



**Fife Council**

**Complaints Handling Procedure**

**(Version 3 / valid from August 2024)**

# **Foreword**

*“Feedback from our customers is essential if we are to really understand how well we are delivering our services. I see complaints as a valuable part of that feedback. We clearly want to get things right first time, and a formal complaint means we may have got something wrong. This does though give us the opportunity to better understand and learn how our customers experience dealing with the council. Welcoming complaints will support us as we modernise the council and improve our customer’s experience. To do so we will need to have better conversations with our customers and, all with a positive attitude and a willingness to learn.*

***Fife Council, Chief Executive***

*Our complaints handling procedure reflects Fife Council’s commitment to valuing complaints. It seeks to resolve customer dissatisfaction as close as possible to the point of service delivery and to conduct thorough, impartial and fair investigations of customer complaints so that, where appropriate, we can make evidence-based decisions on the facts of the case.*

*The procedure has been developed by local government complaints handling experts working closely with the Scottish Public Services Ombudsman (SPSO). This is a standard approach to handling complaints across local government, which complies with the SPSO's guidance on a model complaints handling procedure. This procedure aims to help us 'get it right first time'. We want quicker, simpler and more streamlined complaints handling with local, early resolution by capable, well-trained staff.*

*Complaints give us valuable information we can use to improve customer satisfaction. Our complaints handling procedure will enable us to address a customer's dissatisfaction and may also prevent the same problems that led to the complaint from happening again. For our staff, complaints provide a first-hand account of the customer's 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.*

*Resolving complaints early saves money and creates better customer relations. Sorting them out as close to the point of service delivery as possible 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 resolve swiftly can greatly add to our workload.*

*The complaints handling procedure will help us do our job better, improve relationships with our customers and enhance public perception of Fife 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.*

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# What is a complaint?

Fife Council and Fife Health & Social Care Partnership’s definition is:

A Complaint is an expression of dissatisfaction by one or more members of the public about Fife Council’s action or lack of action, or about the standard of service provided by or on behalf of the Council.

A complaint may relate to:

* failure to provide a service
* inadequate standard of service
* dissatisfaction with Council policy
* treatment by or attitude of a member of staff
* disagreement with a decision where the customer cannot use another procedure (for example an appeal) to resolve the matter
* Fife Council’s failure to follow the appropriate administrative process

This list does not cover everything.

A complaint is **not**:

* a routine first-time request for a service
* a request for compensation only
* issues that are in court or have already been heard by a court or a tribunal
* disagreement with a decision where a statutory right of appeal exists, for example in relation to council tax or planning
* an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision

You must not treat these issues as complaints, and should instead direct customers to use the appropriate procedures.

## Handling anonymous complaints

We value all complaints.  This means we treat all complaints including anonymous complaints seriously 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.  If, however, an anonymous complaint does not provide enough information to enable us to take further action, we may decide not to pursue it further.  This will be at the discretion of the Service and the appropriate managers therein.

If an anonymous complaint makes serious allegations, we will refer it to the appropriate line management of management team in the Service deemed most appropriate to consider the matters raised.

If we pursue an anonymous complaint further, we will record the issues as an anonymous complaint on the complaints system.  This will help to ensure the completeness of the complaints data we record and allow us to take corrective action where appropriate.

Employees should be sensitive to the possible reasons why a complainant has chosen to remain anonymous, e.g. fear of reprisals, loss of service.

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

If a customer has expressed dissatisfaction in line with our definition of a complaint but does not want to complain, tell them that we do consider all expressions of dissatisfaction, and that complaints offer us the opportunity to improve services where things have gone wrong. Encourage the customer to submit their complaint and allow us to deal with it through the complaints handling procedure. This will ensure that the customer is updated on the action taken and gets a response to their complaint.

If, however, the customer insists they do not wish to complain, record the issue as an anonymous complaint. This will ensure that the customer's details are not recorded on the complaints database and that they receive no further contact about the matter. It will also help to ensure the completeness of the complaints data recorded and will still allow us to fully consider the matter and take corrective action where appropriate.

## Who can make a complaint?

Anyone who receives, requests or is affected by our services can make a complaint including the representative of someone who is dissatisfied with our service. Sometimes a customer may be unable or reluctant to make a complaint on their own. We therefore accept complaints brought by third parties as long as the customer has given their personal consent. A representative will be required for young people under 12 years of age.

## Complaints involving more than one service or organisation

If a complaint relates to the actions of two or more of our Services, you must 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. In exceptional circumstances we may separate complaints to be addressed independently by appropriate areas of the council.

If a customer complains to us about the service of another agency or public service provider, but we have no involvement in the issue, the customer should be advised to contact the appropriate organisation directly. However, where, a complaint relates to services we provide and the service of another agency or public service provider, (for example a housing association or a government department), and we have a direct interest in the issue, you must handle the complaint about Fife Council using this procedure. If you need to make enquiries to an outside agency in relation to the complaint always take account of data protection legislation and our guidance on handling our customer’s personal information. The Information Commissioner has detailed guidance on data sharing and has issued a data sharing code of practice.

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 (Department of Work and Pensions) has provided
* a complaint made to us about antisocial behaviour where the customer's dissatisfaction relates to the service we have provided and the service the housing association has provided.

## Care complaints

Local authorities that provide care services must be registered with the Care Inspectorate. Anyone receiving care services from us has the right to complain either direct to the Care Inspectorate or to us.

Customers may also receive care or support from other agencies under a contract with us. They may direct complaints about these services either to us (just like complaints about any of our services) or directly to the Care Inspectorate.

The Care Inspectorate's contact details can be found on their website:

http://www.scswis.com/

Or:

telephone 0345 600 9527

fax 01382 207 289

complete an online complaints form at http://www.scswis.com, or

email enquiries@careinspectorate.com

# 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.

|  |  |  |
| --- | --- | --- |
| **Complaint received**  A customer may complain either verbally or in writing, including face-to-face, by phone, letter or email. | |  |
| **Stage 1: Frontline response**  For issues that are straightforward and simple, requiring little or no investigation. ‘On-the-spot’ apology, explanation, or other action to put the matter right  Complaint resolved or a response provided in **five working days** or less (unless there are exceptional circumstances)  Complaints addressed by any member of staff, or alternatively referred to the appropriate point for frontline response  Response normally face-to-face or by telephone (though sometimes we will need to put the decision in writing)  We will tell the customer how to escalate their complaint to stage 2 | **Stage 2: Investigation**  Where the customer is not satisfied with the frontline response, or refuses to engage at the frontline, or where the complaint is complex, serious or 'high-risk'  Complaint acknowledged within **three working days**.  We will contact the customer to clarify the points of complaint and outcome sought (where these are already clear, we will confirm them in the acknowledgement)  Complaint resolved or a definitive response provided within **20 working days** following a thorough investigation of the points raised | **Independent external review (SPSO or other)**  Where the customer is not satisfied with the stage 2 response from the service provider  The SPSO will assess whether there is evidence of service failure or maladministration not identified by the service provider  In relation to social work decisions the SPSO can also look at professional decisions  Some complaints may also have an alternative route for independent external review |
| **Resolution**  The complainant and organisation agree what action will be taken to resolve the complaint.  Where a complaint is resolved, it is not usually necessary to continue investigating, although an organisation may choose to do so, for example to identify learning.  We must signpost the customer to stage 2 (for stage 1 complaints) or to the SPSO as usual. | | |
| **Reporting, recording and learning**  Action is taken to improve services on the basis of complaint findings, where appropriate.  We record details of all complaints, the outcome and any action taken, and use this data to analyse themes and trends.  Senior management have an active interest in complaints and use complaints data and analysis to improve services.  Learning is shared throughout the organisation. | | |

# Resolving the complaint

1. A complaint is **resolved** when both *Fife Council (includes all Trusts & Arms Length Organisations / Fife Health & Social Care Partnership* 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.
2. We will try to resolve complaints wherever possible, although we accept this will not be possible in all cases.
3. 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.
4. It may be helpful to use alternative complaint resolution approaches when trying to resolve a complaint. See **Alternative complaint resolution approaches**.
5. 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.
6. 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**).
7. If the customer and *Fife Council (includes all Trusts & Arms Length Organisations / Fife Health & Social Care Partnership* 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

1. 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)?**   1. 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. 2. 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. 3. 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx). 4. 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?**   1. 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?**   1. 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. 2. The customer may expect more than we can provide. If so, we will tell them as soon as possible. 3. 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?**   1. 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. 2. 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

1. Frontline response aims to respond quickly (within five working days) to straightforward complaints that require little or no investigation.
2. 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.
3. 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**. ([Appendix 3](#_Appendix_3_–))
4. [**Part 2, Appendix 1**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx) gives examples of the types of complaint we may consider at this stage, with suggestions on how to resolve them.
5. Complaints which are not suitable for frontline response should be identified early, and handled immediately at stage 2: investigation.

## Notifying staff members involved

1. 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

1. 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 received on a weekend or public holiday).

### Extension to the timeline

1. 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).
2. 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.
3. If a complaint has not been closed within ten working days, it should be escalated to stage 2 for a final response.
4. **Appendix 1** provides further information on timelines.

## Closing the complaint at the frontline response stage

1. 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**)); and
* 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).

1. 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.
2. 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).
3. The complaint should then be closed and the complaints system updated accordingly.
4. 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart4.docx).

# Stage 2: Investigation

1. 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx))
* 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); or
* the complaint relates to serious, high-risk or high-profile issues (see [**Part 2: Serious, high-risk or high-profile complaints**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx)).

1. 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).
2. 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.
3. 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

1. Complaints must be acknowledged within three working days of receipt at stage 2.
2. We must issue the acknowledgement in a format which is accessible to the customer, taking into account their preferred method of contact.
3. 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**
4. 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

1. 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.
2. 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**).
3. 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.
4. 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 *[unacceptable actions policy, or equivalent]*, 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx)).

* **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

1. 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 (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); and
* 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).

1. 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx).

## Investigating the complaint

1. 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); and
* is there a difference between what happened and what should have happened, and is *Fife Council (includes all Trusts & Arms Length Organisations / Fife Health & Social Care Partnership* responsible?

1. 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).
2. 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart1.docx).
3. The SPSO has resources for conducting investigations, including:

* [**Investigation plan template**](https://www.spso.org.uk/how-we-offer-support-and-guidance)
* [**Decision-making tool for complaint investigators**](https://www.spso.org.uk/how-we-offer-support-and-guidance)

### Alternative complaint resolution approaches

1. 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.
2. 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.
3. The SPSO has guidance on [**alternative complaint resolution approaches**](https://www.spso.org.uk/how-we-offer-support-and-guidance).
4. If *Fife Council (includes all Trusts & Arms Length Organisations / Fife Health & Social Care Partnership* 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

1. 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.
2. 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

1. 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

1. 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.
2. 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.
3. *:* 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; or
* the customer has agreed to alternative complaint resolution approaches as a potential route for resolution.

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

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

## Closing the complaint at the investigation stage

1. The response to the complaint should be in writing (or by the customer’s preferred method of contact) and must be signed off by a manager or officer who is empowered to provide the final response on behalf of Fife Council.
2. We will tell the customer the outcome of the complaint (whether it is resolvedFife 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**](https://www.spso.org.uk/sites/spso/files/csa/ApologyGuide.pdf))
* 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; and
* 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**).

1. 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.**
2. 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).
3. We will record the decision, and details of how it was communicated to the customer, on the complaints system.
4. The SPSO has guidance on responding to a complaint:

* **[Template decision letter](https://www.spso.org.uk/how-we-offer-support-and-guidance)**
* **[Apology guidance](https://www.spso.org.uk/how-we-offer-support-and-guidance)**

1. 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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart4.docx).

## Signposting to the SPSO

1. 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; and
* how to contact the SPSO.

1. 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.
2. 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 organisation’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 *[the organisation’s sector]*. 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 *Fife Council / Fife Health & Social Care Partnership*, 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 *[organisation]*'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 this letter (our final response to your complaint). You can do this online at [**https://www.spso.org.uk/complain/form/start/**](https://www.spso.org.uk/complain/form/start/) or call them on Freephone 0800 377 7330.  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: 0800 377 7330  Online contact [www.spso.org.uk/contact-us](http://www.spso.org.uk/contact-us)  Website: [www.spso.org.uk](http://www.spso.org.uk/) |

### Factoring complaints and complaints from shared owners

1. 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: [First Tier Tribunal for Scotland (Housing and Property Chamber)](https://www.housingandpropertychamber.scot/)
2. 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

1. 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.

# Governance of the Complaints Handling Procedure

## Roles and responsibilities

Overall responsibility and accountability for the management of complaints lies with the Chief Executive and senior management of Fife Council.

Our final position on the complaint must be signed off by an appropriate officer and we will confirm that this is our final response. This ensures that management own and are accountable for the decision. It also reassures the customer that their concerns have been taken seriously.

***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 complaints handling procedure, 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 complaint handling procedure to senior staff. Regular management reports assure the Chief Executive of the quality of complaints performance.

***Executive Directors****:* On the Chief Executive's behalf, directors 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
* deputising for the Chief Executive on occasion

However, directors may decide to delegate some elements of complaints handling (such as investigations and the drafting of response letters) to other staff. Where this happens, directors should retain ownership and accountability for the management and reporting of complaints. They may also 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.

***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.

***Escalation & Resolution:*** Have a key role in the complaints process. Administrative management of complaints through taking receipt of complaints made, assessing and deciding an approach, allocation to appropriate Service and teams, administer associated records and procedural documentation. The role includes dealing with escalations to ensure customers receive a quality and timely response, speeding up response rates, improving the standard of customer communication. The team focus on resolving issues quickly for customers but also learn from feedback to improve services. They help Councillors resolve issues and log complaints for constituents when the 'business as usual' processes have not worked effectively for some reason.

***Investigating Officer:*** Are responsible and accountable for the management of the complaint investigation. They will be involved in the investigation and in co-ordinating 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 that could result in wider opportunities for learning across Fife Council.

***All Fife Council staff****:* A complaint may be made to any member of staff in the Council. So all staff must be aware of the complaints handling procedure and how to handle and record complaints at the frontline stage. They should also be aware of who to refer a complaint to, in case they are not able to personally handle the matter. We encourage all staff to try to resolve complaints early, as close to the point of service delivery as possible, and quickly to prevent escalation.

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

**Health and Social Care:** The current roles and responsibilities within Health and Social Care are as follows:

* Team Managers – are responsible for:
* Collating and finalising responses for Stage 1 complaints.
* Escalating Stage 1 complaints when required (by contacting the relevant Service Manager).
* Providing the required complaint closure details to Business Support.
* Service Managers - are responsible for:
* Collating and finalising responses for Stage 2 complaints.
* Arranging and approving escalations or extensions as required.
* Providing the required complaint closure details to Business Support.
* Providing guidance to Team Managers, where required.
* Escalation & Resolution - are responsible for:
* Logging and allocating complaints.
* Allocating reminder tasks to managers (this is 3 working days from date received for a Stage 1 complaint, and 10 working days from date received for a Stage 2 complaint).
* Reallocation of complaints (where required).
* Closing complaints.
* Signposting guidance for Service Managers.
* Compliance Team - are responsible for:
* Providing advice on the complaints process and other compliance elements.
* Monitoring complaints, and providing status reports as required.

## Complaints about senior staff

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.

**Complaints concerning the Chief Executive**

* These should be logged by the Receiving Officer using the complaints system then allocated accordingly to an appropriate officer for investigation and response. The appropriate officer determined by internal discussion.

**Complaints concerning an Executive Director or Head of Service**

* These should be logged by the Receiving Officer using the complaints system then allocated accordingly to an appropriate officer for investigation and response. The appropriate officer determined by internal discussion.

**Complaints concerning Elected Members of the Council**

* These should be logged and considered appropriately by the Manager of Committee Services. Should the complaint relate to the conduct or actions of an Elected Member, the Manager of Committee Services or delegate (typically Escalation & Resolution) may at an appropriate stage, inform the complainant of their right to refer the complaint to, or that the complaint may be referred to, the Public Standards Commission for Scotland.

## Recording, reporting, learning and publicising

Complaints provide valuable customer feedback. One of the aims of the complaints handling procedure is to identify opportunities to improve services across the council. We must record all complaints in a systematic way so that we can use the complaints data for analysis and management reporting. By recording and using complaints information in this way, we can identify and address the causes of complaints and, where appropriate, identify training opportunities and introduce service improvements.

### Recording complaints

To collect suitable data it is essential to record all complaints in line with SPSO minimum requirements, as follows:

* the customer's name and address
* the date the complaint was received
* the nature of the complaint
* how the complaint was received
* the service the complaint refers to
* the date the complaint was closed at the frontline resolution stage (where appropriate)
* the date the complaint was escalated to the investigation stage (where appropriate)
* action taken at the investigation stage (where appropriate)
* the date the complaint was closed at the investigation stage (where appropriate)
* the outcome of the complaint at each stage
* the underlying cause of the complaint and any remedial action taken

We have structured systems for recording complaints, their outcomes and any resulting action. These provide a detailed record of services that have failed to satisfy customers.

**Recording and managing complaints using our complaints system**

Please contact Escalation & Resolution for advice and guidance.

### Reporting of complaints

Complaint details are analysed for trend information to ensure we identify service failures and take appropriate action. Regularly reporting the analysis of complaints information helps to inform management of where services need to improve.

We publish on a quarterly basis the outcome of complaints and the actions we have taken in response. This demonstrates the improvements resulting from complaints and shows that complaints can influence our services. It also helps ensure transparency in our complaints handling and demonstrate to our customers that we value their complaints.

We must:

* publicise on a quarterly basis complaints outcomes, trends and actions taken
* use case studies and examples to demonstrate how complaints have helped improve services

This information will be reported quarterly to Service Management Teams.

### Learning from complaints

At the earliest opportunity after the closure of the complaint, the Investigating Officer should always make sure that the customer and staff of the department involved understand the findings of the investigation and any recommendations made. This can also be supported by Service Management Teams.

Senior management will review the information gathered from complaints regularly and consider whether our services could be improved or internal policies and procedures updated.

As a minimum, we must:

* use complaints data to identify the root cause of complaints
* take action to reduce the risk of recurrence
* record the details of corrective action in the complaints file, and
* systematically review complaints performance reports to improve service delivery

Where we have identified the need for service improvement:

* the action needed to improve services must be authorised
* an officer (or team) should be designated the 'owner' of the issue, with responsibility for ensuring the action is taken
* a target date must be set for the action to be taken
* the designated individual must follow up to ensure that the action is taken within the agreed timescale
* where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved
* we must ensure that Fife Council staff learn from complaints

### Publicising complaints performance information

We also report on our performance in handling complaints annually in line with SPSO requirements. This includes performance statistics showing the volumes and types of complaints and key performance details, for example on the time taken and the stage at which complaints were resolved.

## Maintaining confidentiality

Confidentiality is important in complaints handling. It includes maintaining the customer's confidentiality and explaining to them the importance of confidentiality generally. We must always bear in mind legal requirements, for example, data protection legislation, as well as internal policies on confidentiality and the use of customers' information.

Details of how information will be managed can be found at [Privacy Policy | Fife Council](https://www.fife.gov.uk/home/privacy-policy)

[(Appendix 4).](#_Appendix_3_–)

For further information contact the Council’s Data Protection Officer at [dataprotection@fife.gov.uk](mailto:dataprotection@fife.gov.uk)

## Managing difficult behaviour

People may act out of character in times of trouble or distress. The circumstances leading to a complaint may result in the customer acting in an unacceptable way. Customers who have a history of challenging or inappropriate behaviour, or have difficulty expressing themselves, may still have a legitimate grievance.

A customer's reasons for complaining may contribute to the way in which they present their complaint. Regardless of this, we must treat all complaints seriously and properly assess them. However, we also recognise that the actions of customers who are angry, demanding or persistent 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 behaviour such as unreasonable persistence, threats or offensive behaviour from customers. Where we decide to restrict access to a customer under the terms of our unacceptable actions policy, we have a procedure in place to communicate that decision, notify the customer of a right of appeal, and review any decision to restrict contact with us. This will allow the customer to demonstrate a more reasonable approach later.

Please refer to our unacceptable actions policy from the following link [Unacceptable Actions](http://fish.fife/fish/detailedsearch/index.cfm?fuseaction=PubView&objectid=5B109CBF-ED52-4475-ABFF075D7F4A0C3D)

## Supporting the customer

All members of the community have the right to equal access to our complaints handling procedure. Customers who do not have English as a first language may need help with interpretation and translation services, and other customers may have specific needs that we will seek to address to ensure easy access to the complaints handling procedure.

For specific community language lines please refer to Fife Council’s customer facing complaint procedure document.

We must always take into account our commitment and responsibilities to equality. This includes making reasonable adjustments to our service to help the customer where appropriate.

Several support and advocacy groups are available to support customers in pursuing a complaint and customers should be signposted to these as appropriate. Please refer to Fife Council’s customer facing complaint procedure document.

## Time limit for making complaints

The complaint procedure sets a time limit of six months from when the customer first knew of the problem, within which time they may ask us to consider the complaint, unless there are special circumstances for considering complaints beyond this time.

We will apply this time limit with discretion. In decision making we will take account of the Scottish Public Services Ombudsman Act 2002 (Section 10(1)), which sets out the time limit within which a member of the public can normally ask the SPSO to consider complaints. The limit is one year from when the person first knew of the problem they are complaining about, unless there are special circumstances for considering complaints beyond this time.

If it is clear that a decision not to investigate a customer's complaint will lead to a request for external review of the matter, we may decide that this satisfies the special circumstances criteria. This will enable us to consider the complaint and try to resolve it.

# 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 timelimes.

**Timelines at frontline response (stage 1)**

1. 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.
2. 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**

1. 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)**

1. 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.

1. We must acknowledge the complaint within three working days of receipt at stage 2 i.e. by **day three**.
2. 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.
3. 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**

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

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).

*What happens if we cannot meet an extended timeframe?*

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.
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 orginal 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.

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

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**](https://www.spso.org.uk/sites/spso/files/csa/LAMCHPPart2.docx).

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

|  |  |
| --- | --- |
| A customer may complain verbally or in writing, including face-to-face, by phone, letter or email.  Your first consideration is whether the complaint should be dealt with at stage 1 (frontline response) or stage 2 (investigation). | |
| **Stage 1: Frontline response**  Always try to respond quickly, wherever we can | **Stage 2: Investigation**  Investigate where:   * The customer is dissatisfied with the frontline response or refuses to engage with attempts to resolve the complaint at stage 1 * It is clear that the complaint requires investigation from the outset |
| Record the complaint and notify any staff complained about | Record the complaint and notify any staff complained about  Acknowledge the complaint within **three working days** |
| Contact the complainant to agree:   * Points of complaint * Outcome sought * Manage expectations (where required)   *(these can be confirmed in the acknowledgement where the complaint is straightforward)* |
| Respond to the complaint within **five working days** unless there are exceptional circumstances | Respond to the complaint as soon as possible, but within **20 working days** unless there is a clear reason for extending the timescale |
| Is the customer satisfied?  You must always tell the customer how to escalate to stage 2 | Communicate the decision, normally in writing  Signpost the customer to SPSO and advise of time limits |
| (Yes) Record outcome and learning, and close complaint.  *(No) -> to Stage 2: Investigation* | Record outcome and learning, and close complaint |
| Follow up on agreed actions flowing from the complaint  Share any learning points | |

# Appendix 3 – How to make an Apology

An apology is more likely to resolve a complaint early than any other action you might

take. An apology may be the only practical way of restoring trust and repairing a broken

relationship with a customer. When we consider a complaint and find there has been a

problem we most often recommend that the organisation apologise. Apologies are very

powerful and important. This guide will help you get apologies right for most people, most of the time.

**Say it or write it?**

Empathy and sincerity is much easier to express and recognise when we say (rather

than write) it. When we speak to another person directly we come over as fellow humans and not a faceless organisation. Our body language and tone of voice backs up our words, ensuring our meaning is properly understood. When we talk to someone, we are more likely to notice if our words are not being well received and can correct misunderstandings before they escalate.

Written apologies are always trickier to get right, simply because we can’t check whether we have been properly understood.

Verbal apologies help avoid a lot of potential pitfalls. There will be situations where a written apology is needed. Following this guide will help you get that right.

**A couple of common myths about apologies**

*“Apologies are always an admission of liability.”*

No. The Apology (Scotland) Act 2016 and the Health (Tobacco, Nicotine etc. and Care) (Scotland) Act 2016 make it clear that apologies made by public bodies in Scotland cannot simply be assumed to be an admission of liability.

“We will get sued if we apologise.”

No. Research into the impact of apologies consistently shows that a well-made, timely apology diminishes people’s wish for compensation.Quick Tip: 4Rs of Apology

> Regret (I am sorry)

> Responsibility (we didn’t)

> Reason (process your application on time)

> Remedy (I have now fast tracked your application)

**Who should apologise?**

The earlier an apology is made, the more effective it is likely to be. Give it as soon as

the problem is properly understood and it is known what the apology needs to be

about: your organisation should support you to do this.

When complaints escalate or the issues are not limited to your area of responsibility,

it may also be appropriate for the apology to come from a person with overall

responsibility for the issues being raised, such as a Chief Executive, Director of

Department or the person with governance responsibility for complaints. But be careful

not to overdo it as too many apologies can appear insincere.

If the apology is the result of an SPSO recommendation, it must be made by someone

with responsibility for all the areas where failings have been identified.

**What do we mean by apology?**

We use words like ‘apology’ and ‘sorry’ to mean different things in different situations.

Sometimes we are not really giving an apology, but simply telling another person

that we recognise and acknowledge their difficulties: “I am so sorry to hear about

the problems you have had”. This is an expression of empathy. This will often be the

appropriate level of response, especially if seeking early resolution. Empathy lets the

other person know you have listened to them and that you are willing to discuss their

issues with them. An empathetic response may even help avoid a complaint happening.

At other times we are saying sorry and apologising as a recognition that the other

person has suffered because of a failure by us or our organisation; “I am sorry that

we did not process your application on time”. This is an expression of regret which

also makes it clear we are taking responsibility for the problem. Apologies will also

include the reason for the problem. This shows that you have properly understood

the issues. When there is recognised fault or failing, an apology should express regret,

demonstrate responsibility and give the reasons why the apology is needed. The very

best apologies will also explain what you and your organisation are going to do to

remedy the problem.

**These are the 4Rs of apology**.

DO

An apology should be personal and written for the specific occasion. It will include:

**an expression of empathy;** ‘I was sad to read about the difficulties you encountered’

**an acceptance of what has gone wrong**; ‘Staff didn’t ensure that you understood the

procedure you needed to follow

**“an acceptance of responsibility**; ‘We should have explained the process to you’

adequately and we did not’

**an acknowledgement of the effect the problems have had for the other person;** ‘you

were left without a visit to your home for 36 hours’

**an explanation of why the problem occurred** (this may be covered elsewhere in

a letter if this is a written apology); ‘Our computer system was down for routine

maintenance and staff forgot to enter your data when the system went back on-line’

**a description of anything that is being done to put matters right for the person**

**directly concerned and/or to help avoid the problem happening again in the**

**future** (this may be covered elsewhere in a letter if this is a written apology); ‘we

have updated your records to reflect the correct start date and have used your poor

experience to remind staff of the importance of ensuring information is recorded on

our database’.

**DON’T**

Expressing empathy and apologising fail when we:

**use standard words and phrases.** This comes across as impersonal and lacking

in empathy.

**distance ourselves from the fault;** ‘I apologise for ANY faults’. If there were no faults

we don’t need to apologise for these (though empathy will still be helpful) and if there

were then we should admit to them

**shift the blame in whole or part to others**; ‘I am sorry this happened BUT it was

someone else’s fault’. Worst of all is if we seek to blame the complainant ‘I am sorry

but if you hadn’t been late then ..’

**give the impression we are only apologising because we are being forced to;**

‘I have been told I should apologise’. In particular it is bad practice to respond

to an Ombudsman’s recommendation with the sentiment that ‘The Ombudsman

said we must apologise so we are...’

**trivialise the problem;** ‘no one else complained’

**question whether the other person has actually suffered**; ‘I am sorry IF you were upset’

Quick Tip: Keep it short and straightforward. Once you have apologised,

don’t labour the point.

Quick Tip: Try to avoid using the words ‘if’, ‘but’, ‘however’ or ‘any’.

**Appendix 4 - Privacy Policy**

Fife Council is what’s known as the ‘data controller’ of the personal data you provide to us and the personal data we collect and use about you. This applies to council staff and members of the public.

We generally collect, use and hold information about you in order to provide public services and to carry out the Council’s statutory functions. Information may be collected by Fife Council on a paper or online form, by telephone, email, CCTV or by a member of our staff, or an external agency on behalf of the Council.

This notice explains how we use and share your information by providing a general description of why we collect your information and what we use it for. It also links to more detailed information on how Council Services use and share your information. Please simply select from the list below for further information.

You can contact Fife Council for data protection issues by email at: dataprotection@fife.gov.uk. The Council’s Data Protection Officer, Fiona Stuart, can also be contacted at this email address or by calling 03451 55 00 11 and asking to be transferred to her.

The Data Protection Officer for The Assessor for Fife Council is Fiona Stuart and she can be contacted by email at: dataprotection@fife.gov.uk or by calling 03451 55 00 11 and asking to be transferred to her. The Assessors privacy notice can be found here: www.saa.gov.uk/fife/privacy-notice/

The Data Protection Officer for Fife Licensing Board is Fiona Stuart and she can be contacted by email at: [dataprotection@fife.gov.uk](mailto:dataprotection@fife.gov.uk) or by calling 03451 55 00 11 and asking to be transferred to her.

If you have concerns about the use of your personal data by Fife Council, please contact the Council’s Data Protection Officer in the first instance. If you remain dissatisfied, you may wish to contact the Information Commissioner’s Office to raise your concern or complaint. The ICO can be contacted in writing at: Information Commissioner’s Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or telephone: 0303 123 1113 or online: <https://ico.org.uk/concerns/getting/> .

Please click to open the following sections for further information on the ways in which Fife Council uses your personal information.