



Northern Ireland

Public Services

Ombudsman

Investigation Report

Investigation of a complaint against Queen's University Belfast

NIPSO Reference: 202001191

The Northern Ireland Public Services Ombudsman

33 Wellington Place

BELFAST

BT1 6HN

Tel: 028 9023 3821

Email: nipso@nipso.org.uk

Web: www.nipso.org.uk



@NIPSO_Comms

The Role of the Ombudsman

The Northern Ireland Public Services Ombudsman (NIPSO) provides a free, independent and impartial service for investigating complaints about public service providers in Northern Ireland.

The role of the Ombudsman is set out in the Public Services Ombudsman Act (Northern Ireland) 2016 (the 2016 Act). The Ombudsman can normally only accept a complaint after the complaints process of the public service provider has been exhausted.

The Ombudsman may investigate complaints about maladministration on the part of listed authorities, and on the merits of a decision taken by health and social care bodies, general health care providers and independent providers of health and social care. The purpose of an investigation is to ascertain if the matters alleged in the complaint properly warrant investigation and are in substance true.

Maladministration is not defined in the legislation, but is generally taken to include decisions made following improper consideration, action or inaction; delay; failure to follow procedures or the law; misleading or inaccurate statements; bias; or inadequate record keeping.

The Ombudsman must also consider whether maladministration has resulted in an injustice. Injustice is also not defined in legislation but can include upset, inconvenience, or frustration. A remedy may be recommended where injustice is found as a consequence of the failings identified in a report.

Reporting in the Public Interest

This report is published pursuant to section 44 of the 2016 Act which allows the Ombudsman to publish an investigation report when it is in the public interest to do so.

The Ombudsman has taken into account the interests of the person aggrieved and other persons prior to publishing this report.

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Case Reference: 202001191

Listed Authority: Queen's University Belfast

SUMMARY

I received a complaint about the actions of Queen's University Belfast (QUB) regarding its investigation into an allegation the complainant raised against another student.

The investigation examined the details of the complaint, QUB's response, and relevant guidance.

The investigation established QUB failed to provide the complainant with sufficient clarity regarding her options for submitting evidence to support her complaint. It also established QUB failed to apply a consistent approach to evidence gathering during the investigation. However, the investigation further established QUB's communication of the outcome of its investigation was in line with relevant standards.

The failures identified caused the complainant to sustain the injustice of uncertainty, frustration and anxiety, as well as loss of opportunity. They also caused the complainant to take the time and effort to bring this complaint to my Office.

I recommended that QUB provides the complainant with a written apology within one month of the date of the final report. I made three further recommendations for QUB to address to instigate service improvement and to prevent future reoccurrence of the failings identified. I also asked QUB to provide my Office with an action plan regarding steps taken on foot of these recommendations within six months of the date of the final report.

THE COMPLAINT

1. This complaint was about the actions of Queen's University Belfast (QUB) when it investigated an allegation the complainant raised against another student (the respondent) in November 2019.

Background

2. On 5 November 2019 the complainant reported to QUB that the respondent had sexually assaulted her. The complainant also reported the matter to the Police Service of Northern Ireland (PSNI).
3. On 6 November 2019 QUB informed the complainant it would investigate her complaint once the PSNI had concluded its investigation.
4. On 7 October 2020 the complainant informed QUB the PSNI had concluded its investigation. The complainant initially notified QUB she did not want it to proceed with its investigation and to instead enter into a Future Conduct Agreement¹. The complainant subsequently changed her position, and informed QUB she wanted it to proceed with its investigation. QUB then commenced its investigation on 26 November 2020.
5. On 29 June 2021 QUB concluded its investigation and decided there was '*insufficient evidence*' to uphold the complaint. QUB informed the complainant of its decision on 29 July 2021.
6. The complainant subsequently raised her concerns with my Office.

Issues of complaint

7. The issues of complaint accepted for investigation were:

- 1. Whether Queen's University Belfast's (QUB's) investigation into the complaint was in line with relevant procedures and standards?**

In particular, this will consider:

¹ Sets out any agreement by the two students involved regarding their future behaviour towards each other and any other person involved in the process, including witnesses.

- **Whether QUB provided the complainant appropriate opportunity to submit relevant evidence during its investigation of her complaint; and**
- **QUB’s approach to evidence gathering in respect of both the complainant and the responding student.**

2. Whether the time QUB took to communicate the outcome of the investigation into the complaint was in line with relevant procedures and standards?

INVESTIGATION METHODOLOGY

8. In order to investigate this complaint, the Investigating Officer obtained from QUB all relevant documentation together with its comments on the issues the complainant raised. This documentation included information relating to QUB’s investigation.

Relevant Standards and Guidance

9. To investigate complaints, I must establish a clear understanding of the standards, both of general application and those specific to the circumstances of the case. I also refer to relevant regulatory, professional and statutory guidance.

The general standards are the Ombudsman’s Principles²:

- The Principles of Good Administration; and
- The Principles of Good Complaints Handling.

10. The specific standards and guidance referred to are those which applied at the time the events occurred. These governed the exercise of the administrative functions of those individuals whose actions are the subject of this complaint.

The specific legislation, standards and guidance relevant to this complaint are:

- QUB’s Conduct Regulations, 2020-2021 (Conduct Regulations);

² These principles were established through the collective experience of the public services ombudsmen affiliated to the Ombudsman Association.

- QUB’s Conduct Regulations – A Student Guide, 2020-2021 (Student Guide); and
 - QUB’s Serious Misconduct Protocol 2020-2021 (SM Protocol).
11. In investigating a complaint of maladministration, my role is concerned primarily with an examination of QUB’s administrative actions. It is not my role to question the merits of a discretionary decision. That is unless my investigation identifies maladministration in QUB’s process of making that decision.
12. I did not include all information obtained in the course of the investigation in this report. However, I am satisfied I took into account everything I considered relevant and important in reaching my findings.
13. I shared a draft copy of this report with the complainant and QUB for comment on factual accuracy and the reasonableness of the findings and recommendations. I gave careful consideration to the comments I received before I finalised this report.

THE INVESTIGATION

Issue 1 - Whether Queen’s University Belfast’s (QUB’s) investigation into the complaint was in line with relevant procedures and standards?

In particular, this will consider:

- **Whether QUB provided the complainant appropriate opportunity to submit relevant evidence during its investigation of her complaint; and**
- **QUB’s approach to evidence gathering in respect of both the complainant and the responding student.**

Detail of Complaint

Whether QUB provided the complainant appropriate opportunity to submit relevant evidence during its investigation of her complaint

14. The complainant said she informed QUB that the PSNI had evidence '*relevant*' to her complaint. She said QUB told her this evidence was not '*relevant*' to its investigation and '*refused*' to consider it. She said QUB then stated in its investigation outcome that it would not take any action on foot of her complaint due to a '*lack of evidence*'. The complainant felt QUB should have considered the PSNI evidence.

QUB's approach to evidence gathering in respect of both the complainant and the responding student

15. The complainant said QUB '*refused*' to approach the PSNI to obtain the evidence she identified. However, QUB's investigation records document QUB approached the PSNI to seek evidence the respondent identified. The complainant was concerned QUB's approach to PSNI evidence during its investigation was therefore inconsistent.

Evidence Considered

Legislation/Policies/Guidance

16. I refer to the following policies and guidance which I considered as part of investigation enquiries:
- Conduct Regulations;
 - Student Guide; and
 - SM Protocol.

QUB's response to investigation enquiries

Whether QUB provided the complainant appropriate opportunity to submit relevant evidence during its investigation of her complaint

17. QUB referred to *paragraph 11.1* of the Conduct Regulations. It explained this paragraph sets out the evidence it will consider in an investigation. This was a non-exhaustive list, which included a '*caveat*' for '*other relevant evidence*'. QUB stated it was '*not possible (nor is it appropriate)*' to include an '*exhaustive list*' of potential evidence sources in the Conduct Regulations because it will '*vary based on individual circumstances*'. It explained there is '*no automatic*

assumption that PSNI documentation will exist’ as it does not investigate ‘*criminal matters*’. QUB stated this is why it does not include police evidence specifically in its non-exhaustive list in *paragraph 11.1*.

18. QUB stated that on 5 March 2021 it shared a copy of the draft Investigation Officer’s report with the complainant. QUB said on 6 March 2021 the complainant responded. The complainant said she could give QUB ‘*details of the PSNI officer to whom she initially reported the alleged assault so that the University could seek confirmation of one part of her evidence*’. QUB explained this evidence related to ‘*the existence of additional condoms*’ and ‘*bruising*’ on the complainant’s neck. QUB stated it did not dispute these factors in its investigation, but determined there was ‘*no evidence*’ to link the respondent to them.
19. QUB stated that on 10 March 2021 it informed the complainant that as the PSNI investigation and its investigation were separate, the ‘*focus of the university investigation would be on her account and any supporting evidence provided by her*’. It informed the complainant ‘*if she thought there may be evidence which could establish that connection³, she should provide it as soon as possible*’.
20. QUB denied it said it would not consider PSNI evidence as part of its investigation. In its response to my Office QUB stated it ‘*advised*’ the complainant ‘*that the University would consider any evidence she submitted to the University, which included any evidence she obtained from the police, but she did not submit any evidence from the police*’.
21. QUB stated data protection legislation only permits it to process ‘*criminal offence data*’ where it has ‘*lawful authority to do so*’ and only where it is ‘*necessary*’. It explained it was ‘*not clear*’ if these conditions would have been met in this case to allow it to contact the PSNI directly itself. QUB stated it considered it ‘*unlikely*’ the PSNI would have disclosed evidence to it directly, but would have provided it to the complainant.

³ Connection of ‘*the existence of additional condoms*’ and ‘*bruising*’ on the complainant’s neck to the respondent.

22. QUB stated in its response to my Office that it accepted its correspondence of 10 March 2021 *'did not clearly articulate that she was to approach the police to obtain this evidence'*. QUB explained however, its correspondence *'does clearly indicate that she was entitled to make such an approach, and seek evidence from the police herself'*. QUB acknowledged this communication *'may not have been specific enough'* for the complainant. It stated it will *'take steps to ensure that in the future, such communication to students, is set out with clear specificity'*.
23. QUB explained *'no written guidance is provided to reporting students about how to complete a Formal Statement of Complaint or the supporting information or evidence that can be provided, as the circumstances of each case will be different'*. However, it stated that *'support'* is provided online.
24. QUB stated the complainant submitted photographs in response to the draft investigation report, and it considered this new evidence.

QUB's approach to evidence gathering in respect of both the complainant and the responding student

25. QUB stated that on 12 May 2021 it *'made contact'* with the PSNI to request *'copies of the responding student's PACE⁴ interview notes'*. It explained *'ultimately, the University did seek documentation from the PSNI, because of alleged inconsistencies in the events presented by [the complainant] to the PSNI and to the University'*. QUB stated *'the documentation was requested by the responding student as part of his defence'*.
26. QUB explained the PSNI did not release this evidence and it proceeded to make its decision without sight of it.

Analysis and Findings

Whether QUB provided the complainant appropriate opportunity to submit relevant evidence during its investigation of her complaint

⁴ Police and Criminal Evidence Act 1984

27. On 7 January 2021 QUB met with the complainant to discuss her allegation. I am satisfied QUB was aware at this stage the PSNI may have evidence that could potentially have been relevant to its own investigation.
28. On 22 January 2021 QUB emailed the complainant to provide her with a copy of the minutes of that meeting. In that email also, QUB informed the complainant it had '*decided*' it would '*not be appropriate to broaden the scope of the investigation further to include the police*' because '*that process was separate from the University process*'.
29. QUB and the complainant subsequently exchanged further emails regarding PSNI evidence during the period 6 March 2021 to 12 March 2021. On 10 March 2021 QUB explained its investigation was separate from the PSNI's, and that it would not contact the PSNI directly to obtain evidence. QUB informed the complainant she could submit additional evidence to demonstrate a link between the number of condoms, her bruising, and the respondent.
30. Having reviewed all relevant documentation, I accept QUB's position that its investigation was separate from the PSNI's criminal investigation, and that this was in line with the Conduct Regulations. I also accept QUB's position that it would have been contrary to the Conduct Regulations and data protection legislation for it to contact the PSNI directly to obtain evidence. I am satisfied QUB was clear with the complainant about its position on these specific points.
31. However, I am also satisfied *paragraphs 2.21.1 and 11.1* of the Conduct Regulations allowed QUB to consider evidence the complainant submitted to it that she had previously provided to the PSNI as part of its investigation. They also allowed QUB to consider evidence the complainant obtained from the PSNI. I do not consider QUB appropriately communicated this to the complainant. I consider QUB had the opportunity to clarify this position with the complainant during their meeting on 7 January 2021, as well as in its email of 22 January 2021. It had the further opportunity to clarify this position when the complainant raised the issue of PSNI evidence specifically in March 2021. However, it did not do so.

32. In its response to my Office, QUB accepted it had not '*clearly articulated*' this aspect of the Conduct Regulations to the complainant. It accepted it had not been '*specific enough*' with the complainant about her options. I consider QUB should have specifically informed the complainant that whilst it could not obtain evidence from the PSNI directly, she could do so. QUB should also have specifically informed her it would then consider that evidence during its investigation.
33. This was undoubtedly a stressful and difficult process for the complainant, especially given the nature of her complaint. I consider QUB should have been cognisant of this in its communication with the complainant. It should have been clearer with her about her options under the Conduct Regulations, especially as the Regulations do not specifically refer to PSNI evidence. I consider QUB missed opportunities to do so, particularly when the complainant raised her specific queries about PSNI evidence in March 2021.
34. I find, therefore, QUB failed to adequately communicate with the complainant about the application of *paragraph 11.1* of the Conduct Regulations.
35. The third Principle of Good Administration, '*being open and accountable*' requires public bodies to be '*open and clear about policies and procedures*' and to ensure that information it provides is '*clear, accurate and complete*'. I find QUB failed to adhere to this Principle in its communication with the complainant about PSNI evidence.
36. I consider this maladministration. I am satisfied this caused the complainant to sustain the injustice of uncertainty, frustration and anxiety regarding the investigation and the evidence she could provide. It also caused her to sustain the injustice of loss of opportunity to provide evidence that may have been relevant to QUB's investigation.
37. I therefore uphold this element of the complaint.

QUB's approach to evidence gathering in respect of both the complainant and the responding student

38. As set out above, QUB was clear with the complainant that it would not directly contact the PSNI to obtain evidence relating to its investigation. QUB explained that to do so is contrary to both its Conduct Regulations and data protection legislation. This also formed part of QUB's terms of reference for the investigation. As a result, QUB did not contact the PSNI to obtain evidence the complainant identified to it.
39. I note that later in the process, the respondent identified an alleged inconsistency between the complainant's evidence to the PSNI and her evidence to QUB. On this occasion, QUB contacted the PSNI directly to seek a copy of the respondent's PACE interview notes. I note that, in the event, the evidence was not provided timeously, and so QUB made its decision without having sight of that evidence.
40. This demonstrates that while QUB informed the complainant it would not contact the PSNI directly to obtain potentially relevant evidence she identified, it did so for evidence the respondent identified. Whilst I accept the nature of the evidence was different, I nonetheless consider QUB's approach in this respect inconsistent. If QUB was unable to contact the PSNI directly for the complainant's evidence, it should have applied the same standard to the respondent's evidence. I consider QUB applied the Conduct Regulations differently to the respondent than it did to the complainant. This impacted upon the fairness of QUB's approach to its investigation. I also consider it did not act in accordance with its own terms of reference for the case.
41. The first Principle of Good Administration, '*getting it right*' requires a public body to act in accordance with its own policies and procedures and to take account of established good practice. The fourth Principle of Good Administration, '*acting fairly and proportionately*' requires public bodies to deal with people and issues '*consistently*' and to ensure its actions are '*fair*'. I consider QUB failed to adhere to these Principles in respect of its approach to evidence gathering.

42. I consider this failure constitutes maladministration. It caused the complainant to sustain the injustice of loss of opportunity to be treated in a fair and consistent manner with the respondent regarding QUB's approach to evidence.

43. I therefore uphold this element of the complaint.

44. On the basis of my above findings, I uphold issue one of the complaint.

Issue 2 - Whether the time QUB took to communicate the outcome of the investigation into the complaint was in line with relevant procedures and standards?

Detail of Complaint

45. The complainant said QUB took '8 weeks' to provide her with an outcome to the investigation. She said this timeframe was '*unacceptable*', and it had been '*completely unnecessary*' for QUB to '*drag things out for so long*'.

Evidence Considered

Legislation/Policies/Guidance

46. I referred to the following policies and guidance which I considered as part of investigation enquiries:

- Conduct Regulations;
- Student Guide; and
- SM Protocol

QUB's response to investigation enquiries

47. QUB stated it made its decision on 29 June 2021. It explained it informed the respondent of its decision on 7 July 2021, and informed the complainant on 29 July 2021.

48. QUB said it waited until the respondent's appeal period had expired before it issued the outcome to the complainant, which was in line with its Standard Operating Procedure. It stated the '*short delay*' of '*3 days*' in informing the complainant was '*due to the unavailability of key staff over the summer period*'.

QUB clarified this was due to annual leave and also self-isolation as a result of COVID-19.

Analysis and Findings

49. *Paragraph 2.5* of the Conduct Regulations states '*unless otherwise stated, notification of a decision will be sent to the student and copied to relevant persons normally within eight working days of the decision being taken. If there is a delay in the decision being made, the student will be advised*'. QUB explained to my Office that because it is the responding student who is subject to the Conduct Regulations, the timeframe in this *paragraph* applies to that student, and not to a reporting student.
50. QUB explained to my Office that *paragraph 3.2.7* of the Conduct Regulations applies to communicating the outcome of an investigation under those Regulations to the reporting student. This paragraph states '*at the conclusion of the disciplinary procedure, the reporting student or reporting person will normally be advised whether the Conduct Regulations were invoked and, if so, whether a sanction was imposed on the responding student*'. QUB explained the disciplinary procedure is concluded once '*internal procedures have been exhausted*', which includes the responding student's appeal period.
51. I reviewed all relevant documentation, including QUB's clarifications regarding the applicability of the different sections of the Conduct Regulations to the different parties. Having done so, I am satisfied that as the responding student was the party subject to the Conduct Regulations, *paragraph 2.5* applied to that party, and not to the complainant, as the reporting student. I am also satisfied that it is *paragraph 3.2.7* that is then applicable to the complainant.
52. I accept QUB's position that the reference in *paragraph 3.2.7* to the disciplinary procedure being concluded includes the expiry of the responding student's appeal period. However, I consider *paragraph 3.2.7* could be clearer about this. This is not immediately apparent from the wording of that paragraph, and required further explanation on QUB's part. I urge QUB to consider this observation when next reviewing the content of the Conduct Regulations.

53. I note QUB made its decision on 29 June 2021. It communicated this decision to the respondent on 7 July 2021. This was in line with *paragraph 2.5* of the Conduct Regulations. It informed the student he had the right to appeal against this decision, in line with *paragraph 13.1.7* of the Conduct Regulations. Under *paragraph 13.2* the respondent had 10 working days within which to appeal. This period expired on 21 July 2021. QUB communicated its decision to the complainant on 29 July 2021, six working days after the expiry of the responding student's appeal period. I note QUB's position that this was a '*short delay*' in providing the complainant with the outcome, due to staff absences over the summer period. I consider it would have been preferable for QUB to have avoided this '*short delay*', given this was a stressful and difficult process for the complainant. However, I do not consider the six working day timeframe, at that time in the academic year in particular, to constitute a failure to adhere to relevant standards. Nonetheless I urge QUB to reflect on my observation about the clarity of this paragraph.
54. I therefore do not uphold issue two of the complaint.

CONCLUSION

55. I received a complaint about QUB's investigation into an allegation the complainant raised against another student.
56. The investigation established QUB failed to provide the complainant with sufficient clarity regarding her options for submitting evidence. It also established QUB failed to apply a consistent approach to evidence gathering during the investigation. In addition, it established QUB's communication of the investigation outcome to the parties was in line with relevant standards.
57. Therefore I uphold issue one of the complaint, and do not uphold issue two.
58. The failures identified constitute maladministration. They caused the complainant to sustain the injustice of uncertainty, frustration and anxiety, as well as loss of opportunity. Each failure also caused the complainant to take the time and effort to bring this complaint to my Office.

Recommendations

59. I recommend that QUB provides the complainant with a written apology in accordance with NIPSO 'Guidance on issuing an apology' (June 2019), for the injustices caused as a result of the failures identified within **one month** of the date of the final report.
60. *Paragraph 11.1* of the Conduct Regulations sets out the non-exhaustive list of potential sources of evidence QUB will consider. I note QUB's position that it would be impractical for this paragraph to list every potential source of evidence, and so it includes a '*caveat*' of '*other relevant evidence*' followed by some examples in brackets. I am satisfied this is generally a practical, reasonable and appropriate approach for QUB to have adopted in that policy. However, PSNI evidence is potentially significant and important in certain investigations, such as this one. For service improvement and to prevent future reoccurrence, I recommend QUB considers amending this paragraph to list 'PSNI evidence the student obtains' (or words to this effect) in the non-exhaustive list in brackets in this paragraph – and notify my Office of its decision within six months of the date of the final report.
61. I also recommend QUB produces written guidance for students on the type of evidence they can provide in investigations under the Conduct Regulations and/or include a specific section in the Student Guidance to provide this. I further recommend QUB provides my Office with a copy of the new/amended document within six months of the date of the final report.
62. I consider these amendments would benefit students by providing information and clarity regarding the nuance in QUB's position.
63. I also recommend, for service improvement and to prevent future reoccurrence, that QUB brings the contents of this report, and the learnings identified in it, to the attention of all staff involved in this investigation so they can reflect on the findings set out.
64. I recommend that QUB implements an action plan to incorporate the above recommendations and provide me with an update within **six months** of the

date of my final report. QUB should support its action plan with evidence to confirm it took appropriate action (including, where appropriate, records of relevant meetings, training records and/or self-declaration forms which indicate that staff read and understood any relevant policies).

65. As outlined previously in this report, it is not my role to question the merits of a discretionary decision unless my investigation identifies maladministration in the process of making that decision. In this case, I consider the maladministration identified does give me cause to question the merits of QUB's discretionary decision made on 29 June 2021. This finding entitles me to recommend QUB revisit its decision. It is not a finding that I consider the outcome should have been different, nor is it a finding to require QUB to make a different decision. However, given the passage of time, and the events that have occurred in that time, I do not consider it appropriate, practical or in the best interests of the individuals involved to recommend QUB to revisit its decision on this occasion. The Complainant informed my Office she wanted QUB to take accountability for any maladministration identified. She also informed my Office she wanted to prevent similar maladministration occurring in the future. I am satisfied the above recommendations provide the complainant with the necessary reassurance in this respect.

A handwritten signature in black ink that reads "Margaret Kelly". The signature is written in a cursive style with a horizontal line under the name.

Margaret Kelly
Ombudsman
23 June 2023

PRINCIPLES OF GOOD ADMINISTRATION

Good administration by public service providers means:

1. Getting it right

- Acting in accordance with the law and with regard for the rights of those concerned.
- Acting in accordance with the public body's policy and guidance (published or internal).
- Taking proper account of established good practice.
- Providing effective services, using appropriately trained and competent staff.
- Taking reasonable decisions, based on all relevant considerations.

2. Being customer focused

- Ensuring people can access services easily.
- Informing customers what they can expect and what the public body expects of them.
- Keeping to its commitments, including any published service standards.
- Dealing with people helpfully, promptly and sensitively, bearing in mind their individual circumstances
- Responding to customers' needs flexibly, including, where appropriate, co-ordinating a response with other service providers.

3. Being open and accountable

- Being open and clear about policies and procedures and ensuring that information, and any advice provided, is clear, accurate and complete.
- Stating its criteria for decision making and giving reasons for decisions
- Handling information properly and appropriately.
- Keeping proper and appropriate records.
- Taking responsibility for its actions.

4. Acting fairly and proportionately

- Treating people impartially, with respect and courtesy.
- Treating people without unlawful discrimination or prejudice, and ensuring no conflict of interests.
- Dealing with people and issues objectively and consistently.
- Ensuring that decisions and actions are proportionate, appropriate and fair.

5. Putting things right

- Acknowledging mistakes and apologising where appropriate.
- Putting mistakes right quickly and effectively.
- Providing clear and timely information on how and when to appeal or complain.
- Operating an effective complaints procedure, which includes offering a fair and appropriate remedy when a complaint is upheld.

6. Seeking continuous improvement

- Reviewing policies and procedures regularly to ensure they are effective.
- Asking for feedback and using it to improve services and performance.
- Ensuring that the public body learns lessons from complaints and uses these to improve services and performance.

PRINCIPLES OF GOOD COMPLAINT HANDLING

Good complaint handling by public bodies means:

Getting it right

- Acting in accordance with the law and relevant guidance, and with regard for the rights of those concerned.
- Ensuring that those at the top of the public body provide leadership to support good complaint management and develop an organisational culture that values complaints.
- Having clear governance arrangements, which set out roles and responsibilities, and ensure lessons are learnt from complaints.
- Including complaint management as an integral part of service design.
- Ensuring that staff are equipped and empowered to act decisively to resolve complaints.
- Focusing on the outcomes for the complainant and the public body.
- Signposting to the next stage of the complaints procedure, in the right way and at the right time.

Being customer focused

- Having clear and simple procedures.
- Ensuring that complainants can easily access the service dealing with complaints, and informing them about advice and advocacy services where appropriate.
- Dealing with complainants promptly and sensitively, bearing in mind their individual circumstances.
- Listening to complainants to understand the complaint and the outcome they are seeking.
- Responding flexibly, including co-ordinating responses with any other bodies involved in the same complaint, where appropriate.

Being open and accountable

- Publishing clear, accurate and complete information about how to complain, and how and when to take complaints further.
- Publishing service standards for handling complaints.

- Providing honest, evidence-based explanations and giving reasons for decisions.
- Keeping full and accurate records.

Acting fairly and proportionately

- Treating the complainant impartially, and without unlawful discrimination or prejudice.
- Ensuring that complaints are investigated thoroughly and fairly to establish the facts of the case.
- Ensuring that decisions are proportionate, appropriate and fair.
- Ensuring that complaints are reviewed by someone not involved in the events leading to the complaint.
- Acting fairly towards staff complained about as well as towards complainants.

Putting things right

- Acknowledging mistakes and apologising where appropriate.
- Providing prompt, appropriate and proportionate remedies.
- Considering all the relevant factors of the case when offering remedies.
- Taking account of any injustice or hardship that results from pursuing the complaint as well as from the original dispute.

Seeking continuous improvement

- Using all feedback and the lessons learnt from complaints to improve service design and delivery.
- Having systems in place to record, analyse and report on the learning from complaints.
- Regularly reviewing the lessons to be learnt from complaints.
- Where appropriate, telling the complainant about the lessons learnt and changes made to services, guidance or policy.