibilities. The PSD and Vetting Team Leader did note, however, that it had already been agreed that it was an objective for the PSD administrative team to create a complaints procedural document.	Low	The PSD administrative team will create a front-end complaints procedural document (workflow). Implementation date 30 June 2021 Responsible owner PSD and Vetting Team Leader

Ref	Control	Adequate control design (yes/no)	Controls complied with (yes/no)	Audit findings and implications	Priority	Action for management
				We were, however, provided with a copy of a PSD Investigators Guide, which the PSD and Vetting Team Leader noted was to be issued to the PSD once finalised. The guide focuses on the use of the complaints system to record and monitor progress of complaints.	Low	<p>The PSD and Vetting Team Leader will finalise the complaints guide and roll out to the PSD team.</p> <p>Implementation date</p> <p>28 February 2021</p> <p>Responsible owner</p> <p>PSD and Vetting Team Leader</p>
				The Commissioner's CRT Leader confirmed that there is neither a Job Card (a procedural document) nor SOP document in place covering the complaints process as pertains to the Commissioner's CRT's responsibilities.	Low	<p>The CRT Leader will create a Job Card outlining the procedure for handling and managing Complaints.</p> <p>Implementation date</p> <p>31 March 2021</p> <p>Responsible owner</p> <p>Complaints and Recognition Team Leader</p>

A document in how to record and monitor complaints using the complaints system is not in place for the Commissioner's CRT; however, the CRT Leader did note that further training in the use of the complaints system from the PSD team was due after which a CRT-relevant complaints guide will be created.

Low

The CRT Leader will create a job card outlining use of the complaints system in processing complaints.

There is a risk that should a member of either team leave the respective organisation there could be disruption to operations caused by lack of reference documentation for new staff members in both the complaints processes and use of the complaints system.

Implementation date

30 June 2021

Responsible owner

Complaints and Recognition Team Leader

Risk exposure	Root cause
Procedures are not adhered to, potentially resulting in complaints not being managed in line with regulations, policy etc.	Lack of procedural documentation.

2 Yes No

Both members of the PSD and CRT teams have received external training in managing complaints in line with relevant Regulation.

There has also been internal training given to members of the respective wider staff bodies.

It was noted by the Head of Professional Standards that there had been 3 CPD events provided by the PSD for Police supervisors, on 6 December 2019, 10 December 2019, and 8 January 2020 respectively, which captured all Sergeants and above. He further noted that these events covered the revised regulations. A copy of the training material presented at these events was obtained, which confirmed that it covered the management of complaints and expressions of dissatisfaction, including routes of complaints; the OFPCC's role; and the PSD's role.

Medium

We will ensure that we have captured all legacy members of staff who have yet to attend the group presentation by the end of December 2021.

Implementation date

31 December 2021

Responsible owner

Head of Professional Standards

We were provided with copies of the attendee lists for the CPD events (244 members of staff, less any repeat attendances). Included in the spreadsheet was also the attendee lists covering those members of staff who attended a group presentation (90 min), given by the PSD and Professional Standards Integrity Unit (PSIU), included in which is complaints handling. A copy of the training material presented at these presentations was obtained, which confirmed that it covered what is a complaint and who can make a complaint; and how to record an expression of dissatisfaction.

It was noted in discussion with the Head of Professional Standards that the wider coverage for these group presentations is 'ever-changing' (for example, new cohorts of supervisors, promotion boards). To ensure the PSD team is capturing new starts either in cohorts or onboarding sessions the PSD and Vetting Team Leader engages with each of the SMTs at least quarterly.

In addition, the PSD team has a standing training slot on all inductions of new cohorts of Police Officers, transferees, Special Constables, PCSO's, and FCR (Force Control Room) staff, and the programme for the onboarding to deliver the training to those new starters who did not join as part of a cohort runs every eight weeks.

We confirmed that 790 members of staff had either attended a CPD event or a group presentation. There is also a tab within the spreadsheet which logs those members of staff who are still to attend a group presentation (108 as per the spreadsheet). The earliest start date of an applicable member of staff who is yet to attend a group presentation is 30 March 2020; however, group presentations have been held remotely due to Covid-19, therefore it is reasonable that a member of staff who commenced employment in March would have attended the group presentation by January of the following year.

Risk exposure	Root cause
Potential complaints are not recognised by staff and thus not referred to the CRT for consideration of recording as a formal complaint.	Staff have not received relevant training.

3	Partially missing control	No	-	<p>The PSD team and the CRT use the complaints system to record and monitor complaints from reporting of an initial allegation or expression of dissatisfaction to recording of a formal complaint (case) and ultimate resolution of a case. There are pre-set fields within the complaints system which must be completed, such as Case Received, Case Logged, Date Became Schedule 3 and Reason, Case Sub Type, Case Finalised. These fields assist in reporting and KPI monitoring. Each complaint produces a Case Report, within which is a Progress Log where updates to the complaint are entered by members of the PSD team or CRT, as applicable.</p> <p>We confirmed that since 1 April 2020, 340 complaints had been formally logged ('Case Logged'). Of these, we sampled 24 cases to test for compliance with certain requirements as laid out in the Regulations (the results of which are summarised in the Executive Summary section above). We also obtained the respective Case Reports from the complaints system for each of the complaints in our sample.</p>	Low	<p>We will work through Recognition Log to ensure all expressions of appreciation are entered onto the complaints system and acknowledgements sent out to all relevant staff.</p> <p>In addition, we will ensure that all future expressions of appreciation are recorded on the complaints system.</p> <p>Implementation date</p>
<p>Complaints are recorded on the complaints system, which is the 'national complaints recording system'. Until recently, expressions of appreciation were logged on a spreadsheet held locally by the CRT Leader.</p>						

A review of these Case Reports confirmed that the use of the Progress Log to monitor the progress of the respective complaint was happening in practice.

30 June 2021

Responsible owner

Complaints and
Recognition Team Leader

We noted in the review of the Case Reports that where a request to review the outcome of a complaint has been raised by the complainant it is clearly noted how this review was undertaken (i.e. whether further information was requested by from the inspecting officer or whether a review by the PSD of the Progress Log and related supporting evidence confirms the original outcome). There is set Case Status, Review Period, within the complaints system, during which the complainant can request a review of the outcome of their complaint. Furthermore, it was noted in our review of the Case Reports examples where the complainant was reminded that the respective period in which they could appeal the outcome of their complaint was due to expire.

It was noted in discussion with the CRT Leader that previously expressions of appreciation had not been recorded on the complaints system but rather on a spreadsheet, a copy of which was provided. Also provided was a copy of the Job Card (procedures) for dealing with expressions of appreciation. We also confirmed that expressions of appreciation are also reported in the monthly PSD Performance Report under section 14 - Compliments. We compared the reports for October, November and December and confirmed that the number of expressions of appreciation received in the respective months and logged on the spreadsheet were accurately reported in the applicable report.

Going forward, expressions of appreciation will be recorded on the complaints system. There is a risk should expressions of appreciation be recorded locally on a spreadsheet, rather than on the complaints system, that they could be lost in the event of the respective staff member leaving or accidental deletion of locally held files.

Risk exposure	Root cause
Expressions of satisfaction are not recorded or their record is lost due a single point of failure/key person dependency.	Expressions of appreciation are recorded on a locally held spreadsheet rather than on the central complaints system.

APPENDIX A: SCOPE

The scope below is a copy of the original document issued.

Objective relevant to the scope of the review

The internal audit assignment has been scoped to provide assurance on how the Police, Fire and Crime Commissioner for North Yorkshire and the Chief Constable of North Yorkshire manages 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. Under this new legislation the Commissioner has decided to take on the fullest responsibility for police complaints. 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.
- Whether the organisations have procedures in place for the receiving, recording and resolving expressions of dissatisfaction from the public which support that policy, are in line with the Regulations, and available to all relevant staff.
- What training staff have had on the receiving, recording and resolving of complaints.
- How complaints / expression of satisfaction are logged and progress tracked as they are processed.
- How cases not reported by the public via the Police, Fire and Crime Commissioner's Office are captured and processed.
- Whether complaints are dealt with in a timely manner in accordance with the Regulations.
- Whether cases referred to the Independent Adjudicator are handled in an appropriate and timely manner.
- How complainants are kept informed of the progress and outcome of their complaints.
- Whether reporting of complaints is complete, accurate and timely.



The following limitations apply to the scope of our work:

- 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.

APPENDIX B: FURTHER INFORMATION

Persons interviewed during the audit:

- Head of Professional Standards
- DCI, Professional Standards Department
- PSD and Vetting Team Leader
- Force Vetting Manager
- Complaints and Recognition Team Leader

Documentation reviewed during the audit:

- Complaints Policy – Force
- Complaints Policy – Police, Fire and Crime Commissioner
- Investigators' Guide
- Performance Board Reports – October 2020, November 2020, December 2020



FOR FURTHER INFORMATION CONTACT

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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, Fire and Crime Commissioner for North Yorkshire and the Chief Constable of North Yorkshire**, 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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