



SUFFOLK CONSTABULARY

PROFESSIONAL STANDARDS DEPARTMENT

COMPLAINTS OVERVIEW

1 April 2025 to 31 March 2026

PSD

Professional Standards Department



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CONTENTS

Page Number

1. Executive Summary	2 – 3
2. Public Complaint cases	4
3. Complaint Allegations recorded	5 – 6
4. Timeliness (logging complaints and making initial contact)	7
5. Complaint allegation outcomes (Schedule 3)	8 – 9
6. Complaint allegation outcomes (Outside Schedule 3)	10
7. Complaint case timeliness	10 – 11
8. Reviews to IOPC and LPB	12
9. Chapter 13 Reports	13
10. Complainant demographic	13 – 15
11. Discrimination complaints	15 – 16
12. Conduct investigations	16 - 17
13. Resignations and public hearings	17
14. Misconduct outcomes	18
15. Organisational learning	18 – 21
16. OPCC Dip Sampling	22
Glossary	23 – 24

1. Executive Summary

This report provides an overview of public complaints, conduct investigations, and organisational learning within Suffolk Constabulary for the period 1 April 2025 to 31 March 2026. It highlights key trends, performance metrics, and outcomes in the handling of complaints and internal conduct matters, with comparative data from the previous two years.

1.1 Public Complaints and Allegations

- A total of 512 complaints were received in the reporting period, 1 April 2025 to 31 March 2026, marking a 58% increase from the previous year.
- Changes to the recording processes to improve clarity and ensure complaint recording practices are aligned and standardised with Forces nationally has driven the rise in complaints.
- Of the 512 complaints recorded, 45.5% were linked to the South, 29.3% to the West and 22.3% to the East of the County
- 1289 allegations were recorded, with the most common category being 'Police action following contact'
- The most commonly recorded National Factor is 'Investigation', in line with the previous reporting periods

1.2 Timeliness and Contact

- 85.5% of complaints were logged within 2 working days, consistent with the previous reporting periods
- 44.5% of complainants were contacted within 10 working days, which is a decrease from 86.3% in 2024/25

1.3 Complaint Outcomes (Schedule 3)

- 958 allegations were finalised under Schedule 3
- 64% were determined as the service provided was acceptable
- 11% were determined as the service provided was not acceptable, leading to actions such as apologies, providing an explanation and learning from reflection
- The outcomes to allegations show small percentage variance when comparing to the previous reporting periods with a slight increase in the percentage of allegations where it was not determined if the service provided was acceptable and allegations withdrawn.
- The geographical location of the allegation shows small disparity between the outcomes for the South, East and West of the County

1.4 Complaint Outcomes (Outside Schedule 3)

- 203 allegations were handled outside Schedule 3, with 87.7% resolved, a decrease from 92.5% in the previous year
- 7 cases were escalated to Schedule 3 due to complainant dissatisfaction

1.5 Complaint Case Timeliness

- Schedule 3 complaints took an average of 108 working days to finalise and has increased over the last 3 years

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- Outside Schedule 3 complaints took on average 31 working days and show improving timeliness

1.6 Review Requests and Chapter 13 Reports

- The Independent Office for Police Conduct (IOPC) received 45 reviews, upholding 16 in the reporting period
- The Local Policing Body received 37 requests, with one being upheld
- 28 Chapter 13 reports were submitted in the reporting period

1.7 Demographics and Discrimination

- 526 individual complainants were recorded, with 79.3% providing ethnicity data
- 7.2% of complainants were from ethnic minority backgrounds, a decrease from the previous year
- 41 allegations involved discrimination, with race being the most cited characteristic, followed by disability

1.8 Conduct Investigations

- 76 internal conduct cases were recorded, involving 98 breaches of the Standards of Professional Behaviour
- The most common breaches recorded are Discreditable Conduct at 29.6% of all breach types

1.9 Misconduct Hearings and Outcomes

- 13 misconduct hearings and 10 meetings were held in the reporting period
- Outcomes include dismissals, would have been dismissed had they not resigned, Final Written Warning, Written Warnings and referral to the Reflective Practice Review Process

1.10 Organisational Learning

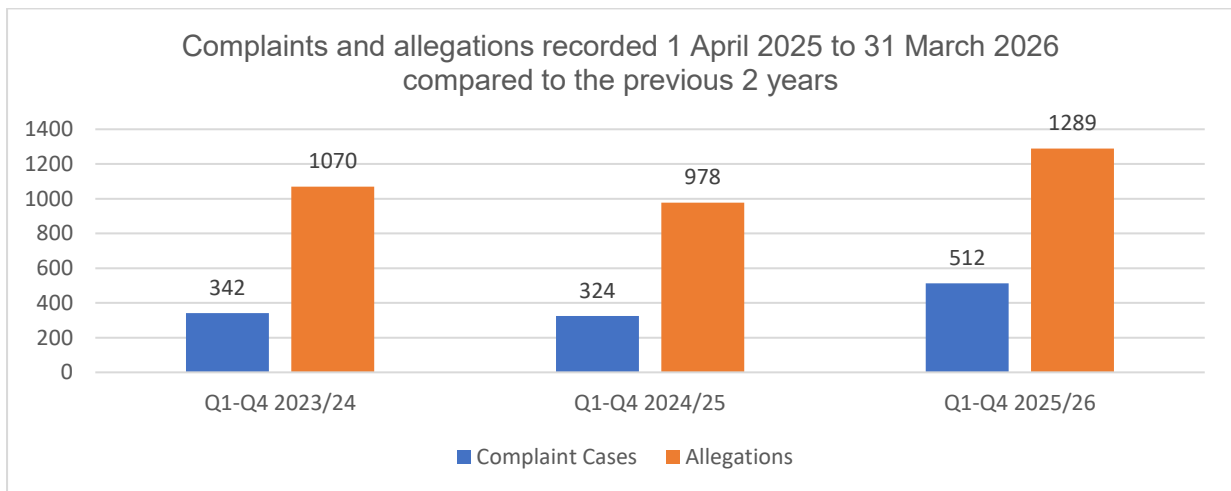
- Suffolk Constabulary aims to identify areas for improvement across the Force to address issues effectively, ensuring lessons learned and best practices are shared across the organisation
- Key initiatives in the reporting period were uniform standards, professional language and conduct and guidance around missing persons

2. Public Complaint Cases

All complaints received by the Professional Standards Department are assessed and either recorded under Schedule 3 of the PRA 2002 or logged outside of Schedule 3.

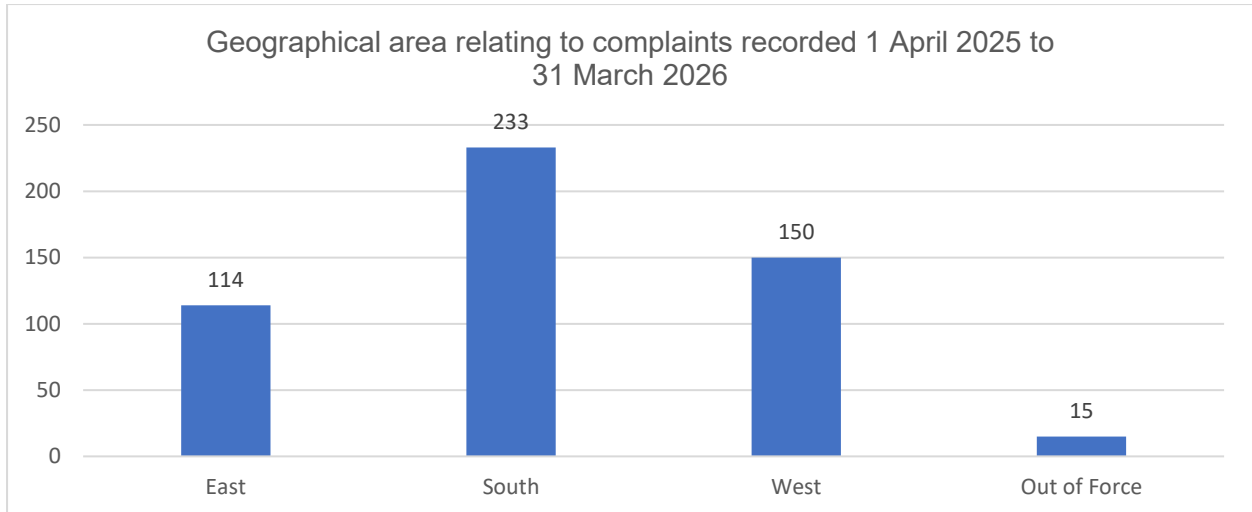
It should be noted that from 1 January 2026 Norfolk and Suffolk PSD changed the way they record 'Low level' dissatisfaction. Such matters are now recorded as 'complaints' on the PSD database, as opposed to previous years when they were recorded on a different system. This change has been introduced to improve clarity and ensure our complaint recording practices are aligned and standardised with those of other forces nationally.

(Chart 1): The chart below shows the 512 complaint cases received in the reporting period, including both Schedule 3 and outside of Schedule 3. It shows the number of complaint cases and associated allegations for the reporting period and for the previous 2 years:



There has been a 58% increase in complaint cases recorded compared to 2024/25 due to the change in the recording process and a 32% increase in allegations.

(Chart 2): A review of the geographical areas of the complaints recorded in the reporting period has been reviewed and the chart below shows the breakdown:

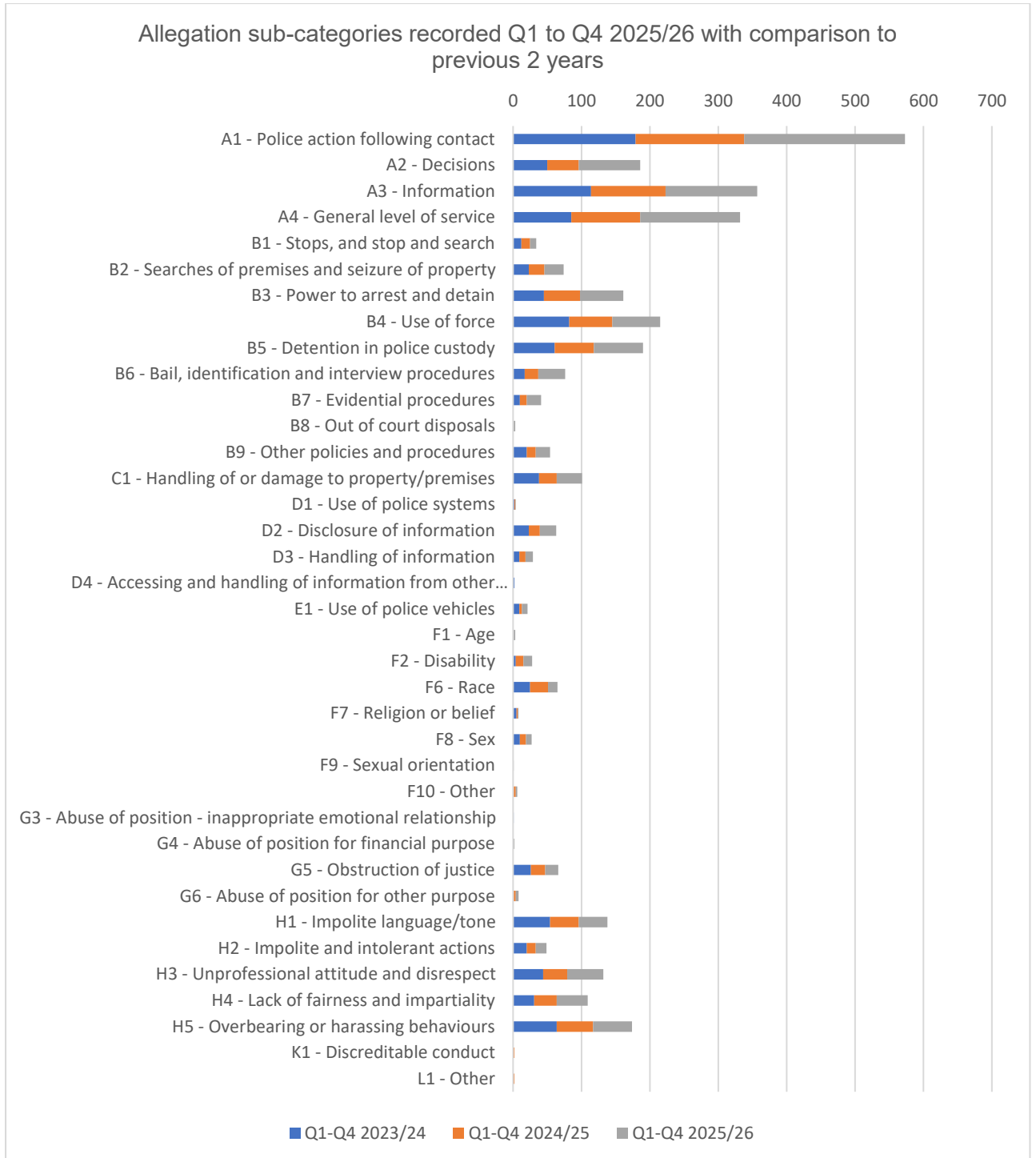


3. **Public Complaint Allegations Recorded**

Allegations represent specific concerns raised by complainants regarding the service they have received. Multiple allegations can be recorded on single complaint cases and new allegations may be added at any point during the complaint handling process, following discussion with the complainant to fully identify their concerns. The following data relates to allegations recorded within the reporting period and include those added to cases recorded prior to 1 April 2025.

(Chart 3): A total of 1289 allegations have been recorded within the reporting period and the graph shows the levels of allegations across the categories over the past 3 years:

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The 45 categories of complaint under which the allegations are recorded classify the nature of the complaints made, enhancing the understanding of complaint themes.

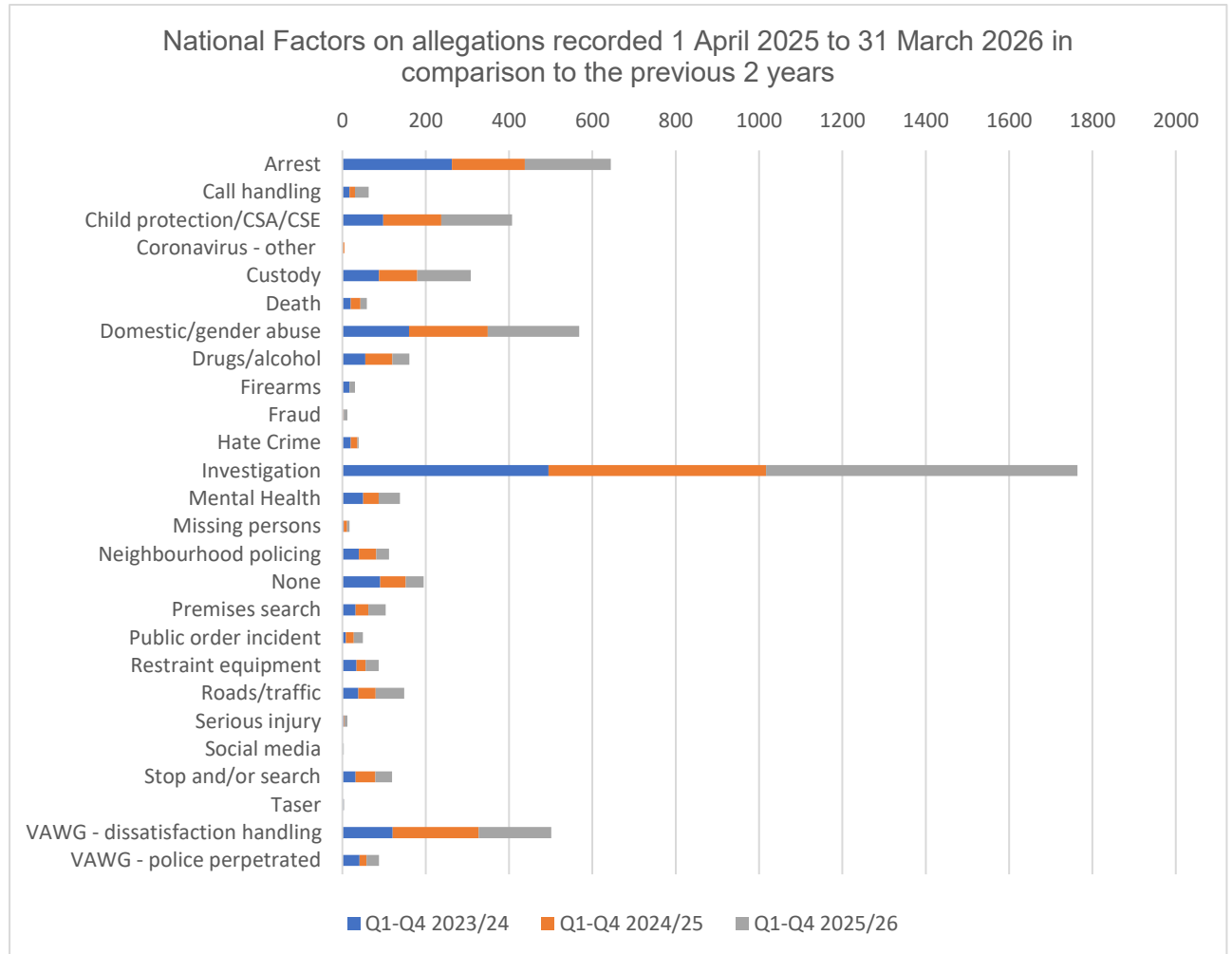
On average, 2.5 allegations are linked to each complaint in 2025/26, down from an average of 3 per complaint in the previous two years.

In the reporting period, the most frequently recorded complaint category is 'Police action following contact' and is consistent across all three years. A total of 47% of all allegations are recorded under the IOPC category 'A – Delivery of duties and service', which incorporates Police action following contact, Decisions, Information and General level of service.

National Factors

When a complaint allegation is recorded, national factors are applied with the purpose of capturing the situational context of the dissatisfaction. Multiple factors can be applied to each individual allegation.

(Chart 4): The chart below shows the national factors applied to the 1289 allegations:



The highest recorded national factor is 'Investigation'. The types of concern raised are perceived failures in the investigation, securing evidence, updating, time taken to investigate and dissatisfaction with the outcome as well as concerns around property seized and the police response to incidents.

4. Timeliness for logging complaints and contacting complainants

Chapter 6 of the IOPC Statutory Guidance states that complaints should be logged, and the complainant contacted 'as soon as possible'. Two key metrics are monitored:

- **Logging time:** The duration from receipt of the complaint in Force to the date logged by the Professional Standards Department.
- **Initial contact time:** The time from when the complaint is made to the first communication with the complainant.

(Table 1): The table below details timeliness for logging complaint cases:

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<u>Measure</u>	<u>1 Apr 2023 to 31 Mar 2024</u>	<u>1 Apr 2024 to 31 Mar 2025</u>	<u>1 Apr 2025 to 31 Mar 2026</u>
% of cases logged within 2 working days	85.4%	88%	85.5%
% of cases logged within 3-5 working days	5.3%	6.8%	5.1%
% of cases logged within 6-8 working days	3.2%	2.5%	3.1%
% of cases logged in more than 8 working days	6.1%	2.8%	6.3%

Of the 512 complaints received in the reporting period, 85.5% were logged within 2 working days.

(Table 2): The table below details the timeliness for contacting complainants:

<u>Measure</u>	<u>1 Apr 2023 to 31 Mar 2024</u>	<u>1 Apr 2024 to 31 Mar 2025</u>	<u>1 Apr 2025 to 31 Mar 2026</u>
% of complainants contacted within 5 working days	43.8%	42.4%	23%
% of complainants contacted within 6-10 working days	36.8%	43.9%	21.5%
% of complainants contacted in more than 10 working days	19.4%	13.7%	55.5%

On average, initial contact with complainants occurred in 13 working days, with 58.2% of complainants being contacted within that time.

The level of contact from complainants remains high and in the reporting period 2,712 contacts were made to the Joint Professional Standards Department, compared to 2,415 in 2024/25.

The Complaint Management Unit (CMU) has experienced notable challenges over the past year due to staff turnover, compounded by delays in recruitment. However, the most significant factor impacting performance has been a substantial increase in workload. Public complaints have risen by 58%, with allegations increasing by 32% compared to the same reporting period last year.

This rise is partly attributable to changes in recording practices. Matters previously categorised as “triges” are now being formally recorded in line with national standards, following direction from the Independent Office for Police Conduct (IOPC). This has resulted in a higher volume of recorded cases and a corresponding increase in demand on CMU resources.

In response, the Professional Standards Department (PSD) is reviewing and restructuring its processes and staffing model to better manage demand. These changes are intended to improve resilience, enhance performance, and ensure the department can continue to deliver an effective and timely service.

5. Complaint allegation outcomes (Schedule 3)

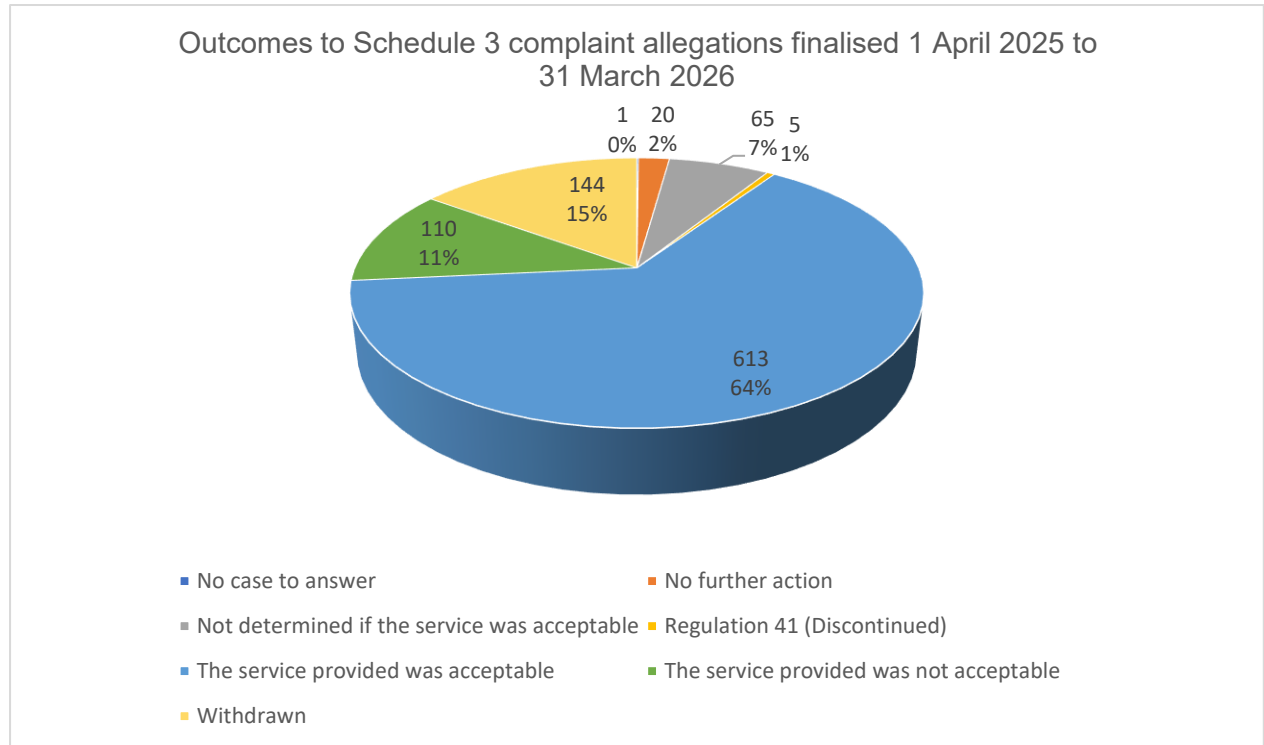
Schedule 3 complaints will either be investigated, handled otherwise than by investigation (responding to concerns raised and seeking to resolve them) or determined that no further action will be taken.

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Some complaints may also be withdrawn by the complainant or discontinued under Regulation 41.

During the reporting period, 265 Schedule 3 complaint cases were concluded.

(Chart 5): Every complaint contains at least one allegation. The chart below details the outcomes to the 958 Schedule 3 complaint allegations finalised in the reporting period:



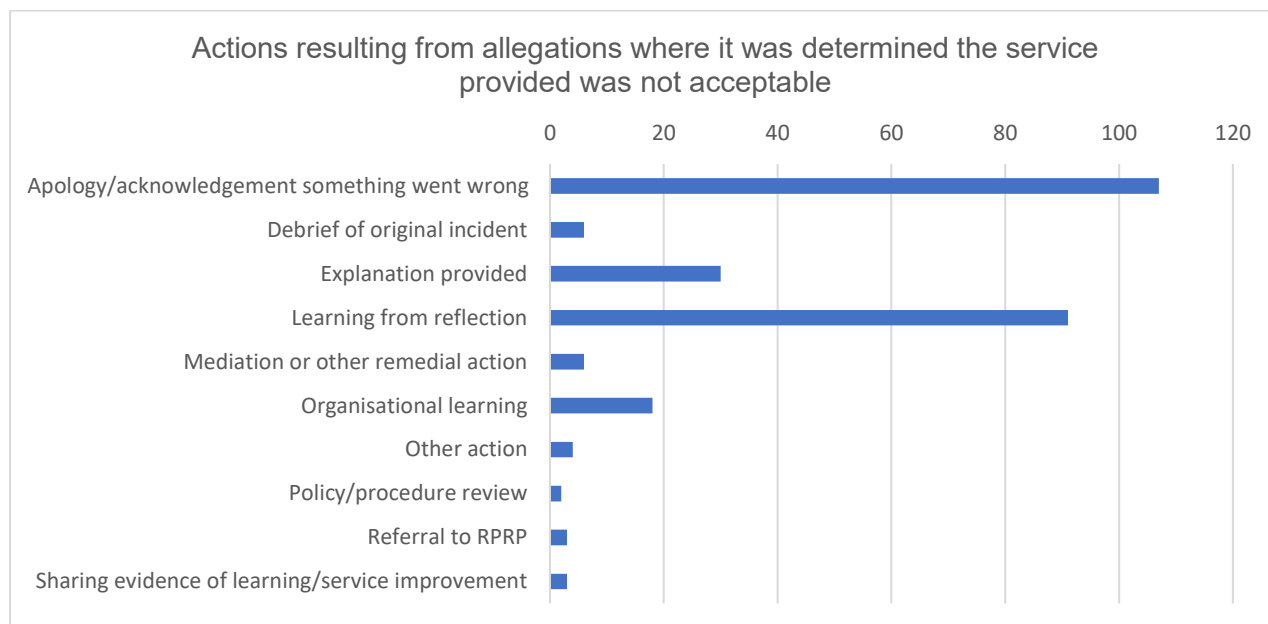
On reviewing the outcomes to Schedule 3 complaint allegations the percentages across all allegation outcomes show little variance when compared to the previous two years.

- Allegations resulting in a case to answer remain consistently below 0.7% and no allegations resulted in a case to answer in the reporting period.
- Fewer allegations are being resulted as No further action required, having dropped from 8.7% in 2023/24 to 2.10%.
- Allegations where it was not determined if the service was acceptable rose from 4.9% in 2023/24 to 6% in 2024/25 and 6.8% in the reporting period.
- The percentage of allegations where it was determined the service provided has remained consistent, between 63% and 64% across the three years.
- Allegations resulted as the service provided was not acceptable have also remained consistent, at 11.8% in 2023/24, to 13.5% in 2024/25 and 11.5% in the reporting period.
- The percentage of allegations withdrawn has increased from 10.4% in 2023/24, to 15% in the last 12 months.
- The geographical location recorded on each finalised allegation shows some disparity between the outcomes for the East, South and West of the County. Service acceptable outcomes were lower in the West at 58.2%, with 63.2% in the South and 73.3% in the East. Allegations resulted as service not acceptable ranged between 9.7% (East) and 12% (South).

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Each allegation finalised includes a recorded action. Multiple actions may be associated with a single allegation.

(Chart 6): It was determined that the service provided was not acceptable for 110 allegations. These allegations have resulted in the following actions:



The largest action recorded is an apology or acknowledgement to the complainant that something went wrong, followed by learning from reflection and explanation provided.

Even where it has been determined the service provided was acceptable, there are opportunities to resolve the issues and learn from the complaints in a number of ways.

In the majority of cases where the service provided was acceptable an explanation was provided to the complainant. It is important to identify all learning for individuals involved as well as the organisation, this can also include a review of Policies and Procedures as well as reviewing information held on police records. Where appropriate, an apology can be given and a debrief of the incident allows those involved the opportunity to reflect on the circumstances.

6. Complaint and allegation outcomes (Outside Schedule 3)

Cases managed outside of Schedule 3 of the PRA 2002 are addressed with the aim of resolving concerns promptly and to the complainant's satisfaction. These cases often involve requests for clarification or acknowledgment rather than formal investigation.

Due to the changes in recording processes, a greater number of issues raised as dissatisfaction are being recorded as complaints outside of Schedule 3.

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During the reporting period, 203 allegations were handled outside Schedule 3. Of these, 178 were resolved representing an 87.7% resolution rate. This is a decrease from 92.5% in 2024/25 and 92.7% in 2023/24. The resolution rate will be monitored moving forward.

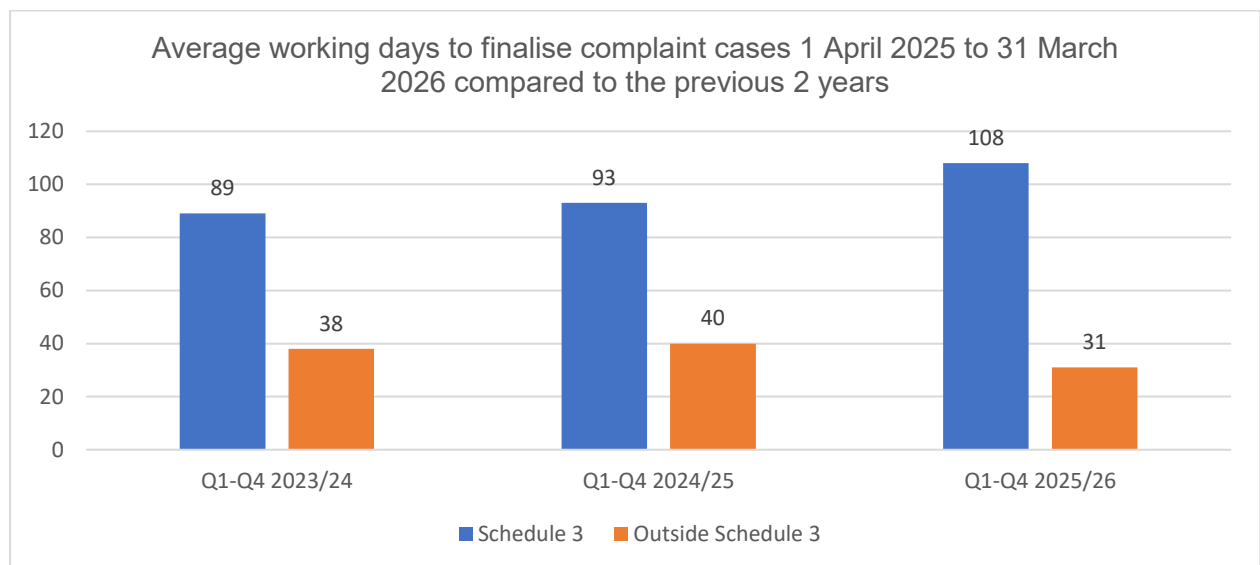
As with complaints handled under Schedule 3, there are opportunities to learn and offer an apology where appropriate. In most cases, an explanation was provided to the complainant to resolve their concerns.

Complainants retain the right to request escalation to Schedule 3 if they remain dissatisfied. In the reporting period, seven cases were escalated compared to six in 2024/25 and 10 in 2023/24.

7. Complaint case timeliness

This section measures the number of working days from the date the complaint is recorded to the date the complainant is informed of the outcome. Periods during which cases are suspended due to legal proceedings (sub judice) are excluded from the calculation.

(Chart 7): The graph below shows the average resolution times in the reporting period, with comparisons to 2024/25 and 2023/24:



The average time to conclude Schedule 3 cases has gradually increased, while resolution times for cases outside Schedule 3 have decreased.

The difference between the time taken to conclude Schedule 3 matters compared to those outside of Schedule 3 is a reflection of the increased work required in any response. A response to a Schedule 3 complaint will most likely require consideration of obtaining officer accounts, reviewing media and records held by Police, followed by consideration of appropriate legislation.

The year-on-year increase in the time taken to resolve Schedule 3 matters reflects the current approach to allocation. These cases are predominantly handled by operational managers, such as Inspectors or staff of equivalent grade, for whom complaint handling forms an additional responsibility alongside their core duties. As demand has risen significantly, so too has the pressure on these individuals, contributing to longer resolution times.

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This position contrasts with the improved timeliness seen in matters dealt with outside of Schedule 3. Progress in this area has been driven by the Complaint Management Unit (CMU), where staff are well-positioned to engage proactively with members of the public at an early stage. By establishing the nature of the complaint and the desired outcome from the outset, many matters can be resolved more efficiently and to the satisfaction of all parties.

Building on this progress, CMU is currently piloting an approach that introduces additional resources to address a greater number of non-Schedule 3 cases at an earlier stage. This is intended to reduce the burden on operational managers, improve overall timeliness, and ensure a more consistent, best-practice approach to complaint handling across the organisation.

8. Reviews to IOPC and LPB

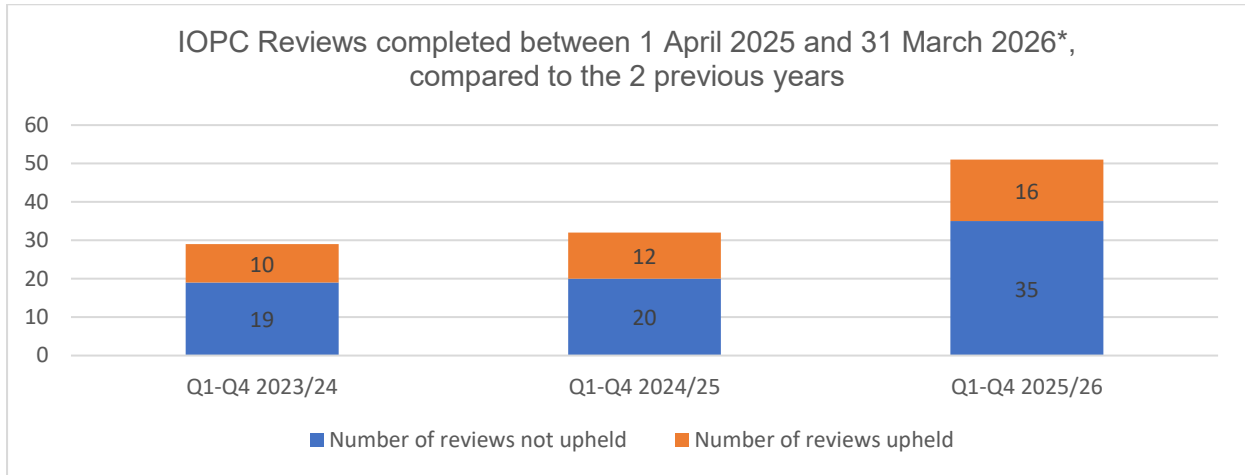
Under Schedule 3 of the PRA 2002, complainants may request a review of their case outcome if dissatisfied. Reviews are conducted by either the IOPC (Independent Office for Police Conduct) or the Local Policing Body (the Office of the Police and Crime Commissioner) depending on the nature of the complaint. The outcome letter to the complainant specifies who the relevant review body is for their complaint.

IOPC reviews

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In the reporting period the IOPC received 45 requests to review the outcome of the complaint.

(Chart 8): The chart below details the number of reviews the IOPC completed in the reporting period and of those, the number which were upheld:

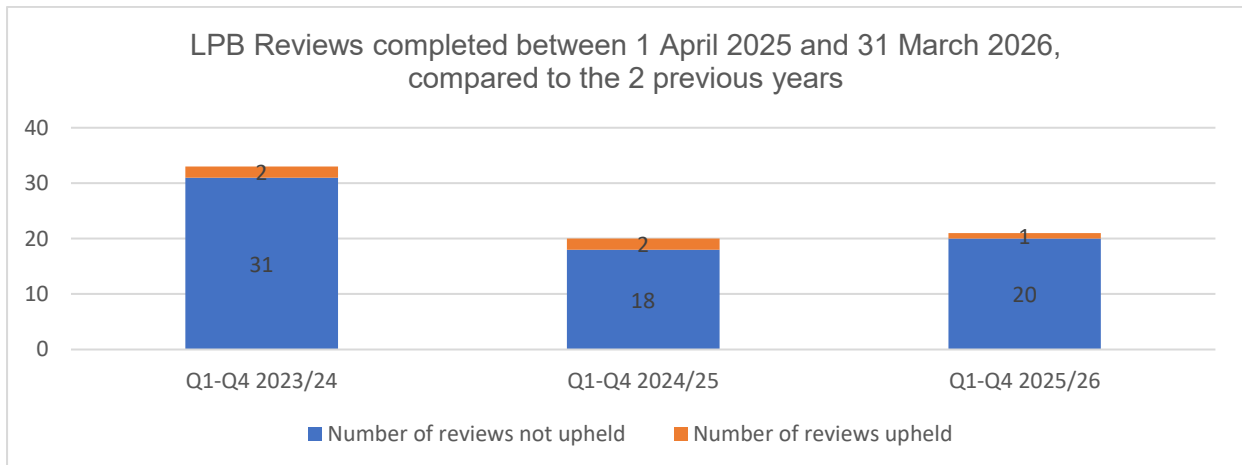


*22 of the 51 reviews completed in 2025/26 were received by the IOPC in 2024/25.

LPB reviews

The Local Policing Body received 37 requests to review the outcome of the complaint.

(Chart 9): The chart below details the number of reviews the LPB completed and of those, the number which were upheld:



9. Chapter 13 Reports

When a local investigation exceeds 12 months, the Appropriate Authority is required to submit a written update to both the Local Policing Body and the IOPC. This update must include:

- The status of the investigation
- Estimated completion timeliness

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- Reasons for the delay
- Planned steps to progress the case

These updates, known as Chapter 13 reports (as outlined in Chapter 13 of the IOPC Statutory Guidance) must be submitted every six months following the 12-month anniversary, until the investigation concludes.

It is important to note that investigations cannot proceed while a case is suspended, such as during ongoing court proceedings, which can impact overall timeliness.

During the reporting period, 28 reports were submitted concerning 12 complaints, eight conduct cases and one general file. This represents a decrease compared to 47 reports in 2024/25 and a slight increase from 23 reports in 2023/24.

10. Complainant demographic

A member of the public is considered a complainant if they are directly or adversely affected by the conduct, has witnessed the conduct or is acting on behalf of someone who meets the criteria. Consequently, a single complaint case may involve multiple complainants.

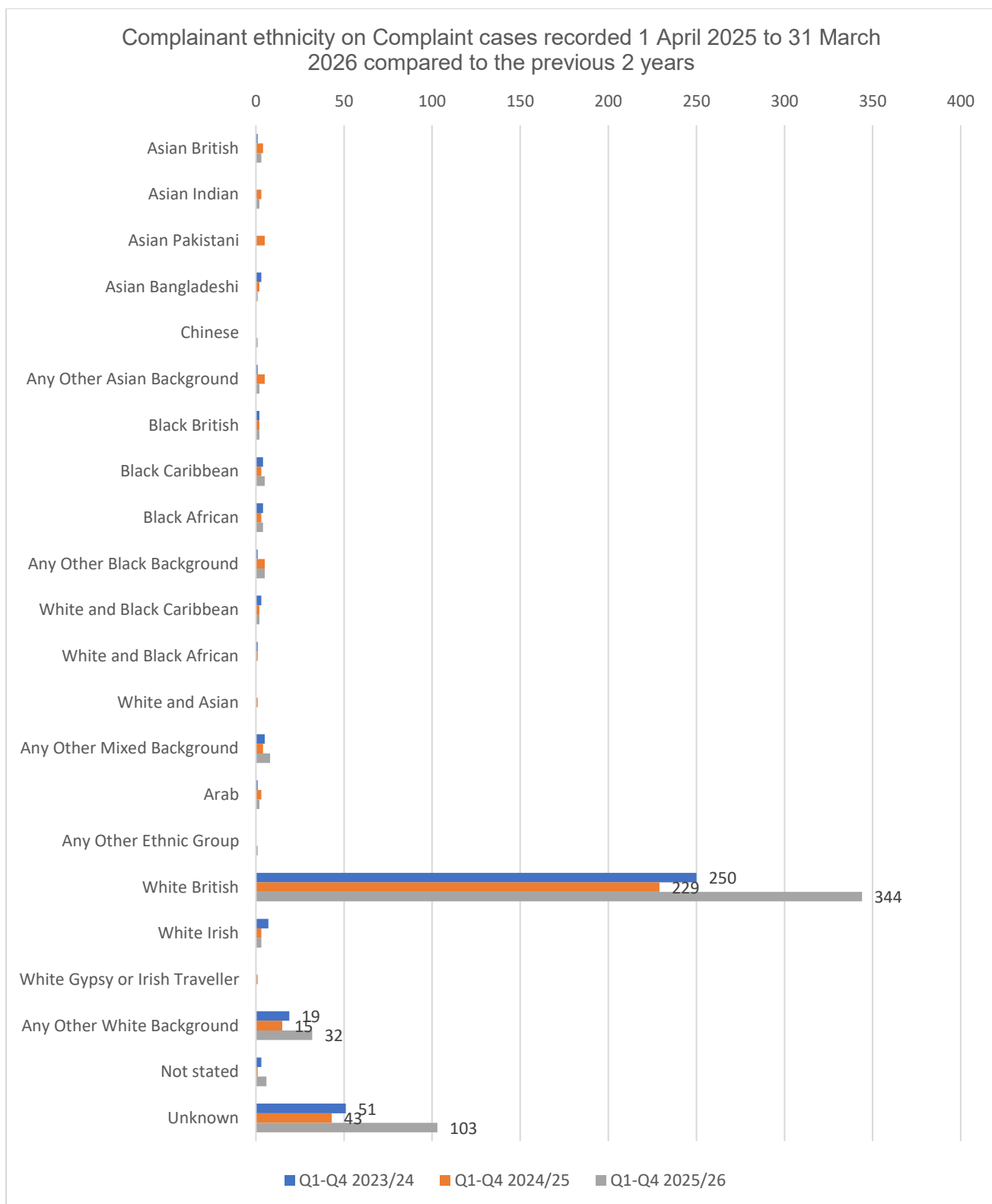
During the reporting period, 1 April 2025 to 31 March 2026, 512 complaint cases were received involving 526 individual complainants. Where available, protected characteristics data, such as ethnicity and gender, is recorded.

Ethnicity data was recorded in 79.3% of cases, a decrease from 86.9% in 2024/25 and 84.8% in 2023/24.

Of the 526 complainants, 258 are male (49%), 258 are female (49%) and 10 complainants have not provided their gender (2%).

(Chart 10): The graph below shows the ethnicity of complainants making the complaints in the reporting period with a comparison to the previous two years:

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Data labels added to the graph where the figure is 10 or more. Where complainants have made more than one complaint in the reporting period, they are counted on each individual complaint.

Complaints from Ethnic Minority Groups

A review of the complainants' ethnicity shows that in reporting period, 38 of the 526 complainants identified as being from ethnic minority backgrounds which is 7.2% of all complainants recorded.

This is a decrease from 12.8% in 2024/25 but is comparable to 7.3% in 2023/24.

Further scrutiny is being applied to these cases in conjunction with HR, code of ethics task and finish group and the ongoing work under the Suffolk PRAP.

11. Discrimination complaints

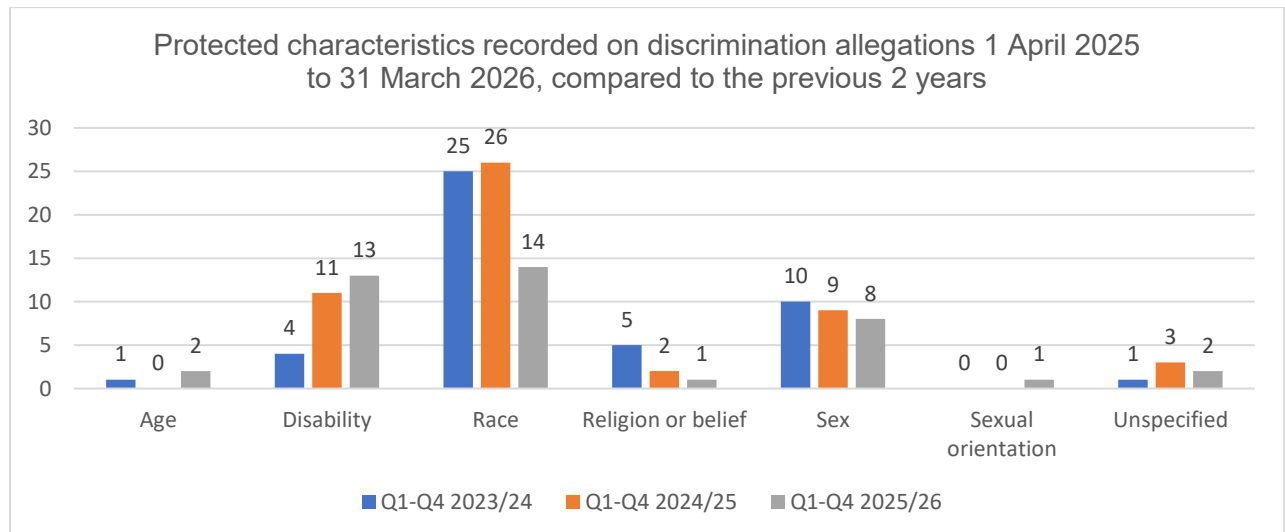
Between 1 April 2025 and 31 March 2026, the Professional Standards Department recorded 1289 complaint allegations. Of these, 41 allegations (3.2%) involved complaints of discrimination.

This represents a decrease compared to:

- 51 allegations (5.2%) in 2024/25
- 46 allegations (4.3%) in 2023/24

Discrimination complaints cover all protected characteristics under the Equality Act 2010, including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation as well as other identifiable groups (not protected under the Equality Act 2010).

(Chart 11): The chart below shows the protected characteristics recorded on allegations of discrimination received in the reporting period compared to 2024/25 and 2023/24:



Race was the most frequently cited characteristic in the reporting period, accounting for 34.1% of all discrimination allegations however the chart above shows the number of allegations has decreased compared to previous years.

Allegations recorded under the protected characteristic of Disability has increased over the last 3 years. Complainants report a lack of reasonable adjustments, feeling their disability is

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ignored or disregarded, a lack of empathy and that their disabilities are not considered when in custody.

Of the 13 disability related complaints, six have been finalised to date. One was withdrawn, four were determined as the service provided was acceptable and one was determined as the service provided was not acceptable. The complaint handler found that officers did not make reasonable adjustments to their communication style or procedures, despite the complainant's repeated disclosures concerning their disability. An apology was provided and additional training was recommended.

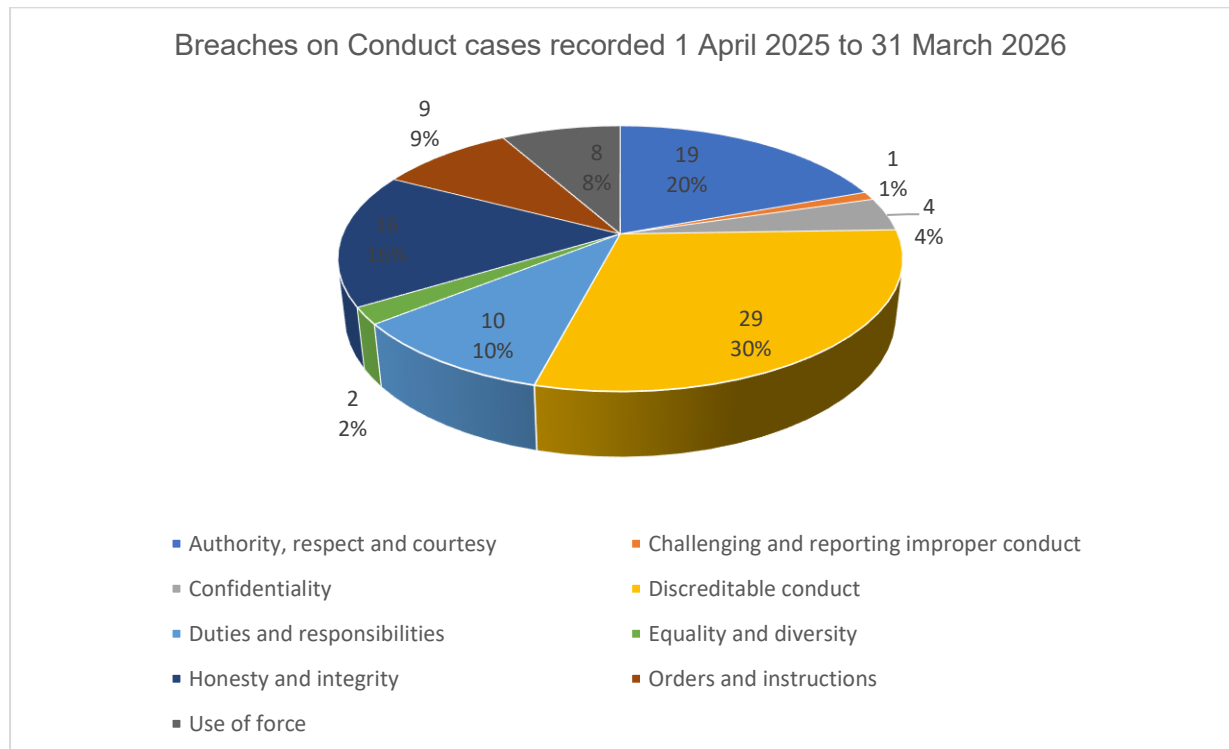
12. Conduct Investigations

Between 1 April 2025 and 31 March 2026, 76 internal conduct cases were recorded. This is a 17% increase from 65 cases in 2024/25 and is higher than the 70 cases recorded in 2023/24.

These cases involved 98 breaches of the Standards of Professional Behaviour, attributed to:

- 64 Police officers
- 3 Special Constables
- 15 members of Police staff

(Chart 12): The chart below displays a breakdown of the breaches recorded on the conduct cases under each category and as a percentage overall:



- Discreditable conduct is the most common breach type (29.6%), followed by Authority, respect and courtesy (19.4%) and Honesty and integrity (16.3%).

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- In 2024/25, the most frequent breach was Authority, respect and courtesy (25%), followed by Discreditable conduct (18.3%) and Confidentiality (14.4%).
- In 2023/24, Duties and responsibilities accounted for 23.6% of breaches, followed by Authority, respect and courtesy (22.2%) and Discreditable conduct (20.1%).

13. Resignations and Public Hearings

The Policing and Crime Act (PCA) 2017 contains a number of reforms and from 15 December 2017 allows officers under investigation to resign or retire however there is an expectation that misconduct proceedings for gross misconduct will be taken to conclusion.

- The Police Barred List includes individuals dismissed following misconduct or performance proceedings.
- The Police Advisory List includes those who resigned or retired during an active investigation or before allegations came to light. Individuals remain on the list until the investigation concludes.

Both lists are maintained by the College of Policing and include officers, special constables, staff and designated volunteers.

Five police officers and one member of the Special Constabulary resigned whilst under investigation in the reporting period. In two cases the matters were taken to proceedings, and both officers would have been dismissed had they not resigned. A secondary determination in two cases assessed the issues as misconduct and no further action was taken. The final two cases are currently live.

Public Hearings

Since 1 May 2015, in cases where an officer is given notice of referral to misconduct proceedings under regulation 21 (1) or 43 (1) of the conduct regulations, the case will be heard in public. This is also the case for accelerated hearings. Exemptions from this are subject to the discretion of the person chairing or conducting the hearing to exclude any person from all or part of the hearing.

The regulations do not apply to misconduct meetings or third stage unsatisfactory performance meetings.

As of 1 January 2016, hearings are chaired by legally qualified individuals. In May 2024, reforms granted Chief Constables greater authority to dismiss officers, with Assistant Chief Constables (ACC) now leading misconduct hearings.

A new ACC role was piloted across Norfolk, Suffolk and Hertfordshire to expedite gross misconduct hearings.

During the reporting period, the ACC chaired two full hearings and one accelerated hearing for Suffolk.

14. **Misconduct outcomes**

Under the Police (Conduct) Regulations 2020:

- Misconduct is defined as “a breach of the Standards of Professional Behaviour that is so serious as to justify disciplinary action (written warning or above)”
- Gross misconduct is “a breach of the Standards of Professional Behaviour that is so serious as to justify dismissal”.

The number of misconduct hearings and meetings held in the reporting period for Police officers, members of Police staff and members of the Special Constabulary are detailed as follows:

Misconduct hearings:

- 2 police officers were subject to Accelerated misconduct hearings, and both would have been dismissed had they not resigned
- 2 police officers were subject to full hearings resulting in one receiving a Final Written Warning and in the other case no misconduct was found
- 9 members of police staff were subject to disciplinary hearings resulting in four dismissals, four would have been dismissed had they not resigned and one received a Final Written Warning

Misconduct meetings:

- 10 police officers were subject to misconduct meetings resulting in eight Written Warnings and two referrals to the Reflective Practice Review Process.

(Table 3): The table below shows the number of hearings and meetings held in the reporting period, in comparison to the previous two years:

<u>Year</u>	<u>Number of misconduct hearings</u>	<u>Number of misconduct meetings</u>
2025/26	13	10
2024/25	13	18
2023/24	17	7

15. **Organisational learning**

Identifying and embedding both organisational and individual learning is essential for any organisation committed to growth and continuous improvement. Suffolk Constabulary works closely with the Independent Office for Police Conduct (IOPC) and the Office of the Police and Crime Commissioner (OPCC) to capture learning opportunities arising from complaints and review processes.

Within the Professional Standards Department (PSD), the Engagement & Analytical Hub (E&A Hub) plays a central role in driving a culture of continuous learning and development. By combining specialist analytical and research expertise with advanced tools such as Power BI and Co-Pilot, the team supports officers and staff in recognising learning opportunities within their day-to-day activities, particularly when dealing with public complaints or expressions of dissatisfaction.

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The overarching aim is to identify areas for improvement across the Constabulary, applying a structured problem-solving approach to address issues effectively. This ensures that lessons learned and best practice are consistently shared across the organisation.

During the reporting period, several key areas for improvement were identified through complaints, misconduct investigations, reviews, and internal feedback. These were proactively addressed through internal communications and management interventions to clarify expectations, reinforce professional standards, and reduce the likelihood of recurrence.

One area highlighted was the use of Artificial Intelligence (AI) in policing activity. Officers and Staff were reminded that the use of generative AI tools, outside of those authorised by the Constabulary, such as ChatGPT or similar platforms, for any policing purpose is strictly prohibited. Clear guidance reinforced that such systems may store and reuse submitted data, creating significant risks to information security and confidentiality. This messaging emphasised the importance of only using approved, secure systems when handling policing information, ensuring compliance with data protection standards and safeguarding public trust.

Following on from a Death and/or Serious Injury investigation (DSI). Another key focus was on compliance with Voluntary Attender (VA) procedures, particularly in relation to risk assessments. Communications reinforced that both pre- and post-interview risk assessments must be completed to identify vulnerabilities and ensure the welfare of individuals. Officers were reminded to follow structured processes, record outcomes accurately, and ensure appropriate supervisory oversight. This guidance underlined the importance of safeguarding, maintaining investigative integrity, and adhering to policy requirements.

Finally, attention was drawn to the importance of delivering high-quality service in line with the Victims' Code. A series of internal publications highlighted the need for clear, timely communication and effective engagement with victims throughout investigations. Officers and Staff were reminded that many public complaints stem from dissatisfaction with communication and service, and that improving these areas is critical to building confidence, supporting victims, and achieving better investigative outcomes.

By addressing these issues through organisation-wide messaging and individual management actions, we aim to embed learning, strengthen standards, and reduce the likelihood of similar concerns arising in the future.

Organisational Learning Development

The E&A Hub is in the final stages of testing a joint-force data correlation tool developed in Power BI. This tool enables the integration and cross-referencing of HR and PSD data, providing enhanced insight into organisational trends, patterns, and emerging risks. The system supports evidence-based decision-making across the Constabulary and includes functionality to identify disproportionality in complaint handling and misconduct investigations, promoting greater transparency and accountability.

Additionally, the PSD Engagement Team has completed a full audit of its existing training products. This has led to the development and rollout of a refreshed and tailored training programme, designed to meet the specific needs of different groups of officers and staff.

To further enhance the delivery of organisational learning, two new Prevention and Engagement Officer roles have been established within PSD. These roles are dedicated to

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improving how learning is communicated, embedded, and understood across the Constabulary, ensuring that key messages are translated into meaningful behavioural and cultural change.

In addition, the Service Improvement Inspector now oversees all Reflective Practice activity across the organisation. This centralised oversight enables the identification of emerging trends, promotes consistency in the application of practice requiring improvement, and ensures lessons arising from misconduct investigations are effectively captured and embedded.

16. Office of the Police and Crime Commissioner (OPCC) Dip Sampling

Dip Sampling of complaint files is a key component of the oversight arrangements which are implemented by the Police and Crime Commissioners in pursuit of the statutory duties set out in the Police Reform and Social Responsibility Act 2011, and further strengthened in the Policing and Crime Act 2017.

Since the last report was presented by Suffolk Constabulary, the OPCC has completed Dip Sampling from the finalised cases provided by the Constabulary's Professional Standards Department (PSD) for the periods of 1 July 2025 to 30 September 2025 and 1 October 2025 to 31 December 2025.

A total of 15 files were subject to Dip Sampling with all complaints being handled under the complaint system introduced as part of the Policing and Crime Act 2017 that came into effect on 1 February 2020.

The finalised complaints included files where investigations were conducted by both Suffolk Constabulary and PSD and included complaints where the level of service was judged to be acceptable and not acceptable. Consideration was also given to files where it was decided to record the complaint and take no further action, where complaints were withdrawn and where it was unable to determine if the service provided was acceptable.

Overall, the files sampled were completed to a high standard with the correct processes and procedures followed. There were many examples of positive engagement with the complainants regardless of the complaint outcome, with detailed findings being provided to the complainant with the force taking time to understand and address the concerns raised.

Where the service was judged to be unacceptable, an apology was offered to the complainant and learning was correctly identified and followed up with the officers involved. There were also examples where learning was identified even if the service provided was judged to be acceptable.

This Dip Sample highlighted a small area of improvement that have been discussed with the Suffolk Constabulary Professional Standard Department (PSD) with the appropriate feedback being actioned. These issues included:

- Delay in completing the initial complaint assessment.
- Delay with the investigating officer providing feedback to PSD.
- Officer not informed of a complaint withdrawal.

In conclusion, whilst there have been some minor issues highlighted, this was a very positive Dip Sample which evidences that public complaints are actioned appropriately. This included a number of sensitive complaints and examples where a review of the complaint outcome had been undertaken by the Independent Office for Police Conduct (IOPC) which were not upheld.

The OPCC will continue to monitor the complaint process to ensure the public receive the best possible service.

Glossary

Appropriate authority - the appropriate authority for a person serving with the police is:

- for a chief officer or an acting chief officer, the local policing body for the area of the police force of which that officer is a member; or
- in any other case, the chief officer with direction and control over the person serving with the police

In relation to complaints not concerning the conduct of a person serving with police, the appropriate authority is the chief officer of the police force with which dissatisfaction is expressed by the complainant.

Complaint – any expression of dissatisfaction with police expressed by or on behalf of a member of the public

Complaint handler – is any person who has been appointment to handle a complaint

IOPC Statutory Guidance – is the guidance from the IOPC to assist local policing bodies and Forces to achieve high standards in the handling of complaints, conduct matters, and death or serious injury (DSI) matters concerning those serving with the police, and to comply with their legal obligations.

Schedule 3 – The complaint must be recorded and handled under Schedule 3 of the legislation if the complainant wishes it to be or if it meets certain criteria as defined within the guidance.

Outside Schedule 3 – The complaint can be logged and handled outside of Schedule 3 with a view to resolving the matter promptly and to the satisfaction of the complainant without the need for detailed enquiries to address the concerns.

Investigation – an investigation of the matter recorded under Schedule 3.

Otherwise than by investigation – responding to concerns raised and seeking to resolve them under Schedule 3.

Service provided was not acceptable – the service provided (whether due to the actions of an individual, or organisational failings) did not reach the standard a reasonable person could expect.

Not been able to determine if the service provided was acceptable – should only be determined in situations where despite the complaint being handled in a reasonable and proportionate manner, there is too little information available on which to make the determination.

Local Policing Body – is the term for the Police and Crime Commissioners

Practice requiring improvement – underperformance or conduct not amounting to misconduct or gross misconduct, which falls short of the expectations of the public and the police service.

Regulation 41 – the Regulation under the Police (Complaints and Misconduct) Regulations 2020 under which the appropriate authority contacts the complainant following a suspension of the investigation of a complaint to ascertain whether they wish for the investigation to be started or resumed. If the complainant does not want the investigation started or fails to

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reply, the appropriate authority must determine whether it is in the public interest for the complaint to be treated as a recordable conduct matter.

Reflective Practice Review Process – the procedures set out in Part 6 of the Police (Conduct) Regulations 2020, for handling practice requiring improvement

Relevant review body (RRB) – the relevant body (the IOPC or the Local Policing Body) to consider a review made under Paragraph 6A or 25, Schedule 3, Police Reform Act 2002.

Withdrawn complaints – a complaint that is withdrawn in accordance with regulations 38 and 39, Police (Complaints and Misconduct) Regulations 2020 following an indication or notification from the complainant.