
**IPCC response to the independent review
of deaths and serious incidents in police
custody by Dame Elish Angiolini**

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Introduction

The investigation of deaths and serious injuries following contact with the police is one of the IPCC's most important functions. For that reason, we welcome this independent review, which examines not only these investigations, but the wider issues that lie behind them. In the event of a death in particular, it is very important for families that they know and understand what happened to their loved one and why. The impact of a death on relatives, friends, communities and the police officers or staff involved is profound. We are extremely mindful that any subsequent investigation by the IPCC impacts on these groups further, and must be carried out in a way that is not only independent, thorough and effective but also conscious of the impact on all those affected.

Many of the review's findings in relation to the IPCC echo the conclusions of our own internal review of how we investigate deaths, which was published in 2014. Some of the review's recommendations therefore reflect our current policies, and our recently-revised operations manual. The review's focus on how the families of the deceased are treated, and the importance of communication with them, is particularly welcome and we will incorporate its findings, alongside feedback we have collected ourselves, into our ongoing operational improvement work.

It is encouraging to see the review's particular focus on mental health, which is a recurring theme in the matters that we investigate. We support the urgent phasing out of police stations as a designated place of safety, and agree that plans for NHS commissioning of healthcare in police custody should be reinstated. We also believe it is helpful that the review reinforces the importance of accountability and monitoring of police use of force. We agree that legal aid should be available for bereaved families at inquests, given that other parties will be legally represented.

We are pleased that the review supports our guidance on achieving best evidence in death or serious injury matters. We believe that keeping key police witnesses separate from each other until after they have provided their personal initial account is the best way to obtain best evidence and achieve public confidence. If there are practical reasons which prevent this then alternative measures should be taken to ensure demonstrable integrity of their evidence and a transparent process. This guidance sets out what the IPCC will expect following these incidents and that the

presumption should be that key policing witnesses (officers directly involved in the incident) are separated as soon as operationally safe to do so, so as not to confer, or unintentionally influence each other's accounts. We believe separation also helps guard against the *suspicion* of collusion and so improves public confidence in the process. If approved by the Home Secretary, all police forces in England and Wales will be obliged to make use of the guidance in the event of deaths or serious injuries resulting from firearms operations, incidents in custody or other police contact.

We have not commented on all of the recommendations made in the report, but we have set out in the table below our response to those recommendations that directly or indirectly relate to the work of the IPCC. In general, we support the purpose and proposed outcome of these recommendations. There are, however, two recommendations which we do not believe would have the desired impact, and where we believe that the purpose behind the recommendation can be achieved in other ways.

The review recommends that the IPCC should have a discrete unit to investigate deaths and serious injuries and that it should be staffed entirely by people who have never worked for the police. It further recommends that, throughout the organisation, ex-police officers should not be in lead investigator roles.

We entirely support the view that those investigating deaths and serious injuries should be confident and competent in doing so. For that reason, we are proposing to develop our existing process of accreditation for investigators, so that there will be specific accreditation for particular areas of work, and only those suitably accredited will lead investigations into deaths, or, for example, attend an incident scene. That runs alongside a review and strengthening of our on-call system. We believe that this, rather than a discrete unit, will provide a more flexible and effective resource. Given that last year over forty percent of the investigations we started were into deaths or serious injuries, a separate unit would not be practical. It could increase the delay in deployment, given the geographical spread. In addition, these investigations cover a wide range of circumstances – from fatal shootings to domestic homicides - and therefore require a wide range of skills and experience, and reliance on different subject matter experts. We therefore believe that we can attain the desired outcome by ensuring that those skills and experience are available and rapidly deployed from any of our offices.

The question of the employment of those who have worked for the police is one that has been raised throughout the IPCC's history. The IPCC's independence, both actual and perceived, plays a vital part in ensuring public confidence in the police complaints system and the investigations we conduct. It is important that all our staff, whatever their previous background, work within a culture of independence and challenge, and that this is reflected in our recruitment, management and quality assurance processes.

Our most senior posts (commissioners, chief executive and chief operating officer) have not, and in the case of commissioners, cannot have, worked for the police. Next year, the IPCC will become the Independent Office for Police Conduct (IOPC). Under our new structure, the Director General of the IOPC cannot have worked for the police and will have the statutory power to specify certain roles that cannot be

filled by ex-police; we envisage this power may be used to bar ex-police officers from some senior operational roles.

We have also taken active steps to diversify the backgrounds of our investigative staff. Two thirds do not have any type of policing background. This is a considerably higher percentage than other police oversight bodies in the UK and Ireland (see Annex A). Fewer than 25% of our investigative staff are ex-police officers. Those with a policing background bring important skills and experience to our work, just as former healthcare professionals do to healthcare oversight and investigative bodies. It is important that they work within multi-disciplinary teams and alongside colleagues from different and varied backgrounds.

The review has recognised some of the positive changes that have taken place since our internal review was completed. Its recommendations provide us with an opportunity to review progress and build on those changes. Our aim is to be a continuously improving organisation and regular feedback from our service users, especially bereaved families, is essential. We will be speaking to families about the most sensitive and effective way of gathering feedback from them at different stages in the investigation process on an ongoing basis so that it can feed into our operational improvement work.

We know the impact of our work can be powerful. Since the IPCC was formed, deaths in custody have halved, as police have adopted improved detention and custody practices. We share the review's conclusion that, although deaths and serious incidents in police custody cannot be eradicated, our work, alongside that of others in the policing world, can minimise the risk of their occurrence and ensure that if they occur, they are robustly investigated and lessons are learnt and implemented.

The IPCC and its remit

The IPCC's primary statutory purpose is to secure and maintain public confidence in the police complaints system in England and Wales. It is independent, and makes decisions independently of the police, Government and interest groups. The IPCC investigates the most serious complaints and incidents involving the police, as well as handling certain appeals from people who are not satisfied with the way police have dealt with their complaint.

The IPCC was established by the Police Reform Act 2002 and became operational in April 2004. Since that time its remit has been extended to include:

- Police and Crime Commissioners and their deputies
- The London Mayor's Office for Policing and Crime and his deputy
- The National Crime Agency (NCA)
- Her Majesty's Revenue and Customs (HMRC)
- Staff who carry out certain border and immigration functions at the Home Office
- Certain non-Home Office police forces (including the British Transport Police, the Ministry of Defence Police and the Civil Nuclear Constabulary)
- Contractors working for the police

- Officers carrying out certain functions at the Gangmasters and Labour Abuse Authority

The majority of complaints made against the police are dealt with by the relevant police force (or agency) without IPCC involvement. However, certain types of complaints and incidents must be referred by the police to the IPCC. These include: where someone has died or been seriously injured in police custody or following direct or indirect contact with police and where there is an indication that this contact may have caused or contributed to the death or serious injury, as well as allegations of serious corruption, serious assault, and criminal offences or behaviour liable to lead to misconduct proceedings which are aggravated by discrimination. We then decide what level of involvement we should have in any investigation of the matter. We may choose to conduct our own independent investigation, manage or supervise a police investigation, or decide that the matter can be dealt with locally by the police. We will investigate independently any death in custody and any death following police contact where there is an indication of causation/contribution and where Article 2 of the European Convention on Human Rights is engaged.

As part of our work to secure public confidence we also have a broader role in sharing learning to help the police service develop and improve. We issue statutory guidance to the police service on the handling of complaints, carry out research, publish learning from real life cases, and work to improve local handling of complaints through our oversight work.

30 October 2017

Response to recommendations

We have not commented on all of the recommendations made in the report, but we have set out in the table below our response to those recommendations that directly or indirectly relate to the work of the IPCC.

Recommendation (Chapter)	Theme from review	IPCC response
<p>34. <i>Written information about sources of specialist support, including information about INQUEST, should be given to every family at the very first contact with an IPCC representative, as well as alternative forms of information taking into account the needs of the individual next of kin.</i> (IPCC investigations, 9)</p>	<p>Funding for families and family support</p>	<p>We recognise the importance of ensuring that families have access to appropriate information at what is an extremely difficult and distressing time. The IPCC has a comprehensive information booklet, specifically for bereaved families, which signposts to sources of dedicated support, including INQUEST. It also contains information on a family's rights, such as the right to request a second post-mortem. It was produced after the IPCC's own deaths review in 2014, in response to families, who said that it is difficult to take in oral information in the early traumatic days, and that they would therefore benefit from something they could keep and refer to when ready. The booklet is available in both print and electronic form and should be given to all families at the start of an investigation. We will continue to stress to the IPCC's investigation staff the importance of sharing this information with families at the outset and, when appropriate, throughout an investigation. We will also incorporate this into investigation checklists as part of our operational improvement work.</p> <p>Our Family Liaison Managers (FLMs) provide support to families throughout an investigation. FLMs undertake specialist training to develop skills in communicating with and supporting families following a bereavement. We are currently conducting a review of our family liaison model, to ensure we provide the best support service for families. We will review the literature and information we provide to families, to ensure that signposting is clear and accessible, as part of this.</p> <p>We agree that families should be signposted to specialist legal advice, where available. The IPCC cannot act for families, but it is important that they have access to support and advocacy. We believe that legal aid should be automatically available to bereaved families, to ensure equality of arms, and we support the review's recommendation on this. We have also argued more generally for some form of</p>
<p>35. <i>The Coroner and IPCC staff should tell families immediately following the death of their loved one of the right to independent free specialist legal advice, the benefit of securing advice from the earliest possible stage and the right to representation of a pathologist at the post mortem or to request a second post-mortem.</i> (Coronial system, 16)</p>	<p>Funding for families and family support</p>	
<p>36. <i>[Information on legal advice and rights] should be regularly repeated during the progress of the investigation if the family have not sought legal advice at the earlier stage. The Coroner should provide information to families about the post-mortem examination before it takes place – including the time and location of the examination, and their right to have a representative present, and all other associated rights.</i> (IPCC investigations, 9)</p>	<p>Funding for families and family support</p>	

<p>42. <i>All state agencies who are engaged with the family, including police, IPCC, CPS and Coroners and their staff should provide both oral and written information about support services, including INQUEST, to families as early as possible when contact is established following the death. Agencies should not assume that this has already been done by others.</i> (Family support, 15)</p>	<p>Funding for families and family support</p>	<p>independent advocacy for those navigating the police complaints system, as there is in healthcare.</p>
<p>45. <i>Written information about sources of specialist support and legal advice should be passed to every family by the Coroner's Officer at the very first contact. The Police and IPCC should also be subject to a legal obligation to advise the family of this right immediately on advising the family of the death. This may require translation services if English is not the first language.</i> (Coronial system, 16)</p>	<p>Funding for families and family support</p>	<p>We agree that families should be made aware of sources of specialist support. As previously indicated, we provide an information booklet for bereaved families, which signposts sources of dedicated support and contains information on a family's rights. We also ensure that information and documents can be translated to meet the individual needs of a family, complainant or interested party.</p> <p>The recommendation proposes that both the police and the IPCC should be subject to a legal obligation to advise families of their rights immediately on advising them of a death. However, it should be noted that the IPCC does not inform the next of kin when someone has died. This is carried out by the police.</p>
<p>46. <i>Following a death in police custody the police should immediately advise the Coroner as well as the IPCC of the fact and whereabouts of the death, and preserve the scene of the death from any potential interference.</i> (Coronial system, 16)</p>	<p>Communication</p>	<p>In relation to the IPCC, this duty already exists. It is set out in the Police Reform Act¹ and Regulation 8 of the Police (Complaints and Misconduct) Regulations 2012². The former states that 'there must be referral without delay and in any event not later than the end of the day following the day on which the matter first comes to the attention of the appropriate authority' (i.e. the relevant chief officer or local policing body). Any delay in doing so will form part of the investigation itself. In addition, the IPCC's statutory guidance provides that 'the process of referral must not delay any initial action by an appropriate authority to secure or preserve evidence especially in relation to incident scene management'.³</p>

¹ <http://www.legislation.gov.uk/ukpga/2002/30/section/59>

² <http://www.legislation.gov.uk/uksi/2012/1204/made>

³ <https://www.ipcc.gov.uk/page/statutory-guidance>

		<p>We are acutely aware of the significance of obtaining and protecting evidence following a death or serious injury. We have produced draft statutory guidance on achieving best evidence in death or serious injury matters, which is currently with the Home Secretary for approval. In February 2017 the IPCC published this draft guidance and wrote to all police forces to ensure that they are aware of the IPCC's views on protecting evidence in these circumstances.</p>
<p><i>47. IPCC staff should to be vigilant about language and communication with families and of how their conduct and communication with police officers may be perceived by next of kin. Families should be invited to express concerns about anything said by IPCC staff which may give rise to doubts about independence. This should form part of the IPCC's learning and development around engagement with families.</i></p> <p>(IPCC investigations, 9)</p>	<p>Communication</p>	<p>We recognise how important communication and language is in carrying out our role, in particular when dealing with families who have suffered the loss of a loved one. Communication and engagement with families is an important focus of our training modules for investigating deaths. The training programme for all new IPCC investigation staff contains a section on bereavement, which includes initial contact, the impact of investigations on families and maintaining relationships. It also includes a video of bereaved individuals discussing their experiences.</p> <p>However, we accept that there is still scope for further learning and improvement. We are currently conducting a review of the way in which we collect feedback from all service users, including families, on an ongoing basis, and how best to act on the feedback or concerns that may be raised. We will be speaking to families about the most sensitive and effective way of gathering feedback from them at different stages in the investigation process.</p> <p>We are aware that on some occasions families have had concerns about the manner in which IPCC staff have communicated with members of the police service. On 30 March 2017 we held a family listening day, designed and facilitated by INQUEST, to learn more about families' experiences of IPCC investigations. Interactions or perceived closeness between our staff and the police was one issue that was raised by some families during the day.</p> <p>We have robust policies in place to ensure that conflicts of interest are minimised and managed when they do arise. However, we appreciate that language and methods of communication, both with families and members of the police service, are extremely important and may affect perception of our independence. We will ensure that all staff are reminded of this and of the importance of ensuring their behaviour, language or communication does not impact negatively on perceptions of impartiality and independence.</p>

<p>48. <i>The roles of the Commissioner and the lead investigator need to be made clear to families in relation to all key aspects of the investigation from the earliest opportunity.</i> (IPCC investigations, 9)</p>	<p>Communication</p>	<p>The roles of the commissioner and the lead investigator are explained in the family booklet that is provided at the outset of an investigation. Families are also offered the opportunity to meet with the lead investigator or the commissioner.</p> <p>We recognise that these dual roles can be confusing, and recent legal judgments have complicated this further. This is one of the reasons why we proposed to the government that there should be a single line of accountability and decision-making. This is now provided for in the Police and Crime Act 2017 and will come into effect with the transition to the Independent Office for Police Conduct (IOPC). The role of commissioner will no longer exist and regional directors and a Wales director will be responsible for the IOPC's work in their region or nation. This should provide greater clarity, and we will ensure that the roles of those involved in investigations under the new structure are explained clearly to families, complainants and interested parties.</p>
<p>50. <i>Before the IPCC has formally taken over an investigation the police should make no public comment on the matter. Unless there are exceptional circumstances which require the urgent release of information the police should not issue any information to the media, but should leave this to the IPCC.</i> (Family support, 15)</p>	<p>Communication</p>	<p>We recognise that families are concerned about the nature of any information being released and how it might impact on an investigation or perceptions of their loved ones.</p> <p>For that reason, the IPCC itself will only comment on matters that we have ourselves independently verified. This can take some time. In the meantime, and before we have made the decision to investigate, it is important to prevent an information vacuum, which can be filled by rumour or uninformed speculation. This problem was referenced in the report of the Riots, Communities and Victims Panel following the riots in the wake of the death of Mark Duggan. Since then the increased use of social media has added to these risks. The IPCC, in conjunction with the Association of Chief Police Officers (ACPO), subsequently agreed a media protocol, setting out clearly which organisation is responsible for issuing what information.</p> <p>The protocol makes clear that the IPCC has the media lead on independent investigations and is responsible for releasing into the public domain information relevant to those investigations. However, it also allows police forces to provide certain limited factual information publicly, both prior to and after the IPCC declaring an independent investigation. It states that, before an independent investigation is declared, forces 'should restrict their comments to matters of fact, which cannot become disputed during any IPCC investigation.' and references the limited factual information forces may put out at this stage. During the course of an investigation, if there are concerns about public disorder or community tension, which the force</p>

		<p>believes requires response, the protocol requires the force to provide the IPCC with any proposed lines or comment in advance.</p> <p>We make it very clear to forces that they should exercise significant restraint in what they say, and that we will challenge and/or correct any statement made by or on behalf of the police which contains irrelevant or prejudicial comment about the deceased person, or makes assumptions that may later be disproved by our investigation. We are currently working with the National Police Chiefs' Council (NPCC) on the development of a new protocol, and we will continue to keep this area under regular review.</p>
<p>51. <i>Any information released to the media should be limited to very basic information about the deceased and the whereabouts of the death, and where possible, agreed in advance with the family, unless there are exceptional circumstances (for example a witness appeal) where time does not allow for this.</i> (Family support, 15)</p>	<p>Communication</p>	<p>This recommendation is in line with our current practice. We routinely share our news releases with families prior to them being issued to the media and reaffirmed our commitment to doing this following our own review into how the IPCC investigates deaths. However, there may be limited occasions where the pressure of time or other circumstances mean this is not possible. As stated above, our public statements are based on factual information, verified by us, that is relevant to our investigation.</p>
<p>52. <i>Consideration should be given to the creation of statutory time limits for the investigation by the agencies unless there are to be criminal charges made and the Coroner suspends the Coroner's investigation. These time limits should be set by the Coroner following receipt of the report of the early meeting between the agencies. A pre-inquest hearing should be set before the expiry of that time limit or on cause shown in the event of a significant reason why the time limit cannot be met.</i> (Coronial system, 16)</p>	<p>Communication</p>	<p>We recognise that the length of time taken to complete some investigations has been a cause of concern both for families and for police who are involved. We fully appreciate the additional stress and anxiety that may be caused by a very long-running investigation. As stated in our response to recommendations 59 and 69, we are committed to, and are already achieving, shorter time-frames for our investigations, including those into deaths in custody, which are among the most complex cases referred to us.</p> <p>We are, however, concerned that a statutory time limit could risk creating a perverse incentive to meet deadlines at the expense of the thoroughness and quality of investigations, and our obligations under Article 2 of the European Convention on Human Rights (ECHR) to carry out a full and thorough independent investigation.</p> <p>We already liaise with coroners during our investigations. The current process for pre-inquest review also allows for a degree of coordination and to monitor timeframes. We have been in communication with the Chief Coroner with a view to progressing a revised Memorandum of Understanding and/or new guidance. We</p>

		agree that the IPCC should provide time estimates to coroners, explain and account for delays, and provide regular updates during the course of an investigation.
53. <i>Police and Crime Commissioners should report annually on deaths and serious incidents in police custody in their jurisdictions.</i> (Sustained learning, 17)	Communication	<p>It will be necessary to define exactly what is meant by a ‘serious incident’: it may be that this includes both serious injuries and near-deaths. The IPCC already publishes:</p> <ul style="list-style-type: none"> - annual statistics on deaths during or following police contact, including a breakdown by police force area (this includes deaths in police custody and deaths following other police contact that the IPCC has independently investigated) - annual and quarterly police complaints statistics, broken down by force area and allegation type <p>The IPCC’s statistics on deaths during or following police contact are designated national statistics, approved by the Office for National Statistics. It would be important to ensure that any other reporting on this area is accurate and consistent with these statistics, to avoid creating any confusion. We would encourage PCCs to make use of all available data to enhance awareness of local issues or trends and encourage learning in their force areas.</p>
55. <i>Urgent consideration should be given to the development of an expert Deaths and Serious Injuries Unit of the IPCC for the investigation of all deaths in police custody in England and Wales. The Unit should be staffed by senior and expert officers from a non-police background.</i> (IPCC investigations, 9)	Investigations	<p>We recognise that it is vital our staff have the appropriate skill sets to conduct investigations into deaths and serious injuries, which are among some of the most serious and sensitive matters that we deal with. We also are also conscious of how important it is that we are trusted to conduct these investigations, and indeed all our investigations, in an independent and impartial manner.</p> <p>We therefore support the intent behind this recommendation, but doubt that the creation of a dedicated unit would be practical or have the desired effect. Deaths and serious injury investigations form a significant number of the matters referred to and investigated by us. Last year, for example, we had 1,700 referrals of such matters and began independent investigations into 237 deaths and serious injuries: over forty percent of all independent investigations started in the year.⁴ The proportion within our current caseload is even higher, as these investigations typically take longer than others. This is therefore a core part of our work.</p>

⁴ A combination of data has been used to collate this information and it is therefore heavily reliant on the quality of data recording on these systems.

		<p>These incidents can occur anywhere in England and Wales, and require swift response. They do not form a homogeneous group, varying considerably from, for example, fatal shootings to domestic violence killings by a third party, requiring different types of investigation and investigative skills. Such investigations also rely on specialist support from across the organisation, for example in relation to disclosure, mental health, and scene and exhibits management.</p> <p>However, we recognise that staff investigating a death need to have the skills to be able to deal effectively with the particular challenges of these investigations. We therefore propose to put in place specialist accreditation for staff who investigate deaths. We are also developing a bespoke process to guide investigators through this type of investigation, supported by new subject matter experts and improved support materials.</p>
<p><i>56. The IPCC should be resourced to provide a 24 hour national on call 'post incident' team with sufficient national coverage to ensure immediate response and attendance at a death or life threatening injury in custody within the shortest possible timeframe. Those attending should have experience of all steps necessary to protect a potential crime scene and secure evidence. The IPCC officer should be in constant contact with a senior member of the Deaths and Serious Injuries Unit for advice, guidance and further instruction until members of that Unit have arrived at the scene.</i> (IPCC investigations, 9)</p>	<p>Investigations</p>	<p>We are acutely aware of how critical the period immediately following a death or serious injury involving the police is. It is crucial that appropriate steps are taken at this time to ensure that the investigation is able to fully establish the facts and that the opportunity to learn lessons is not missed.</p> <p>The IPCC already operates a 24 hour on-call function whereby we are able to respond immediately to incidents. We have improved our geographical coverage, with two new offices, but there are nevertheless limitations to how quickly our staff can physically attend a scene. However, as soon as we are made aware of an incident, a decision will be taken as to whether to deploy IPCC staff. Where we do not deploy staff to an incident we may still give directions to the police, for example warning about conferring. Where it is considered necessary to deploy (as will always be the case where there has been a death in custody, and will also usually be the case where there has been a life threatening injury in custody), an experienced IPCC operations manager maintains contact with police officers at the scene by phone and directs them in how to manage the scene until IPCC on-call staff arrive. Independent forensic expertise is available by phone to assist them.</p> <p>It would require a huge resource to ensure that the IPCC was able to ensure immediate attendance, rather than response. Moreover, whatever the resource available, the police will almost always be on the scene first, given that it is their actions, or failures to act, that will lead to the referral. They have a duty to protect the scene of an incident and any failure to do so will form part of the subsequent investigation.</p>

		<p>Our focus is therefore on strengthening our on-call capacity and producing statutory guidance to ensure that the police carry out their duty effectively. We are reviewing the on-call system, including how best to manage resources, how to further improve our geographic coverage, and evaluation of our post-incident procedures. As mentioned previously, we have also produced draft statutory guidance to the police service on achieving best evidence in death or serious injury matters, to help ensure that the period immediately following these incidents is always managed appropriately.</p>
<p>57. <i>IPCC investigators should consider if discriminatory attitudes have played a part in restraint-related deaths in all cases where restraint, ethnicity and mental health play a part (in line with the IPCC discrimination guidelines). A systematic approach should be adopted across the organisation.</i> (Ethnicity, 5)</p>	<p>Investigations</p>	<p>Following our own review of how we investigate deaths, we committed to ensuring that issues of discrimination are always taken into account in our mode of investigation decisions, setting terms of reference and throughout the course of an independent investigation.</p> <p>In September 2015 we also published revised guidance on dealing with allegations of discrimination, which is to be used by the police service and our own staff. This states: ‘The terms of reference for an investigation into a complaint, conduct matter or death or serious injury matter that raises issues of discrimination should explicitly refer to and address any discrimination allegations raised. This includes where discrimination is alleged as an aggravating factor in relation to a separate criminal or misconduct allegation or where no specific allegation of discrimination has been made but it is apparent that discrimination may be a relevant consideration.’⁵</p> <p>We believe that having a systematic approach is key to achieving consistency and effectiveness in this area. Training on personal bias and discrimination has been incorporated into the core skills training for all new IPCC investigators. Recent training for decision makers on approving terms of reference also included a specific focus on explicitly addressing any potential issues of discrimination.</p>
<p>58. <i>Ex-police officers should be phased out as lead investigators in the IPCC. To the extent that the IPCC still consider this expertise is required, ex-police staff should act as a consultancy and training source within and, more appropriately, outwith the</i></p>	<p>Investigations</p>	<p>This is an issue that has been raised with us frequently, including in our own deaths review.</p> <p>We are conscious that the IPCC’s independence, both actual and perceived, plays a vital part in ensuring public confidence in the police complaints system and the</p>

⁵ http://www.ipcc.gov.uk/sites/default/files/Documents/statutoryguidance/Guidelines_for_handling_allegations_of_discrimination.pdf

<p><i>organisation. The IPCC should also look beyond England and Wales for expert consultants and secondees from other investigative organisations who are also expert in the investigative, forensic skills required to investigate such serious cases, for example, from the Procurator Fiscal Service in Scotland and the Office of the Ombudsman for Police in Northern Ireland. A wider pool of expert resources can also be considered by looking beyond the immediate jurisdiction of the IPCC. (IPCC investigations, 9)</i></p>	<p>investigations we conduct. Currently, our commissioners, who have oversight of investigations, cannot have worked for the police, and when the IOPC comes into effect, the new Director General (who by law also may not ever have worked for the police) will have the statutory power to specify that certain roles cannot be filled by those who have previously worked in the police service. We envisage that this power may be used to ensure that those in the most senior operational roles within the IOPC are similarly barred.</p> <p>The recommendation goes considerably further than this, and it will of course be for the new Director General to decide which, and how many, roles are police-barred. However, we have taken active steps to diversify the backgrounds of our investigative staff. Two thirds do not have any type of policing background. This is a considerably higher percentage than other police oversight bodies in the UK and Ireland (see Annex A), which employ between 40% and 70% of ex-police personnel in investigative roles.⁶ Fewer than 25% of our investigative staff are ex-police officers.</p> <p>As the Committee on Standards in Public Life has observed, all independent oversight bodies must guard against organisational capture. It is therefore important that all our staff work within a culture of independence and challenge, whatever their previous background. We continue to believe that ex-police bring important and valuable skills to the organisation, working alongside colleagues, a significant majority of whom have different and varied backgrounds. It is expected that investigative bodies, for example in healthcare, include people with professional experience in those fields.</p> <p>We ensure that all those joining the organisation are trained in the necessary investigative skills. However, the practical policing experience of those who come from a police background cannot be taught and can be extremely useful in providing context and robustly scrutinising and challenging police behaviour. That has been positively commented on by some bereaved families.</p> <p>We have in place a robust policy to ensure conflicts of interest are managed. Staff and commissioners must report conflicts of interest or previous employment with the police or other bodies under our jurisdiction. Additionally, our conflict of interest policy ensures that for a period of at least three years no lead investigator can investigate a</p>
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⁶ Annex A - Comparison of employment of ex-police officers and staff from Police Investigations and Review Body (PIRC); Police Ombudsman for Northern Ireland (PONI) and Garda Ombudsman (GSOC).

		<p>police force for which they previously worked. Any exception to this rule can only be permitted with the agreement of the Chief Operating Officer.</p>
<p>59. <i>The IPCC should urgently consider whether to adopt a formal time limit for the completion of Article 2 investigations, with the lead investigator obliged to set out in writing why any extension to this limit was required.</i> (IPCC investigations, 9)</p>	<p>Investigations</p>	<p>As stated in our response to recommendation 52, we understand how important it is for investigations to be as expeditious as possible, and that relevant people should be promptly informed of any delays. As previously stated, our investigations are very diverse and a standard time limit would not be beneficial. In particular, Article 2 investigations can be very complex and will often require extensive work to complete a sufficiently thorough inquiry. We need to ensure that speed does not compromise thoroughness.</p> <p>At the beginning of each investigation, we therefore estimate how long it is likely to take, based upon its complexity and circumstances. In some cases, this can be weeks, rather than months. We have found in the past that a single time limit can actually lead to delay in investigations that should not, and need not, take that long. As stated above, our MoU with coroners and/or new guidance will include informing them of any reasons for being unable to meet the time limit, and this extends also to other interested persons.</p> <p>There are various factors that can impact on the time it takes to complete an investigation: such as the volume and complexity of evidence in the case; the ease of gathering evidence, including full accounts from police witnesses; obtaining expert evidence and pathology reports; awaiting decisions from the CPS as to whether criminal charges will be brought; and any other parallel investigations or proceedings. Our draft statutory guidance on post-incident management, and our MoU with the CPS seek to minimise some of these delays.</p> <p>We have made substantial improvements in the timeliness of all of our investigations and this remains a priority. The average duration of our independent investigations reduced from 294 days in 2014/15 to 239 days in 2016/17, and investigations into deaths in custody specifically have reduced by six weeks on average over the last year alone.</p>
<p>60. <i>Police forces should be held accountable at the most senior level for protecting the scene when there is a death or serious incident in custody and preserving evidence until the arrival of the IPCC. Any failure to fulfil this role should be treated as a</i></p>	<p>Investigations</p>	<p>We welcome the emphasis on ensuring accountability for the preservation of the scene and evidence, although disciplinary proceedings may not always be appropriate where the fault is systemic, rather than individual: for example, where reasonable steps have been taken to ensure the maintenance of CCTV cameras and</p>

<p><i>misconduct issue. Failure to maintain CCTV cameras and audio recording equipment in good working order should carry a disciplinary sanction.</i> (IPCC investigations, 9)</p>		<p>audio equipment, and a fault was not known. Some issues may be more suitably addressed through targeted organisational learning recommendations.</p> <p>The College of Policing has developed guidance on outcomes in police misconduct proceedings, and would need to consider any action in support of this recommendation.</p>
<p><i>61. Investigations should maintain a strong focus on obtaining independent evidence, including prioritising CCTV coverage, mobile phone video recordings and the existence of independent witnesses during the immediate aftermath of an incident as well as appropriate instruction of experts.</i> (IPCC investigations, 9)</p>	<p>Investigations</p>	<p>This recommendation is in line with the IPCC's current practice. All of our investigators undertake training in this area and obtaining independent evidence, as well as accounts from subjects and police witnesses, is always a priority. We also have access to independent forensic experts who can be contacted to provide advice where necessary and to attend scenes to assist.</p>
<p><i>63. The IPCC draft guidance on post-incident procedures relating to separation of officers and non-conferral should be accepted by the Government.</i> (Police conferral, 10)</p>	<p>Investigations</p>	<p>The IPCC's draft guidance on achieving best evidence in death or serious injury matters was submitted to the Home Secretary in December 2015. We then clarified certain elements of the guidance and its application and resubmitted it to the Home Secretary in December 2016.</p>
<p><i>64. Other than for pressing operational reasons, police officers involved in a death in custody or serious incident, whether as principal officers or witnesses to the incident should not confer or speak to each other following that incident and prior to producing their initial accounts and statements on any matter concerning their individual recollections of the incident, even about seemingly minor details. As with civilian witnesses, all statements should be the honestly held recollection of the individual officer.</i> (Police conferral, 10)</p>	<p>Investigations</p>	<p>In February 2017 we published the draft guidance and wrote to all police forces to ensure that they are aware of the IPCC's views on protecting evidence and securing initial accounts from officers involved. We are currently awaiting the Home Secretary's approval of the guidance.</p>
<p><i>65. There should be a duty for police officers to provide a full and candid statement at the earliest</i></p>	<p>Investigations</p>	<p>We have for some time argued that police witnesses should be under a duty of candour or cooperation with our investigations. Where an individual has died or</p>

<p><i>opportunity and within the specified timeframe unless they are formal suspects.</i> (Police misconduct, 13)</p>		<p>suffered serious injury during or following police contact, it is entirely appropriate that any police witnesses who were present or have relevant information co-operate fully with the body investigating the incident and tell it what they know. It is also important that we are able to gather relevant information as speedily as possible, without repeated iterations in writing with police witnesses.</p> <p>We understand that as part of its reforms to the police complaints system, the Government intends to set out in future regulations a positive obligation for police officers to co-operate with investigations. We support this and believe the duty should be viewed positively by officers as part of their professional responsibilities.</p>
<p><i>66. The IPCC should make clear in its guidance that minor discrepancies in statements given by police officers or any other witnesses to fact, are natural and are not presumed to be the outcome of dishonesty or incompetence.</i> (Police conferral, 10)</p>	<p>Investigations</p>	<p>We appreciate that minor discrepancies can occur when providing statements, and that this is to be expected and does not necessarily indicate dishonesty or incompetence.</p> <p>We recognise that in some incidents recollection can be difficult and that officers may not always make a contemporaneous note of their actions. However, there may also be times where a seemingly minor discrepancy is significant. We carefully weigh up all relevant evidence before deciding whether an officer's conduct should be referred to the CPS or to disciplinary proceedings. It is ultimately for those conducting any proceedings to reach a determination in respect of the officer's conduct.</p>
<p><i>69. Article 2 related cases should be dealt with in the same time scales as a civilian homicide case and the appropriate resources deployed by all agencies to achieve the completion of the investigation and decision making process within the robust timescale achieved in those cases.</i> (Police misconduct, 13)</p>	<p>Investigations</p>	<p>As we have stated in our response to previous recommendations on timeliness, we agree that investigations should be conducted as promptly as possible, and that this is beneficial for both families and the officers involved. However, it is also vital, and in the interest of all parties, that investigations are thorough and reach appropriate findings.</p> <p>As we have indicated previously, we believe that it would not be helpful to prescribe a set time scale in which to complete investigations engaging Article 2. We agree that every effort should be made to complete investigations and subsequent proceedings as expeditiously as possible, and that all bodies who are involved in the decision making processes need to play their part in this.</p> <p>It is also important to note that civilian homicide cases are different in nature to the investigations carried out by the IPCC. IPCC investigations will not only be considering potential criminality (where appropriate), but also issues of misconduct</p>

		<p>and unsatisfactory performance, and whether any local or national organisational learning recommendations should be made. The IPCC is also obliged to produce a full report, weighing up all the evidence and determining whether or not there is a case to answer for misconduct or criminality. This report needs to be able to withstand judicial review and to provide the basis for any subsequent judicial proceedings. This is not a task that criminal homicide investigators carry out.</p>
<p><i>71. There should be a formal meeting between the CPS, HSE, and IPCC within 14 days of a death or serious incident. This meeting should be chaired by the IPCC to discuss the emerging evidence, the probability and/or possibility of criminal charges and the nature of these charges, and be a precursor to regular cooperation and advice between these bodies for the duration of the investigation. The meeting should set a timetable to be submitted to the Coroner. The liaison should be formalised through a Memorandum of Understanding.</i> (Prosecutions, 14)</p>	<p>Investigations</p>	<p>As in our response to recommendation 53 above, it will be necessary to define exactly what is meant by a 'serious incident', and whether the recommendation refers only to cases independently investigated by the IPCC. We agree that it is important always to consider whether liaison with HSE and the CPS is necessary or beneficial at the outset of an investigation, and if so to ensure that this happens as swiftly as possible so that the relevant organisations can carry out their respective roles as expeditiously as possible. However, it is not clear that this would be necessary in all cases.</p> <p>We also have concerns about the proposal for a 14 day time limit. In some circumstances this may be premature or inappropriate. This is especially pertinent given that there may not yet be a clear position on the possibility of criminal charges.</p> <p>The current MOU between the IPCC and the CPS states that the IPCC will notify the CPS of an independent investigation within 5 working days of a mode of investigation decision. It also provides that in cases involving a death in custody, the IPCC lead investigator and CPS reviewing lawyer will hold an initial meeting within 20 working days of the notification, although this can be delayed in specific circumstances.</p> <p>The IPCC also has a protocol with the HSE, which facilitates co-operation between the bodies, although this does not specify formal meetings following a death or serious injury. As stated above, it is not clear that the involvement of the HSE will be necessary or appropriate in all cases.</p>
<p><i>77. Police must be held to account both at an individual and corporate level, where restraint has been found to have been used in an unnecessary, disproportionate or excessive way.</i> (Restraint, 2)</p>	<p>Accountability</p>	<p>We agree that it is right that police should be held to account at both an individual and corporate level. In addition to considering individual culpability, where appropriate the possibility of corporate manslaughter and/or health and safety charges should be considered.</p>

		<p>In our thematic report into police use of force (published in 2016)⁷, we made a number of recommendations to the police service. In particular, we recommended that there should be consistent recording, monitoring and analysis of police use of force, to allow action to be taken if patterns of concern emerge. We believe that this is extremely important in ensuring accountability at individual, local and national level. The NPCC has since launched new national standards on the recording of police use of force.</p> <p>In all cases the IPCC will continue to examine opportunities for organisational learning by individual forces or nationally. We will continue to issue formal organisational recommendations where appropriate and ordinarily will publish recipients' responses to these recommendations (subject to necessary redaction) as a matter of public record.</p>
<p><i>78. The IPCC should address discrimination issues robustly within misconduct recommendations, including where discrimination is not overt but can be inferred from the evidence in that specific case or similar cases involving the same officer. (Ethnicity, 5)</i></p>	<p>Accountability</p>	<p>We recognise that it is extremely important that discrimination issues are dealt with robustly, by both forces and the IPCC. As previously mentioned, in September 2015 we published revised guidelines on dealing with allegations of discrimination, which both the police and IPCC staff should follow. They provide guidance on identifying different forms of discrimination, including where the discrimination has not been overt. Paragraph 6.9 of the guidelines sets out that: 'The investigating officer must look at all the circumstances of the particular case in order to see if discrimination can rightly be inferred from the surrounding facts'. Case to answer decisions must be based on the evidence available. However, the guidelines highlight that this may include evidence from previous incidents.</p> <p>Our effectiveness and proficiency in this area remains a priority. As has been mentioned, all of our operational staff have undertaken training on personal bias and discrimination.</p>
<p><i>79. In Article 2 related deaths the IPCC should consider making a formal written request for the restriction of duties (in misconduct investigations) and the suspension of officers pending the outcome of gross misconduct and/or criminal investigations,</i></p>	<p>Accountability</p>	<p>This already happens. Regulation 10(12) of the Police (Conduct) Regulations 2012 requires the appropriate authority (that is, the chief constable or local policing body) to consult with the IPCC in respect of a decision to restrict duties, to suspend, and end a suspension, where an officer is subject to an independent, managed or supervised investigation. Paragraphs 2.38-2.50 of the Home Office Guidance on Police Officer Misconduct, Unsatisfactory Performance and Attendance Management</p>

⁷ <https://www.ipcc.gov.uk/news/call-greater-analysis-police-use-force-new-report-published>

<p><i>although the final decision should remain with the Chief Constable.</i> (Police misconduct, 13)</p>		<p>Procedures provides further detail about this. Where appropriate, the IPCC makes formal submissions regarding suspension and restriction of duties, both in Article 2 related and other investigations.</p>
<p><i>80a. The IPCC should publish criteria for deciding on whether police action amounts to misconduct or gross misconduct.</i> (Police misconduct, 13)</p>	<p>Accountability</p>	<p>We believe that this is a matter for the College of Policing, rather than the IPCC. The College has recently produced guidance on outcomes in police misconduct proceedings. The guidance is intended to assist those conducting proceedings, and to provide a framework for assessing the seriousness of conduct and promote consistency in decision-making.</p> <p>It is important to note that final decisions about whether police action amounts to misconduct or gross misconduct are made by those conducting disciplinary proceedings and not the IPCC. The IPCC's role is to determine whether there is a case to answer.</p>
<p><i>80b. The decision on what categorisation the alleged conduct falls into should be taken by the Director of a specialist deaths investigations unit rather than by the lead investigator.</i> (Police misconduct, 13)</p>	<p>Accountability</p>	<p>This recommendation is linked to the previous recommendation and the earlier recommendation for the development of a specialist Deaths and Serious Injuries Unit. In the IOPC, all decision-making will flow from the Director General through to the regional and Wales directors. They will be responsible for ensuring consistency in the way in which assessments of severity and conduct are made. The IPCC has already said that we will have regard to the College of Policing guidance.</p>
<p><i>81. The IPCC should be responsible for informing all interested persons as soon as a misconduct hearing is arranged. There must be adequate notice for a family to attend, and their rights should be fully explained.</i> (Police misconduct, 13)</p>	<p>Accountability</p>	<p>We agree that complainants and interested persons should be informed promptly of any disciplinary proceedings and have their rights fully explained. However, under legislation it is the appropriate authority (i.e. the chief officer of the police force concerned or local policing body) rather than the IPCC who is responsible for convening disciplinary proceedings and notifying complainants and interested persons. Regulation 30(2) of the Police (Conduct) Regulations 2012 sets out that "The appropriate authority shall notify the complainant or any interested person of the date, time and place of the misconduct proceedings". Not all misconduct proceedings flow from IPCC investigations and therefore there is a need to ensure that this task is undertaken consistently in all cases.</p> <p>Nevertheless, where possible, the IPCC does liaise with the families. However, it is sometimes the case that disciplinary proceedings are held at short notice. The IPCC</p>

		has recommended that panel chairs play a more proactive role in case management, to avoid this, so that all parties are able to prepare and participate appropriately.
82. <i>The Government should consider whether there is a need for a family's role at a misconduct hearing to be clarified, standardised and applied with more consistency, and advance disclosure of evidence to family members recognised as interested parties (subject to the harm test).</i> (Police misconduct, 13)	Accountability	We agree that it may be helpful to further clarify a family's role at a misconduct hearing.
94. <i>Families should be involved on an ongoing basis with the provision of staff training in the IPCC including training on the impact of a traumatic bereavement.</i> (IPCC investigations, 9)	Training	We agree. We have taken steps to improve training on bereavement awareness and engagement with families, and we are looking at further ways to improve and reflect feedback from those who come into contact with the IPCC or use our services. For example, we have worked with the Victims' Commissioner and a bereaved mother to develop video input as part of our core training for investigators. We are also in contact with INQUEST to explore how bereaved families can be more directly involved in training and input.
95. <i>Police forces, the IPCC, CPS, Coroners offices and the College of Policing should give consideration to how family experiences can be brought into training and awareness packages. As a result of the tragic experience of the loss of a loved one in police custody many next of kin have become experts on a range of issues following a death in police custody and exposing officers to these families and listening to them is an invaluable training resource for all levels of command.</i> (Family support, 15)	Training	In March we held a second family listening day, organised by INQUEST, to hear directly from bereaved families on their experience of investigations. We are currently reviewing how we collect feedback from all of our service users. A critical aspect of this will be working with families to develop appropriate and effective feedback mechanisms. This will allow us to acquire ongoing feedback from families and reflect the insight we gather in improvements to our service and the way we train our staff.
98. <i>The IPCC should ensure that race and discrimination issues are considered as an integral part of its work. This should be monitored and fed into internal learning and the IPCC's 'watchdog' role.</i> (Ethnicity, 5)	Learning	Addressing discrimination has been a central part of the IPCC's work in recent years. As previously stated, we have developed guidelines on handling allegations of discrimination to help ensure that forces and the IPCC identify, consider and address discrimination appropriately. As part of our oversight work, we have also carried out and published reviews of how allegations are being dealt with by forces at a local level in three thematic reports,

		<p>noting that we uphold more appeals relating to discrimination allegations than other matters and directing reinvestigations.</p> <p>We have recently published the findings of this review and have made number of recommendations for improvement. We have asked all forces to review and apply the recommendations, and to identify where they can adopt the good practice examples from the report.</p>
<p>102. <i>The national ‘use of force’ data collection must be continually reviewed to ensure it provides the necessary transparency, auditing, active monitoring and opportunities for learning and training absent from the current system. Monitoring of ethnicity and mental health should be part of that system. More meaningful information should be requested from forms recording use of force.</i> (Restraint, 2)</p>	<p>Statistics</p>	<p>We welcome this recommendation and believe it is extremely important that there is ongoing and effective scrutiny of police use of force (see our response to recommendation 77 above). Our recent thematic report on use of force⁸ found that forces are less likely to uphold complaints about the use of force than other types of complaint. Yet when those complainants appealed to the IPCC, their appeal was more likely to succeed than other types of appeal, particularly if the complainant was from a black or minority ethnic background.</p> <p>We agree that there needs to be transparency, auditing and monitoring of use of force data. It also needs to be actively followed up, and reviewed regularly to identify where there is evidence of a disproportionate impact of the use of force, particularly against certain ethnic groups or vulnerable people, including those with mental health issues.</p>
<p>103. <i>There should be robust data collection on near misses and non-fatal serious incidents by the police and IPCC.</i> (Restraint, 2)</p>	<p>Statistics</p>	<p>We agree that collecting data on near misses and non-fatal serious incidents could help to identify opportunities for learning and potentially prevent deaths or serious injuries. The IPCC can only collect such information if forces do so, and at present this is not consistently done across forces. If the Home Office decided that this should be a national data collection requirement, work would need to be done to establish the parameters and set a common standard.</p> <p>We would welcome the opportunity to be part of any discussion on the feasibility of collecting this data.</p>
<p>104. <i>The IPCC should monitor the correlation between ethnicity and restraint-related deaths,</i></p>	<p>Statistics</p>	

⁸ <https://www.ipcc.gov.uk/news/call-greater-analysis-police-use-force-new-report-published>

<p><i>including in healthcare settings where the police were involved. Statistics should be published breaking down restraint related deaths by ethnicity. (Ethnicity, 5)</i></p>		<p>The IPCC already collects data on deaths following police contact (including in healthcare settings) where we investigate, identifying whether restraint was used, and the ethnicity of the deceased. This information is published in our annual deaths statistics. This year, we have provided an ethnic breakdown not only of deaths that follow arrest, but also of other restraint-related deaths that we independently investigated. We will explore whether there are other ways of presenting this information so that it is as accessible and transparent as possible.</p>
<p><i>107. The IPCC should monitor ethnicity and deaths in custody against ethnicity and arrests by reference to all arrests, including non-notifiable offences. (Ethnicity, 5)</i></p>	<p>Statistics</p>	<p>The responsibility for collecting data on arrests currently resides with the Home Office, which records only notifiable arrests. We have correlated deaths in custody by reference to the number of such arrests, and can provide a breakdown by ethnicity. We are not aware of any consistent statistics in relation to non-notifiable arrests, and this would need to be discussed further with the Home Office.</p>
<p><i>30. Independent investigations should always be held for all Article 2 related cases on NHS premises where there has been police involvement, or where someone died after contact with the police. (NHS investigations, 11)</i></p>	<p>Health and Wellbeing</p>	<p>We initially investigate independently any death in police custody and any death following police contact where there is an indication of causation and where Article 2 is engaged, whether on NHS premises or in other settings. With all of our investigations, the mode of investigation is reviewed on an on-going basis to ensure that our approach remains appropriate, taking into account emerging evidence and our responsibilities in relation to Article 2.</p>
<p><i>39. Where the NHS Trust is only one of a number of agencies investigating death involving both police contact and NHS contact with the deceased there should be early, regular and formal communication and coordination with the IPCC and other agencies to minimise confusion, loss of evidence and delays. (NHS investigations, 11)</i></p>	<p>Funding for families and family support</p>	<p>We recognise that in some contexts, particularly where there is police contact before a death in a healthcare setting, the sharing of information and the close alignment of investigations can be beneficial to the outcome of an investigation.</p>
<p><i>49. In cases where the IPCC and HSE are actively involved, Coroners should hold prompt and regular pre-Inquest hearings requiring the agencies to liaise closely and account for the progress of their work and coordination. (Prosecutions, 14)</i></p>	<p>Communication</p>	<p>Broadly speaking, it is open to the IPCC to work collaboratively with other public bodies, where this is for the purpose of its statutory functions, such as carrying out an effective investigation. Indeed, we are currently doing this in a number of investigations. If the IPCC has information that it thinks should potentially be shared with another body, we may share that information, considering the justification for making a disclosure (for example, whether it is in the public interest and whether it would enable that body to effectively carry out its statutory role). We also consider whether it is appropriate to provide the individual concerned with an opportunity to make representations regarding disclosure, taking into account whether it would cause any prejudice to the investigation.</p>

<p>68. <i>Where an individual dies during or following restraint involving both police and health personnel, a joint independent investigation by both the IPCC and the proposed independent investigatory body for the NHS should be closely aligned and coordinated in order to investigate the full circumstances of the death, including the conduct of the health personnel.</i> (NHS investigations, 11)</p>	<p>Investigations</p>	<p>We believe that the best approach would be for all parties to make an assessment of the need for collaboration at the beginning of an investigation. Where there is the potential to have multiple investigations this would be an opportunity to share information on the mode of investigation and to agree how formal communication will be maintained. We recognise that conducting multiple investigations, with different reporting mechanisms and timescales, can be counter-intuitive and may make proceedings more complicated and lengthy. We are open to conducting parallel investigations, where appropriate, and believe that the close alignment of investigations is in the public interest.</p> <p>It is worth pointing out that, had responsibility for healthcare provision in police custody passed to the NHS, as was planned, we would have been able to commission independent reviews of healthcare as part of our own investigations, and indeed we had well-developed plans to do so. This would have provided for a more holistic approach to investigation in those settings. It would also have better ensured consistency of provision, appropriate clinical governance and effective links with the external health economy.</p> <p>The Healthcare Safety Investigation Branch (HSIB) has only just become operative, and for the time being has a limited scope. It is our understanding that it is anticipated that it will investigate only around 20-30 cases a year. However, we will explore its role in relation to matters involving both police and health personnel, and how the work of our respective organisations may be aligned.</p>
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Annex A - Comparison of the employment of ex-police personnel by police oversight bodies in the UK and Ireland*.

Organisation	Jurisdiction	Employ ex-police	Percentages of ex-police personnel
IPCC	England and Wales	Yes	- 23% of all staff from policing background (226 of 980) - 33% of investigative staff from policing background **. ⁹
Police Investigations and Review Commission (PIRC)	Scotland	Yes	- 44% of all staff from policing background (26 of 59). - 67% of investigative staff from policing background. ¹⁰
Police Ombudsman for Northern Ireland (PONI)	Northern Ireland	Yes	- 28% of all staff from policing background (41 of 149). - 47% of investigative staff from policing background. ¹¹
Garda Ombudsman (GSOC)	Republic of Ireland	Yes	- 23% of all staff from a policing background (19 of 84). - 45% of investigative staff from policing background. ¹²

* Figures based on comparison of staff employed in an investigative role. It is important to note that each of the organisations operate distinct statutory and investigative structures.

** The data is not collected for temporary staff.

⁹ All figures as at 31 March 2017, IPCC's 2016/17 Annual Report.

¹⁰ Figures obtained from PIRC at September 2017.

¹¹ Figures obtained from PONI as of May 2017.

¹² Figures obtained from GSOC as of August 2017.