

Bishop Auckland College

Quality System

Procedure Number

BAC-Q-05

Procedure Title

Customer Complaints

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1.0	Purpose	Responsibility
1.1	To describe the process for receiving and recording a complaint and ensuring it is dealt with in an agreed timescale.	
1.2	To describe the method of processing a claim for compensation. (ref 2.2)	
1.3	To describe the process for appealing against the outcome of a complaint.	
2.0	Scope	
2.1	This procedure covers both Bishop Auckland College and South West Durham Training (thereafter to be termed the Organisation).	
2.2	The procedure applies to all complaints, internal or external, which are not covered by systems for student, employer and staff, or by systems for evaluation, assessment and verification/moderation. The procedure is to be followed by all members of staff, at the Organisation.	
2.3	Claims for compensation resulting from minor damage sustained to the property of student/staff/visitor as a result of negligence on behalf of the Provider e.g. in terms of Health and Safety.	
	Note: All personal injury claims are outside the scope of this procedure and will be referred to the Provider's Insurer.	
2.4	As this procedure involves processing personal data, data protection regulations will be adhered to. Please refer to the General Data Protection Regulation (ref: POL-DP-01) for further information.	
3.0	References	
3.1 3.2 3.3 3.4 3.5 3.6 3.7 3.8 3.9 3.10	BAC-HR-01 Disciplinary Procedure BAC-HR-1-02 Capability Procedure BAC-HR-1-03 Grievance Procedure BAC-HR-1-05 Inappropriate Behaviour Procedure BAC-C-07 Appeals Procedure BAC-SS-01 Student Disciplinary South West Durham Training Handbook Guidelines for Completing a Quality Records Schedule Q-QR-01 General Data Protection Regulation Policy POL-DP-01 OIA -The good practice framework: handling student complaints and academic appeals	
3.11	The Open University- Handbook for Validated Awards	





		Responsibility
4.0	Definitions	
4.1 4.2 4.3 4.4 4.5 4.6 4.7 4.8 4.9 4.10 4.11	 BAC: Bishop Auckland College SWDT: South West Durham Training Provider: Bishop Auckland College or South West Durham Training DoF: Director of Finance HoQ&HE: Head of Quality and Higher Education Principal CE: Principal/Chief Executive (BAC) CEO: Chief Executive Officer (SWDT) QAM: Quality Assurance Manager Recipient: any member of staff receiving a complaint from a complainant. ESFA: Education and Skills Funding Agency OIA: Office of Independent Adjudicator for Higher Education – runs an independent scheme to review student complaints. The Organisation is a member of this scheme. OU: Open University 	
5.0	Procedure	
5.1	EARLY RESOLUTION	
5.1.1	Any member of staff who is contacted by a student, employer, customer or visitor wishing to make a complaint should first establish if 'Early Resolution' is possible or if this has already been explored. (ref to Appendix 1- Early Resolution). Early Resolution is designed to address straightforward concerns swiftly and informally, before been escalated to a formal complaint.	Recipient
5.1.2	If the recipient can immediately resolve the complaint to the complainant's satisfaction they should do so. It is good practice to record the actions taken to consider and resolve the concern, the decision and minimum detail of what was communicated to the complainant and when. This should then be passed to the Quality Office for logging as an informal complaint. This can then be accessible to those dealing with any formal complaint at a later stage.	Recipient
5.1.3	Where the complainant is dissatisfied with the outcome of early resolution, or where early resolution is not possible or suitable due to the character, complexity or seriousness of the matter, the complainant should be referred to the formal complaints process (see 5.2). The complainant should refer to (ref Q-CC-20 Customer Complaints – Guidelines) for information.	Recipient/ Complainant





Responsibility 5.2 FORMAL COMPLAINT A formal complaint must be recorded in writing. Where possible the 5.2.1 Recipient complainant should document their complaint themselves by either writing a letter or emailing the Quality Office or by completing an online complaints form (accessed through the Organisation's website). A complainant should refer to the Customer Complaints Guidelines (ref Q-CC-20) particularly the section regarding 'When making a complaint what information must I provide'. Note: Where an issue raised affects a number of individuals, those individuals can submit a complaint as a group complaint. In such circumstances the name of each individual must still be provided but the organisation may ask the group to nominate one individual to act as group representative. The Organisation may decide to communicate only through the representative and expect him or her to liaise with the other individuals. Note: It is Organisational policy for the complainant to provide their full name and contact details, in order for the Organisation to fully investigate a complaint. However, if there is a compelling case, supported by evidence, the matter may be investigated. It must be noted however, that raising a concern anonymously may impede the investigation and communication of the outcome. 5.2.2 Where the complainant approaches a member of staff and wishes to make a complaint and clauses 5.1.1-5.1.3 have been followed/ considered and either the recipient or the complainant considers it appropriate, the recipient will either: Record the complaint themselves on a Customer Complaint Form (ref Q-(i) CC-01) and forward the form to the Quality Assurance Manager within one working day of the complaint being recorded (unless the complaint is regarding the Quality Assurance Manager then see clause 5.2.4). OR Recipient (ii) Where it is not appropriate or possible to record the complaint Duty Manager/ themselves, immediately arrange for the Duty Manager or a member of Management Team Management Team to record the complaint. Member 5.2.3 The Duty Manager or the member of the Management Team contacted as a Duty Manager/ result of 5.2.2 (ii) will complete a Customer Complaint Form (ref Q-CC-01) Management Team and forward it within one working day to the Quality Assurance Manager Member (unless the complaint is regarding the Quality Assurance Manager then see clause 5.2.4). 5.2.4 Where a complaint is about the Quality Assurance Manager, the Customer Recipient Complaint Form must be sent to the Head of Quality and Higher Education, who will undertake the further actions in this procedure which are normally the responsibility of the Quality Assurance Manager





5.3	MAKING AN INTERNAL COMPLAINT	Responsibility
0.0	MARING AN INTERNAL COMPLAINT	
5.3.1	A member of staff who wishes to make a complaint will record the complaint on a Customer Complaint Form (ref Q-CC-01) and forward it to the Quality Assurance Manager (unless the complaint is regarding the Quality Assurance Manager then see clause 5.2.4).	Member of Staff
5.4	CLAIMS FOR COMPENSATION	
5.4.1	Any member of staff, student or visitor wishing to make a claim for compensation must refer the incident to the Duty Manager or a member of the Management Team.	Member of Staff/ Student/Visitor
5.4.2	The Duty Manager/ Management Team Member will complete and sign a Customer Complaint Form Q-CC-01 giving full details of the incident. The Duty Manager will record the incident in the Duty Managers' Log, and, if appropriate, complete an Accident Report Form. <i>Note: This is not an acceptance of liability</i>	Duty Manager/ Management Team Member
5.4.3	Each claim for compensation will, in the first instance, be investigated and considered by a review panel comprising of the Quality Assurance Manager and Director of Finance and / or the Chief Executive Officer SWDT (if applicable).	QAM / DoF/ CEO SWDT (if applicable)
	Note: The panel may request the claimant to submit further supporting information e.g. proof of purchase.	
5.4.4	If the claim is considered valid, the panel will agree upon a fair and reasonable offer to be made to the claimant.	QAM / DoF/ CEO SWDT (if applicable)
	Note: Property claims over the insurance excess may be referred to the Provider's Insurer.	applicable)
5.4.5	The Quality Assurance Manager will inform the complainant of the offer, and arrange payment if the offer is accepted.	QAM
	Note: This payment will be made from the nominal sum held within the Quality Budget for such payments. If on investigation of the claim, the panel decides that the incident could have been avoided e.g. through risk assessment, the payment will be made from the relevant budget heading.	
5.4.6	Should the offer be rejected, the panel will reconsider the application and either decide upon a revised offer, or uphold the original offer. If agreement cannot be reached with the claimant, the claim for compensation will be referred to the Directorate. The Directorate's decision will be final.	QAM / DoF / CEO SWDT (if applicable)
5.5	MONITORING, ACKNOWLEDGING AND ACTING UPON COMPLAINTS	
5.5.1	The complaint will be logged in the Customer Complaint Log (ref Q-CC-02).	QAM /
5.5.2	A formal acknowledgement of the complaint will be sent to the complainant within one working day of receiving the Customer Complaint Form, using the Model Acknowledgement of Complaint (ref Q-CC-03) as a guide.	Designate QAM / Designate
	Note: where appropriate correspondence will be provided via email.	





		Responsibility
5.5.3	If the complaint is regarding the conduct of a member of staff, the Customer Complaint Form together with a covering email (ref Q-CC-11) will be forwarded to the relevant line manager complete with the associated documentation (including the Investigating Officer's Report). A copy of the complaint and covering memo will also be forwarded to Human Resources (HR) for reference. For other complaints, the procedure will be followed from clause 5.5.7.	QAM / Designate
	Note: documentation containing personal information will be password protected before been sent via email and the password communicated separately.	
5.5.4	The line manager will undertake an initial investigation of the complaint within three working days of receiving the complaint, using the Guidelines for Investigating Customer Complaints (ref Q-CC-25) for reference.	Line Manager
5.5.5	Following the initial investigation, the line manager must discuss the content of the complaint with the Head of Human Resources/designate to determine if the matter is to be processed further using an appropriate HR procedure (ref 3.1, 3.2, 3.3, 3.4).	Line Manager/ Head of HR/ designate
5.5.6	a) If, it is decided that it is appropriate for the issues raised in the complaint to be dealt with through one of the HR Procedures, then all information relating to the complaint will be forwarded to Human Resources to inform the relevant process. The line manager must complete the Investigating Officers Report and complete section D of the Complaints Form to record that an initial investigation has taken place and that the complaint has been referred to HR. The Complaint paperwork must then be forwarded under confidential cover to the Quality Assurance Manager.	Line Manager/ Head of HR/ designate
0.0	Note: The complaint will still be monitored through the Complaints Procedure. The Head of Human Resources/designate and the Quality Assurance Manager will work closely together whilst the issues raised in the complaint are being dealt with.	
OR	b) If it is agreed by the line manager and HR that the complaint has been resolved or it is not necessary to refer the complaint to a HR procedure, then the line manager must finalise the Investigation and complete the Investigating Officer's Report and section D of the Complaints Form. The complaints paperwork must then be forwarded under confidential cover to the Quality Improvement Office within 10 working days of receipt.	Line Manager/ Head of HR/ designate
5.5.7	For all other complaints the Customer Complaint Form, along with a covering memo (ref Q-CC-26) and associated documentation (including an Investigating Officer's report) will be forwarded via email to an appropriate investigating officer (Usually the Manager responsible for the area to which the complaint refers).	QAM / Designate
5.5.8	Within ten working days of receipt of the Customer Complaints paperwork, the Investigating Officer will investigate the complaint using the Guidelines for Investigating Customer Complaints (ref Q-CC-25) for reference. They must then complete the Investigating Officer's Report and describe any corrective and preventive action taken in section D of the Complaints form. The Manager must sign and date section D before returning the completed Complaints Form to the Quality Improvement Office.	Investigating Officer





		Responsibility
5.5.9	If the Customer Complaint Form is not returned to the Quality Improvement Office within 10 days (from the date it was forwarded to the Investigating Officer), the Quality Assurance Manager will make contact with the relevant Investigating Officer to establish how the investigation is progressing.	QAM
	Note: If it is not possible to determine corrective/preventative action within the 3 working week timescale, it may be appropriate for the Quality Assurance Manager to provide an interim response to the complainant using the Model Interim Response Letter (ref Q-CC-14) as a guide.	
	Note: All paperwork relating to the complaint and the investigations must be forwarded to the Quality Office – no copies of the documentation are to be retained by the investigator.	
5.5.10	Within five working days of the Customer Complaint Form being returned (or after consultation with HR, if appropriate) the Quality Assurance Manager will notify the complainant of the action taken/to be taken, using the Model Response to a Complaint (ref Q-CC-04) as a guide. This will be followed up with further communication if necessary.	QAM
5.5.11	The Quality Assurance Manager will update and review the Customer Complaints Log regularly. Any outstanding complaints will be followed up with the appropriate Manager.	QAM
5.5.12	The complaint will be closed out and recorded as closed in the Complaints Log unless the complainant has communicated in writing that they wish to Appeal against the outcome of the complaint (see 5.6).	QAM
5.5.13	A report on customer complaints will be presented each term to the Senior Leadership Management Team (SLMT). Customer complaints relating to SWDT will be discussed at management meetings of SWDT.	HoQ&HE / QAM / CEO SWDT (if applicable)
5.5.14	Significant complaints, that may pose a risk to the Organisation, will be communicated to the Corporate Board / Executive Council of SWDT.	Vice Principal
5.5.15	At the discretion of the Quality Assurance Manager, particularly significant complaints may be followed-up to check whether the complainant(s) is satisfied with the way in which their complaint was dealt with.	QAM
5.6	STAGE 1 - APPEAL AGAINST THE RESPONSE TO A COMPLAINT	
5.6.1	If the complainant is dissatisfied with the outcome of their complaint, they have 10 working days (from the date of the response letter) in which to appeal. The complainant must appeal in writing and state the reason(s) why they are dissatisfied with the response and, if possible, the outcome they are seeking.	Complainant
5.6.2	On receiving the letter of appeal from the complainant, the Quality Assurance Manager will record receipt of the appeal on the original Complaint Form and log the appeal on the Customer Complaints Log (ref Q-CC-02).	QAM
5.6.3	A formal acknowledgement of the appeal will be sent to the complainant within one working day of receiving the appeal using the Model Appeal Acknowledgement letter (ref Q-CC-10) as a guide. The letter/email will notify the complainant that their complaint will be forwarded to an Appeal Panel and that they will receive a response within 15 working days.	QAM





		Responsibility
5.6.4	The Quality Assurance Manager will appoint two impartial senior managers to consider the Appeal and forward all relevant documentation associated with the complaint, together with a covering memo (ref Q-CC-12) to them.	QAM
	Note: If the complaint was referred to a HR procedure, then the appeals process will be in accordance with the relevant section(s) of that Procedure (ref 3.2).	
5.6.5	Within 10 working days of receiving the appeal letter the Quality Assurance Manager will convene an Appeal Panel Meeting.	QAM
5.6.6	The Appeal Panel will review the complaint and the grounds for appeal. They may also seek/request further clarification/evidence on any point raised in the appeal, including interviewing any relevant parties involved in the complaint as required. The Appeal panel will then make a decision and record the outcome of the Appeal on the Customer Complaints – Appeals Decision Record Form (ref Q-CC-13). The completed form will then be returned to the Quality Improvement Office.	Appeal Panel
	Note: The Quality Assurance Manager will attend the meeting to advise on procedure and provide clarification of any aspect of the complaint and associated information/ documentation.	
	Note: All paperwork relating to the appeal and the investigations must be forwarded to the Quality Office – no copies of the documentation are to be retained by the Appeal Panel.	
5.6.7	The Quality Assurance Manager will then provide a response to the complainant regarding the outcome of the appeal, using Model Appeals Response Letter Stage 1 (ref: Q-CC-15).	QAM
5.6.8	A copy of the letter informing the complainant of the result of the appeal together with all of the relevant documentation associated with the complaint will be retained by the Quality Improvement Office, and saved electronically and logged appropriately.	QAM
5.7 S	TAGE 2 - APPEAL AGAINST THE RESPONSE TO A COMPLAINT	
5.7.1	If the complainant is dissatisfied with the stage 1 appeal decision, they have 10 working days (from the date of the appeal response letter) in which to appeal. The complainant must appeal in writing to the Principal/Chief Executive or Chief Executive Officer SWDT, state the reason(s) why they are dissatisfied with the response and, if possible, the outcome they are seeking.	Complainant
	Note: Should the Principal/Chief Executive or the Chief Executive Officer SWDT, be subject to a complaint or where they have had direct involvement in a complaint, his/her role in the procedure may be undertaken by an appropriate designate.	





		Responsibility
5.7.2	The Principal/Chief Executive/ Chief Executive Officer SWDT/ designate will review the complaint and the grounds for appeal and respond to the complainant within 10 working days.	Principal CE/ CEO SWDT
	If the complainant is on an ESFA course the Model Appeal Response Letter Stage 2 (ref: Q-CC-16) will be used. This letter informs the complainant that they can contact the ESFA and gives details of how to do this, if the complainant feels that their complaint has not been resolved.	Complainant
	If the complainant is attending a Higher Education course through the University of Sunderland the Model Appeal Response Letter Stage 2 (Q-CC- 17) – University of Sunderland will be used. This letter informs the complainant that they can contact the University of Sunderland within 3 months of receiving the complaint decision, and gives details of how to do this, if the complainant feels that their complaint has not been resolved.	Complainant
	If the complainant is attending a Higher Education course (HNC/HND) solely within the College, Model OIA Completion of Procedures Letter (Q-CC-18) will be used. This letter informs the complainant that they can contact the Office of the Independent Adjudicator OIA, within 12 months of receiving the Completion of Procedures Letter, and gives details of how to do this, if the complainant feels that their complaint has not been resolved.	Complainant
	If the complainant is attending an Open University (OU) Course, the Model Appeal Response Letter Stage 2 (Q-CC-19) – Open University will be used. This letter informs the complainant that they can contact the Open University within 3 months of receiving the complaint decision, and gives details of how to do this, if the complainant feels that their complaint has not been resolved	Complainant
5.7.3	A copy of the appeal response will be forwarded to the Quality Improvement Office for filing.	Principal CE/ CEO SWDT
5.8	RECORDS	
5.8.1	The Quality Assurance Manager is responsible for maintaining the documented records associated with this procedure. S/he will determine the records to be held, their location, retention period and dispersion using the 'Guidelines for Completing a Quality Records Schedule' (ref 3.8) for reference. The Quality Records Schedule associated with this procedure is included as section 7.	QAM





6.0	Documentat	ion
6.1	Q-CC-01	Customer Complaint Form
6.2	Q-CC-02	Customer Complaints Log
6.3	Q-CC-03	Model Acknowledgement of Complaint
6.4	Q-CC-04	Model Response to a Complaint
6.5	Q-CC-05	Customer Complaints, Guidelines to Staff
6.6	Q-CC-10	Model Appeals Acknowledgement letter
6.7	Q-CC-11	Memorandum to Line Manager
6.8	Q-CC-12	Memorandum to the Appeal Panel
6.9	Q-CC-13	Customer Complaint- Record of Appeal Panel's Decision
6.10	Q-CC-14	Model Interim Response Letter to a Complainant
6.11	Q-CC-15	Model Appeals Response Stage 1
6.12	Q-CC-16	Model Appeals Response Stage 2
6.13	Q-CC-17	Model Appeals Response Stage 2 – University of
0.4.4	0.00.40	Sunderland
6.14	Q-CC-18	Model OIA Completion of Procedures Letter
6.15	Q-CC-19	Model Appeals Response Stage 2 Open University
6.16	Q-CC-20	Customer Complaints – Guidelines
6.17	Q-CC-21	Investigating Officer's Report
6.18	Q-CC-22	Complaint Interview Form
6.19	Q-CC-23	Arranging a Meeting with a Complainant letter -Stage 1
6.20	Q-CC-24	Letter Following a Meeting
6.21	Q-CC-25	Guidelines for Investigating a Complaint
6.22	Q-CC-26	Memo to Investigating Officer





7.0 Quality Records Schedule

Identification of Record	Medium	Storage Location/ Protection	Retention Period	Access Rights/ Retrieval	Method of Disposal
Completed Customer Complaints Forms and Associated Documentation	Paper Based Electronic	3 Years Quality Office (Locked office/ in a locked cupboard) Then a further 3 Years in College Archive area (Locked room with restricted access) Server files/ Quality folder/Complaints folder (restricted by access rights)	6 Years	Quality Office Staff Filed by academic year in numerical order by log number.	Destroyed (Shredded on site as 'Confidential Waste')
Q-CC-02 Customer Complaints Log	Computer Database	Server files/ Quality folder/Complaints folder Password protected and restricted by access rights	6 Years	Quality Office Staff	Deleted





Appendix 1 – Early Resolution

- 1. Early resolution is designed to address straightforward concerns swiftly, before it is escalated to a formal complaint. This might include:
 - Giving more information or a more detailed explanation
 - Suggesting solutions
 - Being empathetic and understanding when there is no apparent solution
 - Giving an apology where it seems appropriate to do so
- 2. Questions to consider in attempting early resolution of concerns might include:
 - What specifically is the concern about and which area(s) of the Organisation is/are involved?
 - What outcome is the student hoping for and can it be achieved?
 - Is the concern straightforward and likely to be resolved with little or no investigation?
 - Can it be resolved on the spot by providing, where appropriate, an explanation, an alternative solution or an apology?
 - Can someone else assist in seeking resolution, for example where an informal administrative resolution is required?
 - Would it be helpful to use confidential mediation or conciliation, and are the parties willing to do so?
 - What assistance or support can be provided to the complainant in taking this forward?

Mediation and Conciliation are usually voluntary processes where an impartial, independent third party helps parties to a dispute, resolve issues confidentially. Using mediation or conciliation during the early resolution stage can help both parties to understand what is driving the concern and may be more likely to result in a swift and mutually satisfactory conclusion being reached.

- 3. Whatever early resolution mechanism is used, the complainant should be able to air their concerns and feel that they have been listened to. It may be possible to resolve the concern by providing an on-the-spot explanation of why the issue occurred and/or (where appropriate) an apology and an explanation of what will be done to stop a similar situation happening in the future.
- 4. If responsibility for the issue raised lies in the staff member's area of work, every attempt should be made to resolve the concern at source in consultation with the complainant. If responsibility lies elsewhere, the staff member should work with the relevant colleagues to help resolve the complainant's concern, rather than simply passing the complainant on to another office. Where this is not possible, and the complainant is directed to liaise with another office, it is good practice to introduce the complainant to the person who will deal with the concern or to make an appointment for the complainant at the earliest opportunity.
- 5. Where it is clear early resolution is not appropriate or possible, and that a concern will need to proceed immediately to the formal stage, the complainant should be directed promptly to the Customer Complaints Procedure and Customer Complaints Guidelines (Q-CC-20). They should be advised to complete the appropriate form or email <u>Quality@bacoll.ac.uk</u> to provide full details of the complaint and to provide any relevant documentation.
- 6. It is good practice to record the actions taken to consider and resolve the concern. The decision and minimum details of what was communicated with the complainant should be forwarded to the Quality office for logging purposes.