

# Minute

## Policy and Resources Committee

Tuesday, 24 November 2020, 10:30.

Microsoft Teams.



## Present

Councillors James W Stockan, W Leslie Manson, Stephen G Clackson, Alexander G Cowie, Norman R Craigie, Robin W Crichton, David Dawson, Barbara Foulkes, Steven B Heddle, J Harvey Johnston, Rachael A King, John T Richards, Stephen Sankey, John A R Scott, Gwenda M Shearer, Graham L Sinclair, Magnus O Thomson, Owen Tierney, Duncan A Tullock and Heather N Woodbridge.

## Clerk

- Hazel Flett, Senior Committees Officer.

## In Attendance

- John W Mundell, Interim Chief Executive.
- Gavin Barr, Executive Director of Development and Infrastructure.
- Gillian Morrison, Interim Chief Officer/Executive Director, Orkney Health and Care (for Items 1 to 16).
- James Wylie, Executive Director of Education, Leisure and Housing.
- Gareth Waterson, Head of Finance.
- Karen Greaves, Head of Executive Support.
- Gavin Mitchell, Head of Legal Services.
- Lynda Bradford, Interim Head of Health and Community Care (for Items 1 to 8).
- James Buck, Head of Marine Services and Transport and Harbour Master.
- Roddy Mackay, Head of Planning, Development and Regulatory Services (for Items 1 to 15).
- Pat Robinson, Chief Finance Officer, Orkney Health and Care (for Items 1 to 8).
- Darren Richardson, Head of Infrastructure and Strategic Projects (for Items 1 to 14).
- Jackie Thomson, Development and Regeneration Manager (for Items 3 to 15).
- Stuart Allison, Economic Development Manager (for Items 1 to 10).
- Lorna Richardson, Strategic Policy and Projects Manager (for Items 1 to 9).
- Maureen Spence, Democratic Services Manager (for Items 12 to 20).
- Anna Whelan, Strategy Manager (for Items 1 and 2).

## **Observing**

- Hayley Green, Head of IT and Facilities.
- Andrew Groundwater, Head of HR and Performance.
- David Sawkins, Depute Harbour Master (Strategy and Support) (for Items 12 to 14).
- Laura Cromarty, Transportation Manager (for Items 12 and 13).
- Claire Kemp, Business Gateway Manager (for Items 1 to 10).
- William Moore, Revenues and Benefits Manager (for Items 1 to 9).
- Alex Rodwell, Senior Project Officer, Change Programme (for Item 12).
- David Hartley, Communications Team Leader (for Items 10 to 20).
- Christie Hartley, Volume Tourism Development and Management Officer (for Items 1 to 9).
- Raema Lyon, Project Officer, Change Programme (for Item 12).
- Rebecca McAuliffe, Press Officer (for Items 1 to 15).

## **Apology**

- Councillor Andrew Drever.

## **Declarations of Interest**

- Councillor David Dawson – Item 16.
- Councillor Steven B Heddle – Item 8.
- Councillor W Leslie Manson – Item 8.
- Councillor Stephen Sankey – Item 10.
- Councillor Gwenda M Shearer – Items 10 and 15.
- Councillor Graham L Sinclair – Item 15.
- Councillor James W Stockan – Item 15.
- Councillor Duncan A Tullock – Item 8.
- Councillor Heather N Woodbridge – Item 10.

## **Chair**

- Councillor James W Stockan.

## **1. Disclosure of Exempt Information**

Councillor John A R Scott moved that the public should not be excluded from the meeting for consideration of Item 18, Empowering Committees. On receiving no seconder, his motion fell, and the Committee:

Noted the proposal that the public be excluded from the meeting for consideration of Items 12 to 18, as the business to be discussed involved the potential disclosure of exempt information of the classes described in the relevant paragraphs of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

## **2. Political Engagement Strategy**

After consideration of a report by the Chief Executive, copies of which had been circulated, and after hearing a report from the Strategy Manager, the Committee:

Noted:

**2.1.** That the Political Engagement Strategy, adopted in October 2018, had been reviewed and revised to take into account changes in national and international political circumstances impacting on the Council since that date.

The Committee resolved to **recommend to the Council:**

**2.2.** That the updated Political Engagement Strategy, attached as Appendix 1 to this Minute, be approved.

## **3. Complaints Handling Procedure**

After consideration of a report by the Chief Executive, together with an Equality Impact Assessment, copies of which had been circulated, and after hearing a report from the Head of Legal Services, the Committee:

Noted:

**3.1.** That the Council's Complaints Handling Procedure, approved in July 2012, was based on the Local Authority Model Complaints Handling Procedure published by the Scottish Public Services Ombudsman.

**3.2.** That, in 2018/19, the Scottish Public Services Ombudsman conducted a review of the Local Authority Model Complaints Handling Procedure to establish its effectiveness and usability.

**3.3.** That, following the review, the Scottish Public Services Ombudsman published a revised Local Authority Model Complaints Handling Procedure on 31 January 2020.

**3.4.** That the revised Local Authority Model Complaints Handling Procedure included a "Customer-facing Guide", which was a separate, but integral, part of the Local Authority Model Complaints Handling Procedure.

**3.5.** That the revised version of the Local Authority Model Complaints Procedure incorporated a number of updates to reflect feedback from stakeholders and to address issues identified in casework.

**3.6.** That Part 4 of the Local Authority Model Complaints Procedure had been amended to reflect the Council's existing governance arrangements and roles and responsibilities in relation to the handling of complaints.

**3.7.** That the Scottish Public Services Ombudsman required local authorities to adopt the revised Local Authority Model Complaints Handling Procedure, including any changes that they wished to make, by April 2021.

The Committee resolved to **recommend to the Council**:

**3.8.** That the revised Local Authority Complaints Handling Procedure, attached as Appendices 2 and 3 to this Minute, incorporating the amendments referred to in paragraph 3.6 above, be approved.

#### **4. Council Tax – Charging on Empty Properties**

After consideration of a report by the Head of Finance, together with an Equality Impact Assessment, copies of which had been circulated, the Committee:

Noted:

**4.1.** That, on 11 December 2018, when considering recommendations from the Policy and Resources Committee regarding Council Tax charged on empty properties and second homes, the Council resolved inter alia that, from 1 October 2019, an additional surcharge of 100% be applied to empty properties that had been unoccupied for a period exceeding 12 months.

**4.2.** That introduction of the surcharge could be delayed in certain circumstances where the property owner was making efforts to bring the property back in to use, as detailed in the leaflet attached as Annex 1 to the report by the Head of Finance.

**4.3.** That the Head of Finance had discretion to delay introduction of the surcharge for up to 12 months where exceptional circumstances existed.

**4.4.** That, since introduction of the surcharge on 1 October 2019, owners of a number of empty properties had experienced lengthy delays in having work completed due to restrictions put in place as a result of the COVID-19 pandemic.

The Committee resolved to **recommend to the Council**:

**4.5.** That, while restrictions relating to the COVID-19 pandemic remained ongoing, the discretion afforded to the Head of Finance to delay introduction of the 100% surcharge in Council Tax chargeable on empty properties be increased, from 12 months to up to 36 months, where the Head of Finance was satisfied that exceptional circumstances, related to the pandemic, existed.

#### **5. Third Party Funding Applications**

After consideration of a joint report by the Executive Director of Development and Infrastructure and the Head of Finance, copies of which had been circulated, and after hearing a report from the Head of Planning, Development and Regulatory Services, the Committee:

Noted:

**5.1.** That there were a number of grant funds to which only local authorities, or partnerships involving local authorities, could apply, such as the Rural Tourism Infrastructure Fund and the Regeneration Capital Grant Fund.

**5.2.** That, conversely, other funding streams only available to community organisations could potentially be accessed as match funding in applications to funding sources of the type referred to at paragraph 5.1 above.

The Committee resolved to **recommend to the Council:**

**5.3.** That the Executive Director of Development and Infrastructure and the Head of Finance should develop a draft framework that would allow the Council to submit applications to funding schemes available only to local authorities on behalf of community organisations.

**5.4.** That the Executive Director of Development and Infrastructure and the Head of Finance, should submit a joint report, to a meeting of the Committee no later than June 2021, presenting the draft framework referred to at paragraph 5.3 above.

## **6. Clinical and Care Governance Committee**

The Committee noted that this item had been withdrawn.

## **7. Review of Integration Scheme**

After consideration of a joint report by the Chief Executive and the Chief Officer/Executive Director, Orkney Health and Care, copies of which had been circulated, the Committee:

Noted:

**7.1.** That, on 24 March 2015, following a period of consultation, the Council approved the Integration Scheme for submission to the Scottish Government by 1 April 2015.

**7.2.** That Orkney's Integration Joint Board was approved by Scottish Ministers, in terms of the Public Bodies (Joint Working) (Scotland) Act 2014, on 6 February 2016.

**7.3.** That section 44 of The Public Bodies (Joint Working) (Scotland) Act 2014 required the local authority and the Health Board to carry out a review of the integration scheme before the expiry of a period of five years beginning with the day on which the scheme was approved by the Scottish Ministers, for the purpose of identifying whether any changes to the scheme were necessary or desirable.

**7.4.** That the statutory review of the Integration Scheme, referred to at paragraph 7.3 above, was therefore due no later than 5 February 2021.

**7.5.** The outcome of the review of the Integration Scheme, undertaken in line with Scottish Government guidance due to the impact of COVID-19, as noted in section 4 of the joint report by the Chief Executive and the Chief Officer/Executive Director, Orkney Health and Care, namely that there were currently no areas requiring immediate attention.

**7.6.** The proposed process for a further, more detailed, review of the Integration Scheme, as set out in section 5 of the joint report by the Chief Executive and the Chief Officer/Executive Director, Orkney Health and Care.

**7.7.** That, following the detailed review, should NHS Orkney and/or the Council seek to amend the current Integration Scheme, the Interim Chief Officer and the Chief Executives of the Council and NHS Orkney would work with the Joint Discussion Forum, comprising Chairs of relevant groups and senior officers from both organisations, to agree a common approach and consult formally with the public.

**7.8.** That, following consultation, the Council and NHS Orkney must thereafter decide whether any changes to the Integration Scheme were necessary or desirable.

The Committee resolved to **recommend to the Council:**

**7.9.** That a more detailed review of the Integration Scheme be commenced by March 2021.

## **8. Telecare Services – Proposed Introduction of Charges**

Councillors Steven B Heddle, W Leslie Manson and Duncan A Tullock declared non-financial interests in this item in that close family members were in receipt of Telecare services and were not present during discussion thereof.

After consideration of a report by the Chief Officer/Executive Director, Orkney Health and Care, together with an Equality Impact Assessment, copies of which had been circulated, and after hearing a report from the Interim Head of Health and Community Care, the Committee:

Noted:

**8.1.** That, on 14 November 2019, the Orkney Health and Care Committee recommended that consideration of introducing charging for Day Care and Telecare services be deferred, to enable the Chief Officer/Executive Director, Orkney Health and Care to submit a Strategic Charging Policy for social care services, in line with COSLA guidance and best practice.

**8.2.** That, due to the COVID-19 pandemic, day services had been closed and, although some of those services were reopening, that was on a much reduced capacity basis and therefore it was proposed that charging for those services should not be pursued at this time.

**8.3.** That, although a Strategic Charging Policy could be developed, the policy could not currently be implemented, as detailed information in relation to individual service users was not easily accessible.

**8.4.** That, once the issues regarding extracting detailed information in relation to individual service users had been addressed, a charging policy would be presented to Committee.

**8.5.** That, as charging for Telecare services was proposed at a flat rate per week, introducing such a charge would not impact any future charging policy.

Councillor James W Stockan, seconded by Councillor Barbara Foulkes moved that, with effect from 1 January 2021, a flat rate charge of £3.50 per week be introduced in respect of Telecare services provided by the Council.

Councillor David Dawson, seconded by Councillor Stephen G Clackson, moved an amendment that, taking account of the result of the consultation and recognising the risks to vulnerable service users, as highlighted in the Equality Impact Assessment, no charge should be introduced in respect of Telecare services provided by the Council at this time.

The result of a recorded vote was as follows:

For the Amendment:

Councillors Stephen G Clackson, Norman R Craigie, David Dawson, J Harvey Johnston, and Owen Tierney (5).

For the Motion:

Councillors Alexander G Cowie, Robin W Crichton, Barbara Foulkes, Rachael A King, John T Richards, Stephen Sankey, John A R Scott, Gwenda M Shearer, Graham L Sinclair, James W Stockan, Magnus O Thomson and Heather N Woodbridge (12).

The motion was carried.

Councillor Stephen Sankey, seconded by Councillor Rachael A King, moved a further amendment, notice of which had been given, that consideration of introducing a charge for Telecare services be deferred, to enable the Chief Officer/Executive Director, Orkney Health and Care to submit a Strategic Charging Policy for social care services, in line with COSLA guidance and best practice.

The result of a recorded vote was as follows:

For the Amendment:

Councillors Stephen G Clackson, David Dawson, J Harvey Johnston, Rachael A King, John T Richards, Stephen Sankey, Owen Tierney and Heather N Woodbridge (8).

For the Motion:

Councillors Alexander G Cowie, Norman R Craigie, Robin W Crichton, Barbara Foulkes, John A R Scott, Gwenda M Shearer, Graham L Sinclair, James W Stockan and Magnus O Thomson (9).

The motion was therefore carried.

The Committee resolved to **recommend to the Council:**

**8.6.** That, with effect from 1 January 2021, a flat rate charge of £3.50 per week be introduced in respect of Telecare services provided by the Council.

## **9. Burial Grounds**

After consideration of a report by the Executive Director of Development and Infrastructure, copies of which had been circulated, and after hearing a report from the Head of Infrastructure and Strategic Projects, the Committee:

Noted:

**9.1.** That, on 8 September 2020, when considering proposed amendments to the Burial Grounds Code of Practice and the associated resource requirements, the Development and Infrastructure Committee recommended:

- To support, in principle, Option 4 of the proposed resource options, namely further increased resource to enable full compliance with the recommendations arising from the internal audit report on memorial safety works within burial grounds and thereafter implementation of the revised Code of Practice.
- That the Executive Director of Development and Infrastructure should submit a report, to the Policy and Resources Committee, setting out the financial and other implications of Option 4.
- That, subject to the necessary funding being identified and made available to the Development and Infrastructure Service, the revised Code of Practice be adopted.

**9.2.** Details of the four options, together with the required resource, to enable implementation of the Burial Grounds Code of Practice, as set out in section 4 and Appendix 1 of the report by the Executive Director of Development and Infrastructure.

**9.3.** That the total cost of the preferred option, Option 4, supported by the Development and Infrastructure Committee, was estimated at £247,000 over a five-year period.

**9.4.** That, in 2018/19, a contribution of £250,000 was made to the Repairs and Renewals Fund to cover the estimated cost of gravestone repairs, arising as a result of the internal audit on memorial safety works.

**9.5.** That, during 2019/20, additional exceptional costs were incurred by the Development and Infrastructure Service in carrying out remedial works to headstones, funded by a contribution of £116,500 from the Repairs and Renewals Fund, resulting in an unallocated balance of £133,500 remaining available.

On the motion of Councillor W Leslie Manson, seconded by Councillor David Dawson, the Committee resolved to **recommend to the Council:**

**9.6.** That Option 4, being the provision of additional resource to ensure full implementation of the endorsed Burial Grounds Code of Practice, at a total cost of £250,000 over five years, be considered as a service pressure in the revenue budget setting process for 2021/22, to which a contribution of £133,500 from the Repairs and Renewal Fund was available.

## **10. Review of Council's COVID-19 Business Response Grants**

Councillor Stephen Sankey declared a financial interest in this item, in that his company could potentially benefit from proposals to assist local businesses, and was not present during discussion thereof.

Councillor Gwenda M Shearer declared a non-financial interest, in that a close family member could potentially benefit from proposals to assist local businesses, and was not present during discussion thereof.



Councillor Heather A Woodbridge declared a non-financial interest, in that a close family member could potentially benefit from proposals to assist local businesses, and was not present during discussion thereof.

After consideration of a report by the Executive Director of Development and Infrastructure, copies of which had been circulated, and after hearing a report from the Economic Development Manager, the Committee:

Noted:

**10.1.** That, on 16 April 2020, the Council established a Coronavirus Response Fund, with an opening balance of £5,000,000.

**10.2.** That the Council had established several financial support measures drawing from the Coronavirus Response Fund during the response phase to the coronavirus pandemic, including the following:

- Business Hardship Support Grant (BHSG), launched on 1 May 2020.
- COVID-19 Response Grant – Orkney Islands Council 10% Top-up grant, launched 19 August 2020.
- Protective Equipment Grants (PEG), launched 19 August 2020.
- COVID-19 Recovery Development Grant (CRDG), launched 19 August 2020.

**10.3.** That, as at 31 October 2020, the Economic Development service had processed:

- 73 successful applications for the BHSG, amounting to a total of £445,000, with 10% top-up supplement payments totalling £44,500.
- 11 successful applications for the PEG, amounting to a total of £5,284.
- 21 successful applications for CRDG, amounting to £131,728.

**10.4.** That, although a wide range of UK and Scottish Government support mechanisms had been, and continued to be, available to businesses, Orkney businesses continued to be impacted by COVID-19 and associated government restrictions and faced the threat of job losses and financial hardship.

**10.5.** That the Business Hardship Support Grant scheme had been reviewed and an amended Phase 2 of the scheme was now proposed.

**10.6.** That most businesses were now assumed to have purchased protective screens or other public safety equipment required to comply with guidance, so it was not anticipated there was a continued need for the COVID-19 Protective Equipment Grant, for which demand had been low.

**10.7.** That the CRDG scheme had been reviewed and awards totalling £131,728 had been committed against the approved financial ceiling of £300,000 within the Coronavirus Response Fund.

The Committee resolved to **recommend to the Council:**

**10.8.** That the Business Hardship Support Grant be closed to new applications on 8 December 2020.

**10.9.** That the Business Hardship Support Grant Phase 2 be launched on 9 December 2020.

**10.10.** That the Protective Equipment Grant scheme be closed at 17:00 on 18 December 2020.

## **11. Exclusion of Public**

On the motion of Councillor James W Stockan, seconded by Councillor W Leslie Manson, the Committee resolved that the public be excluded for the remainder of the meeting, as the business to be considered involved the disclosure of exempt information of the classes described in the relevant paragraphs of Part 1 of Schedule 7A of the Local Government (Scotland) Act 1973 as amended.

## **12. Grounds Maintenance**

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 6, 8 and 9 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Executive Director of Development and Infrastructure, copies of which had been circulated, the Committee:

Noted:

**12.1.** That, in 2019, following concerns regarding proposed savings as part of the grounds maintenance service, a short life Member/Officer Working Group was established to review the grounds maintenance portfolio of the Council and assess options for future service delivery.

**12.2.** Total spend by the Council on grounds maintenance and road maintenance verge cutting activities, as detailed in section 5.1 of the report by the Executive Director of Development and Infrastructure.

**12.3.** That an analysis of the Council's grounds maintenance activity had been undertaken.

The Committee resolved to **recommend to the Council:**

**12.4.** That the Executive Director of Development and Infrastructure should submit a report, to the meeting of the Committee to be held on 22 June 2021, detailing the outcome of the options appraisal for future contract delivery, together with final specification models for grounds maintenance services, based on consistent standards across all areas.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

### **13. Inter-Island Air Services – Public Service Obligation Contract**

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 6 and 9 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Executive Director of Development and Infrastructure, copies of which had been circulated, and after hearing a report from the Head of Marine Services and Transport and Harbour Master, the Committee:

Noted:

**13.1.** That the Inter-Island Air Services Public Service Obligation (PSO) Contract was due for renewal on 1 April 2021, with no provision to extend the current contract beyond that date.

The Committee resolved to **recommend to the Council:**

**13.2.** What action should be taken with regard to the Inter-Island Air Services Public Service Obligation Contract for the period 1 April 2021 to 31 March 2025.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

### **14. Proposed Remediation Works at Lyness**

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraph 12 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Executive Director of Development and Infrastructure, copies of which had been circulated, and after hearing a report from the Head of Marine Services and Transport and Harbour Master, the Committee:

Noted:

**14.1.** That, on 27 November 2018, the Policy and Resources Committee recommended that consideration of undertaking remediation works on the brownfield site at Lyness be deferred, to enable the Executive Director of Development and Infrastructure to advise of the response from the Ministry of Defence in relation to a financial contribution towards the cost of undertaking the remediation works, as a result of the site being a former Royal Navy/NATO fuel depot.

**14.2.** That the Chief Executive wrote to the Ministry of Defence on 20 December 2018.

**14.3.** That the Council received a reply from the Defence Infrastructure Organisation dated 29 May 2019.

**14.4.** That, in order to allow future development at Lyness, the area should be remediated, taking into account that the works would take at least 12 months from award of contract.

**14.5.** That, in order to mitigate the risk associated with any development proposals, the proposal to undertake remediation works at Lyness, as detailed in section 4 of the report by the Executive Director of Development and Infrastructure.

The Committee resolved to **recommend to the Council:**

**14.6.** That remediation works on the brownfield site at Lyness be undertaken.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

Councillor John T Richards left the meeting at this point.

## **15. Orkney Research and Innovation Campus**

Councillors Gwenda M Shearer, Graham L Sinclair and James W Stockan declared non-financial interests in this item, being Council-appointed Board members on the Orkney Research and Innovation Campus Limited Liability Partnership, but concluded that their interests did not preclude their involvement in the discussion.

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 4 and 6 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Executive Director of Development and Infrastructure, copies of which had been circulated, and after hearing a report from the Development and Regeneration Manager, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to the Orkney Research and Innovation Campus.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

Councillor John T Richards rejoined the meeting during discussion of this item.

## **16. Orkney Housing Association Limited**

Councillor David Dawson declared a non-financial interest in this item, being a Director of Orkney Housing Association Limited, and was not present during discussion thereof.

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraphs 4 and 6 of Part 1 of Schedule 7A of the Act.

After consideration of a joint report by the Head of Finance and the Executive Director of Education, Leisure and Housing, copies of which had been circulated, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to a request from Orkney Housing Association Limited.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

Councillor Steven B Heddle left the meeting at this point.

## **17. Highlands and Islands Airports Limited**

### **Proposed Changes to Air Traffic Management System**

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraph 12 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Chief Executive, copies of which had been circulated, and after hearing a report from the Head of Legal Services, the Committee:

Resolved to **recommend to the Council** what action should be taken with regard to Highlands and Islands Airports Limited's proposed changes to its Air Traffic Management System.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

Councillor Rachael A King left the meeting at this point.

## **18. Empowering Communities**

Under section 50A(4) of the Local Government (Scotland) Act 1973, the public had been excluded from the meeting for this item on the grounds that it involved the disclosure of exempt information as defined in paragraph 1 of Part 1 of Schedule 7A of the Act.

After consideration of a report by the Chief Executive, copies of which had been circulated, and after hearing a report from the Head of Executive Support, the Committee:

Noted:

**18.1.** That, on 18 June 2013, the Policy and Resources Committee recommended:

- That the Sustainable Communities initiative be rebranded as Empowering Communities Project to reflect the objectives of the project.
- That the Chief Executive should submit a report, to a meeting of the Committee during year three of the project, evaluating whether the pilot project objectives had been met, evidence of efficiencies and savings achieved over the three year pilot, recommendations for the future of the pilot island projects and proposals for other island projects, if appropriate.

**18.2.** That an evaluation of the project was presented to the Policy and Resources Committee on 20 June 2017, which demonstrated that good progress had been made to identify potential services which could be redesigned to be delivered in accordance with the empowering communities model.

**18.3.** That a further review of the Empowering Communities project had been undertaken during 2019 and early 2020, with the project achievements and outcomes to date, both from the Island Link Officers' perspectives and those more centrally supported by the Empowering Communities Liaison Officer, detailed in Annex 1 to the report by the Chief Executive.

**18.4.** That the principles of the Empowering Communities project could be expanded outwith the original four islands of Papa Westray, Stronsay, Sanday, and Hoy and there was clear demand and scope to develop the project as a resource for all Community Councils across Orkney.

**18.5.** The proposal to establish a Link Officer, initially on a temporary basis, to assist with exploring opportunities for expanding the principles of the Empowering Communities project within the West Mainland area, the cost of which could be contained within existing resources.



The Committee resolved to **recommend to the Council:**

**18.6.** What action should be taken with regard to the Empowering Communities project team.

**18.7.** That, in order to assist with exploring opportunities for expanding the principles of the Empowering Communities project within the West Mainland area, a temporary part-time post of Link Officer (17.5 hours per week), Grade 5, be established.

**The above constitutes the summary of the Minute in terms of the Local Government (Scotland) Act 1973 section 50C(2) as amended by the Local Government (Access to Information) Act 1985.**

## **19. Potential Strategic Land Acquisition**

The Committee noted that this item had been withdrawn.

## **20. Conclusion of Meeting**

At 16:58 the Chair declared the meeting concluded.

Signed: (Chair's signature).

# Political Engagement Strategy

## Purpose

The advancement of the Council's strategic priorities through optimisation of the Council's political engagement activity.

## Aim

To plan, focus and co-ordinate political engagement such that the Council's key strategic priorities are vigorously promoted and planned outcomes are achieved.

## The Council's Strategic Priorities

- Connected Communities.
- Caring Communities.
- Thriving Communities.
- Enterprising Communities.
- Quality of Life.

## Introduction

The present political environment is fraught with uncertainty. It is imperative that the Council focuses its political engagement in an efficient and proportionate manner having regard to resources available. Brexit, Covid-19 and other external challenges make it important to build resilience and goodwill through external alliances. Unlike most other councils, the majority of our members are independents and there is little recognised political affiliation to guide our engagement policy.

The Council has established a range of Project Boards to promote key strategic priorities, with varying degrees of political input from Elected Members. Council policy is to build on its existing network of stakeholder groups and forums with a view to enhancing local political input, thereby ensuring clear and consistent messaging through lobbying or other means of political engagement.

## Scope of this Strategy

Risk mitigation is one of our main drivers for political engagement. The Corporate Risk Register (revised September 2020) identifies risks which may hinder or thwart the Council's ability to achieve its strategic priorities. For some of these risks, as specified below, the agreed mitigating actions include political engagement, typically with relevant Ministers in the Scottish and UK governments.

Strategic alliances are our second key driver of political engagement. These may be local, regional, national or international. Strategic alliances may be pursued for many purposes with the most usual being the generation of economic opportunities for Orkney, cultural/historical relationships, and the sharing of best practice. Engagement may be directly with national, regional or local governments, universities or other stakeholders, or via forums of strategic interest.

This strategy is not intended to be exclusive. New risks and opportunities with the potential to impact significantly on Orkney can arise at short notice. Elected Members may need to pursue urgent political engagement at any time in the interests of Orkney or the Council, whether or not the particular area of concern is identified in this strategy. Elected members may undertake an audit of the political connections of all elected members at the start of a new council term or when deemed appropriate.

## Risk mitigation

A key factor of the strategy is to mitigate risks which might prevent the Council progressing its strategic priorities. This extract from the Council's Corporate Risk Register (as updated October 2020) identifies the key corporate risks and associated vulnerabilities for which political engagement is planned as part of the mitigating actions.

Risk and vulnerability.	Planned political engagement.
<p><b>CRR 01 – Failure to secure agreement with Scottish Government on appropriate funding arrangements to deliver the Scottish Ferries Plan in relation to ferry and terminal replacement for Orkney.</b></p> <p>Ferry and Terminal replacement programme currently unfunded with ageing infrastructure. Annual revenue costs are unaffordable.</p>	<ul style="list-style-type: none"> <li>• Ongoing dialogue with the Scottish Government emphasising the difficulties of a small authority providing the range of public services within reduced budgets across a wide and diverse geographical area.</li> <li>• Continue to seek additional specific funding sources to protect lifeline services in Orkney and its outlying communities to ensure they are not significantly disaffected, i.e. Transport Grant for replacement ferries.</li> </ul>
<p><b>CRR 06 – Inability to sustain and advance economic opportunities.</b></p> <p>Commercial etc sectors are vulnerable to market forces and changing national and international economic circumstances, Orkney's population is also ageing, leading to a range of challenges and opportunities in managing the impact of this demographic shift in terms of service provision.</p> <p>Current uncertainties associated with the Brexit arrangements for our future workforce.</p> <p>Deliverability of key project and political agendas including the Islands Deal, Port Masterplan, Grid and Digital</p>	<ul style="list-style-type: none"> <li>• Political engagement and lobbying at UK and Scottish Government Levels.</li> <li>• Effective working of Economic Recovery Steering Group.</li> </ul>

<b>Risk and vulnerability.</b>	<b>Planned political engagement.</b>
<p>Connectivity, Shared Prosperity Fund, Ferry Replacement, Arctic Strategy, Special status port concepts.</p> <p>COVID Recovery and Response challenges.</p>	
<p><b>CRR 08 – Inadequate access to superfast broadband across Orkney and mobile connectivity.</b></p> <p>Failure to lobby Governments to address the current digital divide and put in place infrastructure to ensure a step change in speeds.</p> <p>Failure to access mobile coverage.</p> <p>Failure to press the Government to deliver a longer-term plan to ensure that there are the right mechanisms, partnerships and commercial models in place.</p>	<ul style="list-style-type: none"> <li>• Continue to support political lobbying and seek opportunities to progress policy.</li> <li>• Support the Scottish Government in the roll out of R100 infrastructure in Orkney.</li> <li>• Support the development and introduction of alternative commercial models, including 5G infrastructure.</li> </ul>
<p><b>CRR 9 – Lack of sustainability of partnerships and clarity of responsibilities and outcomes.</b></p> <p>Working in partnership exposes the Council to some degree of reputational risk, depending on the stability of the arrangements and outcomes delivered.</p> <p>Resource constraints may affect the success of the Health and Social Care partnership.</p>	<ul style="list-style-type: none"> <li>• The Council will continue to work closely with partners under current frameworks which are monitored closely to ensure they are robust, effective and deliver good governance.</li> <li>• Clear Terms of Reference and Partnership Schemes are critical in reducing risks.</li> <li>• The Council will continue to review existing partnerships and explore new ones as opportunities arise to suit Orkney as a whole.</li> <li>• Commitment from Cabinet Secretary received, which supports joint working.</li> </ul>
<p><b>CRR 12 – Brexit – Implications following a “hard” no deal outcome.</b></p> <p>Loss of access to the single market, with associated implications around trade delays and reduction in supply.</p> <p>Loss of EU funding for projects and businesses in Orkney.</p> <p>Disruption to current workforce and future restrictions on ability to recruit.</p>	<ul style="list-style-type: none"> <li>• The Council “Island proofs” any Scottish Government response and fully participates in discussions with CoSLA, the Scottish Government and other groups as needed.</li> <li>• Member Officer Working Group to be convened as soon as final terms of the Brexit deal are known.</li> </ul>

<b>Risk and vulnerability.</b>	<b>Planned political engagement.</b>
	<ul style="list-style-type: none"> <li>• Urgent discussions within the Community Planning Partnership once the terms of Brexit are known.</li> <li>• Urgent escalation of high / severe risks to the Scottish Government, including the operational difficulties with regards to Environmental Health Certificates.</li> <li>• Urgent escalation of high / severe risks to the Scottish Government.</li> </ul>

## **Strategic alliances**

Noted below are the principal areas and forums where the Council is currently focusing its political engagement activity, in pursuit of its strategic priorities.

### **Local alliances**

#### **The Orkney Partnership**

As a statutory facilitating partner in The Orkney Partnership, the Council has adopted the Local Outcomes Improvement Plan and is committed to support and progress the Partnership's strategic priorities of Living Well, Strong Communities and Vibrant Economy.

#### **Regional alliances**

Convention of the Highlands and Islands (CoHI).  
 Our Islands, Our Future (including the Islands Deal).  
 Highlands and Islands Transport Partnership (HITRANS).  
 The Northern Alliance (Education network).  
 University of the Highlands and Islands.

#### **National alliances**

Convention of Scottish Local Authorities (COSLA).  
 Health and Social Care Scotland (HSCS).

#### **Scottish Government**

Highland and Island Leaders' Group.  
 Islands Strategic Group.  
 Arctic and Nordic Unit.  
 Islands Team.  
 Crown Estate Scotland.  
 Members of Scottish Youth Parliament.

## **UK Government**

All Party Parliamentary Group for Islands.  
Islands Desk.  
Oil and Gas Forum.

## **International alliances**

### **International forums**

Conference of Peripheral Maritime Regions (CPMR).  
Highlands and Islands European Partnership (HIEP).  
Global Island Partnership (GLISPA).  
Arctic Council.  
Nordic Council.  
North Atlantic Forum (NAF).  
Nordic Atlantic Co-operation (NORA).

### **Arctic and Nordic states**

Cultivating relationships and alliances with our Arctic and Nordic neighbours will help to develop an alternative international “family” for Orkney, and new opportunities in the blue and green economies, following Brexit. In addition, the Scottish Government’s Arctic Policy Framework promotes the development of Arctic – Scotland links and Orkney, a natural gateway to the Arctic, is well placed to play a vital role in identifying and pursuing opportunities that will benefit our communities as well as others.

### **International relationships**

Relationships and alliances have been cultivated with other countries, e.g. China and Japan. These have provided opportunities to exchange best practice within Education as well as Business and Economy. The Council welcomes dialogue with worldwide representatives where opportunities to promote the local economy and improve services are evident.

### **Twinning and Friendship**

The Council has a longstanding Twinning arrangement with Hordaland and will explore the continuation of this formal agreement with the new County of Vestland which was created in 2020 when the former counties of Hordaland and Sogn og Fjordane merged. In addition, strong friendships with Moena, Italy and Manitoba, Canada remain.

## **Meeting arrangements**

The Chief Executive, in agreement with the Leader, has established and will maintain meeting arrangements which are key to achieving the aim of the Strategy, as follows:

<b>Meeting date.</b>	<b>Participants.</b>
Weekly.	Chairs and the Chief Executive.
Fortnightly.	All Elected Members and the Chief Executive.
Monthly.	All Councillors and Senior Management Team.
By arrangement.	All Elected Members, MP, MSP's and the Chief Executive.

The objectives of these meetings are to:

- Provide support for the Political Leader.
- Identify opportunities for political engagement.
- Inform political engagement.
- Advise and help develop the Council's Political strategy.
- Enhance collegiate approach for effective strategic leadership.
- Raise awareness and commitment to key strategic priorities.
- Allow the Political Leader to co-ordinate / lead and where appropriate delegate political activity.
- Allow the Political Leader to report effectively to all members.



# **Complaints Handling Procedure**



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## Document Control Sheet.

Review / Approval History.

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# Part 1: Introduction and Overview

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## Foreword

The Council's Complaints Handling Procedure reflects our 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](#). 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 Council 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 Council. 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 section.
- When to use the procedure (part 2) – 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) – guidance on handling a complaint through stages 1 and 2, and dealing with post-closure contact.
- Governance of the procedure (part 4) – staff roles and responsibilities and guidance on recording, reporting, publicising and learning from complaints.
- The customer-facing CHP (separate document) – information for customers on how we handle complaints.

2. 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.spsso.org.uk](http://www.spsso.org.uk).

## Overview of the CHP

3. Anyone can make a complaint, either verbally or in writing, including face-to-face, by phone, letter, email or via the Council's website – [www.orkney.gov.uk/feedback](http://www.orkney.gov.uk/feedback).

4. 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).

5. 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.

<b>Stage 1: Frontline response</b>	<b>Stage 2: Investigation</b>	<b>Independent external review (SPSO or other)</b>
<p>For issues that are straightforward and simple, requiring little or no investigation.</p> <p>‘On-the-spot’ apology, explanation, or other action to put the matter right.</p> <p>Complaint resolved or a response provided in <b>five working days</b> 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 response.</p> <p>Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing).</p> <p>We will tell the customer how to escalate their complaint to stage 2.</p>	<p>Where the customer is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, <u>serious</u> or 'high-risk'.</p> <p>Complaint acknowledged within <b>three working days</b>.</p> <p>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).</p> <p>Complaint resolved or a definitive response provided within <b>20 working days</b> following a thorough investigation of the points raised.</p>	<p>Where the customer is not satisfied with the stage 2 response from 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> <p>In relation to social work decisions the SPSO can also look at professional decisions.</p> <p>Some complaints may also have an alternative route for independent external review.</p>

6. For detailed guidance on the process, see **Part 3: The complaints handling process**.

## Expected behaviours

7. 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.
- Responding to reasonable requests for information.

8. We have a policy in place for when these standards are not met which is our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.

9. 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.

10. 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 the Council's Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.](#)

11. 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).

12. The SPSO has [guidance on promoting positive behaviour and managing unacceptable actions.](#)

## **Maintaining confidentiality and data protection**

13. 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.

14. 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.

15. 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. The Council's Privacy Notice can be accessed via the following link: <https://www.orkney.gov.uk/Online-Services/privacy.htm>.

16. 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.

17. 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.

## **Part 2: When to use this Procedure**



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## What is a complaint?

1. The Council's definition of a complaint is: 'an expression of dissatisfaction by one or more members of the public about the Council's action or lack of action, or about the standard of service provided by or on behalf of the Council.
2. For clarity, where an employee also receives a service from the Council as a member of the public, they may complain about that service.
3. A complaint may relate to the following, but is not restricted to this list:
  - Failure or refusal to provide a service.
  - Inadequate quality or standard of service, or an unreasonable delay in providing a service.
  - Dissatisfaction with one of our policies or its impact on the individual.
  - Failure to properly apply law, procedure or guidance when delivering services.
  - Failure to follow the appropriate administrative process.
  - Conduct, treatment by or attitude of a member of staff or contractor (**except** where there are arrangements in place for the contractor to handle the complaint themselves: see **Complaints about contracted services**).
  - Disagreement with a decision, (**except** where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector).
4. **Appendix 1** provides a range of examples of complaints we may receive, and how these may be handled.
5. A complaint **is not**:
  - A routine first-time request for a service (see **Complaints and service requests**).
  - A first-time report of a fault (for example, potholes or street lighting).
  - A request for compensation only (see **Complaints and compensation claims**).
  - Issues that are in court or have already been heard by a court or a tribunal (see **Complaints and legal action**).
  - Disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process followed throughout the sector – such as council tax, planning, or a parking ticket appeal (see also **Complaints and social work appeals**).
  - Disagreement with decisions or conditions that are based upon social work recommendations, but determined by a court or other statutory body, for example decisions made by a children's panel, parole board or mental health tribunal.
  - A request for information under the Data Protection or Freedom of Information (Scotland) Acts.
  - A grievance by a staff member or a grievance relating to employment or staff recruitment.
  - A concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern).

- A concern about a child or an adult's safety.
- An attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision.
- Abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.
- A concern about the actions or service of a different organisation, where we have no involvement in the issue (**except** where the other organisation is delivering services on our behalf: see **Complaints about contracted services**).

6. We will not treat these issues as complaints, and will instead direct customers to use the appropriate procedures. Some situations can involve a combination of issues, where some are complaints and others are not, and each situation should be assessed on a case-by-case basis.

7. If a matter is not a complaint, or not suitable to be handled under the CHP, we will explain this to the customer, and tell them what (if any) action we will take, and why. See **What if the CHP does not apply**.

8. **Appendix 2** gives examples of more complex complaints, some of which are not appropriate for this CHP (**Appendix 3** gives examples specific to social work). The section on **Complaints relevant to other agencies** provides information about some of the other agencies that may be able to assist customers if their complaint is not appropriate for this CHP.

## Who can make a complaint?

9. Anyone who receives, requests, or is affected by our services can make a complaint. This is not restricted to 'service users' and their relatives or representatives, but may also include people who come into contact with or are affected by these services, for example people who live in close proximity to a social work service provision, such as a care home or day centre. In this procedure these people are termed 'customers', regardless of whether they are or were using a service.

10. We also accept complaints from the representative of a person who is dissatisfied with our service. See **Complaints by (or about) a third party**.

## Supporting the customer

11. All members of the community have the right to equal access to our complaints procedure. It is important to recognise the barriers that some customers may face complaining. These may be physical, sensory, communication or language barriers, but can also include their anxieties and concerns. Customers may need support to overcome these barriers.

12. We have legal duties to make our complaints service accessible under equalities and mental health legislation. For example:

- The Equality Act (Scotland) 2010 – this gives people with a protected characteristic the right to reasonable adjustments to access our services (such as large print or BSL translations of information).

- The Mental Health (Care and Treatment) (Scotland) Act 2003 – this gives anyone with a ‘mental disorder’ (including mental health issues, learning difficulties, dementia and autism) a right to access independent advocacy. This must be delivered by independent organisations that only provide advocacy. They help people to know and understand their rights, make informed decisions and have a voice.

13. Examples of how we will meet our legal duties include:

- Proactively checking whether members of the public who contact us require additional support to access our services.
- Providing interpretation and / or translation services for British Sign Language users.
- Helping customers access independent advocacy (the Scottish Independent Advocacy Alliance website has information about local advocacy organisations throughout Scotland).

14. In addition to our legal duties, we will seek to ensure that we support vulnerable groups in accessing our complaints procedure. Actions that we may take include:

- Helping vulnerable customers identify when they might wish to make a complaint (for example, by training frontline staff who provide services to vulnerable groups).
- Helping customers access independent support or advocacy to help them understand their rights and communicate their complaints (for example, through the Scottish Independent Advocacy Alliance or Citizen’s Advice Scotland).
- Providing a neutral point of contact for complaints (where the relationship between customers and frontline staff is significant and ongoing).

15. These lists are not exhaustive, and we must always take into account our commitment and responsibilities to equality and accessibility.

## How complaints may be made

16. Complaints may be made verbally or in writing, including face-to-face, by phone, letter, email or on our Customer Services Platform – [www.orkney.gov.uk/feedback](http://www.orkney.gov.uk/feedback).

17. Where a complaint is made **verbally**, we will make a record of the key points of complaint raised.

18. Complaint issues may also be raised on digital platforms (including social media).

19. Where a complaint issue is raised via a digital channel managed and controlled by the Council (for example our Twitter address or Facebook page), we will normally respond by explaining that we do not normally take complaints on social media and telling the person how they can complain.

- In exceptional circumstances, we may respond to very simple complaints on social media. This will normally only be appropriate where an issue is likely to affect a large number of people, and we can provide a very simple response (for example, an apology for a cancelled bus service or late cancellation of a class).

20. We may also become aware that an issue has been raised via a digital channel not controlled or managed by us (for example a Youtube video or post on a private Facebook group). In such cases we **may** respond, where we consider it appropriate, by telling the person how they can complain.

21. We must always be mindful of our data protection obligations when responding to issues online or in a public forum. See **Part 1: Maintaining confidentiality and data protection**.

## **Time limit for making complaints**

22. The customer must raise their complaint within six months of when they first knew of the problem, unless there are special circumstances for considering complaints beyond this time (for example, where a person was not able to complain due to serious illness or recent bereavement).

23. Where a customer has received a stage 1 response, and wishes to escalate to stage 2, unless there are special circumstances they must request this either:

- Within six months of when they first knew of the problem; or
- Within two months of receiving their stage 1 response (if this is later).

24. We will apply these time limits with discretion, taking into account the seriousness of the issue, the availability of relevant records and staff involved, how long ago the events occurred, and the likelihood that an investigation will lead to a practical benefit for the customer or useful learning for the organisation.

25. We will also take account of the time limit within which a member of the public can ask the SPSO to consider complaints (normally one year). The SPSO have discretion to waive this time limit in special circumstances (and may consider doing so in cases where we have waived our own time limit).

## **Particular circumstances**

### **Complaints by (or about) a third party**

26. Sometimes a customer may be unable or reluctant to make a complaint on their own. We will accept complaints from third parties, which may include relatives, friends, advocates and advisers. Where a complaint is made on behalf of a customer, we must ensure that the customer has authorised the person to act on their behalf. It is good practice to ensure the customer understands their personal information will be shared as part of the complaints handling process (particularly where this includes sensitive personal information). This can include complaints brought by parents on behalf of their child, if the child is considered to have capacity to make decisions for themselves.

27. The provision of a signed mandate from the customer will normally be sufficient for us to investigate a complaint. If we consider it is appropriate we can take verbal consent direct from the customer to deal with a third party and would normally follow up in writing to confirm this.

28. In certain circumstances, a person may raise a complaint involving another person's personal data, without receiving consent. The complaint should still be investigated where possible, but the investigation and response may be limited by considerations of confidentiality. The person who submitted the complaint should be made aware of these limitations and the effect this will have on the scope of the response.

29. See also **Part 1: Maintaining confidentiality and data protection**.

### **Serious, high-risk or high-profile complaints**

30. We will take particular care to identify complaints that might be considered serious, high-risk or high-profile, as these may require particular action or raise critical issues that need senior management's direct input. Serious, high-risk or high-profile complaints should normally be handled immediately at stage 2 (see **Part 3: Stage 2: Investigation**).

31. We define potential high-risk or high-profile complaints as those that may:

- Involve a death or terminal illness.
- Involve serious service failure, for example major delays in providing, or repeated failures to provide, a service.
- Generate significant and ongoing press interest.
- Present a serious risk to our operations.
- Present issues of a highly sensitive nature, for example concerning:
  - Immediate homelessness.
  - A particularly vulnerable person.
  - Child protection.
  - Adult protection.

### **Anonymous complaints**

32. We value all complaints, including anonymous complaints, and will take action to consider them further wherever this is appropriate. Generally, we will consider anonymous complaints if there is enough information in the complaint to enable us to make further enquiries. Any decision not to pursue an anonymous complaint must be authorised by an appropriate manager.

33. If we pursue an anonymous complaint further, we will record it as an anonymous complaint together with any learning from the complaint and action taken.

34. If an anonymous complainant makes serious allegations, these should be dealt with in a timely manner under relevant procedures. This may not be the complaints procedure and could instead be relevant child protection, adult protection or disciplinary procedures.

### **What if the customer does not want to complain?**

35. If a customer has expressed dissatisfaction in line with our definition of a complaint but does not want to complain, we will explain that complaints offer us the opportunity to improve services where things have gone wrong. We will encourage the customer to submit their complaint and allow us to handle it through the CHP. This will ensure that the customer is updated on the action taken and gets a response to their complaint.

36. If the customer insists they do not wish to complain, we are not required to progress the complaint under this procedure. However, we should record the complaint as an anonymous complaint (including minimal information about the complaint, without any identifying information) to enable us to track trends and themes in complaints. Where the complaint is serious, or there is evidence of a problem with our services, we should also look into the matter to remedy this (and record any outcome).

37. Please refer to the example in **Appendix 1** for further guidance.

### **Complaints involving more than one area or organisation**

38. If a complaint relates to the actions of two or more areas within our organisation, we will tell the customer who will take the lead in dealing with the complaint, and explain that they will get only one response covering all issues raised.

39. If a customer complains to us about the service of another organisation or public service provider, but we have no involvement in the issue, the customer should be advised to contact the appropriate organisation directly.

40. If a complaint relates to our service and the service of another organisation or public service provider, and we have a direct interest in the issue, we will handle the complaint about the Council through the CHP. If we need to contact an outside body about the complaint, we will be mindful of data protection. See **Part 1: Maintaining confidentiality and data protection**.

41. Such complaints may include:

- A complaint made to us about a claim for housing benefit where the customer's dissatisfaction relates to the service we have provided and the service the DWP has provided.
- A complaint made to us about anti-social behaviour where the customer's dissatisfaction relates to the service we have provided and the service the housing association has provided.

### **Complaints relating to a social work service and another service**

42. A complaint may relate to a social work service and another service provided by the Council. An example is: a social work service and a housing service both provided by the local authority.

43. In such cases, a joint response must be given following the guidance above.

44. Alternatively, a complaint may involve services from different organisations. Examples are:

- A complaint about a social work service provided by the Council and a care service provided by a contractor.
- A complaint about a social work service provided by the Council and a housing service provided by a housing association.

45. The aim with such complaints is still to provide a joint response (particularly where the organisations are linked, eg. NHS providers), though this may not always be possible.

Contact must be made with the customer to explain that their complaint partly relates to services which are delivered by another organisation, and that to respond to their complaint, we will need to share information with this organisation. Staff must check whether specific consent is needed from the customer before we can share their information with the other services, and take appropriate action where necessary, bearing in mind any data protection requirements. See **Part 1: Maintaining confidentiality and data protection**.

46. If it is possible to give a joint response, a decision must be taken as to which service will lead the process. We must ensure that all parties are clear about this decision. The response must cover all parts of the complaint, explain the role of both services, and (for investigation stage complaints) confirm that it is the final response from both services.

47. If a joint response is not possible, you should explain to the person making the complaint the reasons why they will receive two separate responses, and who they can get in contact with about the other aspects of their complaint. You must also write to both the customer and the other services involved, setting out which parts of the complaint you will be able to respond to.

### **Complaints about contracted or commissioned services / ALEOs**

48. The Council uses Arm's Length External Organisations (ALEOs), such as Orkney Ferries, to deliver certain services. They are 'arm's-length' because the Council retains a degree of control or influence, usually through a funding agreement, and 'external' because they have a separate identity to the Council. An example might be a charitable organisation delivering leisure and culture services on our behalf.

49. Where we use an ALEO or contractor to deliver a service on our behalf we recognise that we remain responsible and accountable for ensuring that the services provided meet the Council's standard (including in relation to complaints). We will either do so by:

- Ensuring the contractor complies with this procedure; or
- Ensuring the contractor has their own procedure in place, which fully meets the standards in this procedure. At the end of the investigation stage of any such complaints the contractor must ensure that the customer is signposted to the SPSO.

50. We will confirm that service users are clearly informed of the process and understand how to complain. We will also ensure that there is appropriate provision for information sharing and governance oversight where required.

51. The Council has discretion to investigate complaints about organisations contracted to deliver services on its behalf even where the procedure has normally been delegated.

### **Commissioned social work services**

52. Where social work services are commissioned on behalf of the Council, customers can make complaints under this CHP in relation to the assessment of need, the commissioning or recommendation process, and any element of the service that has been publicly funded. Complaints about any part of service that has been privately funded cannot be considered through this CHP.



53. These services may also be registered as a care service with the Care Inspectorate to deliver a care or support service. If this is the case, customers have the right to complain directly to the Care Inspectorate or to make use of the provider's CHP and thereafter make a complaint to the Care Inspectorate: see **Complaints for the Care Inspectorate**.

### **Complaints about senior staff**

54. Complaints about senior staff can be difficult to handle, as there may be a conflict of interest for the staff investigating the complaint. When serious complaints are raised against senior staff, it is particularly important that the investigation is conducted by an individual who is independent of the situation. We must ensure we have strong governance arrangements in place that set out clear procedures for handling such complaints. Each service has a head of service or senior manager trained to carry out investigations of complaints about members of senior staff.

### **Complaints and other processes**

55. Complaints can sometimes be confused (or overlap) with other processes, such as disciplinary or whistleblowing processes. Specific examples and guidance on how to handle these are below.

### **Complaints and service requests**

56. If a customer asks the Council to do something (for example, provide a service or deal with a problem, such as a pot hole), and this is the first time the customer has contacted us, this would normally be a routine service request and not a complaint.

57. Service requests can lead to complaints, if the request is not handled promptly or the customer is then dissatisfied with how we provide the service.

### **Complaints and disciplinary or whistleblowing processes**

58. If the issues raised in a complaint overlap with issues raised under a disciplinary or whistleblowing process, we still need to respond to the complaint.

59. Our response must be careful not to share confidential information (such as anything about the whistleblowing or disciplinary procedures, or outcomes for individual staff members). It should focus on whether the Council failed to meet expected standards and what we have done to improve things, in general terms.

60. Staff investigating such complaints will need to take extra care to ensure that:

- We comply with all requirements of the CHP in relation to the complaint (as well as meeting the requirements of the other processes).
- All complaint issues are addressed (sometimes issues can get missed if they are not also relevant to the overlapping process).
- We keep records of the investigation that can be made available to the SPSO if required. This can be problematic when the other process is confidential, because the SPSO will normally require documentation of any correspondence and interviews to show how conclusions were reached. We will need to bear this in mind when planning any elements of the investigation that might overlap (for example, if staff are interviewed for the purposes of both the complaint and a disciplinary procedure, they should not be

assured that any evidence given will be confidential, as it may be made available to the SPSO).

61. The SPSO's report [Making complaints work for everyone](#) has more information on supporting staff who are the subject of complaints.

### **Complaints and compensation claims**

62. Where a customer is seeking financial compensation only, this is not a complaint. However, in some cases the customer may want to complain about the matter leading to their financial claim, and they may seek additional outcomes, such as an apology or an explanation. Where appropriate, we may consider that matter as a complaint, but deal with the financial claim separately. It may be appropriate to extend the timeframes for responding to the complaint, to consider the financial claim first.

### **Complaints and legal action**

63. Where a customer says that legal action is being actively pursued, this is not a complaint.

64. Where a customer indicates that they are thinking about legal action, but have not yet commenced this, they should be informed that if they take such action, they should notify the complaints handler and that the complaints process, in relation to the matters that will be considered through the legal process, will be closed. Any outstanding complaints must still be addressed through the CHP.

65. If an issue has been, or is being, considered by a court, we must not consider the same issue under the CHP.

### **Social work complaints and appeals**

66. While some social work decisions may be reviewed under alternative arrangements at a local level (for example through appeal or peer review), the SPSO has the power to consider professional social work decisions. The customer should not be required to seek a reconsideration of a decision under both appeal and complaint processes, nor should they be required to make further complaint if dissatisfied with the outcome of an appeal.

67. Therefore, whilst we have discretion to operate appeals procedures, these must be regarded as a special form of complaint investigation (stage 2 of this CHP). Such appeals processes must be compliant with this procedure in terms of the rigour and documentation of the process, must be concluded within 20 working days where possible with a written response to the customer, and must be recorded as a stage 2 complaint on the relevant complaints database (unless recorded elsewhere as an appeal). If the customer raises additional issues of dissatisfaction as well as challenging a professional decision, then the process must consider and respond to every element of the customer's dissatisfaction so that no additional complaint process is required.

68. The final response letter must provide relevant text advising the customer of their right to refer the matter to the SPSO for independent consideration. The SPSO will then investigate matters in full, in line with their standard procedures.

## **Social Work Complaints and the Duty of Candour**

69. In some cases, a complaint may be prompted by a duty of candour disclosure, or a complaint investigation may itself prompt a disclosure. In such cases, we must comply with both this CHP and our duty of candour requirements.

70. It will often be possible to conduct a single review for the purposes of both the complaint investigation and the duty of candour. We should, however, take care to ensure that all the issues raised in the complaint are dealt with (including any that are not relevant to the duty of candour disclosure).

## **Complaints for the Care Inspectorate**

71. Local Authorities and any contractors that provide care services must be registered with the Care Inspectorate. This is the independent scrutiny and improvement body for care and social work across Scotland, which regulates, inspects and supports improvement of care services.

72. The Care Inspectorate has a procedure for receiving information, concerns and investigating complaints from members of the public, or their representatives, about the care services they use. The Care Inspectorate's complaints procedure is available even when the service provider has an alternative complaints procedure in place.

73. The Care Inspectorate encourages people to complain directly to the organisation they receive a service from. However, some people are not comfortable doing this and to support them, the Care Inspectorate may take complaints about care services directly.

74. When complaints are brought to us about registered care services, we have the right to share complaint information about the registered care provider with the Care Inspectorate, to decide who is best placed to investigate the complaint. We can also share the outcome of complaints about contracted and registered services with the Care Inspectorate.

Contact details for the Care Inspectorate can be found on their website:

<https://www.careinspectorate.com/>.

## **Complaints about Personal Assistants**

75. Where an individual directly employs a Personal Assistant to provide their support, using a Direct Payment (as part of a Self-directed Support package), the Personal Assistant is not subject to registration with the Care Inspectorate under the Public Services Reform (Scotland) Act 2011, its regulations and amendments. The individual directly employing the Personal Assistant remains responsible for the management of their employee, including their performance management. The Care Inspectorate would only be able to take complaints about such support workers if they work for a registered care agency.

## **Complaints relevant to other agencies**

76. Customers may raise concerns about issues which cannot be handled through this CHP, but which other agencies may be able to provide assistance with or may have an interest in. This may include:

The Mental Welfare Commission.

Website: [www.mwcscot.org.uk](http://www.mwcscot.org.uk).

The Children and Young People's Commissioner Scotland.

Website: [www.cycps.org.uk](http://www.cycps.org.uk).

The Scottish Social Services Council.

Website: [www.sssc.uk.com](http://www.sssc.uk.com).

77. This list is not exhaustive, and it is important to consider the circumstances of each case, and whether another organisation may also have a role to play.

### **What to do if the CHP does not apply**

78. If the issue does not meet the definition of a complaint or if it is not appropriate to handle it under this procedure (for example, due to time limits), we will explain to the customer why we have made this decision. We will also tell them what action (if any) we will take (for example, if another procedure applies), and advise them of their right to contact the SPSO if they disagree with our decision not to respond to the issue as a complaint.

79. Where a customer continues to contact us about the same issue, we will explain that we have already given them our final response on the matter and signpost them to the SPSO. We may also consider whether we need to take action under our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.

80. The SPSO has issued a [template letter for explaining when the CHP does not apply](#).

## Appendix 1 – Complaints

The following tables give examples of complaints that may be considered at the frontline stage and suggest possible actions. For ease of reference, examples of social work complaints are provided in a separate table.

<b>Complaint.</b>	<b>Possible actions.</b>
The customer complains that her council tax direct debit has been set up wrongly.	Apologise to the customer and update the direct debit details.
The customer has provided evidence to verify his claim for benefits, but the Benefits Service has not updated his case records with this information.	<ul style="list-style-type: none"> <li>• Apologise to the customer.</li> <li>• Update the customer's benefit record to record receipt of evidence.</li> <li>• Check that the benefit award is corrected from the appropriate date.</li> </ul>
The customer complains that a workman did not attend to carry out a housing repair as we had agreed.	<ul style="list-style-type: none"> <li>• Speak to the workman, the service or the service manager to explain the customer's complaint and to agree how to address the issue, for example by arranging a new time and date to do the repair.</li> <li>• Explain the reasons for the failed appointment and apologise to the customer.</li> </ul>
The quality of repair done by us or our contractor is not satisfactory.	<ul style="list-style-type: none"> <li>• Ask the service department to examine the repair to assess whether or not it is acceptable.</li> <li>• If appropriate, agree that the service department should do more work.</li> <li>• Explain and apologise to the customer.</li> <li>• Obtain a report from the service or contractor to confirm that the repair is now complete.</li> <li>• Feedback the lessons learned from the complaint into a service improvement plan.</li> </ul>
The customer complains that a road which is on our winter gritting route has not been gritted despite previous assurances that it would be.	<ul style="list-style-type: none"> <li>• Confirm if the roads are on our agreed gritting routes.</li> <li>• If assurance had been provided that the road would be gritted, check to confirm if this action occurred, and when.</li> <li>• Where appropriate, provide an explanation and apologise to the customer.</li> <li>• Obtain confirmation from the service to confirm when the road will be gritted.</li> </ul>

<b>Complaint.</b>	<b>Possible actions.</b>
	<ul style="list-style-type: none"> <li>• Feedback the lessons learned from the complaint into a service improvement plan.</li> </ul>
<p>The customer complains that his home carer turned up late and was smoking.</p>	<ul style="list-style-type: none"> <li>• Contact the care service to discuss the matter with a service manager.</li> <li>• The care service should check the timetable for visits and discuss with the home carer the complaint about smoking. The care service should let you know the outcome.</li> <li>• You in turn contact the customer to explain the policy, confirm the timing of visits (for example between 08:00 and 12 noon) and, where appropriate, apologise for the inconvenience.</li> </ul>
<p>The customer complains that a night-working refuse collector woke her up by making excessive noise.</p>	<ul style="list-style-type: none"> <li>• Explain our policy on refuse collection, in particular the approach to night working.</li> <li>• Tell the customer that you will pass on details of the complaint to the service to highlight the noise issue and ask the service to do what they can to control noise.</li> <li>• Apologise to the customer for the inconvenience.</li> </ul>
<p>The customer expresses dissatisfaction in line with the definition of a complaint, but says she does not want to complain – just wants to tell us about the matter.</p>	<ul style="list-style-type: none"> <li>• Tell the customer that we value complaints because they help to improve services. Encourage them to submit the complaint.</li> <li>• In terms of improving service delivery and learning from mistakes, it is important that customer feedback, such as this, is recorded, evaluated and acted upon. Therefore, if the customer still insists that they do not want to complain, record the matter as an anonymous complaint. This will avoid breaching the complaints handling procedure. Reassure the customer that they will not be contacted again about the matter.</li> </ul>

<b>Social work complaint.</b>	<b>Possible actions.</b>
A service user complains that a social worker did not turn up for a planned visit.	<ul style="list-style-type: none"> <li>• Apologise to the service user.</li> <li>• Explain that you will look into the matter.</li> <li>• Contact the social worker / manager to find out the reason for the missed appointment, then</li> <li>• Explain the reasons and offer a new appointment.</li> </ul>
A member of the public complains that a home carer parked in a private resident's car parking place.	<ul style="list-style-type: none"> <li>• Take the customer's details and explain that you will look into the matter.</li> <li>• Contact the home care service to find out if this is the case.</li> <li>• If so, request that this does not happen again, and</li> <li>• Contact the customer, apologise and advise that the worker has been asked to find alternative parking.</li> </ul>
A member of public complains that his neighbours (residents of a children's house) have been playing football in the street where they live and are being abusive to passers-by.	<ul style="list-style-type: none"> <li>• Explain to the customer that you will look into the matter and call them back.</li> <li>• Contact the manager of the children's house to verify the facts.</li> <li>• Request that the manager meet with the neighbour to apologise and engender good relations, then</li> <li>• Call back the customer to update them.</li> </ul>
A complaint about a service provider commissioned by social work services.	<ul style="list-style-type: none"> <li>• Discuss with the customer the different ways for this complaint to be handled, ie by a complaint to the Care Inspectorate or through the provider's own CHP, and</li> <li>• Ensure, whatever process is agreed, that the customer is clear how they can progress their complaint to the next stage, should they remain dissatisfied. This may be within the provider's CHP, to the Council, or to the Care Inspectorate. The customer should be advised that they can come back to the Council for further advice if they need to at any stage.</li> </ul>
A service user complains that their care needs assessment does not accurately reflect their needs, or that the care package proposed would not meet the needs identified in their assessment.	<ul style="list-style-type: none"> <li>• Clarify with the customer whether the complaint relates to an assessment of needs or a proposed care package. Establish specifically what the customer is complaining about and what has happened so far. Ask them what they</li> </ul>

<b>Social work complaint.</b>	<b>Possible actions.</b>
	<p>are seeking from their complaint, and explain that you will look into the matter.</p> <ul style="list-style-type: none"> <li>• Make internal enquiries to establish what stage the assessment and care planning processes are at.</li> <li>• While considering the complaint, if the team indicate that a new assessment or care planning meeting may be offered, pass this offer onto the customer, and ask the team to contact the customer to take this forward, and</li> <li>• If the team are not prepared to look at the matter again, explain why the assessment or care package decision is considered to be adequate, and signpost to the next stage of the CHP.</li> </ul>
<p>A customer complains about social work services impacting on their discharge from hospital.</p>	<ul style="list-style-type: none"> <li>• Check with the hospital social work team about the customer's care planning in relation to discharge from hospital, and the timing of medical decisions and social work input.</li> <li>• It may become apparent at that stage that the discharge process was complicated by a range of issues, in which case it may be appropriate to escalate the complaint to investigation.</li> <li>• It may also become apparent that the customer is still in hospital, and may or may not be considered ready for discharge. If they are ready, then pass the complaint onto the team directly involved to respond to as quickly as possible.</li> <li>• If the situation is not current, and there were delays from social work services, find out why these happened, and</li> <li>• Respond to the customer by their preferred method, to inform them of the outcome of their complaint. Offer an apology if appropriate, and outline what steps have been put in place to prevent a recurrence of the situation.</li> </ul>



## **Appendix 2 – What is not a complaint?**

1. A concern may not necessarily be a complaint. For example, a customer might make a routine first-time request for a service. This is not a complaint, but the issue may escalate into a complaint if it is not handled effectively and the customer has to keep on asking for service.
2. In some cases a measure of discretion or further clarification is required in determining whether something is a complaint that should be handled through this procedure or another matter which should be handled through another process. There are also some specific circumstances when complaints should be handled in a particular manner.
3. The following paragraphs provide examples of the types of issues or concerns that must not be handled through the complaints handling procedure. This is not a full list, and you should decide the best route based on the individual case.

### **Planning.**

4. Customers may express dissatisfaction after the refusal of planning or other related permissions. An example would be dissatisfaction with a condition of consent or an enforcement action.
5. Planning applicants, or their agent, have the right to appeal to Scottish Ministers or the Local Review Body on planning or related matters determined by Committee or decided under delegated powers. Appeals to Scottish Ministers are usually, but not always, decided by a Reporter from the Directorate of Planning and Environmental Appeals and can be considered on the basis of written submissions or by a hearing or public inquiry. The Reporter appointed to consider the appeal will manage the whole process and consider how to gather enough information to make a decision.
6. Customers who are dissatisfied with one of our planning decisions, and who have a right to appeal to Scottish Ministers, should be directed to this service. However, some complaints about planning matters are from third parties such as neighbours. These customers do not have the right of appeal to Scottish Ministers. These complaints should, therefore, be considered through the CHP.

### **Benefits.**

7. A customer may be dissatisfied or disagree with a decision about their housing or council tax benefit claim. This is not a complaint. The customer may ask us to review the decision. If they remain dissatisfied at the outcome of the review or reconsideration of their claim, they may also appeal against our decision to an independent appeal tribunal. Where they want to do so, you should direct them appropriately.

### **Claims for compensation.**

8. A customer may seek compensation from us if they consider us liable. This includes issues such as personal injury or loss of or damage to property. Claims for compensation only are not complaints, so you must not handle them through the complaints handling procedure. You should be clear, however, that where a customer wants to complain about the matter leading to their request for compensation, for example workmen damaging their home, or the condition of a public road causing damage to a motor vehicle, you may

consider that matter as a complaint, but deal with the request for compensation separately. You may decide to suspend complaint action pending the outcome of the claim for compensation. If you do this, you must notify the customer and explain that the complaint will be fully considered when the compensation claim has been decided.

9. If you receive a compensation claim, you should explain to the customer the process for claiming compensation in line with our policy on these claims.

10. The Council can still make 'time and trouble' payments for inconvenience suffered by customers, in line with our policy on such matters. This is distinct from compensation claims.

### **Licence decisions.**

11. We are responsible for issuing various licences, including public entertainment, HMO (houses in multiple occupation), liquor and taxi licences. These have their own legal redress. Customers who are dissatisfied with these decisions will have to pursue this through the correct procedure for the type of licence they want.

### **School exclusions and placing requests.**

12. Decisions on appeals against a pupil's exclusion from school or a refusal of a school placing request are made by Committee. Once the Committee has ruled, the customer cannot then use the complaints process to continue their case.

### **School exam results.**

13. Schools have devolved authority to offer examinations on the awarding body's behalf. In most cases this will be the SQA. If a customer is dissatisfied with the result of an exam, the school should refer it to the awarding body.

14. Remember that although there may be an alternative form of redress for the customer as detailed above, you must consider carefully whether or not a customer's representations should be managed within the complaints handling procedure. Dissatisfaction with certain local authority decisions may simply require an explanation and directing to the correct route. If, however, a customer says they are dissatisfied with the administrative process we have followed in reaching a decision, you may consider that dissatisfaction through the complaints handling procedure. An example may be a complaint from a customer who is dissatisfied with a decision and alleges that we failed to follow or apply the appropriate guidance in reaching that decision.

## Appendix 3 – Complex social work scenarios

### Child or adult protection concerns.

15. Customers may express concerns that a child or adult is at risk, but frame their concern in terms of dissatisfaction that 'nothing has been done about this'. The member of staff will need to consider whether the person is authorised to make complaints on behalf of the child or adult in question, whether they expect the matter to be handled as a complaint and whether the professional view is that these matters are best addressed through initiating the applicable protection procedures. Where the need to initiate protection procedures and investigate concerns within those procedures is identified, the complaint should be closed. The person making the complaint should be advised of this and signposted to the SPSO.

16. Where a complaint is received about some aspect of protection processes that have already been initiated, for example in relation to the way the processes was applied, this should be considered a complaint, and progressed within the complaints handling procedure.

### Complaints about professional social work decisions.

17. A customer may wish to complain about or appeal against a social work decision. Such decisions must be considered in line with the timescales for complaints as specified in the CHP.

18. Some decisions may be considered through an internal appeal procedure. However, any such appeal route must be considered as constituting a special form of stage 2 of this procedure, in that it will result in a thorough response to **all concerns** and onward referral to the SPSO. See also **Social work complaints and appeals**.

### Legal action.

19. Legal action takes several forms and each must be handled in a distinctive way:

19.1. Judicial Review: If a person wishes to seek judicial review of a decision then they should be encouraged to seek legal advice.

19.2. Litigation: Where a customer says that they are seeking compensation and that legal action is being actively pursued, this is not a complaint. Where a customer indicates that they intend to litigate but have not yet commenced legal action, they should be informed that if they take such action, they should notify the complaints handler and / or the Complaints Manager and that the complaints process, in relation to the matters that will be considered through the legal process, will be closed. If it becomes apparent that legal action is being pursued, the complaints handler must clarify with the customer if all the issues they have raised will be considered through legal action; any outstanding issues must still be addressed through the CHP.

19.3. Legal tribunals, etc: Sometimes the matter complained of may be the subject of ongoing consideration by a relevant legal body, for example where a customer complains of lack of contact with their child who is being looked after by the Council, when that matter falls to be determined by the Children's Panel. In such cases the customer should be

directed to raise the matter either directly or through their legal representatives within that other defined process and the matter should not be accepted as a complaint.

This is distinct from a complaint that the Council and its staff have failed to properly carry out their roles and responsibilities. In the example above, a Children's Panel may have set contact frequency but it is not being properly facilitated by social work staff due to staffing shortages or some other factor. That is a matter of legitimate complaint under this procedure.

### **Complaints about the content of social work reports submitted to legal bodies.**

20. The Council may receive complaints about the accuracy of reports by professional social work staff submitted to Courts or other bodies such as Children's Panels, Parole Boards or Mental Health Tribunals. In such circumstances, the report is provided as a service to the court or tribunal, not as a service to the customer. The customer has no right to veto such reports or insist that content is subject to their approval but they can complain about the content of the report.

21. The Council should consider each complaint and it will usually be necessary to undertake a short screening process to establish whether the issue is appropriate for the CHP. This will depend on the nature and seriousness of alleged inaccuracy, and the status of the report in relation to the progress of court or other proceedings. In particular the Council should consider whether the complaint relates to accuracy of facts, to opinion or to the standard and quality of the work carried out by the professional concerned, and should take one of three actions accordingly:

21.1. Advise the customer that, due to the timescales involved, the issue should be raised when the report is presented in court / to the relevant body, as that is the appropriate forum for deciding on the matter.

21.2. Advise the customer that the complaint raises issues that will be considered under the CHP (such as issues of fact), and progress accordingly, or

21.3. Advise the customer that the complaint raises a mixture of issues that will be considered under the CHP and other issues that should be raised within the relevant forum when the report is submitted.

22. If you refuse to consider some or all issues as per 21.1 or 21.3 above and direct the customer to raise the matter within the legal process, you must still provide clear information about the reason for this decision, and signpost the customer to the SPSO for access to a review of this decision.

23. The Council should also consider whether the complaint relates to a breach of data protection legislation, in which case it must be processed accordingly. See **Part 1: Maintaining confidentiality and data protection.**

### **Campaigns.**

24. The introduction of a new policy or changes in service, such as the closure of a facility, may lead to a high volume of complaints being received. These should be handled under this procedure on an individual basis on their merits, addressing the issue of how that

particular customer is affected by the change. It may be appropriate to provide information about the process that led to the changes, or when the policy may next be reviewed.

25. Occasionally, however, such complaints are evidently part of an organised campaign. Indicators may be that all complaints have identical content or are on a 'form' letter or that all complainers are known to be members of a pressure group that has made separate representations through the Council's petitions or elected members.

26. The Council should not accept an unreasonable burden on its complaints processes produced by an organised campaign. Instead, the Council may either issue a single 'form' response or may ask the organisers to nominate a single person to make a single complaint on behalf of the group. In such circumstances it would be important to be clear that all the complaints being brought to the Council are identical, and setting out clearly what issues are being considered under the complaint. Any other additional concerns that individuals may have would need to be handled as new complaints.

### **Persons under investigation.**

27. The Council is likely to have a role in investigating the actions of individuals towards other, more vulnerable people, for example those suspected of child or adult abuse or Guardians and Powers of Attorney who are allegedly misusing their powers.

28. Those individuals are still customers as defined within this procedure and any complaint from them must be considered on its individual merits. For example, a complaint about an improper exercise of investigative procedures should be looked into as a complaint. Any response should take into account any confidentiality issues, and this should be explained to the customer.

29. However, if it is evident that the person is not complaining about the process or the actions of staff, but is complaining that they are under investigation, this should not be accepted as a complaint. Instead it should be explained to the customer that the Council has a statutory obligation to investigate such matters, and this is not conditional upon their agreement or approval. Their objection to the process is not considered to be a complaint, though they may be directed to seek appropriate legal advice to protect their rights.

### **Looked after and accommodated children / adults under local authority guardianship.**

30. The Council has a special duty of care to children in its care or adults for whom it exercises decision-making powers. Special care should be taken when investigating complaints made by or on behalf of those individuals.

31. Artificial barriers of confidentiality should not be imposed to prevent people with a relevant interest in the affairs of an incapacitated adult from complaining on their behalf.

32. Children who are looked after by the Local Authority may complain. They may have little in the way of a support network and may be estranged from their family. It may also be inappropriate for the family to represent the child's interests. Particular care, therefore, should be taken to ensure that the child's complaint is understood and, particularly for younger children, that the response is understood by them.

33. In both cases, the need for personal contact with the customer, and the possible involvement of advocacy services, should be actively considered. We must also always bear in mind our obligations under data protection information. See **Part 1: Maintaining confidentiality and data protection**.

**Allegations of fraud / criminality / professional malpractice or incompetence.**

34. Discretion is required where the complaint is so serious as to immediately merit investigation under disciplinary processes or referral to another agency.

35. If it is determined that the complaint falls into this category, you should be careful to follow the CHP and mindful of our obligations under data protection legislation. See **Part 1: Maintaining confidentiality and data protection**.

**Complaints brought by foster carers.**

36. Complaints brought by foster carers can relate to the support services they receive from the Council, the way our staff engage with them, or services a child in their care is or was receiving or has requested from us.

37. Any complaint brought by a foster carer on behalf of a foster child in the care, or formerly in their care, should be considered under this CHP. Where possible, the views of the child should also be taken into account.

38. Foster carers who are recruited and supported by us may bring complaints about these services. However, approval and de-registration of the carer by the Council may be considered through alternative appeal mechanisms. As noted under **Social work complaints and appeals**, these appeals must be handled in line with the CHP timescales, where possible, and end with signposting to the SPSO.

39. Complaints from foster carers supported by private agencies will not be addressed within this CHP if the complaint is wholly about their own circumstances and support rather than those of the child. Such complaints should be directed to the complaints process of the relevant agency.

40. An agency foster carer may still complain about the way our staff have interacted with them or about any element of service that they might reasonably expect to be provided by the Council for example invitations to meetings, provision of information about the child in their care or the manner and content of communications with the Council. This list is not exhaustive and such complaints should be carefully considered in terms of the role of the Council's staff, before directing them to pursue their complaint with their fostering agency.

41. Where a complaint cannot be considered in part or in whole by the Council, the customer must be given a clear explanation as to why this is, what (if any) parts of their complaint will be investigated and how they may refer the matter to the SPSO.

# **Part 3: The Complaints Handling Process**

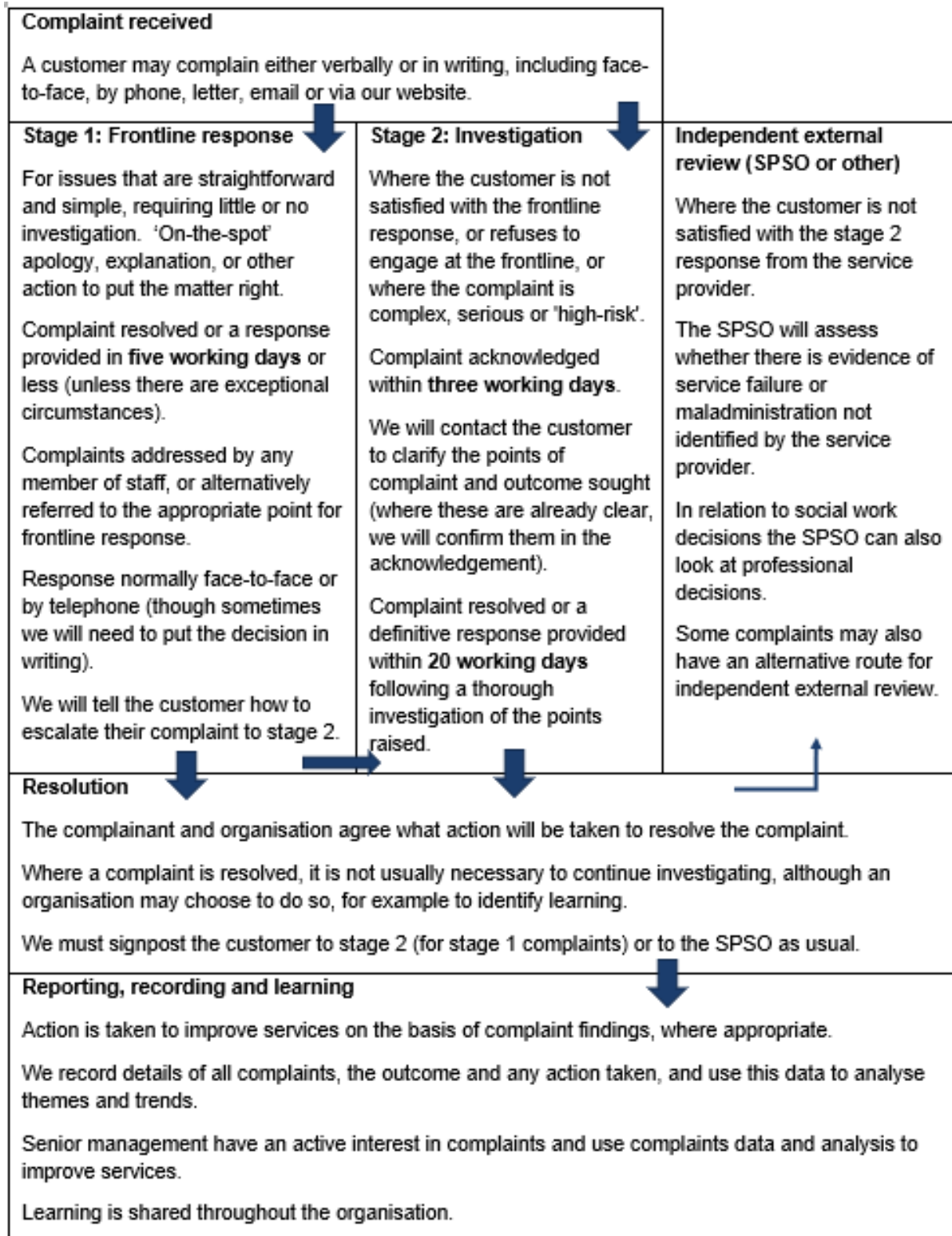
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## The complaints handling process

1. Our Complaints Handling Procedure (CHP) aims to provide a quick, simple and streamlined process for responding to complaints early and locally by capable, well-trained staff. Where possible, we will resolve the complaint to the customer's satisfaction. Where this is not possible, we will give the customer a clear and reasoned response to their complaint.



## Resolving the complaint

2. A complaint is **resolved** when both the Council and the customer agree what action (if any) will be taken to provide full and final resolution for the customer, without making a decision about whether the complaint is upheld or not upheld.
3. We will try to resolve complaints wherever possible, although we accept this will not be possible in all cases.
4. A complaint may be resolved at any point in the complaint handling process, including during the investigation stage. It is particularly important to try to resolve complaints where there is an ongoing relationship with the customer or where the complaint relates to an ongoing issue that may give rise to future complaints if the matter is not fully resolved.
5. It may be helpful to use alternative complaint resolution approaches when trying to resolve a complaint. See **Alternative complaint resolution approaches**.
6. Where a complaint is resolved, we do not normally need to continue looking into it or provide a response on all points of complaint. There must be a clear record of how the complaint was resolved, what action was agreed, and the customer's agreement to this as a final outcome. In some cases it may still be appropriate to continue looking into the issue, for example where there is evidence of a wider problem or potential for useful learning. We will use our professional judgment in deciding whether it is appropriate to continue looking into a complaint that is resolved.
7. In all cases, we must record the complaint outcome (resolved) and any action taken, and signpost the customer to stage 2 (for stage 1 complaints) or to the SPSO as usual (see **Signposting to the SPSO**).
8. If the customer and the Council are not able to agree a resolution, we must follow this CHP to provide a clear and reasoned response to each of the issues raised.

## What to do when you receive a complaint

9. Members of staff receiving a complaint should consider four key questions. This will help them to either respond to the complaint quickly (at stage 1) or determine whether the complaint is more suitable for stage 2:

### What exactly is the customer's complaint (or complaints)?

10. It is important to be clear about exactly what the customer is complaining about. We may need to ask the customer for more information and probe further to get a full understanding.
11. We will need to decide whether the issue can be defined as a complaint and whether there are circumstances that may limit our ability to respond to the complaint (such as the time limit for making complaints, confidentiality, anonymity or the need for consent). We should also consider whether the complaint is serious, high-risk or high-profile.
12. If the matter is not suitable for handling as a complaint, we will explain this to the customer (and signpost them to SPSO). There is detailed guidance on this step in **Part 2: When to use this procedure**.

13. In most cases, this step will be straightforward. If it is not, the complaint may need to be handled immediately at stage 2 (see **Stage 2: Investigation**).

### **What does the customer want to achieve by complaining?**

14. At the outset, we will clarify the outcome the customer wants. Of course, the customer may not be clear about this, and we may need to probe further to find out what they expect, and whether they can be satisfied.

### **Can I achieve this, or explain why not?**

15. If a staff member handling a complaint can achieve the expected outcome, for example by providing an on-the-spot apology or explain why they cannot achieve it, they should do so.

16. The customer may expect more than we can provide. If so, we will tell them as soon as possible.

17. Complaints which can be resolved or responded to quickly should be managed at stage 1 (see **Stage 1: Frontline response**).

### **If I cannot respond, who can help?**

18. If the complaint is simple and straightforward, but the staff member receiving the complaint cannot deal with it because, for example, they are unfamiliar with the issues or area of service involved, they should pass the complaint to someone who can respond quickly.

19. If it is not a simple and straightforward complaint that can realistically be closed within five working days (or ten, if an extension is appropriate), it should be handled immediately at stage 2. If the customer refuses to engage at stage 1, insisting that they want their complaint investigated, it should be handled immediately at stage 2. See **Stage 2: Investigation**.

## **Stage 1: Frontline response**

20. Frontline response aims to respond quickly (within five working days) to straightforward complaints that require little or no investigation.

21. Any member of staff may deal with complaints at this stage (including the staff member complained about, for example with an explanation or apology). The main principle is to respond to complaints at the earliest opportunity and as close to the point of service delivery as possible.

22. We may respond to the complaint by providing an on-the-spot apology where appropriate, or explaining why the issue occurred and, where possible, what will be done to stop this happening again. We may also explain that, as an organisation that values complaints, we may use the information given when we review service standards in the future. If we consider an apology is appropriate, we may wish to follow the **SPSO guidance on apology**.

23. **Part 2, Appendix 1** gives examples of the types of complaint we may consider at this stage, with suggestions on how to resolve them.

24. Complaints which are not suitable for frontline response should be identified early and handled immediately at stage 2: investigation.

### **Notifying staff members involved**

25. If the complaint is about the actions of another staff member, the complaint should be shared with them, where possible, before responding (although this should not prevent us responding to the complaint quickly, for example where it is clear that an apology is warranted).

### **Timelines**

26. Frontline response must be completed **within five working days**, although in practice we would often expect to respond to the complaint much sooner. 'Day one' is always the date of receipt of the complaint (or the next working day if the complaint is delivered by letter after 3pm when the day's post has already been received, stamped and allocated, or on a weekend or public holiday).

### **Extension to the timeline**

27. In exceptional circumstances, a short extension of time may be necessary due to unforeseen circumstances (such as the availability of a key staff member). Extensions must be agreed with an appropriate manager. We will tell the customer about the reasons for the extension, and when they can expect a response. The maximum extension that can be granted is five working days (that is, **no more than ten working days** in total from the date of receipt).

28. If a complaint will take more than five working days to look into, it should be handled at stage 2 immediately. The only exception to this is where the complaint is simple and could normally be handled within five working days, but it is not possible to begin immediately (for example, due to the absence of a key staff member). In such cases, the complaint may still be handled at stage 1 if it is clear that it can be handled within the extended timeframe of up to ten working days.

29. If a complaint has not been closed within ten working days, it should be escalated to stage 2 for a final response.

30. **Appendix 1** provides further information on timelines.

### **Closing the complaint at the frontline response stage**

31. If we convey the decision face-to-face or on the telephone, we are not required to write to the customer as well (although we may choose to). We must:

- Tell the customer the outcome of the complaint (whether it is resolved, upheld, partially upheld or not upheld).
- Explain the reasons for our decision (or the agreed action taken to resolve the complaint, or the agreed action taken to resolve the complaint (see **Resolving the complaint**)).

- Explain that the customer can escalate the complaint to stage 2 if they remain dissatisfied and how to do so (we should not signpost to the SPSO until the customer has completed stage 2).

32. We will keep a full and accurate record of the decision given to the customer. If we are not able to contact the customer by phone, or speak to them in person, we will provide a written response to the complaint where an email or postal address is provided, covering the points above.

33. If the complaint is about the actions of a particular staff member / s, we will share with them any part of the complaint response which relates to them, (unless there are compelling reasons not to).

34. The complaint should then be closed and the complaints system updated accordingly.

35. At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. See **Part 4: Learning from complaints**.

## Stage 2: Investigation

36. Not all complaints are suitable for frontline response and not all complaints will be satisfactorily addressed at that stage. Stage 2 is appropriate where:

- The customer is dissatisfied with the frontline response or refuses to engage at the frontline stage, insisting they wish their complaint to be investigated. Unless exceptional circumstances apply, the customer must escalate the complaint within six months of when they first knew of the problem or within two months of the stage 1 response, whichever is later (see **Part 2: Time limits for making a complaint**).
- The complaint is not simple and straightforward (for example where the customer has raised a number of issues, or where information from several sources is needed before we can establish what happened and / or what should have happened).
- The complaint relates to serious, high-risk or high-profile issues (see **Part 2: Serious, high-risk or high-profile complaints**).

37. An investigation aims to explore the complaint in more depth and establish all the relevant facts. The aim is to resolve the complaint where possible, or to give the customer a full, objective and proportionate response that represents our final position. Wherever possible, complaints should be investigated by someone not involved in the complaint (for example, a line manager or a manager from a different area).

38. Details of the complaint must be recorded on the complaints system. Where appropriate, this will be done as a continuation of frontline response. If the investigation stage follows a frontline response, the officer responsible for the investigation should have access to all case notes and associated information.

39. The beginning of stage 2 is a good time to consider whether complaint resolution approaches other than investigation may be helpful (see **Alternative complaint resolution approaches**).

## **Acknowledging the complaint**

40. Complaints must be acknowledged within three working days of receipt at stage 2.

41. We must issue the acknowledgement in a format which is accessible to the customer, taking into account their preferred method of contact.

42. Where the points of complaint and expected outcomes are clear from the complaint, we must set these out in the acknowledgement and ask the customer to get in touch with us immediately if they disagree (See **Agreeing the points of complaint and outcome sought**).

43. Where the points of complaint and expected outcomes are not clear, we must tell the customer we will contact them to discuss this.

## **Agreeing the points of complaint and outcome sought**

44. It is important to be clear from the start of stage 2 about the points of complaint to be investigated and what outcome the customer is seeking. We may also need to manage the customer's expectations about the scope of our investigation.

45. Where the points of complaint and outcome sought are clear, we can confirm our understanding of these with the customer when acknowledging the complaint (see **Acknowledging the complaint**).

46. Where the points of complaint and outcome sought are not clear, we must contact the customer to confirm these. We will normally need to speak to the customer (by phone or face-to-face) to do this effectively. In some cases it may be possible to clarify complaints in writing. The key point is that we need to be sure we and the customer have a shared understanding of the complaint. When contacting the customer we will be respectful of their stated preferred method of contact. We should keep a clear record of any discussion with the customer.

47. In all cases, we must have a clear shared understanding of:

- **What are the points of complaint to be investigated?**

- While the complaint may appear to be clear, agreeing the points of complaint at the outset ensures there is a shared understanding and avoids the complaint changing or confusion arising at a later stage. The points of complaint should be specific enough to direct the investigation, but broad enough to include any multiple and specific points of concern about the same issue.
- We will make every effort to agree the points of complaint with the customer (alternative complaint resolution approaches may be helpful at this stage). In very rare cases, it may not be possible to agree the points of complaint (for example, if the customer insists on an unreasonably large number of complaints being separately investigated, or on framing their complaint in an abusive way). We will manage any such cases in accordance with our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants, bearing in mind that we should continue to investigate the complaint (as we understand it) wherever possible.

- **Is there anything we can't consider under the CHP?**
  - We must explain if there are any points that are not suitable for handling under the CHP (see **Part 2: What to do if the CHP does not apply**).
- **What outcome does the customer want to achieve by complaining?**
  - Asking what outcome the customer is seeking helps direct the investigation and enables us to focus on resolving the complaint where possible.
- **Are the customer's expectations realistic and achievable?**
  - It may be that the customer expects more than we can provide, or has unrealistic expectations about the scope of the investigation. If so, we should make this clear to the customer as soon as possible.

### **Notifying staff members involved**

48. If the complaint is about the actions of a particular staff member / s, we will notify the staff member/s involved (including where the staff member is not named, but can be identified from the complaint). We will:

- Share the complaint information with the staff member / s and their line manager (unless there are compelling reasons not to).
- Advise them how the complaint will be handled, how they will be kept updated and how we will share the complaint response with them.
- Discuss their willingness to engage with alternative complaint resolution approaches (where applicable).
- Signpost the staff member / s to a contact person who can provide support and information on what to expect from the complaint process (this must not be the person investigating or signing off the complaint response).

49. If it is likely that internal disciplinary processes may be involved, the requirements of that process should also be met. See also **Part 2: Complaints and disciplinary or whistleblowing processes**.

### **Investigating the complaint**

50. It is important to plan the investigation before beginning. The staff member investigating the complaint should consider what information they have and what they need about:

- What happened? (this could include, for example, records of phone calls or meetings, work requests, recollections of staff members or internal emails).
- What should have happened? (this should include any relevant policies or procedures that apply).
- Is there a difference between what happened and what should have happened, and is the Council responsible?

51. In some cases, information may not be readily available. We will balance the need for the information against the resources required to obtain it, taking into account the seriousness of the issue (for example, it may be appropriate to contact a former employee, if possible, where they hold key information about a serious complaint).

52. If we need to share information within or outwith the organisation, we will be mindful of our obligations under data protection legislation. See **Part 1: Maintaining confidentiality and data protection**.

53. The SPSO has resources for conducting investigations, including:

- [Investigation plan template](#).
- [Decision-making tool for complaint investigators](#).

### **Alternative complaint resolution approaches**

54. Some complex complaints, or complaints where customers and other interested parties have become entrenched in their position, may require a different approach to resolving the matter. Where we think it is appropriate, we may use alternative complaint resolution approaches such as complaint resolution discussions, mediation or conciliation to try to resolve the matter and to reduce the risk of the complaint escalating further. If mediation is attempted, a suitably trained and qualified mediator should be used. Alternative complaint resolution approaches may help both parties to understand what has caused the complaint, and so are more likely to lead to mutually satisfactory solutions.

55. Alternative complaint resolution approaches may be used to resolve the complaint entirely, or to support one part of the process, such as understanding the complaint, or exploring the customer's desired outcome.

56. The SPSO has guidance on alternative complaint resolution approaches.

57. If the Council and the customer (and any staff members involved) agree to using alternative complaint resolution approaches, it is likely that an extension to the timeline will need to be agreed. This should not discourage the use of these approaches.

### **Meeting with the customer during the investigation**

58. To effectively investigate the complaint, it may be necessary to arrange a meeting with the customer. Where a meeting takes place, we will always be mindful of the requirement to investigate complaints (including holding any meetings) within 20 working days wherever possible. Where there are difficulties arranging a meeting, this may provide grounds for extending the timeframe.

59. As a matter of good practice, a written record of the meeting should be completed and provided to the customer. Alternatively, and by agreement with the person making the complaint, we may provide a record of the meeting in another format. We will notify the person making the complaint of the timescale within which we expect to provide the record of the meeting.

### **Timelines**

60. The following deadlines are appropriate to cases at the investigation stage (counting day one as the day of receipt, or the next working day if the complaint was received on a weekend or public holiday):

- Complaints must be acknowledged within three working days.



- A full response to the complaint should be provided as soon as possible but not later than 20 working days from the time the complaint was received for investigation.

### **Extension to the timeline**

61. Not all investigations will be able to meet this deadline. For example, some complaints are so complex that they require careful consideration and detailed investigation beyond the 20 working day timeline. It is important to be realistic and clear with the customer about timeframes, and to advise them early if we think it will not be possible to meet the 20 day timeframe, and why. We should bear in mind that extended delays may have a detrimental effect on the customer.

62. Any extension must be approved by an appropriate manager. We will keep the customer and any member / s of staff complained about updated on the reason for the delay and give them a revised timescale for completion. We will contact the customer and any member/s of staff complained about at least once every 20 working days to update them on the progress of the investigation.

63. The reasons for an extension might include the following:

- Essential accounts or statements, crucial to establishing the circumstances of the case, are needed from staff, customers or others but the person is not available because of long-term sickness or leave.
- We cannot obtain further essential information within normal timescales.
- The customer has agreed to alternative complaint resolution approaches as a potential route for resolution.
- The complaint is remitted by agreement to an external investigator.

These are only a few examples, and we will judge the matter in relation to each complaint. However, an extension would be the exception.

64. **Appendix 1** provides further information on timelines.

### **Closing the complaint at the investigation stage**

65. The response to the complaint should be in writing (or by the customer's preferred method of contact) and must be signed off by the relevant Head of Service or an officer authorised by the Head of Service.

66. We will tell the customer the outcome of the complaint (whether it is resolved, upheld, partially upheld or not upheld). The quality of the complaint response is very important and in terms of good practice should:

- Be clear and easy to understand, written in a way that is person-centred and non-confrontational.
- Avoid technical terms, but where these must be used, an explanation of the term should be provided.
- Address all the issues raised and demonstrate that each element has been fully and fairly investigated.
- Include an apology where things have gone wrong (this is different to an expression of empathy: see [the SPSO's guidance on apology](#)).

- Highlight any area of disagreement and explain why no further action can be taken.
- Indicate that a named member of staff is available to clarify any aspect of the letter.
- Indicate that if they are not satisfied with the outcome of the local process, they may seek a review by the SPSO (see **Signposting to the SPSO**).

67. Where a complaint has been resolved, the response does not need to provide a decision on all points of complaint, but should instead confirm the resolution agreed. See **Resolving the complaint**.

68. If the complaint is about the actions of a particular staff member / s, we will share with them any part of the complaint response which relates to them, (unless there are compelling reasons not to).

69. We will record the decision, and details of how it was communicated to the customer, on the complaints system.

70. The SPSO has guidance on responding to a complaint:

- [Template decision letter](#).
- [Apology guidance](#).

71. At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. See **Part 4: Learning from complaints**.

## **Signposting to the SPSO**

72. Once the investigation stage has been completed, the customer has the right to approach the SPSO if they remain dissatisfied. We must make clear to the customer:

- Their right to ask the SPSO to consider the complaint.
- The time limit for doing so.
- How to contact the SPSO.

73. The SPSO considers complaints from people who remain dissatisfied at the conclusion of our complaints procedure. The SPSO looks at issues such as service failure and maladministration (administrative fault), and the way we have handled the complaint. There are some subject areas that are outwith the SPSO's jurisdiction, but it is the SPSO's role to determine whether an individual complaint is one that they can consider (and to what extent). All investigation responses must signpost to the SPSO.

74. The SPSO recommends that we use the wording below to inform customers of their right to ask the SPSO to consider the complaint. This information should only be included on the Council's final response to the complaint.

### **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 local authorities. The SPSO is

an independent organisation that investigates complaints. It is not an advocacy or support service (but there are other organisations who can help you with advocacy or support).

If you remain dissatisfied when you have had a final response from the Council, you can ask the SPSO to look at your complaint. You can ask the SPSO to look at your complaint if:

- You have gone all the way through the Council's Complaints Handling Procedure.
- It is less than 12 months after you became aware of the matter you want to complain about.
- The matter has not been (and is not being) considered in court.

The SPSO will ask you to complete a complaint form and provide a copy of this letter (our final response to your complaint). You can do this online at <https://www.spsso.org.uk/complain/form/start/>. or call them on Freephone 08003777330.

You may wish to get independent support or advocacy to help you progress your complaint. Organisations who may be able to assist you are:

- Citizens Advice Bureau.
- Scottish Independent Advocacy Alliance.

The SPSO's contact details are:

SPSO, Bridgeside House, 99 McDonald Road, Edinburgh, EH7 4NS.

If you would like to visit in person, you must make an appointment first.

Their freepost address is: FREEPOST SPSO.

Freephone: 08003777330.

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).

### **Factoring complaints and complaints from shared owners**

75. The SPSO does not normally look at complaints about our factoring service or complaints from shared owners. These complaints can be considered by the First Tier Tribunal for Scotland (Housing and Property Chamber). Their contact details are on their website: <https://www.housingandpropertychamber.scot/>.

76. Where the complaint relates to social housing, we should still signpost these complaints to the SPSO, as there may be some aspects the SPSO can consider (for example, if the customer is dissatisfied with how we have handled their complaint). However, we should also notify the customer of their right to approach the Tribunal if they are dissatisfied with our response to these kinds of complaint.

**Post-closure contact**

77. If a customer contacts us for clarification when they have received our final response, we may have further discussion with the customer to clarify our response and answer their questions. However, if the customer is dissatisfied with our response or does not accept our findings, we will explain that we have already given them our final response on the matter and signpost them to the SPSO.

## Appendix 1 – Timelines

### General.

1. References to timelines throughout the CHP relate to working days. We do not count non-working days, for example weekends, public holidays and days of industrial action where our service has been interrupted.
2. We do not count school holidays as non-working days. Complaints received during school holidays should follow the same timelines as set out for frontline response and investigation, unless there are special circumstances which would extend these timelines.
3. Complaints by letter handed in after 3pm, when post has been sorted, stamped and allocated to the relevant service, will be treated as being received on the next working day.

### Timelines at frontline response (stage 1).

4. We will aim to achieve frontline response within five working days. The date of receipt is day one, and the response should be provided (or the complaint escalated) on day five, at the latest.
5. If we have extended the timeline at the frontline response stage in line with the CHP, the response should be provided (or the complaint escalated) on day ten, at the latest.

### Transferring cases from frontline response to investigation.

6. If the customer wants to escalate the complaint to the investigation stage, the case must be passed for investigation without delay. In practice this will mean on the same day that the customer is told this will happen.

### Timelines at investigation (stage 2).

7. For complaints at the investigation stage, day one is:

- The day the case is transferred from the frontline stage to the investigation stage
- The day the customer asks for an investigation or expresses dissatisfaction after a decision at the frontline response stage; or
- The date we receive the complaint, if it is handled immediately at stage 2.

8. We must acknowledge the complaint within three working days of receipt at stage 2 i.e. by day three.

9. We should respond in full to the complaint by day 20, at the latest. We have 20 working days to investigate the complaint, regardless of any time taken to consider it at the frontline response stage.

10. Exceptionally, we may need longer than the 20 working day limit for a full response. If so, we will explain the reasons to the customer, and update them (and any staff involved) at least once every 20 working days.

### Frequently asked questions.

11. What happens if an extension is granted at stage 1, but then the complaint is escalated?

11.1. The extension at stage 1 does not affect the timeframes at stage 2. The stage 2 timeframes apply from the day the complaint was escalated (we have 20 working days from this date, unless an extension is granted).

12. What happens if we cannot meet an extended timeframe?

12.1 If we cannot meet the extended timeframe at stage 1, the complaint should be escalated to stage 2. The maximum timeframe allowed for a stage 1 response is ten working days.

12.2. If we cannot meet the extended timeframe at stage 2, a further extension may be approved by an appropriate manager if there are clear reasons for this. This should only occur in exceptional circumstances (the original extension should allow sufficient time to realistically investigate and respond to the complaint). Where a further extension is agreed, we should explain the situation to the customer and give them a revised timeframe for completion. We must update the customer and any staff involved in the investigation at least once every 20 working days.

13. What happens when a customer asks for stage 2 consideration a long time after receiving a frontline response?

13.1 Unless exceptional circumstances exist, customers should bring a stage 2 complaint within six months of learning about the problem, or within two months of receiving the stage 1 response (whichever is latest). See **Part 2: Time limits for making a complaint.**

## Appendix 2 – The complaint handling process (flowchart for staff)

<p>A customer may complain verbally or in writing, including face-to-face, by phone, letter or email.</p> <p>Your first consideration is whether the complaint should be dealt with at stage 1 (frontline response) or stage 2 (investigation).</p>	
↓	↓
<p><b>Stage 1: Frontline response</b></p> <p>Always try to respond quickly, wherever we can</p>	<p><b>Stage 2: Investigation</b></p> <p>Investigate where:</p> <ul style="list-style-type: none"> <li>• The customer is dissatisfied with the frontline response or refuses to engage with attempts to resolve the complaint at stage 1</li> <li>• It is clear that the complaint requires investigation from the outset</li> </ul>
↓	↓
<p>Record the complaint and notify any staff complained about</p>	<p>Record the complaint and notify any staff complained about</p> <p>Acknowledge the complaint within <b>three working days</b></p>
↓	↓
	<p>Contact the complainant to agree:</p> <ul style="list-style-type: none"> <li>• Points of complaint</li> <li>• Outcome sought</li> <li>• Manage expectations (where required)</li> </ul> <p><i>(these can be confirmed in the acknowledgement where the complaint is straightforward)</i></p>
↓	↓
<p>Respond to the complaint within <b>five working days</b> unless there are exceptional circumstances</p>	<p>Respond to the complaint as soon as possible, but within <b>20 working days</b> unless there is a clear reason for extending the timescale</p>
↓	↓
<p>Is the customer satisfied?</p> <p>You must always tell the customer how to escalate to stage 2</p>	<p>Communicate the decision, normally in writing</p> <p>Signpost the customer to SPSO and advise of time limits</p>
↓	↓
<p>(Yes) Record outcome and learning, advise complaints officer and close complaint.</p> <p><i>(No) -&gt; to Stage 2: Investigation</i></p>	<p>Record outcome and learning, advise complaints officer and close complaint</p>
↓	↓
<p>Follow up on agreed actions flowing from the complaint</p> <p>Share any learning points</p>	

# 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.
- 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 Council'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 Council 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 Council.
- Complaints information is used to improve services, and this is evident from regular publications.

4. **Chief Executive:** The Chief Executive 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 CHP, with a robust investigation process that demonstrates how we learn from the complaints we receive. The Chief Executive 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 Chief Executive of the quality of complaints performance.

5. The Chief Executive is also responsible for ensuring that there are governance and accountability arrangements in place in relation to complaints about contractors / ALEOs. This includes:

- Ensuring performance monitoring for complaints is a feature of the service/management agreements between the Council and contractors / ALEOs
- Setting clear objectives in relation to this complaints procedure and putting appropriate monitoring systems in place to provide the Council with an overview of how the contractor / ALEO is meeting its objectives

6. **Chief Social Work Officer (CSWO):** The CSWO has an important role in the consideration of social work complaints information and, on occasion, the content of

individual complaints. Their role in overseeing the effective governance of social work services and monitoring these arrangements includes complaints about social work services. The CSWO should also take appropriate account of complaints information in fulfilling their obligations to promote continuous improvement and best practice. Furthermore, the CSWO or their delegated officers may have specific interest in complaints relating to individuals for whom they have decision-making responsibilities.

**7. Executive Directors and Members of Senior Management Team (SMT):** On the Chief Executive's behalf, Executive Directors and Members of the Council's SMT may be responsible for:

- Managing complaints and the way we learn from them.
- Overseeing the implementation of actions required as a result of a complaint.
- Investigating complaints.
- In the case of Executive Directors, deputising for the Chief Executive on occasion.

8. They may also be responsible for preparing and signing off decisions for customers, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint. However, Executive Directors and members of SMT may decide to delegate some elements of complaints handling (such as investigations and the drafting of response letters) to other senior staff. Where this happens, Executive Directors and members of SMT should retain ownership and accountability for the management and reporting of complaints.

**9. Heads of Service:** Heads of 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 customers, so they should be satisfied that the investigation is complete, and their response addresses all aspects of the complaint.

**10. Complaints Officer:** The Complaints Officer's responsibilities include:

- Co-ordinating the Complaints Officers' Group (COG), which includes the Service Complaints Officers and their Deputies.
- Providing advice to staff and the COG on the CHP.
- Ensuring that training is available on the CHP for members of the COG and for Complaints Investigators.
- Representing the Council on the Network of Local Government Complaints Handlers (NLGCH).
- Reporting performance statistics, in line with the complaints performance indicators published by the SPSO, to the NLGCH, the Council's SMT and the COG.
- Producing reports to the Council's Corporate Management Team capturing the lessons learnt from the handling of complaints.
- Producing the Council's Annual Complaint's Handling Report.

**11. Service Complaints Officers:** The Chief Executive's Service and each Directorate have at least one nominated service complaints officer and a deputy. The complaints officers' responsibilities include:

- Recording complaints.
- Carrying out Stage 2 investigations (noting that other members of staff within services can be asked to carry out a Stage 2 investigation).
- Drafting decision letters to customers.
- Offering advice on the CHP to other staff in their service.

The nominated complaints officers for each Service are as follows:

- Chief Executive's Service – Business Improvement Manager.
- Corporate Services – Information Governance Officer.
- Development and Infrastructure – Business Support Manager (deals with all complaints for D&I except complaints made against Orkney Ferries).
- Development and Infrastructure – Ferry Operations Manager (deals with complaints only against Orkney Ferries).
- Education, Leisure and Housing – Service Manager (Resources) and Team Leader (Policy and Planning).
- Orkney Health and Care – Chief Social Work Officer.

12. **Complaints investigator:** The complaints investigator is responsible and accountable for the management of the investigation. They may work in a service delivery team or as part of a centralised customer service team, and will be involved in the investigation and in coordinating all aspects of the response to the customer. 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 organisation.

13. **The HR / 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.

14. **The Council's SPSO liaison officer:** Our SPSO liaison officer is the Council's Head of Legal Services. The SPSO liaison officer's role includes 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**

15. Complaints provide valuable customer feedback. One of the aims of the CHP is to identify opportunities to improve services across the Council. 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.

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

## Recording complaints

17. 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 customer'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.
- The date when the customer feedback form was issued.

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

19. Individual complaint files will be stored in line with our document retention policy.

## Learning from complaints

20. 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.
- Systematically review complaints performance reports to improve service delivery.

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

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

- The action needed to improve services should 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 and report accordingly to the service complaints officer.

- Where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved.
- Any learning points should be shared with relevant staff.

23. SPSO has guidance on learning from complaints.

24. 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.

### **Reporting of complaints**

25. 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.

26. We will report at least quarterly to senior management 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).

### **Publicising complaints information**

27. We publish on an annual basis information on complaints outcomes and actions taken to improve services.

28. 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 our customers that we value their complaints.

29. 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 report will be presented to the Council's Monitoring and Audit Committee. It includes:

- Performance statistics, in line with the complaints performance indicators published by the SPSO.
- Complaint trends and the actions that have been or will be taken to improve services as a result.

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



# **Complaints Handling Procedure**

## **Customer-facing Guide**

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Orkney Islands Council is committed to providing high-quality customer services.

We value complaints and use information from them to help us improve our services.

1. If something goes wrong or you are dissatisfied with our services, please tell us. This leaflet describes our complaints procedure and how to make a complaint. It also tells you about how we will handle your complaint and what you can expect from us.

## What is a complaint?

2. We regard a complaint as any expression of dissatisfaction about our action or lack of action, or about the standard of service provided by us or on our behalf.

## What can I complain about?

3. You can complain about things like:

- Failure or refusal to provide a service.
- Inadequate quality or standard of service, or an unreasonable delay in providing a service.
- Dissatisfaction with one of our policies or its impact on the individual.
- Failure to properly apply law, procedure or guidance when delivering services.
- Failure to follow the appropriate administrative process.
- Conduct, treatment by or attitude of a member of staff or contractor (**except** where there are arrangements in place for the contractor to handle the complaint themselves).
- Disagreement with a decision, (**except** where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector).

4. Your complaint may involve more than one organisation or service or be about someone working on our behalf.

## What can't I complain about?

5. There are some things we can't deal with through our complaints handling procedure. These include:

- A routine first-time request for a service.
- A first-time report of a fault (for example, potholes or street lighting).
- A request for compensation only.
- Issues that are in court or have already been heard by a court or a tribunal (if you decide to take legal action, you should let us know as the complaint cannot then be considered under this process).
- Disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process followed throughout the sector – such as council tax, planning (including internal appeal to Local Review Body or external appeal to Scottish Ministers), or a parking ticket appeal.

- Disagreement with decisions or conditions that are based upon social work recommendations, but determined by a court or other statutory body, for example decisions made by a children's panel, parole board or mental health tribunal.
- A request for information under the Data Protection or Freedom of Information (Scotland) Acts.
- A grievance by a staff member or a grievance relating to employment or staff recruitment.
- A concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern).
- A concern about a child or an adult's safety.
- An attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision.
- Abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our Policy on Unacceptable Actions and Challenging Behaviour by Service Users and Complainants.
- A concern about the actions or service of a different organisation, where we have no involvement in the issue (**except** where the other organisation is delivering services on our behalf).

6. If other procedures or rights of appeal can help you resolve your concerns, we will give information and advice to help you.

## Who can complain?

7. Anyone who receives, requests or is directly affected by our services can make a complaint to us. This includes the representative of someone who is dissatisfied with our service (for example, a relative, friend, advocate or adviser). If you are making a complaint on someone else's behalf, you will normally need their written consent. Please also read the section on **Getting help to make your complaint** below.

## How do I complain?

8. You can complain in person at any of our offices, by phone, in writing, by email or online via our Customer Services Platform.

9. It is easier for us to address complaints if you make them quickly and directly to the service concerned. Please talk to a member of our staff at the service you are complaining about, so then they can try to resolve the issue.

10. When complaining, please tell us:

- Your full name and contact details.
- As much as you can about the complaint.
- What has gone wrong.
- What outcome you are seeking.

## Our contact details

Address: Orkney Islands Council, Council Offices, School Place, Kirkwall, Orkney, KW15 1NY.

Telephone: 01856873535.

Website: <https://www.orkney.gov.uk/feedback>.

## How long do I have to make a complaint?

11. Normally, you must make your complaint within six months of:

- The event you want to complain about; or
- Finding out that you have a reason to complain.

12. In exceptional circumstances, we may be able to accept a complaint after the time limit. If you feel that the time limit should not apply to your complaint, please tell us why.

## What happens when I have complained?

13. We will always tell you who is dealing with your complaint. Our complaints procedure has two stages.

### Stage 1: Frontline response

14. We aim to respond to complaints quickly (where possible, when you first tell us about the issue). This could mean an on-the-spot apology and explanation if something has clearly gone wrong, or immediate action to resolve the problem.

15. We will give you our decision at stage 1 in five working days or less, unless there are exceptional circumstances. Please note that a complaint delivered by letter after 3pm when the post has already been received, stamped and allocated to the service, will be held to have been received on the morning of the following day for the purposes of calculation of timescales for responding.

16. If you are not satisfied with the response we give at this stage, we will tell you what you can do next. If you choose to, you can take your complaint to stage 2. You must normally ask us to consider your complaint at stage 2 either:

- Within six months of the event you want to complain about or finding out that you have a reason to complain; or
- Within two months of receiving your stage 1 response (if this is later).

17. In exceptional circumstances, we may be able to accept a stage 2 complaint after the time limit. If you feel that the time limit should not apply to your complaint, please tell us why.

### Stage 2: Investigation

18. Stage 2 deals with two types of complaint: those that have not been resolved at stage 1 and those that clearly require investigation, and so are handled directly at this stage. If

you do not wish your complaint to be handled at stage 1, you can ask us to handle it at stage 2 instead.

19. When using stage 2:

- We will acknowledge receipt of your complaint within three working days. If a complaint is delivered by letter after 3pm when post has already been received, stamped and allocated to the service, receipt will be acknowledged within three working days of the day after the complaint was received.
- We will confirm our understanding of the complaint we will investigate and what outcome you are looking for.
- We will try to resolve your complaint where we can (in some cases we may suggest using an alternative complaint resolution approach, such as mediation); and
- Where we cannot resolve your complaint, we will give you a full response as soon as possible, normally within 20 working days.

20. If our investigation will take longer than 20 working days, we will tell you. We will tell you our revised time limits and keep you updated on progress.

## What if I'm still dissatisfied?

21. After we have given you our final decision, if you are still dissatisfied with our decision or the way we dealt with your complaint, you can ask the Scottish Public Services Ombudsman (SPSO) to look at it.

The SPSO are an independent organisation that investigates complaints. They are not an advocacy or support service (but there are other organisations who can help you with advocacy or support).

You can ask the SPSO to look at your complaint if:

- You have gone all the way through the Council's complaints handling procedure.
- It is less than 12 months after you became aware of the matter you want to complain about; and
- The matter has not been (and is not being) considered in court.

The SPSO will ask you to complete a complaint form and provide a copy of our final response to your complaint. You can do this online at <http://www.spsso.org.uk/complain/form> or call them on Freephone 08003777330.

You may wish to get independent support or advocacy to help you progress your complaint. See the section on **Getting help to make your complaint** below.

The SPSO's contact details are:

SPSO, Bridgeside House, 99 McDonald Road, Edinburgh, EH7 4NS.

If you would like to visit in person, you must make an appointment first.

Their freepost address is: FREEPOST SPSO

Freephone: 08003777330.

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).

22. There are some complaints that have an alternative route for independent review. We will tell you how to seek independent review when we give you our final response on your complaint.

## Care complaints

23. If your complaint relates to a care service we provide, you can choose whether to complain to us or the Care Inspectorate. You can find out more about their complaints procedure, or make a complaint, by contacting them.

The Care Inspectorate has several offices around Scotland. Please refer to: <http://www.scswis.com/>.

## Getting help to make your complaint

24. We understand that you may be unable or reluctant to make a complaint yourself. We accept complaints from the representative of a person who is dissatisfied with our service. We can take complaints from a friend, relative, or an advocate, if you have given them your consent to complain for you.

25. You can find out about advocates in your area by contacting the Scottish Independent Advocacy Alliance:

Scottish Independent Advocacy Alliance.

Telephone: 01315109410.

Website: <http://www.siaa.org.uk>.

26. You can find out about advisers in your area through Citizens Advice Scotland:

Citizens Advice Scotland.

Website: <http://www.cas.org.uk>.

You can also check your phone book for your local citizens advice bureau.

27. We are committed to making our service easy to use for all members of the community. In line with our statutory equalities duties, we will always ensure that reasonable adjustments are made to help you access and use our services. If you have trouble putting your complaint in writing, or want this information in another language or format, such as large font, or Braille, please tell us in person or contact us using the details below.

## **Contact details for queries about this guide**

Address: Orkney Islands Council, Council Offices, School Place, Kirkwall, Orkney, KW15 1NY.

Telephone: 01856873535.

Website: <https://www.orkney.gov.uk/feedback>.

## **How we will use your information**

28. We will use the information that you provide us so that we can look into your complaint and attempt to resolve it. More information about how the Council uses personal information and your rights is available on the website here:

<https://www.orkney.gov.uk/Online-Services/privacy.htm>.

## Quick guide to our complaints procedure

### Complaints procedure

You can make your complaint in person, by phone, by email or in writing.

We have a **two-stage complaints procedure**. We will always try to deal with your complaint quickly. But if it is clear that the matter will need investigation, we will tell you and keep you updated on our progress.

*If your complaint relates to a care service you can choose to complain to us or to the Care Inspectorate.*

### Stage 1: Frontline response

We will always try to respond to your complaint quickly, within **five working days** if we can.

If you are dissatisfied with our response, you can ask us to consider your complaint at stage 2.

### Stage 2: Investigation

We will look at your complaint at this stage if you are dissatisfied with our response at stage 1. We also look at some complaints immediately at this stage, if it is clear that they need investigation.

We will acknowledge your complaint within **three working days**.

We will confirm the points of complaint to be investigated and what you want to achieve.

We will investigate the complaint and give you our decision as soon as possible. This will be after no more than **20 working days** *unless* there is clearly a good reason for needing more time.

### Scottish Public Services Ombudsman

If, after receiving our final decision on your complaint, you remain dissatisfied with our decision or the way we have handled your complaint, you can ask the SPSO to consider it.

There are some complaints that have an alternative route for independent review. We will tell you how to seek independent review when we give you our final response on your complaint.

We will tell you how to do this when we send you our final decision.