



**Seattle Office of
Inspector General**

Evaluation of OPA Bias Review Process

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Introduction

The Office of Inspector General (OIG) conducts systemic oversight of investigations by the Office of Police Accountability (OPA) into allegations of misconduct by Seattle Police Department (SPD) employees. Ordinance #125315 requires OPA to review all complaints made against SPD employees and requires OIG to report patterns in OPA complaints and investigation outcomes involving biased policing.

In March 2025, OPA notified OIG that a significant number of Bias Review documents had not been properly reviewed by the previous OPA Director.¹ OIG assessed OPA's Bias Review process and data related to bias complaints. This report presents the findings of that evaluation and recommendations for OPA handling of future bias reviews.

Background

SPD policy 5.140-POL-6 requires personnel to report allegations of bias-based policing to a frontline supervisor.² The supervisor conducts a preliminary investigation into the claim, including attempting to discuss the allegation with complainants and witnesses. If the supervisor believes there is no evidence of bias and the complainant declines to refer the allegation to OPA for further investigation, the supervisor submits a Bias Review Blue Team³ entry for review by the chain of command.⁴

Upon approval of the Bias Review by the bureau chief, SPD forwards the Bias Review to OPA to determine if the allegation was handled appropriately. OPA administrative staff create a case file with relevant information and route the case to the OPA director for final review.⁵

Prior to 2023, OIG regularly reviewed statistically significant samples of all Bias Reviews sent to OPA. OIG amended its classification process in 2023 to include evaluation of all Bias Reviews sent to OPA.⁶ As a result of this change, all Bias Reviews that went unscreened by OPA were screened by OIG as they were routed from SPD.

1 Gino Betts was the OPA Director between August 1, 2022, and November 30, 2024.

2 [5.140 - Bias-Free Policing - Seattle Police Department \(WA\) - PowerDMS](#).

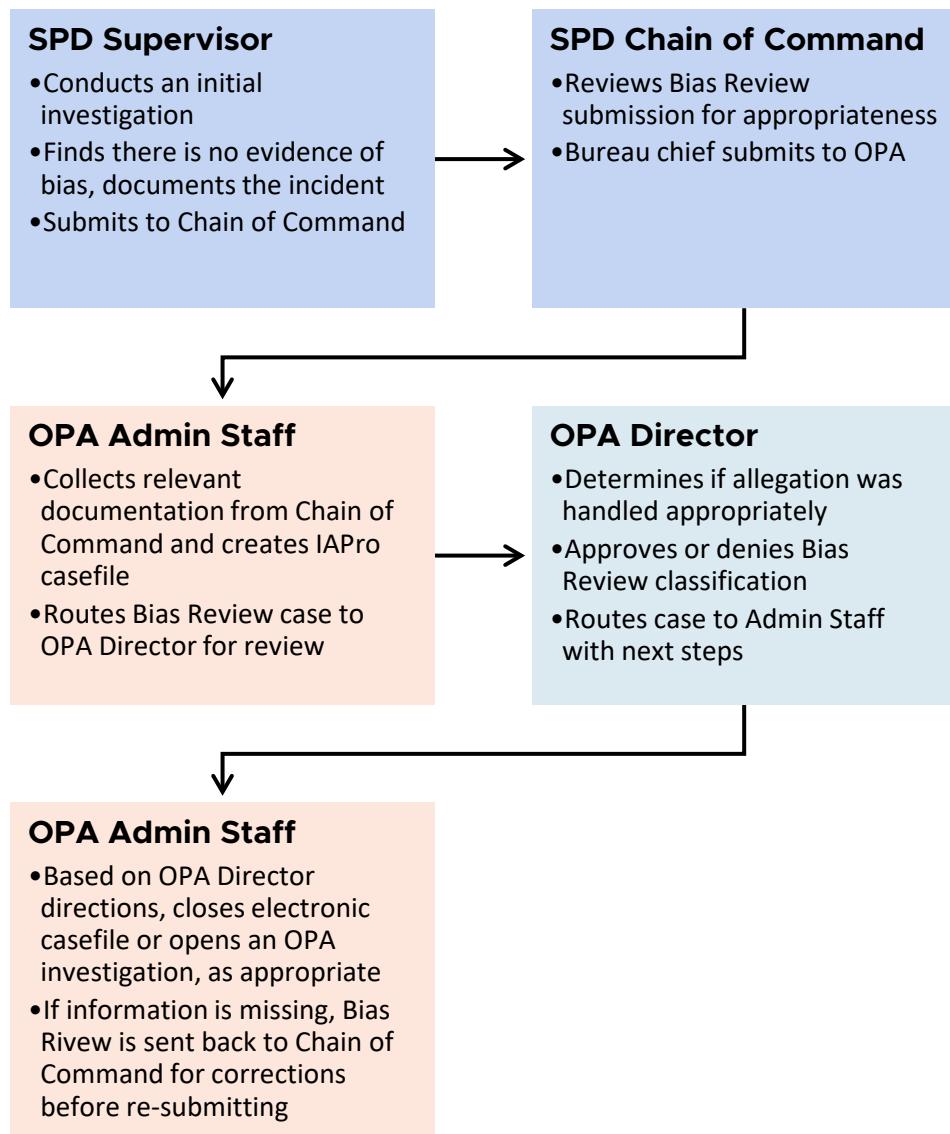
3 Blue Team is a software used by SPD to manage administrative investigations, including uses of force and complaints of bias-based policing.

4 The supervisor completes either a Complaint Blue Team entry (for cases referred to OPA for further investigation), or a Bias Review Blue Team entry (for cases not referred to OPA for further investigation).

5 [OPA Internal Operations and Training Manual](#).

6 In 2022, 87 bias reviews were not reviewed by OPA. Of those 87, OIG reviewed a sample of 46, leaving a total of 41 that went unreviewed. Those 41 have since been reviewed by OIG.





In March 2025, OPA notified OIG that a significant number of Bias Reviews had not been properly evaluated by the previous OPA Director.⁷ OIG informed relevant City of Seattle stakeholders and committed to reviewing the matter and publishing a findings report.

The following sections summarize OIG review of OPA processes and data related to Bias Reviews. It should be noted that SPD appears to utilize the Bias Review process appropriately. Similarly, the administrative staff at OPA handled the incoming Bias Reviews appropriately and forwarded them to the Director as required.

⁷ OPA notified OIG on March 13, 2025.



Methodology

OPA conducted an initial records review to identify each improperly handled Bias Review and provided a list of cases to OIG consisting of 336 Bias Reviews. Using its own query, OIG discovered 26 additional Bias Reviews not identified in the data provided by OPA and included them in this review.⁸ OIG interviewed current OPA staff, the previous interim OPA Director, and the current OPA Director to supplement the data review.

Findings

A total of 362 Bias Reviews were sent to the OPA Director between August 1, 2022 and November 30, 2024. During this period, the OPA Director did not review any Bias Reviews for content and appropriateness.

The user logs for the Bias Review records show one August 2022 case accessed by both the previous interim OPA Director and the newly permanent OPA Director on the same day, potentially indicating the interim Director was training the new Director on the bias review process.⁹ The case was never completed or properly routed back to OPA administrative staff for action. This single case appears to be the only Bias Review case opened by the new Director during their tenure. In addition to any training the new OPA Director may have received, the OPA Manual Section 8.6 also outlines the OPA Director's responsibilities with regard the bias review process.

Recommendation 1: OIG recommends OPA change its system for counting Bias Reviews to reflect reviews marked completed by the OPA Director, not simply reviews sent to OPA by SPD.

OPA did not identify or report discrepancies in OIG and OPA Bias Review data during the review period.

OIG publishes quarterly reviews of the OPA complaint handling system. OIG provides OPA with a draft of these reports prior to publication as a courtesy for OPA to review the content and numbers. During the period reviewed, multiple quarterly reports were sent to OPA for review which included OIG data on Bias Reviews. OPA did not recognize or report any discrepancy between the number of Bias Reviews reviewed by OPA and those reviewed by OIG.

Interviews with OPA personnel indicated the draft quarterly reports were not distributed to the staff responsible for data collection, resulting in no quantitative comparison between OIG and OPA data. OIG has since begun including OPA data staff as recipients of draft reports.

Recommendation 2: OIG recommends OPA formalize a process to compare its Bias Review data with the data sent quarterly by OIG.

⁸ The difference in numbers was due to slight differences in the SQL queries used by OPA and OIG.

⁹ The previous Interim Director was unable to specifically recall training the new Director on that day, though they recalled doing extensive daily trainings.



The former OPA Director received multiple notifications regarding the uncompleted Bias Reviews.

OPA informed OIG that OPA administrative staff periodically noted Bias Reviews routed to the Director were not being completed.¹⁰ The staff reported their concerns to their supervisors who relayed the information to the former Director. In interviews with OIG, OPA staff indicated the former Director stated the reviews were being done.

In late 2024, OIG noted a decrease in the number of Bias Reviews appearing in SQL queries run by OIG staff. OIG requested the then Deputy OPA Director discuss the identified decrease with the Director. The Director again stated they were completing the reviews. Ultimately, the decrease was attributed to fewer bias allegations requiring a Bias Review being sent to OPA from SPD.

Recommendation 3: OIG recommends OPA develop a process for staff to raise concerns related to the Director's performance of duties mandated under the Accountability Ordinance to the attention of relevant city agencies.

Current Status

OPA has made changes to its internal Bias Review processes following the identification of this issue. OPA has implemented a new process that makes Bias Reviews the shared responsibility of the Deputy Director and the Director as assigned by OPA administrative staff when the reviews come in. This system disperses responsibility among OPA leadership and provides an opportunity for the Director, the Deputy Director, as well as the Assistant Director of Operations to ensure reviews are completed as required.

OPA now tracks all Bias Reviews sent by SPD in a spreadsheet, allowing OPA to more easily see incoming reviews, completed reviews, and reviews awaiting completion. OIG will continue to work with OPA to refine and improve such preventative measures.

OIG has modified the query used to count Bias Reviews to show completed reviews instead of routings from SPD. This, coupled with OIG's weekly review of OPA classification, will allow OIG to continue monitoring the appropriateness of Bias Review classifications and effectiveness of the review process.

¹⁰OPA data analysts were not provided the information necessary to identify the discrepancy.