Witness Name: RACHEL WATSON

No: WITN0339001

Dated: 11 December 2025

THE NOTTINGHAM INQUIRY

FIRST WITNESS STATEMENT OF RACHEL WATSON

I, Rachel Watson, will say as follows: -

INTRODUCTION

1. I am the Director General of the Independent Office for Police Conduct ("the IOPC"). I have held this position since 22 April 2024.

2. This witness statement is made to assist the Nottingham Inquiry ("the Inquiry") with the matters set out in the Rule 9 Request dated 28 October 2025 ("the "Request").

3. May I begin by expressing my sympathy for the bereaved families and survivors of the attacks carried out by Valdo Calocane (VC) in Nottingham on 13 June 2023. Three innocent people were killed and three other victims were violently attacked. The attacks have shocked the nation and I cannot imagine the full extent of the anger, grief and despair that the families of Barnaby, Grace and Ian must feel, alongside the other victims. I welcome the Inquiry and wish to fully assist it.

4. Due to the size and complexity of the IOPC's operations, and the fact that I took up my role after some of the events referred to, I have not been personally involved in all of the matters referred to in this statement. I have relied on information provided to me by colleagues within the organisation who have responsibility for those areas. I believe such information to be accurate.

BACKGROUND

5. I have been asked to provide an overview of my career, role within the IOPC and the function of the IOPC.

6. Before joining the IOPC, I spent over twenty years in government. Immediately before appointment as Director General, I spent ten years at the Home Office including five years as Policing Director between 2019-2024. Before joining the Home Office, I worked in various Government departments including HM Treasury, HM Revenue and Customs and the Department of Energy and Climate Change. My roles have encompassed media relations and leading organisational change and culture transformation, as noted on the IOPC webpage "Our People" [WITN0339002].

7. I hold a degree in Philosophy, Politics and Economics from the University of Oxford.

8. The IOPC investigates serious and sensitive matters involving police officers' conduct, including complaints, conduct matters and deaths and serious injuries (DSIs) involving the police. It oversees the police complaints system in England and Wales and sets the standards by which the police should handle complaints. It is operationally independent of the police, government and complainants. For more information please read the IOPC Framework Document [WITN0339003].

9. As the Director General of the IOPC, I have certain statutory functions set out in Section 10 of the Police Reform Act 2002. These include:

    a. to secure and maintain public confidence in the police complaints system in England and Wales; and

    b. to ensure that the system is efficient and effective and manifests an appropriate degree of independence [WITN0339003].

10. I act as the IOPC's senior decision maker and ensure effective delegation of decision-making responsibilities throughout the IOPC. The IOPC Scheme of Delegation is publicly available [WITN0339007].

11. I am also the Accounting Officer which means that I am responsible for safeguarding and managing public funds and for the day-to-day operations and management of the IOPC [WITN0339003].

OVERVIEW OF STATUTORY FRAMEWORK UNDERPINNING IOPC WORK

12. This witness statement will set out details of IOPC decision making and investigations. For this witness statement to read as a stand-alone document it is necessary for me to set out the relevant statutory framework underpinning our work at the IOPC. I will refer to this at relevant points throughout this statement.

13. The Police Reform Act 2002 ("PRA") and The Police (Complaints and Misconduct) Regulations 2020 ("PCMR") is the core statutory basis for IOPC decision making. The IOPC Statutory Guidance 2020 provides more guidance in applying and interpreting the PRA and PCMR.

14. The oversight of policing is divided between several bodies. The College of Policing has a stated aim to support policing to deliver the best service to the public through high-quality leadership, consistent standards and continual performance improvement, as per their website [WITN0339006]. His Majesty's Inspectorate of Constabulary, Fire and Rescue Services inspects the performance of forces against their standards, as per their website [WITN0339005]. The National Police Chiefs Council brings UK police leaders together to set direction in policing and drive progress for the public, as per their website [WITN0339006]. Within this context the IOPC's primary role is to investigate the most serious matters where individual police conduct may have adversely affected members of the public or their confidence in policing.

15. Under the PRA, there are three types of matters over which the IOPC exercises jurisdiction:

    a. **Complaints**. Paragraph 5.1 of the Statutory Guidance summarises the statutory definition: 'A complaint is any expression of dissatisfaction with a police force that is expressed by or on behalf of a member of the public. It must be made by a person who meets the definition of a complainant'

b. **Conduct matters**. Section 12 to the PRA defines a conduct matter as "any matter which is not and has not been the subject of a complaint, where there is an indication (whether from the circumstances or otherwise) that a person serving with the police may have committed a criminal offence or behaved in a manner which would justify disciplinary proceedings"

c. **Death or serious injury matters** ("DSI"). Paragraph 7.1 of the IOPC Statutory Guidance summarises the statutory definition:

"A DSI matter means any circumstances (unless the circumstances are or have been the subject of a complaint or amount to a conduct matter) in, or as a result of which, a person has died or sustained serious injury and:

• at the time of death or serious injury the person had been arrested by a person serving with the police and had not been released or was otherwise detained in the custody of a person serving with the police; or

• at or before the time of death or serious injury the person had contact of any kind – whether direct or indirect – with a person serving with the police who was acting in the execution of their duties and there is an indication that the contact may have caused – whether directly or indirectly – or contributed to the death or serious injury."

16. These matters must usually be recorded by the Appropriate Authority ("**AA**") before they can be referred to the IOPC for consideration. Section 29 of the PRA and Paragraphs 1.19 to 1.21 of the Statutory Guidance explain who the AA is for a given matter: "*The appropriate authority for a complaint is the chief officer of the force about which dissatisfaction is expressed or, where a complaint relates to the conduct of an individual, the chief officer who has direction and control over that person. However, if a complaint relates to the conduct of a chief officer or acting chief officer, the appropriate authority is the local policing body with responsibility for that police force area."*

17. Where a complaint is made directly to the IOPC, it should refer it to the AA to make a recording decision.[1] For example, a number of the complaints being investigated by Operations Longdale and Copthorne (see below paragraphs 71-9 and 80-4 respectively) were recorded in this way as a result of coming to the attention of the IOPC during Operation Astwell (see below, paragraphs 63-70).

18. It will be noted that the definition of a DSI refers to prior contact with the persons deceased or seriously injured, not the perpetrator. There is an absence of settled law about the extent to which contact with the perpetrator may amount to indirect contact with the victims which has then caused or contributed to their death. The practice of the IOPC is to consider it by reference to the law of causation in legal proceedings. In particular, the IOPC considers whether it was foreseeable that the death or serious injury to those victims may result from acts or omissions in connection with that contact and the degree of proximity between them. It is important to mention this here because the question of whether or not prior contact with VC amounted to a DSI was an issue in Operation Penhallow (see below, paragraph 86(a) and (b)) prior to the conduct matters being recorded.

19. Schedule 3 to the PRA sets out the criteria for recording of complaint (paragraph 2) and conduct matters (paragraphs 10 and 11). All DSI matters must be recorded (paragraph 14A).

20. Following recording, the AA must decide whether to refer the matter to the IOPC. Schedule 3 to the PRA sets out the criteria for referral to the IOPC for complaints (paragraph 4) and conduct matters (paragraph 13). All DSI matters must be referred to the IOPC (paragraph 14C).

21. The AA must refer all conduct matters concerning chief officers to the IOPC. The AA must refer all complaints concerning chief officers to the IOPC where the AA is unable to satisfy itself that the conduct complained of, if proven, would not justify the bringing of criminal or disciplinary proceedings.[2]

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[1] Police Reform Act 2002 (PRA), Schedule 3 Paragraph 2.
[2] Police (Complaints and Misconduct) Regulations 2020 (PCMR), Regulation 4.

22. On receipt of a valid referral, the IOPC must determine if the matter should be investigated.[3]

23. If the IOPC determines that the matter should be investigated, then it decides what form this should take. This is also known as a Mode of Investigation ("MOI") decision.[4] There are three MOIs:

    a. **A Local investigation** is an investigation by the AA on its own behalf.[5]

    b. **A Directed investigation** is an investigation by the AA directed by the IOPC.[6]

    c. **An Independent investigation** is an investigation by the IOPC.[7]

24. The appropriate MOI is decided by the IOPC's assessment unit which must consider the severity of the matter and the public interest.[8]

25. The IOPC may combine or split investigations if the relevant decision maker determines that it is more efficient and effective or otherwise in the public interest to do so.[9] In this case, some complaints were directed at the Chief Constable for whom the AA is the Police and Crime Commissioner ("**PCC**"), and the same or similar complaints were made against other officers who were under the Chief Constable's direction and control, for whom she was the AA (although she could have delegated that role to avoid bias or the appearance of it). For that reason, investigations of some complaints have been split between those for which the PCC is the AA and those for which the Chief Officer is the AA.

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[3] PRA 2002, Schedule 3, Paras 4, 14 and 14D.
[4] PRA 2002, Schedule 3, Para 15.
[5] PRA 2002, Schedule 3, Para 16.
[6] PRA 2002, Schedule 3, Para 18.
[7] PRA 2002, Schedule 3, Para 19.
[8] PRA 2002 Schedule 3, Para 21(5).
[9] PCMR 2020, Regulation 14.

IOPC decision making during and following an investigation

26. During and at the end of an independent investigation by the IOPC, the primary determinations that must be made are:[10]

    a. **Complaints:** during the investigation the IOPC must decide if it (or part of it) should be subject to Special Procedures because there is an indication that the officer to whose conduct the investigation relates may have committed a criminal offence or breached the standards of professional behaviour in a manner that would justify the bringing of disciplinary proceedings. If the complaint is subject to special procedures, then a severity assessment must be carried out to determine if proved whether the conduct alleged would amount to misconduct (a breach which justifies at least a written warning) or gross misconduct (a breach which would justify dismissal). Where a complaint is not made subject to special procedures then at the end of the investigation the IOPC will decide if the service provided by the police was acceptable, not acceptable or it is not possible to say.[11] Where the complaint is subject to special procedures the IOPC must decide if there is a case to answer for misconduct or gross misconduct and whether to refer the case to the Crown Prosecution Service for a charging decision.

    b. **Conduct Matters:** As it has already been decided at the point of recording the matter that there is an indication of a possible criminal offence and/or misconduct or gross misconduct, a special procedures determination does not need to be made but a severity assessment must be carried out.[12] At the end of the investigation the IOPC must decide whether to refer the case to the Crown Prosecution Service for a charging decision and whether any officer has case to answer for misconduct or gross misconduct.

    c. **DSI Matters:** If during an investigation the IOPC determines there is an indication of misconduct or gross misconduct, it will require the AA to record and refer it, and the investigation will become a conduct matter investigation.

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[10] PRA 2002, Schedule 3 Paras 19A, 23(5A) and 24B and PCMR 2020 Regulations 16 -20.
[11] IOPC Statutory Guidance 2020, Para 17.4.
[12] PRA 2002, Schedule 3 Para 19A and PCMR 2020 Regulations 16-20.

Where it remains a DSI, at the end of the investigation the IOPC must review the report and make a determination as to whether there is a conduct matter (if there is, then the matter is investigated as such). IOPC guidance is that it should also make a determination about whether the police may have caused or contributed to the death or serious injury.[13]

27. The IOPC must consult with the AA on severity assessments and their end of investigation determinations before finalising them. Following final determinations at the end of a conduct matter or complaint investigation subject to special procedures the IOPC may direct the AA to bring disciplinary proceedings if there is a case to answer.[14]

28. Where an investigation is subject to special procedures, officers have a number of rights and protections. In particular, they must be served with a notice of investigation. They may be required to attend for an interview under misconduct caution which advises them they are not required to answer questions but that adverse inferences may be drawn from a failure to mention facts which are later relied on.[15]

29. There is an express requirement for there to be Terms of Reference for investigations of conduct matters and complaints subject to special procedures[16] which must be shared with the officers (see below, paragraphs 37-44, for more information on Terms of Reference).

30. The IOPC has duties to provide information about the progress of its investigations and their outcomes to complainants and interested persons. These duties are subject to statutory "harm test" exceptions which permit non-disclosure where the IOPC is of the opinion that non-disclosure is necessary to meet a limited set of purposes, and is satisfied that there is a real risk that disclosure would cause a significant adverse effect.[17] Interested Persons include survivors of a DSI, relatives of the deceased and those with a sufficient interest.[18] There is no express

[13] IOPC Statutory Guidance 2020, Para 14.12.
[14] PRA 2002 Schedule 3 Para 23(5A) and PCMR 2020, Regulation 27(2).
[15] PCMR 2020, Regulations 16-23.
[16] PCMR 2020, Regulation 17(2).
[17] Police (Conduct) Regulations 2020, Regulation 35.
[18] PRA 2002 Sections 20 and 21 and PCMR 2020 Regulations 35-37.

requirement in the legislation to consult with complainants and/or interested persons over special procedures, severity assessments and/or final outcomes. However, particularly where article 2 and/or 3 of European Convention on Human Rights are engaged the IOPC may do so; where it does this is referred to as "enhanced engagement".

31. The IOPC's determinations are focussed on professional discipline and not fault or liability. As with other professions, there may be mistakes or misjudgements, including ones resulting in civil liability for negligence which do not justify disciplinary proceedings. Even where errors may be a breach of the standards of professional behaviour (particularly those of "duties and responsibilities" and/or failures to abide by policies), they may not justify disciplinary action. In assessing whether they do so, the IOPC must have regard to Case law, for example *Hindmarch v NMC [2016] EWHC 2233 (Admin)* [WITN0339010] and *R (On The Application Of Shaw) v General Osteopathic Council) [2015] EWHC 2721 (Admin)*,[WITN0339011] at Paragraph 47, approving *Spencer v General Osteopathic Council [2012] EWHC* [WITN0339012] and College of Policing Guidance on outcomes in police misconduct proceedings (2022) [WITN0339009]. According to these authorities, where there is no culpability – a concept encompassing blameworthiness and level of responsibility among other factors - errors will rarely amount to misconduct, let alone gross misconduct even where harm may be significant.

32. During and/or at the end of all investigations the IOPC may make learning recommendations to police forces and other organisations.[19]

[19] PRA 2002 Section 10 PRA and Schedule 3 Para 28ZA.

OPERATIONAL PRACTICES COMMON TO ALL INVESTIGATIONS

33. In addition to the statutory framework, it may be helpful for me to explain certain operational processes common to all IOPC investigations at this stage, to provide context. I will refer to this section when discussing the IOPC investigations below.

Investigative team composition

34. In practice, to ensure the efficiency and effectiveness of the IOPC, I do not carry out investigations myself. Through the scheme of delegation,[20] a Lead Investigator (LI) is designated to take charge of the investigation, and a Decision Maker (DM) to make the end of investigation determinations and other members of staff to assist them. The DM will be consulted by the LI on special procedure and other decisions, will approve the terms of reference, and decide whether to accept the final report as completed before making their decisions.

35. IOPC LIs must have completed or be in the process of completing the IOPC internal training programme.[21] DMs undergo bespoke Decision Maker training, provided by the IOPC, and in many cases, they will also be trained IOPC investigators. When there is a new investigation to be allocated an LI and DM will be designated from existing teams and the decisions are informed by team capacity and resourcing and geographical location.

36. In each independent investigation, the decision maker and lead investigator will have supervisory support. Decisions can be made by staff at higher grades where appropriate. There will also be assistance available from investigators and trainee investigators and from other teams including legal services, digital investigations unit and the investigative support unit.

Terms of Reference

37. Whilst the Statutory Framework only requires that Terms of Reference ("**ToR**") be set in conduct matter investigations or complaint investigations which are subject

[20] PRA 2002 Schedule Para 6A and the Scheme of Delegation made under it, together with Schedule 3 Paragraph 19(2).
[21] This replaced a bespoke training programme. Some Lead Investigators have qualified as investigators under the earlier programme.

to special procedures, a proportionate ToR is a minimum standard in all independent and directed investigations at the IOPC.

38. The ToR in the investigations discussed in this statement were set in accordance with IOPC internal policy on ToR which provides that the ToR must include context and a summary of concerns, complaints or allegations made. The ToR must set out the parameters of the investigation.

39. The ToR should:

    a. provide focus and direction for the investigation.

    b. be clear, unambiguous and tightly drawn.

    c. describe the scope of the investigation that will be undertaken, including the target end date if appropriate.

    d. not list actions to be undertaken.

    e. consider the perception of the reader when you decide the sequence in which to list the elements of the terms of reference.

40. Templates are available which contain standard wording to which text should be added to meet these requirements.

41. The LI is responsible for drafting the ToR and the Decision Maker is responsible for approving them. They are shared with complainants and IPs who may make representations about them. They may be amended in the light of representations or new information.

42. ToRs usually include a target end date and this is kept under review throughout the investigation

43. ToR for each investigation related to the Inquiry's ToRs have been shared with the Inquiry:

    a. Operation Penhallow - IOPC0000043;

    b. Operation Astwell - IOPC0000050

c. Operation Copthorne - IOPC0000064

d. Operation Longdale - IOPC0000046

e. Operation Gosemore (final report) - IOPC0000004

44. The target end dates for the investigations have changed throughout the course of the investigations for reasons explained below and are currently set for the end of January 2026. The IOPC intends to complete as many investigative actions as possible before that date but some more time may be required and post-final report decision making will take place subsequently.

IOPC INVESTIGATIONS RELATED TO THE CASE OF VALDO CALOCANE (VC)

45. I have been asked to provide an account of all referrals or complaints that were made to the IOPC in connection with the case of VC. I have also been asked to explain the decisions made in respect of the investigations that flowed from the referrals and to explain, where a decision was made not to conduct an Independent IOPC investigation, why that decision was taken. I have been asked to provide an account of the investigations that the IOPC has undertaken so far as is appropriate to do so.

46. I understand that the events of the 13 June 2023 were first brought formally to the attention of the IOPC on that day. IOPC staff attended during the post-incident procedure relating to the serious injuries caused to Marcin Gawronski and Sharon Miller as part of 'on-call deployment' as requested by Nottinghamshire Police. The call-out was requested because they had suffered serious injury after being hit by the van that Valdo Calocane had stolen from Ian Coates. The van was being pursued by police immediately before the collision and it was considered that indirect police contact may have caused or contributed to the serious injury, and it may therefore be a DSI under the statutory scheme.

47. A written mandatory DSI referral was received by the IOPC on 14 June 2023. This referral eventually became the independent DSI investigation which is known by the Operational name 'Operation Gosemore" (see below, paragraphs 47-56).

48. I will list below all the matters related to the attacks that I know to have been *formally* referred to the IOPC. It is important to be aware that, not infrequently, AAs may make *informal* contact with the IOPC's Assessment Unit to seek its views about recording matters and/or whether they may meet mandatory referral criteria. Informal contact is not always recorded or recorded in manner which makes it easy to recover, where it is known there were such discussions I have referred to them below.

Completed investigations

Operation Gosemore

49. As explained above, Operation Gosemore was a DSI investigation into the police pursuit of VC's stolen van prior to collision with Marcin Gawronski and Sharon Miller.

50. On 13 June 2023, IOPC investigators attended the post-incident procedure, as explained above at paragraph 46.

51. On 14 June 2023, the IOPC received a written DSI referral from Nottinghamshire Police in respect of the police pursuit of VC's stolen van prior to collision with Marcin Gawronski and Sharon Miller.

52. On 15 June 2023 the IOPC determined that the DSI should be investigated as an Independent Investigation.

53. There were two specific ToRs for the investigation:

    a. The actions and decisions of the police driver prior to the collision, and

    b. The officer's dynamic risk assessment prior to the collision.

54. During the investigation, investigators obtained accounts from the two key police witnesses in the police vehicle. The IOPC investigators obtained eye-witness statements from Nottinghamshire Police's criminal investigation of the incident, alongside dashcam footage and telematics data.

55. On 27 September 2023, the IOPC completed its investigation and shared the final report with Nottinghamshire police.

56. The final report [URN IOPC0000004] concluded that there was no evidence of any direct contact between Nottinghamshire Police and the two victims prior to their sustaining serious injury. There was indirect contact. The police driver, Officer J,[22] activated his sirens to make the van driver aware of his presence and indicate for him to stop, however, a short time later the white van appeared to be turning left onto Market Street before it suddenly turned right and mounted a pedestrian crossing area where it ran over both Ms Miller and Mr Gawronski. Officer J immediately requested East Midlands Ambulance Service (EMAS) to provide assistance, and he was directed not to pursue the van and to prioritise the victims. He administered first aid until EMAS attended the scene and took over medical care. The investigation concluded that the police driver behind the van could not have foreseen that VC would veer sharply to the right onto a pedestrian crossing, hitting members of the public.

57. The investigation also concluded there was no indication any police officer may have behaved in a manner that would justify the bringing of disciplinary proceedings or committed a criminal offence.

58. The following individuals were designated as interested persons in this investigation:

    a. Ms Miller

    b. Mr Gawronski

<u>Ongoing investigations</u>

59. For each of the live investigations we are providing updates to the complainants and/or Interested Persons every 28 days. I have included text from the most recent updates for each of the investigations in the relevant sub-sections below. It is unavoidable that this will become out of date quickly as the investigations progress. I will of course provide further information when these investigations are complete, including through providing copies of the final reports which will provide the fullest picture.

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[22] The IOPC here replicates the use of ciphers as in the final report for Operation Gosemore. The names of the officers involved are known to the Inquiry.

60. Recognising the extent and impact of the tragic events of the 13 June 2023 on the families, the investigations now follow enhanced engagement (see above, paragraph 30). This means that, among other things, the families, through their solicitors, can make representations about decisions before they are finalised.

61. The IOPC is committed to completing the ongoing investigations in as timely a manner as possible, and to providing effective assistance to the Inquiry. It has tried to maintain ambitious targets for the investigations to be completed, which, as explained above at 42-44, are currently set for the end of January 2026. Several factors have contributed to delays in completing investigative actions and realistically may do so further. They include:

    a. The complexity, the volume of material to be considered or obtained and the number of separate determinations required across the investigations

    b. Technical issues, for example the delays to the NICHE rebuild in Operation Penhallow

    c. The procedural requirements under the PRA and the potential for planned further enquiries to give rise to new ones

62. The IOPC aims to complete as many lines of enquiry by the end of January as possible and is seeking to prioritise its enquiries in a manner which it believes will best assist the Inquiry.

Operation Astwell

63. Operation Astwell is a complaint investigation. The investigation concerns the actions of Nottinghamshire police officers prior to, during and after the events of 13 June 2023. The Terms of Reference [IOPC0000050] also consider the contact that other forces in England and Wales may have had with VC prior to 13 June 2023.

64. The following referrals relate to Operation Astwell:

    a. On 5 February 2024, the IOPC received a complaint referral from Nottinghamshire Police relating to a complaint from the families of the victims regarding the investigation into the events of the 13 June 2023, the communication with the families and other related matters.

b. On 3 May 2024, further to a request from the IOPC to record complaints which had been made directly at its meeting with the family, the IOPC received a complaint referral from Nottinghamshire Police relating to additional complaints from the families of the victims made to Nottinghamshire Police.

65. On 9 February 2024, the IOPC determined that the complaints referred to the IOPC on 5 February 2024 should be subject to an Independent Investigation.

66. On 26 March 2024 the investigation team met with the families and then began obtaining and assessing material from Nottinghamshire Police which appeared to be relevant, to be able to set the ToR. Prior to the ToRs being formally set, drafts were shared with the families. We acknowledge that they were not of sufficient quality and had not been reviewed by sufficiently senior staff. They set unrealisable expectations. On 24 June 2024 the IOPC wrote to the families' solicitor to explain there would be three separate independent investigations (Operation Astwell, Longdale and Copthorne) and provided the initial ToRs for each. Further to the families' representations that the ToRs were too narrow, there was a meeting to discuss the ToRs on 1 July 2024, after which there was an exchange of correspondence about them culminating in a letter dated 3 September 2024 from the families' solicitor, which came to my personal attention. As a result, I arranged to meet personally with the families' solicitor on 17 October 2024. Following that meeting, we were able to agree terms of reference. Those terms of reference remain 'live' and can be amended should the need arise. Mistakes were undoubtedly made by the IOPC in the process of setting the ToRs, and I have reflected on these further at Paragraph 125.

67. The investigation into the complaints in Operation Astwell remains ongoing and the IOPC aims to complete as many investigative lines of enquiry as possible by the end of January 2026. As of the date of this witness statement, there are eight special procedures decisions that have been completed and shared with the families as part of our enhanced engagement processes. When the draft Special Procedures decision is made it is shared with the families for their representations. Once representations have been received the decision is reviewed and then finalised. If the timeframe for representations has passed and no representations

made, the decision can be finalised. Of the eight special procedures decisions conducted, one has been finalised at gross misconduct as of Wednesday 10 December. We expect to finalise the remaining decisions shortly.

68. The IOPC has identified 17 other police and non-police witnesses and six statements have been obtained to date. There are 11 outstanding statements in progress.

69. There remain a further 35 officers whose status is being finalised. In the interests of ensuring a reasonable and proportionate investigation, investigators will not complete a full special procedures decision for officers where there is no evidence to support an indication of behaviour justifying disciplinary proceedings. The IOPC has raised 135 investigative actions. All other identified lines of enquiry relating to the Terms of Reference, with the exception of the accounts from officers set out above, have been followed, This includes the IOPC contacting other police forces to establish if they had contact with VC.

70. The IOPC has been sharing monthly updates with the Inquiry as an Interested Party.

Operation Longdale

71. Operation Longdale is an investigation relating to complaints against Nottinghamshire Police, including Chief Constable Kate Meynell, about a non-reportable briefing held on 22 February 2024. The complaints were raised during the meeting between the IOPC and the families of Barnaby Webber, Grace O'Malley-Kumar on 26 March 2024 (see above). The complaints split from Operation Astwell in June 2024 (see above, paragraph 25 for details on this mechanism).

72. The non-reportable press briefing had already come to the attention of the IOPC and, on 27 February 2024, its then[23] Head of Communications, raised a concern by email with the Head of Corporate Communications at Nottinghamshire Police that it may have been in breach of the IOPC/NPCC media protocol

[23]They left the IOPC on 31 July 2024.

[WITN0339012]. Whether it did so, and if so, whether there is an indication it may have been a breach of the standards of professional behaviour which justifies disciplinary proceedings is being considered alongside the families' complaints about the briefing (see more below).

73. Later, on 6 December 2024, Dr Sanjoy Kumar made a further complaint that Chief Constable Meynell had failed to inform the families that she had made a complaint to the Independent Press Standards Organisation (IPSO) on 11 April 2024 about the Nottingham Post's reporting of the non-reportable briefing. The families had only found out about it after IPSO published the outcome of the complaint on 19 September 2024. The outcome was that IPSO would not uphold the complaint – see IPSO Decision 01572 – 34 Nottinghamshire Police v Nottingham Post [WITN0339014]. This further complaint from Dr Kumar was referred to the IOPC, and it was decided it would be independently investigated as part of Operation Longdale.

74. There are two Appropriate Authorities for this investigation. Nottinghamshire Police are the AA for the allegations against officers other than the Chief Constable. Gary Godden, the Police and Crime Commissioner for Nottinghamshire, is the AA for the allegations concerning the Chief Constable (see above explanation, paragraph 16).

75. The investigation remains ongoing. Most existing lines of enquiry have been completed but it is noted that further lines of enquiry may arise from witness interviews that are being reviewed. The Investigative team have conducted eleven interviews with witnesses, with an account still to be obtained from Chief Constable Meynell. The Investigative team have shared a draft Special Procedures decision for CC Meynell with the families of the victims, via their solicitors, for their comments prior to finalisation. The IOPC hopes to have completed all investigative lines of enquiry by the end of January 2026.

76. The IOPC has been sharing monthly updates with the Inquiry as an Interested Party.

77. In its update letter to the families dated 27 November 2025, the IOPC described email correspondence between its then Head of Communications,

Nottinghamshire Police and the NPCC communications teams. As explained above, the IOPC Head of Communications had raised a concern in February 2024 that the non-reportable briefing had breached the NPCC/IOPC media protocol. However, in a subsequent email dated 13 June 2024 to some IOPC colleagues, they gave an opinion that it did not amount to misconduct. In the same email they shared their opinion, which they had been asked for by the NPCC, that the complaint to IPSO was appropriate. This was a relevant factor that Nottinghamshire Police considered in deciding whether or not to continue with their complaint to IPSO and witnesses have referred to it in their statements.

78. It is usual practice and within guidelines for forces to engage and liaise with the IOPC communications team on their media lines, and media handling for an investigation. Contact between the Nottinghamshire Police / NPCC and IOPC would have been expected and routine in this circumstance. In this context, the email of 27 February 2024 expressing concern that the non-reportable briefing had breached the NPCC/IOPC media protocol was entirely appropriate. However, it was not appropriate to express the opinion in the email of 13 June 2024 about the appropriateness of the police's complaint to IPSO. Even though at that time the IOPC were not investigating the complaints to IPSO, it was not a matter that involved the IOPC and was one that the IOPC ought to have remained neutral on. Nor was it appropriate to give an opinion on whether any breach of the IOPC/NPCC media protocol amounted to misconduct, which was a matter for the case decision makers.

79. In consequence of the above, to try and eliminate any bias, perceived or otherwise, from IOPC decision making, the following arrangements have been made:

    a. None of the colleagues copied into the email sent by the IOPC's then Head of Communications on 13 June 2024 will be responsible for the decisions that we make in relation to the complaint about IPSO, and

    b. External Kings Counsel will review our draft special procedure decision about this complaint to provide an additional layer of independent scrutiny.

Operation Copthorne

80. Operation Copthorne is a complaint investigation into Chief Constable of Nottinghamshire Police Kate Meynell. It concerns whether CC Meynell acted in accordance with policies, guidance and legislation in relation to the events of 13 June 2023. It includes actions and omissions following episodes of police contact with VC before the events and matters following the attacks, including communication with the families of the victims. Terms of Reference for this investigation have been provided to the Inquiry [URN: IOPC0000064].

81. Operation Copthorne comes from one referral. The matters subject to the complaints were raised during the IOPC's meeting with the families of the victims on 26 March 2024.

82. On 20 May 2024, the IOPC determined that the Complaints relating to CC Meynell should, when recorded and referred by the AA, be split from Operation Astwell [see above, paragraph 25 on splitting and combining investigations]. The IOPC notified the PCC of these complaints on 21 May 2024. On 3 June 2024 the PCC made a referral of the same to the IOPC.

83. The investigation remains ongoing, and the IOPC aims to complete as many investigative lines of enquiry by the end of January 2026 as possible. Investigators are arranging to take final statements from witnesses. Investigators have shared a draft Special Procedures decision for CC Meynell with the families of the victims, via their solicitors, for their comments prior to finalisation.

84. The IOPC has been sharing monthly updates with the Inquiry as an Interested Party.

Operation Penhallow

85. Operation Penhallow is a conduct matter investigation into three officers of Leicestershire Police – Officers A, B and C. These Officers had investigated a previous assault committed by VC against co-workers at a factory on 5 May 2023. On 24 May of 2023 Leicester Police had identified him as the suspect for assaults committed on co-workers at a factory on 5 May 2023. Checks would have revealed

that there was an existing warrant for his arrest, but he was not arrested, and the assault investigation was closed.

86. The following referrals relate to Operation Penhallow:

    a. On 29 January 2024, the IOPC received a DSI referral from Leicestershire Police in respect of the deaths of Barnaby Webber, Grace O-Malley-Kumar and Ian Coates and the serious injuries of Wayne Birkett, Sharon Miller and Marcin Gawronski due to Leicestershire police contact with Valdo Calocane prior to the events of 13 June 2023, specifically the actions of Officers A and B.

    b. Between 29 January 2024 and 2 February 2024, there was communication between the IOPC Assessment Unit and Leicestershire Police. There was a concern that on the facts the statutory definition of a DSI was not made out but that they may indicate misconduct and that the AA should consider recording and referring conduct matters rather than a DSI.

    c. On 1 February 2024, the IOPC received a conduct matter referral for officer Officers A and B from Leicestershire Police.

    d. On 3 April 2024, Leicestershire Police referred a conduct matter to the IOPC relating to Officer C who supervised Officers A and B.

87. On 2 February 2024 the IOPC determined that the conduct matters for Officers A and B should be investigated by way of an Independent Investigation. On 4 April 2024, the IOPC determined that the conduct matter for Officer C should also be investigated by way of Independent Investigation and that it should be linked to the existing investigation of Officers A and B.

88. The families were informed of and updated as to Operation Penhallow on 26 March 2024, and on that date the IOPC offered the families of the victims Interested Party status which they accepted. An update was provided on 26th April 2024 but that was after a severity assessment had been conducted, Regulation 17 notices issued to 3 officers, and each had been interviewed. The delay in advising the

families of the referral and the steps that had been taken are matters I have reflected on below.

89. On 5 November 2024, following completion of the final report by the LI, the Decision Maker made provisional determinations that each officer had a case to answer for misconduct. Following consideration of representations made by the AA the Decision Maker directed that Officers A, B and C had a case to answer for misconduct. I refer the Inquiry to the Decision Maker's Opinion of 25 September 2024 for the rationale behind this direction [IOPC0000085], and to the Final Report [IOPC0000031] for further context.

90. Following representations from the families' solicitors after the report and decision documents had been shared, further inquiries were made by the IOPC investigator about the audits of IT systems. On 26 February 2025, Leicestershire Police shared information that supported that Officer A had viewed a tab on a police system (NICHE) on which the existence of the warrant was visible. This contrasted with the position when our decision maker made their determinations on 5 November 2024, when they believed there was no evidence that any checks had been carried out which could have resulted in the warrant being visible to officer A.

91. On 6 March 2025, the IOPC reopened its investigation under the principles in the case of *R (oao Commissioner of Police for Metropolis) v IPCC [2015] EWCA Civ 1248.* The new information was deemed significant and there was a real possibility that had it been available, it would have led, wholly or partly, to different decisions, from those made on 5 November 2024, and there was a public interest, in re-opening the investigation.

92. The reopened investigation remains ongoing. The NICHE system is being rebuilt for Leicestershire Police and will be examined to assess whether Officer A could have viewed the warrant. Regrettably, on 14 November 2025 Lincolnshire police informed the IOPC that due to a technical error in their NICHE re-build, the month of May 2023 failed to load correctly and must be reloaded which will take up to 25 working days to run again. While this puts significant pressure on the current target to complete investigative lines of enquiry by January 2026, we will closely monitor

the progress of the NICHE rebuild and once completed and analysed, we will be better placed to understand potential lines of enquiry that will follow.

93. Other lines of enquiry are also being pursued. The IOPC intends to complete as many investigative lines of enquiry as possible by the end of January 2026.

94. The IOPC has been sharing monthly updates with the Inquiry as an Interested Party.

Referrals that were referred to the IOPC but where the MOI was for a local investigation.

Elias Calocane

95. On 15 March 2024 the IOPC received a complaint referral from Nottinghamshire Police Standards Department. The complaint was made by Elias Calocane, the brother of VC regarding the investigation, engagement with him and his family and publicity.

96. On 22 March 2024, the IOPC determined that the complaint should be investigated by way of a Local Investigation by Nottinghamshire PSD. Whilst the IOPC accepted that the complaint was serious and merited further investigation, it was determined that the issues being raised by the complainant were, in the main, separate from the matters being investigated by the IOPC and the matters where there may be some crossover would be being considered from an entirely different perspective. A right of review to the IOPC was determined to be an appropriate level of oversight.

97. On 1 August 2024, Elias Calocane exercised his right of review of the outcome of Nottinghamshire's investigation into his complaint to the IOPC.

98. On 20 May 2025, the IOPC invited the families of Grace, Ian and Barnaby to be interested parties in the review. By this date, the IOPC had considered the review, commissioned further work and requested additional information from Nottinghamshire Police, and were in the process of considering this additional information before finalising any review outcome.

99. On 22 July 2025, the IOPC determined that the outcome of the complaint had been reasonable and proportionate and did not uphold the review.

PC Matthew Gell

100. On 27 June 2023, the IOPC received a conduct matter referral from Nottinghamshire Police regarding PC Matthew Gell. This related to his access of and use of police records for a non-policing purpose.

101. On 4 July 2023, the IOPC determined that the matter should be investigated by way of a Local Investigation. Whilst recognising that the matter should be investigated, the IOPC determined that Nottinghamshire Police Standards Department were best placed to conduct this investigation, which required further data collection.

Enquiry Police Staff Member

102. On 13 July 2023, the IOPC received a conduct matter referral in respect of Police Staff Member A, a front counter clerk at Radford Road Police Station. This related to their accessing information about the events of the 13 June 2023 using police systems without a policing purpose.

103. On 4 August 2023, the IOPC determined that the matter should be subject to a Local Investigation. Although further investigation was required, the IOPC did not consider than an independent Investigation was necessary as the force appear to be treating the matter with due seriousness and had already arrested the member of police staff. There was also no indication at this stage that the police Staff Member has shared any of the information more widely.

GRO-B

104. On 5 August 2025, the IOPC received a conduct matter referral in respect of an **GRO-B**. The referral contained allegations around disclosure of police information via GRO-B work email address to external email addresses. One element of the referral related to information relating to the incidents of 13 June 2023.

105. On 15 August 2025, the IOPC determined that the investigation should be subject to a Local Investigation.

Informal enquiries between police forces and the IOPC which did not result in referral

106. On 11 August 2023 Nottinghamshire Police Standards Department requested guidance from the IOPC as to whether to record and refer a conduct matter to the IOPC in respect of an organisational issue. The PSD alerted the IOPC to the fact that there was no process in place to routinely check warrants that were in circulation. As there was no conduct matter identified for a specific officer, the IOPC advised that there was no matter to refer to the IOPC, but that the force should keep the matter under review.

ALLEGATIONS AGAINST IOPC STAFF

107. I am asked to provide an account of the IOPC's approach to handling the following allegations against IOPC Staff that were made public in the press on 25 September 2025:

> *"[…]claims that some IOPC staff told officers that the investigation was being "driven by the families" and that they would only face "words of advice or reflective practice"" [lifted from Annex to the Rule 9 request dated 28 October 2025].*

108. The allegations first came to the attention of the IOPC on 5 February 2025. The IOPC investigations team received the Regulation 31 notice for the Operation Penhallow Investigation on this day from the Appropriate Authority (Leicestershire Police), which in this case was the Head of the Professional Standards Department. The notice contained reference to the comments alleged in this case.

109. The allegations in the notice received in this case, just ahead of the original date of misconduct meeting, were viewed as "abuse arguments". In the absence of an express complaint, no action would usually be taken by the IOPC to investigate such allegations until after evidence had been heard and determinations had been made in the misconduct proceedings. Even had the allegations been expressed as a complaint, any handling under the Staff Conduct regulations would usually be suspended pending the proceedings making their findings.

110. The misconduct meeting was adjourned shortly after the Regulation 31 notice was served.

111. On 13 May 2025, Catherine Bates, Deputy Director raised concerns about the Regulation 31 notice with Steve Noonan, Deputy Director General – Investigations, Oversight and Casework. Steve Noonan then made me aware of the allegations on 16 May 2025.

112. Those allegations that relate to the concerns raised in the press are:

a. That one IOPC staff member:

i. Provided the information to the three officers when serving the Regulation 17 notices that,

1. The investigation was not connected to the tragic events in Nottingham in June 2023

2. That the investigation was politically motivated and being driven by the families of the victims in Nottingham

3. That the most likely outcome for the officers was "words of advice" or reflective practice

4. That it would take 2-3 weeks from the interview to be resolved

b. That another IOPC staff member:

i) provided the information to the three officers when serving the Regulation 17 notices that,

1. The investigation was not connected to the tragic events in Nottingham in June 2023

2. That the investigation was politically motivated and being driven by the families of the victims in Nottingham

3. That the most likely outcome for the officers was "words of advice" or reflective practice

4. That it would take 2-3 weeks from the interview to be resolved

ii) did not act in an independent or impartial manner.

113. On 22 July 2025 the IOPC instructed an external firm of solicitors to investigate the allegations together with the complaints made by the families. The Director of Investigations, Nicola Marfleet, has oversight of the investigation.

114. The IOPC receives regular updates from the firm of external solicitors. At the time of sharing this witness statement with the Inquiry, the IOPC is still awaiting the findings of the investigation. The two staff members referred to above remain subject to restrictions on engaging with members of the public pending conclusion of the investigation.

REFLECTIONS

115. I have been asked to reflect on the IOPC investigations, and if there is anything that the IOPC could or should have done differently.

116. The IOPC will always address concerns where it is able to do so, but it cannot investigate all concerns raised by complainants and IPs where these sit outside our statutory remit. Investigations may identify failures to which significant harm can be attributed. However, for an Officer's behaviour to justify professional disciplinary proceedings, the nature of the harm flowing from an action is only one of the measures that will be considered alongside culpability and the existence of aggravating and mitigating factors. This means that some errors will not meet the threshold for an IOPC investigation, even where harm may be significant.

117. Nevertheless, outside its investigative work the IOPC is able to encourage better practice and draw attention to areas for improvement. For example, in the absence of evidence to indicate misconduct it may not be appropriate for the IOPC to seek to make determinations about the quality of police investigations or communications. However, wherever possible, the IOPC will seek to draw attention to these areas for further learning through, for example, raising these issues directly with forces through regular Oversight meetings between Directors of Engagement and the forces.

118. Where, during its investigations, the IOPC uncovers issues which may be systemic or identifies failings, it is able to issue learning recommendations to forces for improvements.

119. The ToR for our investigations should clearly set out the extent of the IOPC's investigation and decision-making powers, bearing the limitations of what we do in mind. When addressing matters which are within the ToRs, the IOPC must be independent and impartial and carry out its investigations fairly, whilst having proper regard to the needs and concerns of victims and those adversely affected by police conduct. In many investigations, the correct outcome will be a matter of dispute, with the police officers, the appropriate authority, complainants and IPs and other stakeholders having strongly and honestly held contradictory views.

120. The facts under scrutiny and the statutory regime applying to them are often complex. The IOPC has resource constraints like many organisations. This may mean that investigations cannot be completed within desirable timescales and/or their target dates. In some cases, the desire to complete investigations quickly has to be balanced against the need for enhanced engagement and meeting the needs of those involved in the investigative process where possible.

121. The IOPC does, like all organisations working with complex issues and within complex legal and policy frameworks, make mistakes. In some cases, the service it provides falls below what it should be. Where that is so, my role is to ensure that suitable arrangements are in place for us to be able to learn the lessons. Usually, that will be most appropriate to do at the end of an investigation in line with our Quality Assurance Framework for Investigations.

122. I am not aware of any significant flaws or mistakes in Operation Gosemore or in the review of the outcome of Elias Calocane's complaints.

123. In Operation Penhallow the families were not made IPs or advised about the service of notices and interviews taking place at the earliest opportunity. It is also a matter of concern that not all the relevant evidence was obtained or provided prior to the completion of the original final report and decision making. Whilst it may only be possible to harvest all the learning in a debrief at the end of the re-opened investigation, where quick time learning can be identified, it will be acted upon. Of

relevance to this issue arising from Op Penhallow, there has been quick time learning from other investigations that has led to our Transforming Investigations Programme issuing guidance on how investigators should commission inquiries by forces to interrogate their own IT systems and provide suitable assurance that all reasonable and proportionate steps have been taken to do so.

124. It was reflected in our correspondence with the families' solicitors that we had been assisted by their constructive criticism. This has led, at least in part, to further inquiries being made which obtained the further evidence.

125. Following it coming to my attention in connection with Operation Longdale, that the Head of Communications had expressed opinions on matters which were not for them to decide and/or about which the IOPC should remain neutral, we have reminded all staff in our media and communications teams that our role is to remain neutral and follow the IOPC/NPCC media protocol. We are already in the process of reviewing the IOPC/NPCC media protocol to ensure it is current and fit for purpose. We will ensure this example is taken into account when reviewing the protocol.

126. I will provide broader reflections on the remaining ongoing investigations after their conclusion. I have taken steps in the meantime to try and ensure that these investigations are progressing with the sensitivity, diligence, and timeliness they deserve. I and others in the senior management team are briefed regularly on these investigations and are sighted on regular statutory updates. However, the timeliness of them is a matter of concern. Primarily this reflects their complexity, the volume of material to be considered or obtained and the number of separate determinations required. These factors also place significant demands on the time of the families of Grace, Ian and Barnaby to be able to provide representations on special procedures assessments and the like.

127. The mistakes made in the process of developing and refining the ToRs for these three ongoing investigations have undermined the families' confidence in the IOPC. More should have been done at an early stage to strike the balance between ensuring the scope of the ToRs remained within our statutory remit whilst addressing as fully as possible all the concerns of the families. The process took

too long and was not subject to sufficient scrutiny from senior IOPC staff in its early stages. The IOPC's new Investigation team model is geared to allow for more senior oversight in complex investigations to try to ensure that these mistakes do not happen again. Whilst it is important for an IOPC investigation to explain the limitations on the IOPC's role, it must also keep in mind that, at is heart, is the duty to promote public confidence in policing.

128. What is clearly regrettable is that the families of Grace, Ian and Barnaby have lost a great deal of confidence in our investigations and have felt it necessary to make complaints about IOPC staff. I cannot pre-judge the outcome of those complaints, but I can say that, at the very least, consideration needs to be given by the IOPC, and policing, about how to strengthen communication with families in such terrible circumstances. This should be made genuinely trauma-informed going forward. I agree that it is vital we get this right for the future. I have already mentioned the ongoing work to embed "enhanced engagement" in investigations where families need more effective participation, and we continue to evaluate the impact this revised process is having on families and individuals to ensure it is meeting their needs. We will be launching the second of our service user panels in early 2026 to improve the engagement with and experience of everyone who comes into contact with the IOPC.

129. Similarly, the complaints raised by the families bring up important issues about the training of investigators to maintain the correct balance between being courteous to and considerate of subjects under investigation whilst maintaining appropriate professional boundaries, to demonstrate their independence. The IOPC is currently rolling out the Professionalising Investigations Programme for trainee investigators, investigators and lead investigators to improve on these related skills.

130. Having already reflected on these matters, I met personally with members of the families on 25 April 2025. Since then, steps have been taken to improve the quality and resourcing of the investigations and communications with complainants and IPs. I hope that this will enable to rebuild the families' confidence in the quality of our investigations and their ultimate outcomes, whatever they may be.

STATEMENT OF TRUTH

I believe the content of this statement to be true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed:

GRO-B

Rachel Watson

Director General, Independent Office for Police Conduct

Dated: 11 December 2025

Index to First Witness Statement of Rachel Watson

No.	URN	Document Description
1	IOPC0000004	Operation Gosemore - Final Report
2	IOPC0000057	Operation Gosemore - Decision Maker's Opinion
2	IOPC0000043	Operation Penhallow – Terms of Reference, as of 30 April 2024
3	IOPC0000050	Operation Astwell, Terms of Reference, as of 28 October 2024
4	IOPC0000064	Operation Copthorne, Terms of Reference, as of 18 November 2024
5	IOPC0000046	Operation Longdale, Terms of Reference, as of 27 January 2025
6	IOPC0000085	Operation Penhallow – Decision Maker's Opinion
7	IOPC0000031	Operation Penhallow – Final Report
8	IOPC0000090	Operation Penhallow – Addendum to Final Report
9	WITN0339002	Our people | Independent Office for Police Conduct (IOPC)
10	WITN0339003	IOPC Framework Document Independent Office for Police Conduct: framework document (accessible) - GOV.UK
11	WITN0339004	About us | College of Policing.
12	WITN0339005	His Majesty's Inspectorate of Constabulary and Fire & Rescue Services - His Majesty's Inspectorate of Constabulary and Fire & Rescue Services.
13	WITN0339006	National Police Chiefs Council Website.
14	WITN0339007	Scheme of Delegation
15	WITN0339008	IOPC Statutory Guidance
16	WITN0339009	College of Policing: Guidance on Outcomes in Police Disciplinary Proceedings 2022
17	WITN0339010	Hindmarch v NMC [2016] EWHC 2233 (Admin)
18	WITN0339011	R (On The Application Of Shaw) v General Osteopathic Council) [2015] EWHC 2721 (Admin)
19	WITN0339012	Spencer v General Osteopathic Council [2012] EWHC 3147 (Admin)
20	WITN0339013	IOPC-NPCC Media Protocol
21	WITN0339014	IPSO Decision 01572 – 34 Nottinghamshire Police v Nottingham Post