

**The Scottish Higher Education Model Complaints Handling Procedure**

**Part 4:**

**Governance**

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# 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.

1. 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.
2. Senior management will ensure that:

* [*the institution’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 institution]* 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.

[*The roles and responsibilities in each Institution will vary depending on size, organisational structure, portfolio responsibilities and a host of other business considerations. The following paragraphs provide general examples of the roles and responsibilities that an Institution may consider appropriate in respect of complaints handling. Institutions are, however, free to manage the CHP in the most efficient and effective manner for their Institution.* ***The following paragraphs explaining roles and responsibilities should be amended to suit the Institution. However, there must remain a clear description of the roles and responsibilities in relation to complaints handling for each level of the institution.]***

1. ***[Principal****: The principal provides leadership and direction in ways that guide and enable us to perform effectively across all services. This includes ensuring that there is an effective Complaints Handling Procedure, with a robust investigation process that demonstrates how we learn from the complaints we receive. The principal may take a personal interest in all or some complaints, or may delegate responsibility for the CHP to senior staff. Regular management reports assure the principal of the quality of complaints performance.*
2. *The principal is also responsible for ensuring that there are governance and accountability arrangements in place in relation to complaints about contractors. This includes:*

* *ensuring performance monitoring for complaints is a feature of the service/management agreements between [the institution] and contractors*
* *setting clear objectives in relation to this complaints procedure and putting appropriate monitoring systems in place to provide [the institution] with an overview of how the contractor is meeting its objectives*

1. ***Heads of school/college/service****: May be involved in the operational investigation and management of complaints handling. As senior officers they may be responsible for preparing and signing decision letters to complainants, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint.*
2. ***Complaints investigator****: The complaints investigator is responsible and accountable for the management of the investigation. They may work in a particular school/college/service or as part of a centralised team, and will be involved in the investigation and in coordinating all aspects of the response to the complainant. This may include preparing a comprehensive written report, including details of any procedural changes in service delivery and identifying wider opportunities for learning across the Institution.*
3. ***The human resources/training officer:*** *The HR or training officer 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.*
4. ***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

1. Complaints provide valuable feedback. One of the aims of the CHP is to identify opportunities to improve services across *[the institution]*. 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.
2. We also have arrangements in place to ensure complaints about contractors are recorded, reported on and publicised in line with this CHP.

## Recording complaints

1. 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); and
* the underlying cause of the complaint and any remedial action taken.
* *[institutions may also wish to record: the outcome of the SPSO’s investigation (where applicable). It is good practice to record the full journey of a complaint, as this allows Institutions to use the information to identify good practice or areas for improvement. For example, where there are a high number of complaints ‘not upheld’ by the Institution but then ‘upheld’ by the SPSO, this could suggest that there are opportunities to improve complaints handling at a local level.]*

1. 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.
2. Individual complaint files will be stored in line with our document retention policy. *[Institutions may wish to add detail on local policies. In deciding how long to keep complaint files, consideration should be given to the timescales involved in an SPSO investigation (in the event of SPSO review, we need to be able to produce records of how we investigated the complaint).]*

[*The institution may provide further guidance or examples in relation to how to record complaints in line with their system. This can be inserted here or be included in an annex to this document.]*

## Learning from complaints

1. 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.

1. Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data.
2. Where we have identified the need for service improvement in response to an individual complaint, we will take appropriate action. *[Institutions should include details on their process for learning from complaints, which should meet the following minimum standard:*

* *the action needed to improve services must be authorised by an appropriate manager*
* *an officer (or team) should be designated the 'owner' of the issue, with responsibility for ensuring the action is taken*
* *a target date must be set for the action to be taken*
* *the designated individual must follow up to ensure that the action is taken within the agreed timescale*
* *where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved; and*
* *any learning points should be shared with relevant staff.]*

1. SPSO has guidance on **Learning from complaints**.
2. 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.

[*The Institution may provide further guidance or examples in relation to how complaints information will be used to learn from complaints and/or how learning from complaints will be shared within the Institution. This can be inserted here or included in an annex to this document*.]

## Reporting of complaints

1. 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.
2. We will report at least **quarterly** to senior management and at least annually to the governing body on:

* performance statistics, in line with the complaints performance indicators published by SPSO
* 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).

*[The institution may provide further guidance or examples in relation to how complaints information will be reported internally. This can be inserted here or can be included in an annex to this document.]*

## Publicising complaints information

1. We publish on a **quarterly** basis information on complaints outcomes and actions taken to improve services. *[Institutions may add more detail on what will be published. Please note that this does not require publication of complaints performance data or trends analysis on a quarterly basis, although some may choose to do so. The focus is on improving positive communication on the value of complaining. This could take the form of case studies, examples of how complaints have helped improve services, or ‘you said, we did’ leaflets. Publication may be through newsletters, websites or other forums used to communicate with students and other members of the public.]*
2. 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.
3. 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.

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