# 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, Crime and Victims’ Commissioner (PCVC) is identified as the Relevant Review Body (RRB) within your outcome letter from Durham Police.

The Office of the Police, Crime and Victims’ Commissioner (OPCVC) 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: 0191 3752001   
Email: **general.enquiries@durham.pcc.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 Durham Police and the IOPC.

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

## **Where to send this review form**

This form should be completed and sent to the Office of the Durham Police, Crime and Victims’ Commissioner:

By email to general.enquiries@durham.pcc.pnn.police.uk

By post to Office of the Durham Police, Crime and Victims’ Commissioner, Police Headquarters, Aykley Heads, Durham DH1 5TT

**Section 1 - About you**  
**\*Title:** …………………………………………………………………………………………………

**\*First name(s):** ……………………………………………………………………………………..

**\*Last name(s):** ……………………………………………………………………………………...

**\*Date of birth:** ………………………………………………………………………………………..

*Please provide at least two forms of contact below.*

**Address:** …………………………………………………………………………………………..

**Email:** ………………………………………………………………………………………………

**Telephone:** ………………………………………………………………………………………..

**Preferred method of contact:** *Please mark your answer with an ‘X’.*

|  |  |  |
| --- | --- | --- |
| Email | Telephone | Post |

**Are you applying for an outcome review on behalf of someone else?** *Please mark your answer with an ‘X’. If the answer is no, you do not need to complete Section 2.*

|  |  |
| --- | --- |
| **Yes** – Please complete section 2. | **No** – Please go to section 3. |

## **Section 2 – Details of person on whose behalf you are applying for an outcome review**

Do not complete this section if you are applying for an outcome review on your own behalf.

If you are applying for an outcome review on behalf of someone else, you must have permission from that person. Please provide evidence of their consent.

**What is your relationship to the person making the appeal?** …………………………….

**\*Title:** …………………………………………………………………………………………………

**\*First name(s):** ……………………………………………………………………………………..

**\*Last name(s):** ……………………………………………………………………………………...

**\*Date of birth:** ………………………………………………………………………………………..

*Please provide at least two forms of contact below.*

**Address:** …………………………………………………………………………………………….

**Email:** ……………………………………………………………………………………………….

**Telephone:** ……………………………………………………………………………………...

**Preferred method of contact:** *Please your answer with an ‘X’.*

|  |  |  |
| --- | --- | --- |
| Email | Telephone | Post |

## **Section 3 – Outcome review details**

*Please attach the final decision letter from the police force and any additional documents that are relevant. The final decision letter from the police will help us to process your review more quickly*.

**\*Tell us which organisation handled the complaint?**

…………………………………………………………………………………………………………

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

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**Please explain why you want to apply for a review of the outcome of your complaint.** *Please explain why you feel that the outcome is not reasonable and proportionate to the circumstances of your complaint.*

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**Please explain what you would like to happen.** *What can happen depends on the circumstances of the case. What would you like the outcome to be?*

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*………………………………………………………………………………………………………..*

## **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: ………………………………………………………………………………………………..

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## **Section 5 – Feedback**

## **We are constantly striving to improve our service. Please tell us if you have any feedback below**.

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………………………………………………………………………………………………………….

**Would you be happy to be contacted about your experience of the police complaints system?**

Yes

No  
  
Thank you for the information you have provided.