

# Application for a Complaint Outcome Review

# Using this form

Please use this form if you disagree with the outcome of your complaint, in cases where the Police and Crime Commissioner (PCC) is identified as the Relevant Review Body (RRB) within your outcome letter from Humberside Police.

The Office of the Police and Crime Commissioner (OPCC) must receive your application for an outcome review within 28 days from the day after the date stated on your outcome letter. For example, if your letter is dated 1 April, you must ensure that we receive your completed outcome review form by 29 April.

Fields marked with an \* are mandatory.

#### Accessibility

If it is difficult for you to use this form or this service – for example, if English is not your first language or you have a disability – please contact us:

Telephone: 01482 220787 Email: pcc@humberside.pnn.police.uk

If you require any adjustments to support you through the review process, please outline these below. For example, if you have a visual impairment, it may be helpful for us to provide written responses in larger text.

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#### What happens to the information in my review form?

The information you provide on this form will be entered onto our secure system. The content of this form and details of your review may be shared with Humberside Police and the IOPC.

For information about how we handle your personal information, please read our privacy notice at <u>https://www.humberside-pcc.gov.uk/Privacy-Notice.aspx</u>

#### Where to send this review form

This form should be completed and sent to the Office of the Police and Crime Commissioner for Humberside:

- By email to pcc@humberside.pnn.police.uk
- By post to Office of the Police and Crime Commissioner for Humberside, The Lawns, Cottingham, East Yorkshire, HU16 5SN

#### Section 1 - About the Complainant

\*If you are not the complainant but are a representative acting on the complainants' behalf, please note that we will need their written consent before proceeding with your application. Letters of consent must be signed and either posted or emailed to our office as detailed above with the review application. Representatives acting with consent must complete both section 1 (about the complainant) and section 2 (about the representative).

| *Title:   |           |        |
|---|-----------|--------|
| *First name(s):   |           |        |
| *Last name(s):  |           |        |
| *Date of birth:   |           |        |
| Please provide at least two forms of contact below.                             |           |        |
| Address:  |           |        |
| Email:  |           |        |
| Telephone:  |           |        |
| <b>Preferred method of contact:</b> <i>Please mark your answer with an 'X'.</i> |           |        |
| 🗆 Email   | Telephone | 🗆 Post |

### Section 2 - About the Complainants' Representative

\*If you are the complainant, please move to Section 3
\*Title:
\*First name(s):

| *Last name(s):  |
|---|
| *Date of birth:   |
| Please provide at least two forms of contact below.   |
| Address:  |
| Email:  |
| Telephone:  |
| I have obtained and provided written consent from the complainant to act as their representative se mark your answer with an 'X'. |
|   |
| <b>Preferred method of contact:</b> <i>Please mark your answer with an 'X'.</i>   |

🗆 Email

□ Telephone

🗌 Post

## Section 3 – Outcome review details

**\*Complaint reference number:** This should be on any correspondence you have had from the Force.

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**\*Outcome of your complaint:** *This should be stated on your outcome letter from the Force.* 

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\*It is important to understand that our role as the Review Body is not to re-investigate your complaint but to review the outcome decision made by Humberside Police in relation to your complaint. Please explain why you feel that the outcome is not reasonable and proportionate and let us know what outcome you are hoping for as a result of this review.

(Text box expands as you type. If you are printing this form to fill in by hand, please continue on a separate sheet of paper)

#### Section 4 – Confirmation that information provided is correct

I confirm the information I have provided is truthful and accurate to the best of my knowledge.

Name: .....

Date: .....