

Graduate Diploma Professional Police Practice

LEVEL 6 - 40 Credits

**Workbook title: Competency Based
Workbook 2 (DHEP/DET)**

***To be completed by DHEP Detective students
only***

**(SOUTH WALES POLICE, GWENT POLICE AND
UWTSD)**

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FACULTY OF BUSINESS AND MANAGEMENT PUBLIC SERVICE PROGRAMME

Module title: Policing in the Workplace 3 (DHEP) - BMPP6009D

Workbook Guidance

Please read these notes carefully. They provide essential information. The documents you will use in developing your workbook are on the following pages.

What is the workbook for?

The purpose of this workbook is to enable learners to demonstrate and provide evidence of how they meet the learning outcomes set by the College of Policing, for the Graduate Diploma in Professional Policing Practice. You are being asked to outline your experiential learning based upon your theoretical understanding in a range of operational situations.

- Wellbeing and Resilience
- Criminal Justice
- Conducting Investigations
- Decision making and discretion
- Maintaining Professional Standards
- Leadership and Team working
- Policing the roads
- Information and Intelligence

You may wish to use the same incidents as you have outlined in the Occupational Competence Portfolio.

How should the workbook be presented?

Blank electronic copies can be found on Moodle of this workbook. You must submit this document electronically therefore it is important that you save your work regularly and upload the final typed version through Turnitin on Moodle.

Word count policy can be found in chapter 7 of the Academic Quality under section 7.7 (this applies to presenting work above and under the specified word count).

https://www.uwtsd.ac.uk/media/uwtsd-website/content-assets/documents/academic-office/aqh-chapters/chapters---en/Chapter_07_Assessment-Taught_Programmes_Pages_72-79-UPDATED-05-11-2019.pdf

Reflective practice is a core aspect for your workbooks and although there is a variety of useful resources on Moodle, there is one particular book, that is specifically based on reflective practice in policing, here is a link to one chapter from Selina Copley's Reflective Practice for Policing Students:

https://moodle.uwtsd.ac.uk/pluginfile.php/298870/mod_resource/content/1/Reflective%20Practice%20for%20Policing%20Students%20-%20Selina%20Copley%20Chapter5.pdf

How is the workbook assessed?

Advice and support about the completion of this workbook is available to you. Please contact Kelly Andrews direct using k.andrews@uwtsd.ac.uk with any questions or queries you may have.

Dates of workbook submission can be located within the General information tile within Moodle.

Once submitted your workbook will be assessed and marked independently. You will be provided with individual feedback once the work has been marked.

Confidentiality

It is important that no individual can be identified either directly or indirectly from the information in the workbook. However, you must:

- adhere to guidance in the Candidate Handbook about confidentiality.
- not identify individuals including witnesses, victims, or offenders by name.
- not write information that enables any individual to be identified indirectly through the description you provide. This includes references to names, colleagues, places (including hospitals, schools, town, villages, streets) specific incidents which were high profile and could be identified due to past publicity, other professionals or any other personal information including medical or other conditions.
- take personal responsibility for adhering to confidentiality rules.
- not include any dates of any incidents or anything that specifically identifies an actual incident.

Please be aware that any content that is deemed to be inappropriate, disrespectful, or abusive will not be tolerated. Following review of any content of this nature the information will be shared with the employer of the student responsible.

Should any health and wellbeing concerns be raised because of disclosures made by the student within this workbook, the employer of the student will be informed.

NOTE

Your workbook will be submitted electronically via Turnitin on Moodle. Guidance on this is in the Candidate Handbook.

Remember that the workbook is YOUR responsibility you must not rely on the assessor or anyone else to pick up any confidentiality breaches as this is your work and you must accept full responsibility for confidentiality. Meeting all the confidentiality requirements is particularly important.

Dyslexia and other special circumstances

If you have any condition that you feel may affect your ability to deal with any part of the programme, please see the Candidate Handbook for further guidance. The University has a Student Services Unit that may be able to help but ***it is the learner's individual responsibility to contact them.***

Competency Based Workbook 2 - Learner Workbook

Guidance:

- *Your workbook must contain items 1 - 5 below (in the order given).*
- *You should use the pro-forma to insert your text within each section.*
- *You should upload your completed document as a saved pdf file of this workbook; if this is not possible then a Word Doc file is acceptable. Do not send a scanned file from a photocopier, an apple.dot file, or a Microsoft publisher file as Turnitin will not be able to assess them, despite you being able to upload them.*

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Task 1

Relevant areas of the National Policing Curriculum: Vulnerability and Risk, Evidence-based policing

You must choose serious and complex investigation in which you played a significant role with a victim of crime and reflect on what happened.

Give a brief description of the **investigation** including social and legislative contexts and any relevant cultural, ethnicity and language issues.

Critically evaluate the appropriateness of different approaches (by professionals and the police) in supporting or managing vulnerable people or people at risk of harm during the **investigative process**

Explore what works in relation to tackling repeat victimisation and repeat offending during this **investigation**. Consider the use of evidence-based policing.

2000 words (+/- 10%: include your actual word count at the end of each section)

ANSWER:

In this incident, the victim, who is a vulnerable drug user that lives in a homeless shelter, was assaulted by a suspect that had recently been released from prison for another violent offence.

The assault took place in the living room of a flat, in front of five others, all drug users and involved in the homeless community.

All seven involved had been drinking and using crack together for several hours leading up to the assault, when there was an argument between the victim and the suspect about a can of beer.

This argument caused the suspect to punch the victim in the face, then pick up a fire extinguisher and hit the victim with it several times, although the victim managed to parry the fire extinguisher with his feet.

The suspect then picked up a sword and hit the victim in the head with it. Fortunately, the victim managed to protect his head with his left hand. This meant that the sword only made a slight cut above the victim's right eyebrow, but his left hand took the brunt of the blow. This caused a large cut on the palm of his left hand, between his index finger and thumb, that required surgery to repair the tendons.

This injury will likely cause lasting damage, and had broken through all layers of his skin, and into the internal mechanisms of his hand, as such, the assault was deemed to be of the level of Grievous Bodily Harm "a wound is any break in the continuity of the whole skin (an injury where there has merely been internal rupturing of blood

vessels is not a wound). Both the dermis and epidermis must be broken” (Police National Legal Database, 2024).

In order to evade further assaults by the suspect, and in order to seek medical assistance, the victim fled and called an ambulance from a nearby payphone, ambulance then contacted the police.

The fact that the victim chose to call an ambulance and not police, is not only down to him wanting medical attention, but also a social factor in the homeless community “shelter users, 69% stated they would call police in an emergency (compared to 92%, who said they would call paramedics)” (Woolley, 2015).

The assault was heard by the next door neighbour of the flat, the neighbour called the police. This resulted in officers attending the scene where the victim had fled to, and officers attending the flat.

Initially the officers at either call did not realise that they were linked, but via radio communication, they realised that the calls were linked. Information was passed between both sets of officers, and the victim identified the suspect to them, this information was passed to officers at the other scene, who realised that the suspect and one other male, had left before their arrival.

The victim was then conveyed to hospital by officers, who recorded his first disclosure of the incident on their body worn video. The scene was preserved, and evidence was secured, including the sword. None of the individuals at the scene would provide any information to the officers there.

I was assigned as the officer in the case when I started my CID shift the next day. To reflect on the investigation, I will use the ALACT model developed by Korthagen, the first stage of this model is “Action” (Korthagen, 2001), the action was: I attended the scene, conducted house to house and CCTV enquiries. The following day the victim was deemed fit by doctors to be spoken, whilst he was recovering from his operation, so I attended the hospital and took a statement from him, where he detailed the above account of the incident.

I attempted to contact all of the witnesses that were at the scene at the time of the incident, however all were evasive, and I was unable to contact them.

The fact that the witnesses would not provide any information to officers, is common among drug users and homeless people “there is little trust between people experiencing homelessness and police officers” (Woolley, 2015).

I also attended the address of the next door neighbour that reported the assault. She advised me that she was not willing to provide a statement of what she heard through the wall, or saw when she looked out of her window. She also has a CCTV camera at the front of her property, that would have captured people arriving and leaving the scene, however she was not willing to provide us with footage from this camera.

She advised that she did not want to provide us with a statement or footage, as she was worried that members of the community where she lived, and members of the ethnic minority that she was part of, would find out, and she would face repercussions from both those communities.

Not cooperating with police due to pressure from the community where a witness lives, are “the result of more generalized community norms that discourage residents from cooperating with police” (Dedel, 2006).

Members of ethnic minority communities not being willing to engage with police, is a common problem “minority ethnic groups are not engaging with the police” (Radford, 2006).

In the days following the incident the victim contacted me and informed me that he wished to withdraw his complaint and provide a negative statement. I subsequently met with the victim at the homeless hostel where he resided. Here he signed a negative statement and informed me that he wished to withdraw his statement through a combination of intimidation from the suspect and his associates, and as the suspect has supplied him with a large quantity of crack cocaine, as a form of compensation for causing the injuries to him.

This is not surprising as “attempts are often made to threaten or persuade a witness to not give evidence” (Crown Prosecution Service, 2019).

There was no CCTV that captured the suspect leaving the address, and no witnesses that are willing to provide a statement. The forensic results on the sword provided a mixed, low level match to the victim and suspect. Extensive arrest enquiries have been conducted, but the suspect is still currently unlawfully at large.

Critically evaluating the appropriateness of different approaches in supporting the vulnerable victim, early on in the investigation, it was identified that due to the suspect still being at large, and the victim being of no fixed abode, it was crucial to find accommodation for the victim that was secure, in order to safeguard the victim.

This was done by liaising with the Violence Protection Team at the hospital, where a single, lockable room at a homeless hostel was sourced for the victim. Also, I spoke with staff at the hostel and advised them of the identity of the suspect and to call 999 if he attended. This is in line with guidance from homeless charity Shelter, “Local authorities should give careful consideration to people who are at risk of witness intimidation” (Shelter, 2024).

Using the next stage of the ALACT model, “Looking back on the action” (Korthagen, 2001), on reflection, perhaps more could have been done to safeguard the victim, as he had been in contact with the suspect, and intimidated and compensated with drugs, so that he would withdraw his complaint. It is believed he came into contact with the suspect when he left the homeless hostel he was staying in, to go and buy drugs from an associate of the suspect.

It would have been beneficial to put the victim in touch with drug rehabilitation programmes straight away when he left hospital, and if this was successful, this

could have prevented the victim from coming into contact with the suspect while sourcing drugs, which would have safeguarded the victim from intimidation and potential violence, this could have been done through signposting the victim to a drug rehabilitation service (NHS Wales, 2024).

Also, this would have strengthened the case against the suspect as the prosecution could proceed (when suspect is arrested) with the support of the victim, as victimless prosecutions are notoriously difficult to get a conviction from “complaint withdrawal...appears to have an almost singular effect; namely, discontinuance” (Ellison, 2002).

I referred the victim to South Wales Victim Focus, when I first met him to take a statement, they are an organisation that “provide help and support to anyone in South Wales affected by crime” (South Wales Victim Focus, 2024). This is as per South Wales Police policy, however, on reflection, I could have done more to encourage the victim to engage with them, by contacting the victim more in the very early stages of the investigation, in order to prevent him from withdrawing his statement.

Also, more could have been done by the professionals at South Wales Victim Focus, in providing support to the victim, this may have resulted in a different outcome of the victim supporting the police case against the suspect. A report by His Majesties Inspectorate of Constabularies and Fire and Rescue Services, found that “too many victims are not receiving a quality service” (Victim Support, 2024).

Professionals from the Violence Protection Team at the hospital where the victim was treated could also have done more to safeguard the victim, as although through partnership with the police, they secured a lockable room at a shelter for the victim, once he was discharged, their support for him stopped, and they did not put any support in place for him once theirs had ended. Post discharge care for hospital patients is vital, even if their medical needs from the hospital visit have been treated “while a person may be ‘medically fit’ to leave hospital, they may not be practically ready to cope” (Parliamentary and Health Service Ombudsman, 2016).

Professionals at the hostel where the victim was found accommodation post hospital discharge could have also done more to support him, in the form of support for his drug addiction, as ultimately he returned to taking drugs within days or even hours of his stay their beginning, and this lead to him coming into contact with the suspect, which lead to the victim withdrawing his statement. However, this could be due to the barriers faced by homeless shelters when attempting to gain support for their residence, partly due to negatives stereotypes of the homeless community “residents have multiple complex needs yet both hostel staff and residents face stigma and barriers accessing support from external services” (Armstrong, Shulman, Hudson, Stone and Hewett, 2018).

“Awareness of essential aspects” (Korthagen, 2001) is the next stage of the ALACT model. On reflection, myself and other professionals involved could have had more awareness around the essential aspects, that the victim was a vulnerable drug user and the suspect was also part of the that community. More awareness of this could have lead to us taking more steps to keep the victim and suspect apart.

When considering evidence based policing in relation to tackling repeat victimisation and repeat offending, it is first necessary to define the term: "police practices should be based on scientific evidence about what works" (Sherman, 1998).

In terms of tackling repeat victimisation, it is clear that the victim in this case, was repeatedly victimised by the same suspect, initially through the original assault, and subsequently through intimidation and coercion from the suspect to withdraw his complaint and provide a negative statement.

The reason that the victim was exposed to second offence of witness intimidation was due to him associating with associates of the suspect, in order to purchase drugs. Repeat victimisation amongst drug users is common "victimization experiences were associated with increased contemporaneous substance use, with the strongest effects for those experiencing multiple forms of violence" (Pinchevsky, Fagan and Wright, 2013). The victim could have been provided with more support in regards to this issue, by police, victim support professionals, hospital staff, and hostel staff, as already discussed.

In terms of repeat offending, the suspect in this case has a long history of violent offending, and had been released on licence from prison shortly before the offence, and is now wanted on recall to prison due to being suspected of the offence. In this case it is clear that the early release of the suspect, and the subsequent support provided to him, did not work to stop his repeat offending, this is common "90% of the prolific offenders had re-offended within the two years after release from prison" (Boorman and Hopkins, 2012).

"Creating alternative methods of action" (Korthagen, 2001), is the penultimate stage of the model. On reflection, I would have attempted to ensure that the victim did not come into contact with the suspect, I would have done this with more contact with the victim in the early stages of the investigation, as I did find I was more focused on the offence and the suspect than the victim.

"Trial" (Korthagen, 2001) is the final stage of the model, I will trial having more contact with victims, especially those that are vulnerable drug users, rather than becoming focused on the offence and the suspect in future, in order to negate victims coming into contact with suspects and being vulnerable to intimidation and withdrawing complaints and providing negative statements.

Word Count: 2198

Task 2

Relevant areas of the National Policing Curriculum:

Conducting Investigations

You should choose an **serious and complex investigation** that you have been involved in **that was of a complex nature**, in which you played a significant role.

Critically evaluate the processes employed in a **complex investigation** you have been involved in, and the fast-track actions that you have utilised.

Evaluate the support you have provided to victims, witnesses, and offenders (where appropriate) during a **complex investigation** and reference the management of your own personal values and attitudes in relation to this.

2000 words (+/- 10%: *include your actual word count at the end of each section*)

Answer:

Authentication signature:

Please sign to confirm that the work submitted is your own and has not been copied from another:

Signed:

Date:

Bibliography

The bibliography should only include sources referenced within the workbook using the Harvard referencing system. Information about referencing in written assignments and how to avoid plagiarism can be found on Moodle. It is important that you are aware of the importance of ensuring that the work submitted is your original work.

Armstrong, Shulman, Hudson, Stone and Hewett (2018) *National Institute of Health*. Available at: [Original research: Barriers and facilitators to accessing health and social care services for people living in homeless hostels: a qualitative study of the experiences of hostel staff and residents in UK hostels - PMC \(nih.gov\)](#) (Accessed 4th April 2024).

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Woolley (2015) *Homeless Hub*. Available at: [How can we improve police interactions with the homeless population? | The Homeless Hub](#) (Accessed 22nd March 2024).