

# COMPLAINTS HANDLING PROCEDURE

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## CP1 INTRODUCTION

This procedure reflects Edinburgh Napier University's commitment to valuing complaints. Our aim is to resolve issues of dissatisfaction as close to the initial point of contact as possible and to conduct thorough and fair investigations of complaints so that, where appropriate, we can make evidence-based decisions on the facts of each individual case. Resolving complaints early saves time and resource and contributes to the overall efficiency of Edinburgh Napier University. Concentrating on achieving an early resolution of a complaint as close to the point of contact as possible will free up the time of academic and support staff and ultimately contribute to the continued positive experience of our students and members of the public.

This procedure has been subject to an equality impact assessment.

### CP1.1 What is a complaint?

For the purposes of this procedure, a complaint may be defined as: **“an expression of dissatisfaction by one or more individuals about the standard of service, action or lack of action by or on behalf of the University.”**

A complaint may relate to:

- the quality and standard of service
- failure to provide a service
- the quality of facilities or learning resources
- treatment by or attitude of a staff member, student or contractor
- inappropriate behaviour by a staff member, student or contractor
- the failure of the University to follow an appropriate administrative process
- dissatisfaction with the University's policy, although it is recognised that policy may be set at the discretion of the University

The definition of a complaint is very broad and the list above is not exhaustive. However, not every concern raised with the University is a complaint. For example, the following **are not complaints**:

- a routine, first-time request for a service
- a request under the Freedom of Information (Scotland) Act or Data Protection Act
- a request for information or an explanation of policy or practice
- a response to an invitation to provide feedback through a formal mechanism such as a questionnaire or committee membership will generally not be treated as a complaint
- an insurance claim
- an issue which is being, or has been, considered by a court or tribunal
- an attempt to have a complaint reconsidered where the Institution's procedure has been completed and a decision has been issued

- a grievance by a member of staff which is eligible for handling through the grievance procedure
- an appeal about an academic judgement on assessment or admission.

These issues will be dealt with under the alternative appropriate processes rather than under the CHP. It should be noted, however, that some situations can involve a combination of issues, some are complaints and others are not, and each case should be assessed on a case by case basis.

Links to other selected University procedures:-

Appeals and Extenuating Circumstances -

<http://my.napier.ac.uk/Student-Administration/Pages/Student-Administration.aspx>

Matters relating to non-academic and academic conduct -

<http://my.napier.ac.uk/Student-Administration/Conduct/Pages/Conduct.aspx>

University Governance (Including Freedom of Information and Data Protection) –

<http://staff.napier.ac.uk/services/secretary/governance/Pages/Governance.aspx>

Staff Grievance Procedure

<http://staff.napier.ac.uk/services/hr/hrdocuments/Pages/Documents.aspx>

Public Interest Disclosure Policy

<http://staff.napier.ac.uk/services/hr/hrdocuments/Pages/Documents.aspx>

## **CP1.2 Who can make a complaint?**

The University's Complaints Handling Procedure covers complaints from anyone who receives, requests or is affected by our services.

This includes, although is not limited to:

- a student's experience during their time (subject to the time limits detailed in section CP1.6) at the University (all referred to as 'students' through the remainder of this document);
- members of the public, where they have a complaint about matters which are (or which were at the time the issue arose) the responsibility of the University; and
- members of the public who are applying for admission to the University and whose complaint does not relate to academic judgement.

The basic processes for investigating complaints are the same for students, members of the public and applicants to the University.

Sometimes individuals may be unable or reluctant to make a complaint on their own. The University will accept complaints brought by third parties, as long as the individual affected has given their personal consent under the requirements of the current data protection legislation. This usually means that the individual affected must give clear written authority for the third party to act on their behalf and state their relationship to the complainant. Complaints made by a third party

with the explicit permission of the complainant will be dealt with according to the same timescales.

### **CP1.3 Anonymous Complaints**

Complaints submitted anonymously will be considered if there is enough information in the complaint to enable the University to make further enquiries. If, however, an anonymous complaint does not provide enough information to enable us to take further action, we may decide not to pursue it further. However, the University may give consideration to the issues raised, and will record the complaint so that corrective action can be taken as appropriate.

Any decision not to pursue an anonymous complaint must be authorised by the University Secretary or his/her nominee. If an anonymous complaint contains serious allegations, it should be referred to the Dean of the School/ Director of Service concerned immediately for consultation with the University Secretary.

### **CP1.4 Complaints involving more than one School/Service**

If a complaint relates to the actions of two or more Schools or Services, the staff member receiving the complaint must confer with the other area(s) to decide who will take the lead on the complaint. Coordination may still be required between different areas of the University to ensure that the complaint is fully addressed in a single response. The nature of the complaint may also require parallel procedures to be initiated (such as academic appeal or disciplinary procedures).

### **CP1.5 Complaints involving other organisations or contractors who provide a service on behalf of the University**

If an individual complains to the University about the service of another organisation, but the University has no involvement in the issue, the individual should contact the appropriate organisation directly.

Where a complaint relates to a University service which is carried out on our behalf by another organisation or contractor, the complaint must be handled via this CHP.

### **CP1.6 Time limit for making complaints**

Complaints should be raised with the University as soon as problems arise to enable prompt investigation and swift resolution. This CHP sets a time limit of six months to raise a complaint with the University, starting from when the complainant first became aware of the problem, unless there are special circumstances for requesting consideration of a complaint beyond this time. Beyond the six-month time limit, the University will exercise discretion in the way that the time limit is applied. This will take account of the time limit within which a member of the public can normally ask the SPSO to consider complaints, which is twelve months from when the person first became aware of the issue about which they are complaining.

## CP1.7 Recording and the use of recordings

Audio/video recording of meetings/hearings associated with this procedure will generally not be permitted. Requests of this nature will be considered where required as a reasonable adjustment pending consideration of an appropriate disability assessment.

With regard to requests related to recording, any decision taken will involve input from the Disability and Inclusion team and/or the Information Governance team where appropriate.

For students, covert recording will be considered a misconduct matter in its own right and any student found to have undertaken this will be subject to action in line with the [Student Conduct Regulations](#). The [Unreasonable Complainant Behaviour Policy](#) may be invoked for any non-student found to have undertaken covert recording.

Recordings submitted as evidence to support complaints will be considered at the discretion of the Complaint Investigator and/or relevant Dean of School/Director of Service.

## CP2 THE COMPLAINTS HANDLING PROCESS

The CHP is intended to provide a quick, simple and streamlined process with a strong focus on early resolution by empowered and well-trained staff. The procedure involves up to two internal stages plus a final, independent, external review stage. The University will decide which of the first two stages is appropriate initially though if stage 1 is opted for then the complainant is permitted to request escalation to stage 2 at the conclusion of the first stage. Escalation to request independent external review is at the discretion of the complainant.

**1 Frontline resolution** seeks to resolve straightforward complaints swiftly and effectively at the point at which the complaint is made, or as close to that point as possible.

**2 Investigation** is appropriate where a complainant is dissatisfied with the outcome of frontline resolution, or where frontline resolution is not possible or appropriate due to the complexity or seriousness of the case.

**3 Independent External Review** is for issues that have not been resolved to the complainant's satisfaction at either stage 1 or 2 and may be requested at the discretion of the complainant.

**A flowchart providing further detail can be found on the following page.**

 <b>Frontline Resolution</b>	 <b>Investigation</b>	<b>Independent External Review (SPSO or Other)</b>
<p><b>For issues that are straightforward and easily resolved, requiring little or no investigation.</b></p> <p>'On-the-spot' apology, explanation, or other action to resolve the complaint quickly, in five working days or less, unless there are exceptional circumstances.</p> <p>Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline resolution.</p> <p>Complaint details, outcome and action taken recorded and used for service improvement.</p>	<p><b>For issues that have not been resolved at the frontline or that are complex, serious or 'high risk'.</b></p> <p>A definitive response provided within 20 working days following a thorough investigation of the points raised.</p> <p>Responses signed off by senior management.</p> <p>Senior management have an active interest in complaints and use information gathered to improve services.</p> <p>Complainants who remain dissatisfied after an investigation has been completed by the Institution have the right to ask the SPSO to review their case (see right).</p>	<p><b>For issues that have not been resolved by the service provider.</b></p> <p>Complaints progressing to the SPSO will have been thoroughly investigated by the service provider.</p> <p>The SPSO will assess whether there is evidence of service failure or maladministration not identified by the service provider.</p>

**Note:** For clarity, the term 'frontline resolution' refers to the first stage of the complaints process. It is not intended to reflect any job description within the Institution; rather it refers to the process which seeks to resolve complaints as soon as possible.

## **CP2.1 Stage One: Frontline Resolution – to be completed within 5 working days**

Anyone who has a complaint is encouraged to raise it initially at the point of, or as close to the point of, becoming aware of it as possible and to raise it with the School/Service in which the issue arose.

Complaints at this stage may be made face-to-face, by phone, in writing or by email.

The purpose of frontline resolution is to attempt to resolve as quickly as possible complaints which are straightforward and require little or no investigation. Complaints at this stage of the process may be addressed by any relevant member of the University's staff and may be handled by way of a face-to-face discussion with the complainant, or by asking an appropriate member of staff to deal with the complaint.

Members of staff to whom complaints are made will consider some key questions:

- Is this a complaint or should the individual be referred to another procedure?
- What specifically is the complaint (or complaints) about and which area(s) of the University is /are involved?
- What outcome is the complainant hoping for and can it be achieved?
- Is this complaint straightforward and likely to be resolved with little or no investigation?
- Can the complaint be resolved on the spot by providing an apology /explanation /alternative solution?
- Can another member of staff assist in seeking a frontline resolution?
- What assistance can be provided to the complainant in taking this forward?

Resolution may be achieved by providing an on-the-spot explanation of why the issue occurred and/or an apology and, where possible, what will be done to stop this happening in the future.

If responsibility for the issue being complained about lies in the staff member's area of work, every attempt will be made to resolve the problem at source. If responsibility lies elsewhere, the staff member receiving the complaint will liaise with the relevant area rather than simply passing the complainant on to another office.

## **CP2.2 Extension of the five day timeline**

Frontline resolution should normally be completed within 5 working days, though a resolution may be achieved more quickly. In exceptional circumstances a short extension of time may be necessary to increase the possibility of resolving the complaint at the frontline resolution stage (for example, by obtaining information from other areas where no single area of the University is responsible for the issue(s) being complained about). Where an extension is required this must be signed off by an appropriate senior manager. The complainant must be told of the reasons for extending the deadline and advised of the new timescale for resolution. The maximum extension which can be granted is 5 working days (i.e. not more than 10 working days in total from the date of receipt of the complaint).

### **CP2.3 Closing the complaint at the frontline resolution stage**

The outcome will be communicated to the complainant. This may be face-to-face, by phone, in writing or by email. The response to the complainant will address any aspects for which the University is responsible, and explain the reasons for the decision. Once a decision has been issued, the complaint will be recorded, including details of the decision reached. The complaint will then be closed with the complainant being advised that, should they remain dissatisfied, they should refer to section CP2.4 of this document and make contact with the University's Appeals, Complaints and Conduct Manager (ACCM). Preferred contact with the ACCM in the first instance is via email ([complaints@napier.ac.uk](mailto:complaints@napier.ac.uk)) with a summary of the complaint and action taken thus far. If it is a complainant's preference to telephone they may call 0131 455 2396.

### **CP2.4 Stage two: Investigation – to be completed within 20 working days**

These complaints may already have been considered at the frontline resolution stage, or they may be complaints identified upon receipt as appropriate for immediate investigation.

A complaint will be moved to the investigation stage when:

- frontline resolution was attempted, but the complainant remains dissatisfied. This may be after the case has been closed following the frontline resolution stage
- the complainant refuses to recognise or engage with the frontline resolution process and is insistent that the issue be addressed by a more senior officer
- the issues raised are complex and will require detailed investigation
- the complaint relates to issues that have been identified by the University as high risk or high profile.

Special attention will be given to identifying complaints considered high risk /high profile, as these may require particular action or may raise critical issues requiring direct input from senior management. Potential high risk /high profile complaints may:

- involve a death or terminal illness
- involve serious service failure, for example major delays in service provision or repeated failures to provide a service
- generate significant and on-going press interest
- pose a serious operational risk to the University
- present issues of a highly sensitive nature.

A person can make a complaint in writing, in person, by telephone, by email or online or by having someone complain on their behalf. Where it is clear that a complaint will be immediately considered at the investigation stage, the complainant may be encouraged to complete the appropriate [complaint form CP1](#) to provide full details of the complaint and any relevant documentation. If they choose not to write it down and would prefer to complain in person, the

complaint form can be completed with them and a letter to confirm the scope of the complaint issued to them.

The purpose of conducting an investigation is to establish all of the facts relevant to the points made in the complaint and to provide a full, objective and proportionate response to the complainant that represents the Institution's definitive position.

### **CP2.5 What the University will do when it receives a complaint for investigation**

Upon receipt of a complaint for investigation at stage two, the matter should be referred to the ACCM who will encourage the complainant to complete a CP1 form if this has not already been done.

The ACCM will at this stage formally record the complaint and will pass details of the complaint to the relevant Dean of School/Director of Service to be investigated. The Dean of School/Director of Service will either investigate personally or nominate a senior colleague to act as Complaints Investigator. Depending on the nature of the complaint, the Dean of School/Director of Service may wish to appoint two investigators who will jointly attend to the case.

If the complaint directly concerns a Dean of School/Director of Service, the ACCM will ask an appropriate member of the Senior Leadership Team or their nominee to act as Complaint Investigator.

Investigation may involve the Complaint Investigator meeting with/interviewing any individuals/groups he/she deems relevant to the case. This could include the complainant. Should any student raising a complaint be asked to attend such a meeting/interview, he/she will be entitled to the support, representation and accompaniment detailed in section CP5.

Following the conclusion of the investigation, the Complaints Investigator will provide a written response to the ACCM who will formally communicate the findings to the complainant, noting any consequent action the School/Service intends to take.

### **CP2.6 Timelines**

The following deadlines will be used for stage two cases:

- complaints will be acknowledged in writing within 3 working days
- the University will provide a full response to the complaint as soon as possible but not later than 20 working days from the time that the complaint was received for investigation.

### **CP2.7 Extension to the timeline**

Not all investigations will be able to meet this deadline; for example some complaints are so complex that they will require careful consideration and detailed investigation beyond the 20 working days timeline. Where there are clear and justifiable reasons for extending the timescale, senior management will exercise judgement and will set time limits on any extended investigation, with

the agreement of the complainant. If the complainant does not agree to an extension but it is unavoidable and reasonable, then senior management must consider and confirm the extension.

In such circumstances, the complainant must be kept updated on the reason for the delay and given a revised timescale for bringing the investigation to a conclusion. It is expected, however, that this will be the exception and that the university will always strive to deliver a definitive response to the complaint within 20 working days.

Where an extension has been agreed, this will be recorded appropriately and the proportion of complaints that exceed the 20 working day-limit will be evident from reported statistics.

### **CP2.8 Mediation**

In some circumstances, mediation may be seen as the most suitable way to resolve a complaint. Mediation will only be entered into with the agreement of all parties and is not a mandatory requirement within the Complaints Handling Procedure.

If deemed appropriate, the ACCM can appoint a suitable member of staff to act as Mediator. The Mediator will be independent of the School/ Service, which is the subject matter of the complaint. The individual, who is the subject of the complaint, can object to any appointment if good cause can be shown.

The Mediator will hold an informal mediation meeting, within 10 working days of his/her appointment, with the complainant and the individual or School/Service representative against whom the complaint is made. The aim of this meeting will be to facilitate a dialogue between the two parties in an attempt to reach a mutually agreed conclusion, with the minimum of distress for all concerned without having to proceed to a formal resolution. Where the complainant is a student, he/she can be accompanied by a member of the University community as detailed in CP5. The Mediator has the discretion to allow the person accompanying the student to the meeting to speak.

If the outcome of mediation is satisfactory to all concerned, the Mediator will issue a report within 10 working days from the date of the final mediation meeting to the ACCM for circulation to the parties concerned. The report will contain agreed proposals for resolution of the complaint and any other recommendations, which the Mediator considers appropriate in the circumstances. The ACCM will ensure that any actions are drawn to the attention of the relevant persons or bodies. If mediation is unsuccessful, the mediator will inform the ACCM and detail the reasons why it was unsuccessful.

### **CP2.9 Closing the complaint at the investigation stage**

The outcome of the investigation will be communicated to the complainant in writing. The decision, and details of how and when it was communicated to the complainant, must be recorded on the system for recording complaints. The decision will also advise the complainant about:

- their right to ask the Scottish Public Services Ombudsman (SPSO) to review the complaint
- the time limit for doing so
- how to contact the SPSO

### **CP2.10 Independent external review (SPSO)**

Once the investigation stage has been completed, the complainant is entitled to ask the SPSO to look at their complaint. The SPSO considers complaints from people who remain dissatisfied at the conclusion of the University's CHP. The SPSO looks at issues such as service failure and maladministration (administrative fault) as well as the way the University has handled the complaint. The SPSO will not consider complaints that concern the exercise of academic judgement.

### **CP2.11 Information about the SPSO**

The Scottish Public Services Ombudsman (SPSO) is the final stage for complaints about public services in Scotland. This includes complaints about Scottish universities. If you remain dissatisfied with a university or co-operative after its complaints process, you can ask the SPSO to look at your complaint. The SPSO cannot normally look at complaints:

- where you have not gone all the way through the university's complaints handling procedure
- more than 12 months after you became aware of the matter you want to complain about, or
- that have been or are being considered in court.

The SPSO's contact details are:

In person **Bridgeside House, 99 McDonald Road, Edinburgh, EH7 4NS**  
Post **Freepost SPSO**  
Freephone **0800 377 7330**  
Online contact [www.spsso.org.uk/contact-us](http://www.spsso.org.uk/contact-us)  
Website [www.spsso.org.uk](http://www.spsso.org.uk)  
Mobile site: <http://m.spsso.org.uk>

## CP3 GOVERNANCE OF THE COMPLAINTS HANDLING PROCEDURE

### CP3.1 Roles and Responsibilities

All staff will be aware of:

- the CHP
- how to handle and record complaints at the frontline resolution stage
- who they can refer a complaint to if they are unable to handle the matter personally
- the need to try and resolve complaints early and as locally (within their department) as possible

and

- their clear authority to attempt to resolve any complaints they may be called upon to deal with.

Senior management will ensure that:

- the University's final position on a complaint investigation is signed off by an appropriate senior member of staff in order to provide assurance that this is the definitive response of the University and that the complainant's concerns have been taken seriously
- it maintains overall responsibility and accountability for the management and governance of complaints handling within the University
- it has an active role in, and understanding of, the CHP (although not necessarily involved in the decision making process of complaints handling)
- mechanisms are in place to ensure a consistent approach to the way complaints handling information is managed, monitored, reviewed and reported at all levels in the Institution, and
- complaints information is used to improve services, and this is evident from regular publications.

**The Principal:** provides leadership and direction to the University. This includes ensuring that there is an effective CHP with a robust investigation process which demonstrates that organisational learning is in place. The Principal and the members of the University Leadership Team receive regular reports on complaints received by the University and how they have been processed, including the outcomes of the complaints. He/she ensures that complaints are used to identify service improvements, and that these improvements are implemented, and learning fed back to the wider organisation as appropriate.

**University Leadership Team/Deans of School/Directors of Services:** May be involved in the investigation. As a senior member of staff they may be responsible for preparing and signing response letters to complainants and therefore must be satisfied that the investigation is complete and that their response addresses all aspects of the complaint.

**Complaints Investigators:** Complaints Investigators are suitably trained and experienced staff members who are given responsibility for the conduct of the complaints investigation and are involved in the investigation and the co-ordination of all aspects of the response to the complainant. This may include

preparing a comprehensive written report, including details of any recommended procedural changes to service delivery. Complaints Investigators have a clear remit to investigate effectively and reach robust decisions on more complex complaints.

**All staff:** A complaint may be made to any member of staff. All staff must, therefore, be aware of the CHP and how to handle and record complaints at the frontline resolution stage. They should also be aware of whom to refer a complaint to, in case they are not able to personally handle the matter. We encourage all staff to try to resolve complaints early, as close to the point of service delivery as possible, and quickly to prevent escalation.

**Appeals, Complaints and Conduct Manager (ACCM):** The ACCM oversees coordination and operation of the Complaints Handling Procedure and provides students, staff and other relevant parties' procedural information and advice in an orderly, structured way within requested timescales. When liaising with the SPSO, the ACCM provides comments on factual accuracy on behalf of the University in response to SPSO reports, confirming recommendations have been implemented, and providing evidence to verify this.

### **CP3.2 Complaints about senior staff**

Complaint investigations concerning senior staff should be undertaken in line with the levels of authority found in the Appeals Hearing section of the Staff Grievance Procedure which can be found at:

<http://staff.napier.ac.uk/services/hr/hrdocuments/Pages/Documents.aspx>.

Any complaint directly concerning the Principal will be referred to the Chair of the University Court.

## **CP4 RECORDING, REPORTING, PUBLICISING AND LEARNING**

Valuable feedback is obtained through complaints. One of the objectives of the CHP is to identify opportunities to improve provision of services across the University.

Staff must record all complaints so that we can use the complaints data for analysis and management reporting. By recording and using complaints information in this way, the causes of complaints can be identified, addressed and, where appropriate, training opportunities can be identified and improvements introduced.

### **CP4.1 Recording Complaints**

To collect suitable data, it is essential that all complaints are recorded in sufficient detail.

The minimum requirements are as follows:

- name and contact details of the complainant and student matriculation number (if applicable)
- date of receipt of the complaint
- how the complaint was received

- category of complaint
- staff member responsible for handling the complaint
- department to which the complaint relates
- action taken and outcome at frontline resolution stage
- date the complaint was closed at the frontline resolution stage
- date the investigation stage was initiated (if applicable)
- action taken and outcome at investigation stage (if applicable)
- date the complaint was closed at the investigation stage (if applicable)
- underlying cause and remedial action taken (if applicable)
- response times at each stage

The University has structured systems for recording complaints, their outcomes and any resulting action so that the complaint data can be used for internal reporting as indicated below.

#### **CP4.2 Reporting Complaints**

The University has a system for the internal reporting of complaints information. Regularly reporting the analysis of complaints information helps to inform management of where improvements are required. Information reported internally will include:

- performance statistics, detailing complaints volumes, types and key performance information, for example on time taken and stage at which complaints were resolved
- the trends and outcomes of complaints and the actions taken in response including examples to demonstrate how complaints have helped improve services.

This information will be reported at least quarterly to senior management and at least annually to the governing body (Court).

#### **CP4.3 Publicising complaints performance information**

The University will publish on a quarterly basis a summary of complaints outcomes, trends and actions taken to improve services, with a focus on case studies and examples of how complaints have helped improve services. This may also include positive feedback from students and members of the public. This demonstrates the University's approach to improving services on the basis of complaints and shows that complaints can influence our services. It also helps ensure transparency in our complaints handling service and will help to demonstrate to our students and members of the public that we value their complaints.

The University will report on complaints handling performance annually in line with SPSO requirements. This includes performance statistics showing the volume and type of complaints and key performance details, for example on the time taken and the stage at which complaints were resolved.

#### **CP4.4 Learning from complaints**

The Complaints Investigator will always satisfy themselves that all parties involved understand the findings or recommendations of the investigation and any decisions made. Senior management will ensure that the University has procedures in place to act on issues that are identified. These procedures facilitate:

- using complaints data to identify the root cause of complaints
- taking action to reduce the chance of this happening again
- recording the details of corrective action in the complaints file
- systematically reviewing complaints performance reports to improve performance.

The analysis of management reports detailing complaints performance will help to ensure that any trends or wider issues which may not be obvious from individual complaints are quickly identified and addressed. Where the Institution identifies the need for service improvement:

- a member of the Senior Leadership Team will be designated the 'owner' of the issue, with responsibility for ensuring that any identified action is taken
- a target date will be set for the action to be implemented, and followed up on to ensure delivery within this timescale
- where appropriate, performance in the service area will be monitored to ensure that the issue has been resolved.

#### **CP4.5 Maintaining confidentiality**

Confidentiality is an important factor in conducting complaints investigations. The University will always have regard to any legislative requirements; for example, data protection legislation and also internal policies on confidentiality and the use of complainant information. Complaints will be handled with an appropriate level of confidentiality and information released only to those who need it for the purposes of investigating or responding to the complaint. No third party will be told any more about the investigation than is strictly necessary in order to obtain the information required from them.

The University expects that all parties will respect the confidentiality of the process. Any individual about whom a complaint is made will have the right to be informed of the fact and the nature of the complaint by the University Appeals, Complaints & Conduct Manager (ACCM).

When gathering evidence as part of an investigation, due regard will be given to information that may be confidential, sensitive, restricted or covered by data protection legislation. Subject to those considerations and unless expressly requested or otherwise agreed, any documentation submitted by the complainant or their appointed representative in relation to a complaint will form part of the complaint file and be shared appropriately with relevant parties.

Sensitive data, such as medical evidence, will not be disclosed without the explicit written consent of the person to whom the data relates.

Where a complaint has been raised against a student or member of staff and has been upheld, the complainant will be advised of this. However, it would not be appropriate to share specific details affecting specific students or staff members, particularly where disciplinary action is taken.

#### **CP4.6 Managing unacceptable behaviour**

It is recognised that people may act out of character in times of trouble or distress. The circumstances leading to a complaint may result in the complainant acting in an unacceptable way. Complainants who display difficult behaviour may still have a legitimate grievance, and the University will therefore treat all complaints seriously and assess them properly.

However, the actions of Complainants who are angry, demanding or persistent may result in unreasonable demands on time and resources or unacceptable behaviour towards the University's staff. The University's "[Unreasonable Complainant Behaviour Policy](#)" (appendix 3) details how the University will manage such behaviour. Where the complaint has been made by a matriculated student or member of University staff, and is considered unreasonable behaviour in terms of the Policy referred to above, the University will reserve the right to invoke Student or Staff Disciplinary Regulations where applicable.

#### **CP5 SUPPORTING THE COMPLAINANT**

Anyone who receives, requests or is directly affected by the services the University provides has the right to access the University's CHP. Complainants who do not have English as a first language may need help with interpretation and translation services. Other complainants may have specific needs which the University will seek to address to ensure easy access to the CHP by making reasonable adjustments to help the complainant. There are a number of support services available which can provide helpful support to those who wish to pursue a complaint with the University.

##### **CP5.1 Guidance and support available**

For general advice on any aspect of making a complaint, complainants are advised to contact the Appeals, Complaints and Conduct Manager (ACCM). Assistance is also available for students with additional support needs. This includes, upon request, support for students where English is not their first language

Guidance and support can be provided via email, telephone or by making an appointment with the ACCM. The ACCM can be contacted via email at [complaints@napier.ac.uk](mailto:complaints@napier.ac.uk) or telephone on 0131-455-2396.

Students will also be encouraged to seek advice and support from staff within the Edinburgh Napier Students' Association (ENSA) through their ENSA Advice service. Any student who makes a complaint or against whom a complaint is made is entitled to be accompanied by a member of the University community\* to any meetings/interviews in connection with the investigation of the complaint. Students may seek representation from the

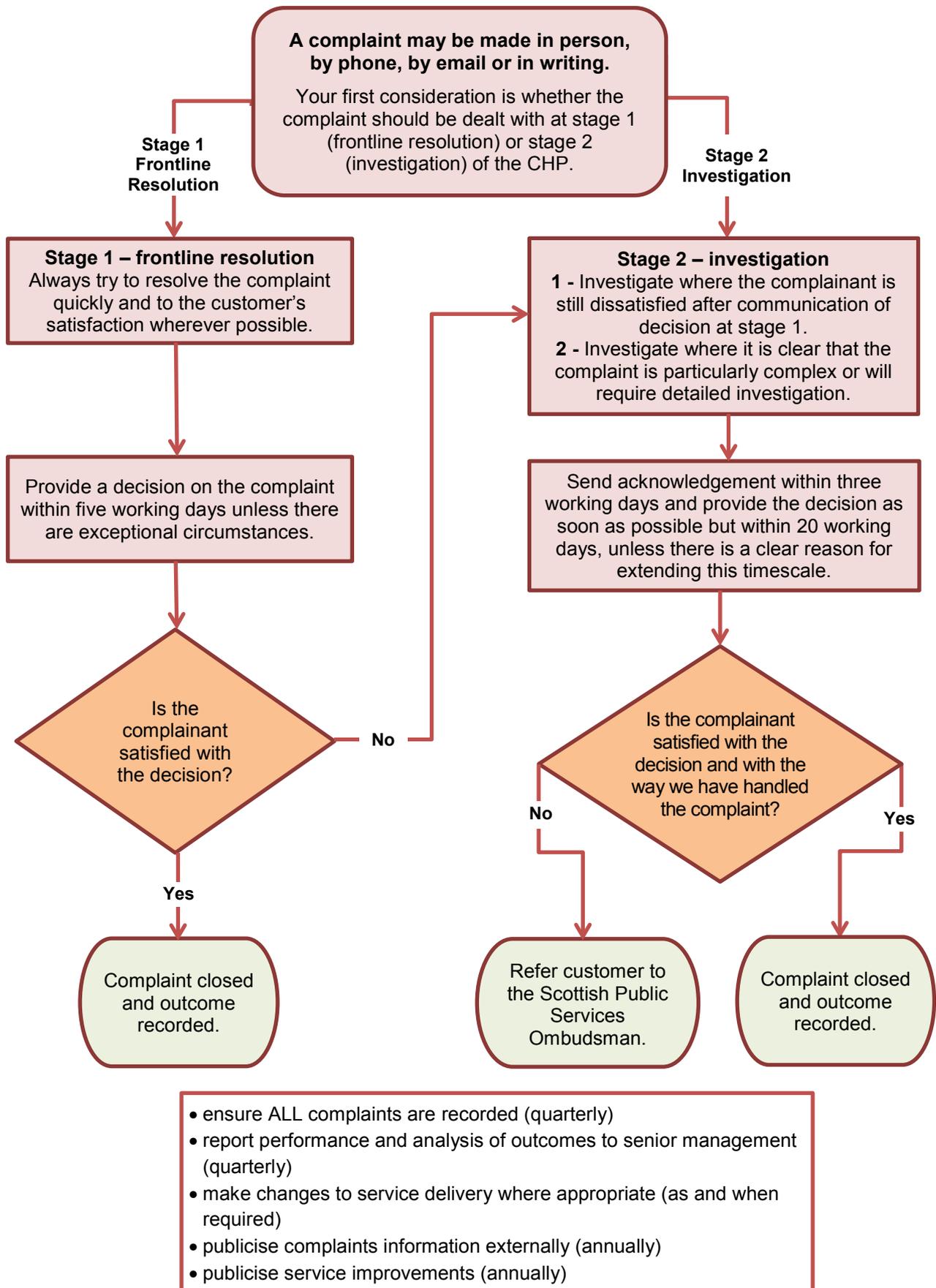
Edinburgh Napier Students' Association (ENSA) through ENSA Advice\*\*, or may choose to be accompanied by a member of the University community\*.

*\*For the purposes of this procedure, the University community is defined as being a fellow, current, Edinburgh Napier University student, a member of University staff or an ENSA representative.*

*\*\*ENSA Advice can be contacted on 0131-229-8791 or by emailing [ensa.advice@napier.ac.uk](mailto:ensa.advice@napier.ac.uk).*

All stages of the University's Complaint Handling Procedure are internal proceedings and are sub-judicial. Any person representing or accompanying the complainant or the person against whom a complaint has been made is expected to observe this tenet.

## The Complaints Handling Procedure





**INFORMAL RESOLUTION:** Please give details of the steps you have taken so far to informally resolve your complaint and include the details of individuals contacted and the dates of any meeting(s)

<b>WHO ELSE HAVE YOU TALKED TO ABOUT YOUR COMPLAINT?</b>		
<b>Name</b>	<b>Contact Details (Telephone and email)</b>	<b>Details of their involvement</b>

**RECOURSE AND REDRESS:** Please give details of what, in your view, would be a suitable and satisfactory outcome for you as a result of submitting this complaint. *(Please note that completing this section does not guarantee that any suggestions or remedies sought made will be agreed and/or met by University):*

By lodging my complaint I understand that:

- information may be gathered by members of staff in the University for the purposes of investigating and evaluating my complaint
- my name and other relevant information about my complaint may be disclosed to others in the University where it is necessary to do so
- the outcome of formal complaints will be recorded and anonymised for the purposes of monitoring and analysing complaints and for statistical reporting to the Academic Board for quality assurance purposes.

Where I have disclosed information above about a protected characteristic for the purposes of the Equality Act 2010 e.g. a disability, my ethnicity or gender, I hereby consent to this information being passed in confidence to other members of staff who require to be advised of it whilst my complaint is being investigated and dealt with.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Please send completed forms and any accompanying documentation to: **Appeals, Complaints and Conduct Manager, Sighthill Campus, Edinburgh EH11 4BN; telephone: 0131 455 2396**

## **Appendix 3**

### **UNREASONABLE COMPLAINANT BEHAVIOUR POLICY**

#### **Introduction**

The University believes that complainants have a right to be heard, understood and respected. Occasionally, the behaviour of individuals using our Complaints Procedure makes it very difficult for us to deal with their complaint. In a very small number of cases, the behaviour becomes unacceptable because it involves abuse of our staff or our processes. When this happens we have to take action to protect our staff. We consider the impact of the behaviour on our ability to do our work and provide a service to others. This policy explains how we will approach these situations.

#### **Unreasonable behaviour**

People may act out of character in times of trouble or distress. There may have been upsetting or distressing circumstances leading up to a complaint coming to the University. We do not view behaviour as unreasonable just because a complainant is forceful or determined. However, we do consider behaviour that results in unreasonable demands on the University or unreasonable behaviour towards staff to be unacceptable.

#### **Aggressive or abusive behaviour**

We understand that complainants may be angry about the issues they have raised in their complaint. If that anger escalates into aggression towards the University's staff, we consider that unacceptable. Any violence or abuse towards staff will not be accepted.

Violence is not restricted to acts of aggression that may result in physical harm. It also includes behaviour or language, whether verbal or written, that may cause staff to feel afraid, threatened or abused, and may include threats, personal verbal abuse, derogatory remarks or rudeness. We also consider inflammatory statements and unsubstantiated allegations to be abusive behaviour.

#### **Unreasonable demands**

A demand becomes unreasonable when it starts to, or when complying with the demand would, impact substantially on the work of staff investigating a complaint. Examples of behaviour under this heading include:

- repeatedly demanding responses within an unreasonable timescale
- insisting on seeing or speaking to a particular member of staff when that is not possible or necessary
- repeatedly changing the substance of a complaint or raising unrelated concerns

An example of such impact would be that the demand takes up an excessive amount of staff time and, in so doing, disadvantages others.

## **Unreasonable levels of contact**

Sometimes the volume and duration of contact made to staff investigating a complaint by an individual causes problems. This can occur over a short period: for example, a number of calls in one day or one hour. It may occur over the life-span of a complaint when a complainant repeatedly makes long telephone calls to the University or inundates the University with copies of information that have been sent already or that are irrelevant to the complaint.

We consider that the level of contact has become unreasonable when the amount of time spent talking to a complainant on the telephone, or responding to, reviewing and filing emails or written correspondence impacts on our ability to deal with that complaint, or with other people's requests for support.

## **Unreasonable use of the complaints process**

Individuals with complaints about the University have the right to pursue their concerns through a range of means. They also have the right to complain more than once about the University if subsequent incidents occur.

However, this contact becomes unreasonable when the effect of the repeated complaints is to harass, or to prevent the University from pursuing a legitimate aim or implementing a legitimate decision. We consider access to the University's complaints system to be important and it would only be in exceptional circumstances that we would consider such repeated use as unreasonable – but we reserve the right to do so in those exceptional cases.

## **Managing unreasonable complainant behaviour**

The threat or use of physical violence, verbal abuse or harassment towards University staff is likely to result in a termination of all direct contact with the complainant. Incidents may be reported to the police. This will always be the case if physical violence is used or threatened. We will not accept any correspondence that is abusive to staff or contains allegations that lack substantive evidence. We will tell the complainant that we consider their language offensive, unnecessary and unhelpful and ask them to stop using such language. We will state that we will not respond to their correspondence if the action or behaviour continues.

University staff will end telephone calls if they consider the caller aggressive, abusive or offensive. University staff have the right to make this decision, to tell the caller that their behaviour is unacceptable and end the call if the behaviour persists.

In extreme situations, we will tell the complainant in writing that their name is on a 'no personal contact' list. This means that we will limit contact with them to either written communication or through a third party.

Where a complainant repeatedly phones, visits, raises repeated issues, or sends large numbers of documents where their relevance is not clear, we may decide to:

- limit contact to telephone calls from the complainant at set times on set days
- restrict contact to a nominated member of staff who will deal with future calls or correspondence from the complainant

- see the complainant by appointment only
- restrict contact from the complainant to writing only
- return any documents to the complainant or, in extreme cases, advise the complainant that further irrelevant documents will be destroyed.
- take any other action that we consider appropriate.

Where we consider continued correspondence on a wide range of issues to be excessive, we may tell the complainant that only a certain number of issues will be considered in a given period and we may ask them to limit or focus their requests accordingly. In exceptional cases, we reserve the right to refuse to consider a complaint or future complaints from an individual. We will take into account the impact on the individual and also whether there would be a broader public interest in considering the complaint further.

We will always tell the complainant what action we are taking and why.

### **The process**

Any member of staff who directly experiences aggressive or abusive behaviour from a complainant has the authority to deal immediately with that behaviour in a manner they consider appropriate to the situation and in line with this policy. With the exception of such immediate decisions taken at the time of an incident, decisions to restrict contact with the University are only taken after careful consideration of the situation and evidence by the relevant manager. Wherever possible, we will give a complainant the opportunity to change their behaviour or action before a decision is taken.

### **Informing the complainant**

When a staff member makes an immediate decision in response to aggressive or abusive behaviour, the complainant is advised at the time of the incident. When a decision has been made by the relevant manager, a complainant will be told in writing why a decision has been made to restrict future contact, the restricted contact arrangements and, if relevant, the length of time that these restrictions will be in place. This ensures that the complainant has a record of the decision.

### **Appeals**

It is important that a decision can be reconsidered. A complainant can appeal a decision to restrict contact. If they do this, we will only consider arguments that relate to the restriction and not to either the complaint made to us or to our decision to close a complaint. An appeal could include, for example, a complainant saying that: their actions were wrongly identified as unreasonable; the restrictions were disproportionate; or that this will adversely impact on the individual because of personal circumstances.

The University Secretary will consider the appeal. They have discretion to quash or vary the restriction as they think best. They will make their decision based on the evidence available to them. They must advise the complainant in writing that either the restricted contact arrangements still apply or a different course of action has been agreed.

## **Recording and reviewing decisions**

We record all incidents of unacceptable actions by complainants. Where it is decided to restrict complainant contact, an entry noting this is made in the relevant file. A decision to restrict complainant contact as described above may be reconsidered if the complainant demonstrates a more acceptable approach. The relevant manager will review the status of all complainants with restricted contact arrangements on a regular basis.