University Complaints Handling ("CHP") Procedure: adaptation of the Scottish Higher Education CHP

Part 4 of 4: Governance

Document type	Procedure
Scope (applies to)	Students, members of the public
Applicibility date	01/04/2021
Review/Expiry date	NA
Approved date	25/02/2021
Approved	University Information Compliance Group
Document owner	Head of Information Assurance and Governance
School/unit	Office of the Principal
Document status	Published
Information classification	Public
Equality impact assessment	None
Key terms	Scottish Public Services Ombudsman
Purpose	Model framework for the management of complaints

Contents

Roles and responsibilities

1. All staff will be aware of:

    -   the Complaints Handling Procedure (CHP)

    -   how to handle and record complaints at the frontline response stage

    -   who they can refer a complaint to, in case they are not able to handle the matter

    -   the need to try and resolve complaints early and as close to the point of service delivery as possible; and

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

2. Training on this procedure will be part of the induction process for all new staff. Refresher training will be provided for current staff on a regular basis.

3. Senior management will ensure that:

    -   The University's final position on a complaint investigation is signed off by an appropriate manager or officer 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 (including complaints about contracted services)

    -   it has an active role in, and understanding of, the CHP (although not necessarily involved in the decision-making process of complaint 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.

4. **The Principal***: The Principal provides leadership and direction to the University. This includes ensuring that there is an effective complaints handling procedure with a robust investigation process which demonstrates that organisational learning is in place. The Principal may delegate responsibility for the procedure, but will receive assurance of complaints performance by way of regular reporting through appropriate internal channels. The Principal will also ensure that complaints are used to identify service improvements for implementation in the wider organisation as appropriate.*

5. *The Vice-Principal (Governance) has delegated responsibility from the Principal to oversee the effective operation of the University's Complaints Handling procedures and processes. This includes:*

    -   *ensuring performance monitoring for complaints is a feature of the University's operation; and*

    -   *setting clear objectives in relation to this complaints procedure and putting appropriate monitoring systems in place to provide the University with an overview of its operation.*

6. ***The Principal's Office****: Members of the PO can be responsible for issuing outcome letters letters to complainants, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint.*

7. ***Investigating Officer****: is responsible for the conduct of their investigation, which includes the production and submission of an investigations report, including details of any procedural changes in service delivery and identifying wider opportunities for learning across the Institution.*

8. ***The Head of Information Assurance and Governance****: is responsible for the day-to-day operation of the University CHP, which includes providing advice and direction on its operation, both to complainants and staff involved in the management of complaints. They will receive stage 2 complaints, and work with the complainant to agree the 'heads of complaint'. They will work with the Director and/or Depute Director of Human Resource Services to determine what procedures shall apply (HR and/or the CHP) where a complaint about staff behaviour is made, or make recommendations to the Vice-Principal (Governance). They will also provide assistance to Investigating Officers, and support to the Vice-Principal (Governance) when determining the University's final position on issues of complaint, and will draft submissions on the University's operation of the CHP, in response to SPSO requests/investigations.*

9. ***The Director of CAPOD:*** *is responsible for ensuring all new staff receive training on the CHP as part of the induction process, and that refresher training is provided for current staff on a regular basis. Training will normally be delivered by the Head of Information Assurance and Governance.*

10. ***The Institution's SPSO liaison officer****: Our SPSO liaison officer's role may include providing complaints information in an orderly, structured way within requested timescales, providing comments on factual accuracy on our behalf in response to SPSO reports, and confirming and verifying that recommendations have been implemented*.

Recording, reporting, learning from and publicising complaints

11. Complaints provide valuable feedback. One of the aims of the CHP is to identify opportunities to improve services across the University. By recording and analysing complaints data, we can identify and address the causes of complaints and, where appropriate, identify training opportunities and introduce service improvements.

12. We also have arrangements in place to ensure complaints about contractors are recorded, reported on and publicised in line with this CHP.

Recording complaints

13. It is important to record suitable data to enable us to fully investigate and respond to the complaint, as well as using our complaint information to track themes and trends. As a minimum, we should record:

- the complainant's name and contact details

- the date the complaint was received

- the nature of the complaint

- the service the complaint refers to

- staff member responsible for handling the complaint

- action taken and outcome at frontline response stage

- date the complaint was closed at the frontline response 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);

- the underlying cause of the complaint and any remedial action taken; and

- *the outcome of the SPSO's investigation (where applicable).*

14. If the complainant does not want to provide any of this information, we will reassure them that it will be managed appropriately, and record what we can.

15. *Individual complaint files will be stored in line with our with the University Records Retention Schedule: a complaint file is retained for 6 years, following the final action on a complaint, and then destroyed*.

Learning from complaints

16. We must have clear systems in place to act on issues identified in complaints. As a minimum, we must:

- seek to identify the root cause of complaints

- take action to reduce the risk of recurrence; and

- systematically review complaints performance reports to improve service delivery.

17. Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data.

18. Where we have identified the need for service improvement in response to an individual complaint, we will take appropriate action, which can include:

    - *on the issuance of an outcome letter, which identifies scope to change how a service is delivered, the Vice-Principal (Governance) or the Vice-Principal Proctor (Education) will authorise amendment(s), as appropriate; or take to the Principal's Office options for change;*

    - *learning points will be shared with staff;*

    - *an 'owner' of the change, with responsibility for ensuring the action is taken will be identified, which may be the Vice-Principal (Governance) or the Vice-Principal Proctor (Education);*

    - *a target date within which change is to be implanted will be identified;*

    - *the designated individual must follow up to ensure that the action is taken within the agreed timescale;*

    - *where appropriate, performance in the service area may be monitored to understand whether changes implemented have been effective or otherwise; and*

    - *the Head of Information Assurance and Governance will monitor where the above steps have been actioned, and provide commentary on their completion, as part of the annual review of the operation of the CHP, for the University Audit and Risk Committee.*

19. SPSO has guidance on **Learning from complaints**.

20. Senior management will review the information reported on complaints regularly to ensure that any trends or wider issues which may not be obvious from individual complaints are quickly identified and addressed. Where we identify the need for service improvement, we will take appropriate action (as set out above). Where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved, specific actions include:

    - *Formal review of the operation of the CHP, which includes trend analysis is year, and across multiple years is undertaken as part of the reporting process to the University Information Compliance Group, and the Audit and Risk Committee, with learning from academic complaints led by the Proctor's Office; the Vice-Principal (Governance) can initiate review, in response to the emergence of a suspected or actual trend, at any time; and*

    - *From 2021, University will implement business intelligence dashboards for complaints managed under these procedures.*

Reporting of complaints

21. We have a process for the internal reporting of complaints information, including analysis of complaints trends. Regularly reporting the analysis of complaints information helps to inform management of where services need to improve.

22. We will report at least **quarterly** to senior management (via the University Information Compliance Group) and at least annually to the governing body (via the University Audit and Risk Committee) on:

    - performance statistics, in line with the complaints performance indicators published by SPSO; and

- analysis of the trends and outcomes of complaints (this should include highlighting where there are areas where few or no complaints are received, which may indicate either good practice or that there are barriers to complaining in that area).

Publicising complaints information

23. Schools and Services inform students and staff on a **quarterly** basis of significant complaints outcomes and actions taken to improve services, from stage 1 of the CHP.

24. This demonstrates the improvements resulting from complaints and shows that complaints can help to improve our services. It also helps ensure transparency in our complaints handling service and will help to show that we value complaints.

25. We will publish an **annual** complaints performance report on our website in line with SPSO requirements, and provide this to the SPSO on request. This summarises and builds on the quarterly reports we have produced about our services. It includes:

    - performance statistics, in line with the complaints performance indicators published by the SPSO; and

    - complaint trends and the actions that have been or will be taken to improve services as a result.

26. These reports must be easily accessible to members of the public and available in alternative formats as requested.