

**The Local Authority Model Complaints Handling Procedure**

**Part 1:**

**Introduction and overview**

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| *Version* | *Description* | *Date* |
| 1 | Local Authority MCHP published on SPSO website | March 2012 |
| 1 | Social Work MCHP published on SPSO website | December 2016 |
| 2 | Combined and revised version published on SPSO website | January 2020 |

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# Foreword

*[This is a suggested foreword for endorsement by your organisation's chief executive. You may, however, write an alternative foreword presenting the Complaint Handling Procedure's key aims, benefits and requirements.]*

*[Our Complaints Handling Procedure reflects [the organisation's] commitment to valuing complaints. It seeks to resolve customer dissatisfaction as close as possible to the point of service delivery and to conduct thorough, impartial and fair investigations of customer complaints so that, where appropriate, we can make evidence-based decisions on the facts of the case.*

*The local authority procedure was first developed by local government complaints handling experts, working closely with the Scottish Public Services Ombudsman (SPSO). A separate procedure for social work complaints was developed by social work experts and third sector organisations working with SPSO.*

*The Model Complaints Handling Procedures (MCHPs) were revised in 2019 by the SPSO in consultation with all sectors. As part of this, the local authority and social work procedures were combined into a single procedure. This new edition includes a core text, which is consistent across all public services in Scotland, with some additional text and examples specific to local authorities and health and social care partnerships (HSCPs) handling social work complaints. The procedural elements tie in very closely with those of the National Health Service Complaints Handling Procedure, so where complaints cut across services, they can still be handled in much the same way as other complaints.*

*As far as is possible we have produced a standard approach to handling complaints across Scotland’s public services, which complies with the* [***SPSO's guidance on a MCHP***](https://www.spso.org.uk/sites/spso/files/csa/2018%20Guidance%20on%20a%20Model%20Complaints%20Handling%20Procedure.pdf)*. This procedure aims to help us 'get it right first time'. We want quicker, simpler and more streamlined complaints handling with local, early responses by capable, well-trained staff.*

*All staff across [the organisation] must cover this procedure as part of their induction and must be given refresher training as required, to ensure they are confident in identifying complaints, empowered to resolve simple complaints on the spot, and familiar with how to apply this procedure (including recording complaints).*

*Complaints give us valuable information we can use to improve service provision and customer satisfaction. Our Complaints Handling Procedure will enable us to address a customer's dissatisfaction and may help us prevent the same problem from happening again. For our staff, complaints provide a first-hand account of the customers’ views and experience, and can highlight problems we may otherwise miss. Handled well, complaints can give our customers a form of redress when things go wrong, and can also help us continuously improve our services.*

*Handling complaints early creates better customer relations. Handling complaints close to the point of service delivery means we can deal with them locally and quickly, so they are less likely to escalate to the next stage of the procedure. Complaints that we do not handle swiftly can greatly add to our workload and are more costly to administer.*

*The Complaints Handling Procedure will help us provide better services, improve relationships with our customers and enhance public perception of [the organisation]. It will help us keep the user at the heart of the process, while enabling us to better understand how to improve our services by learning from complaints.]*

# Structure of the Complaints Handling Procedure

1. This Complaints Handling Procedure (CHP) explains to staff how to handle complaints. The CHP consists of:

* Overview and structure (part 1) – this document
* When to use the procedure ([**part 2**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx)) – guidance on identifying what is and what is not a complaint, handling complex or unusual complaint circumstances, the interaction of complaints and other processes, and what to do if the CHP does not apply
* The complaints handling process ([**part 3**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart3.docx)) – guidance on handling a complaint through stages 1 and 2, and dealing with post-closure contact
* Governance of the procedure ([**part 4**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart4.docx)) – staff roles and responsibilities and guidance on recording, reporting, publicising and learning from complaints
* The customer-facing CHP ([**part 5**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart5.docx)) – information for customers on how we handle complaints

1. When using the CHP, please also refer to the ‘SPSO Statement of Complaints Handling Principles' and good practice guidance on complaints handling from the SPSO. [**www.spso.org.uk**](http://www.spso.org.uk)
2. ***Delete this section after amending and adopting the MCHP:*** *This CHP is designed to be an internal document for us to adopt. The language used reflects its status as an internal document. So 'we' refers to the organisation, not the SPSO. It contains references and links to more detailed guidance from the SPSO where relevant.*

* *Any text that is in italics may be amended or replaced with the organisation's own text as appropriate.*
* *Turquoise text is used to give instructions or clarification (this should be deleted after amending and adopting the MCHP).*

# Overview of the CHP

1. Anyone can make a complaint, either verbally or in writing, including face-to-face, by phone, letter or email.
2. We will try to resolve complaints to the satisfaction of the customer wherever this is possible. Where this isn’t possible, we will give the customer a clear response to each of their points of complaint. We will always try to respond as quickly as we can (and on the spot where possible).
3. Our complaints procedure has two stages. We expect the majority of complaints will be handled at stage 1. If the customer remains dissatisfied after stage 1, they can request that we look at it again, at stage 2. If the complaint is complex enough to require an investigation, we will put the complaint into stage 2 straight away and skip stage 1.

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| **Stage 1: Frontline response**  For issues that are straightforward and simple, requiring little or no investigation  ‘On-the-spot’ apology, explanation, or other action to put the matter right  Complaint resolved or a response provided in **five working days** or less (unless there are exceptional circumstances)  Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline response  Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing)  We will tell the customer how to escalate their complaint to stage 2 | **Stage 2: Investigation**  Where the customer is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, serious or 'high-risk'  Complaint acknowledged within **three working days**  We will contact the customer to clarify the points of complaint and outcome sought (where these are already clear, we will confirm them in the acknowledgement)  Complaint resolved or a definitive response provided within **20 working days** following a thorough investigation of the points raised | **Independent external review (SPSO or other)**  Where the customer is not satisfied with the stage 2 response from the service provider  The SPSO will assess whether there is evidence of service failure or maladministration not identified by the service provider  In relation to social work decisions the SPSO can also look at professional decisions  Some complaints may also have an alternative route for independent external review |

1. For detailed guidance on the process, see [**Part 3: The complaints handling process**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart3.docx).

# Expected behaviours

1. *[Organisations may wish to set out the behaviours they expect from staff and customers (or link to these, if the organisation has set these out elsewhere). The text below is provided as an example:*
2. *We expect all staff to behave in a professional manner and treat customers with courtesy, respect and dignity. We also ask customers bringing a complaint to treat our staff with respect. We ask customers to engage actively with the complaint handling process by:*

* *telling us their key issues of concern and organising any supporting information they want to give us (we understand that some people will require support to do this)*
* *working with us to agree the key points of complaint when an investigation is required; and*
* *responding to reasonable requests for information.*

1. *We have a policy in place for when these standards are not met which is our Unacceptable Actions Policy or equivalent]*
2. We recognise that people may act out of character in times of trouble or distress. Sometimes a health condition or a disability can affect how a person expresses themselves. The circumstances leading to a complaint may also result in the customer acting in an unacceptable way.
3. Customers who have a history of challenging or inappropriate actions, or have difficulty expressing themselves, may still have a legitimate grievance, and we will treat all complaints seriously. However, we also recognise that the actions of some customers may result in unreasonable demands on time and resources or unacceptable behaviour towards our staff. We will, therefore, apply our policies and procedures to protect staff from unacceptable actions such as unreasonable persistence, threats or offensive behaviour from customers. Where we decide to restrict access to a customer under the terms of our policy, we have a procedure in place to communicate that decision, notify the customer of their right of appeal, and review any decision to restrict contact with us. *[Link to relevant policy/procedure]*
4. If we decide to restrict a customer’s contact, we will be careful to follow the process set out in our policy and to minimise any restrictions on the customer’s access to the complaints process. We will normally continue investigating a complaint even where contact restrictions are in place (for example, limiting communication to letter or to a named staff member). In some cases, it may be possible to continue investigating the complaint without contact from the customer. Our policy allows us in limited circumstances to restrict access to the complaint process entirely. This would be as a last resort, should be as limited as possible (for a limited time, or about a limited set of subjects) and requires manager approval. Where access to the complaint process is restricted, we must signpost the customer to the SPSO (see [**Part 3: Signposting to the SPSO**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart3.docx)).
5. The SPSO has [**guidance on promoting positive behaviour and managing unacceptable actions**](https://www.spso.org.ukhow-we-offer-support-and-guidance).

[*The organisation may provide further guidance or examples in relation to their policy. This can be inserted here or be included in an annex to this document*.]

# Maintaining confidentiality and data protection

1. Confidentiality is important in complaints handling. This includes maintaining the customer's confidentiality and confidentiality in relation to information about staff members, contractors or any third parties involved in the complaint.
2. This should not prevent us from being open and transparent, as far as possible, in how we handle complaints. This includes sharing as much information with the complainant (and, where appropriate, any affected staff members) as we can. When sharing information, we should be clear about why the information is being shared and our expectations on how the recipient will use the information.
3. We must always bear in mind legal requirements, for example data protection legislation, as well as internal policies on confidentiality and the use of customer information. *[Organisations may wish to include more detail on local arrangements, such as where staff should seek advice on data processing matters, and where to find relevant policies, guidance and legislation, or link to these. If organisations require more information,* the [**Information Commissioner’s Office**](https://ico.org.uk/) has *detailed guidance on data sharing and has issued a data sharing code of practice.]*
4. *It may be helpful for organisations to give examples of situations where a response to a complaint may be limited by* *confidentiality, such as:*

* *where a complaint has been raised against a staff member and has been upheld – we will advise the customer that their complaint is upheld, but would not share specific details affecting staff members, particularly where disciplinary action is taken.*
* *where someone has raised a concern about a child or an adult’s safety and is unhappy about how that has been dealt with – we would look into this to check whether the safety concern had been properly dealt with, but we would not share any details of our findings in relation to the safety concern.*