

Policy on the Management of Unreasonable, Persistent or Vexatious Contacts

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Title:	Policy on the Management of Unreasonable, Persistent or Vexatious Contacts		
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1.0 Introduction and Policy Statement

- 1.1 This policy relates to RQIA's management of unreasonable, persistent or vexatious contacts.
- 1.2 RQIA recognises that managing unreasonable, persistent or vexatious contacts can place an unreasonable and disproportionate strain on organisational time and resources and can also cause avoidable stress for staff. While RQIA staff must always respond in an appropriate and professional manner when dealing with such contacts, there may be times when nothing further can reasonably be done to assist the person(s) with regard to rectifying a real or perceived problem.

2.0 Scope

- 2.1 This policy and procedure applies to all RQIA staff, including temporary and agency staff and those contracted to work on behalf of RQIA.
- 2.2 RQIA receives valuable intelligence and information from the public regarding the experience of those using HSC services.
- 2.3 In all our interactions with those who contact RQIA, staff should respond in an appropriate and professional manner at all times. However, circumstances may arise when, despite taking all reasonable and appropriate steps, our responses have been exhausted in an effort to assist a person(s) and where further contact with the person(s) places inappropriate, disproportionate and unreasonable demands on RQIA resources.
- 2.4 In such circumstances and, in consultation with the Office of the Chair and Chief Executive, it will be established if this Policy should be applied. For those complaints / concerns / issues that are in relation to the Office of the Chair and Chief Executive, the Chair or an Authority Member who has not been involved previously in the contact should establish if this Policy should be applied.
- 2.5 The source from which RQIA may receive such contact can be diverse in nature and may incorporate a wide range of information; this includes but is not limited to the following:
 - Current / previous service users;
 - Relatives / friends of service users;
 - Previous staff;
 - Members of the Public;
 - Other statutory / non-statutory organisations; and
 - Commissioners of HSC services.
- 2.6 However, where contacts are **abusive, violent or aggressive**, whether verbally or physically or in writing, RQIA's Policy on Zero Tolerance on The Abuse of Staff must be invoked immediately.

The following definitions have been set out in the Departmental Circular HSS (Gen) (3) 2007 on Zero Tolerance:

- Non Physical Abuse: The use of inappropriate words or behaviour causing distress and/or constituting harassment. This includes receipt of abusive telephone calls from any source.
- Physical Abuse: The intentional application of force against the person of another without lawful justification resulting in physical injury or personal discomfort.
- Anti-Social Behaviour: The following are examples of anti-social behaviour that are not acceptable at, or in connection with, work:
 - Excessive noise, eg: loud or intrusive conversation, or shouting;
 - Threatening or abusive language including excess swearing or offensive remarks or gestures;
 - Derogatory racial, religious or sexual remarks or behaviour;
 - Malicious allegations relating to members of staff;
 - Inappropriate behaviour as a result of alcohol or misuse of illicit drugs, including non-prescribed medication or drugs;
 - Intimidation, threats or threatening behaviour (eg 'I know where you live');
 - Harassment or stalking;
 - Violence, perceived acts of violence or threats of violence;
 - Any explicit or implicit challenge to the safety, well-being or health of any member of staff; and
 - Brandishing weapons or objects which could be used as weapons.

Examples of unacceptable behaviour include, but not exclusively, threats, verbal abuse, derogatory remarks, rudeness, racist, sexist, homophobic, transphobic, disablist or other harassment based on personal characteristic.

The Zero Tolerance Policy is due to be replaced by the regional Management of Violence and Aggression (MOVA) Framework - date to be confirmed. Until then, the Zero Tolerance Policy remains extant.

- 2.7 Where contacts are making a complaint about RQIA, RQIA's Complaints Policy must be followed and the complaint must be managed by RQIA's Complaints and Representations Manager.
- 2.8 When a contact is received is it important that it is handled appropriately; therefore, the following key points should be considered:
- a) When responding to a contact, RQIA is cognisant that habitual or vexatious contacts may still include information which is of importance to our regulatory role or valid grounds for dissatisfaction with RQIA. As such, there is a need for full consideration of all information shared with RQIA as it pertains to its statutory functions.

Staff should also remain vigilant for any disclosures made by the person(s) which require an appropriate safeguarding referral. Furthermore, staff should ensure that, where appropriate, necessary signposting to other public bodies / organisations is provided, eg: The Patient and Client Council (PCC); Northern Ireland Public Services Ombudsman (NIPSO); relevant Health and Social Care Trust safeguarding teams; relevant statutory / non-statutory mental health teams.

- b) If point (a) has been satisfactorily addressed and when the decision-making process has been undertaken by the receiving member of staff, their line manager and

Director, the Office of the Chair and Chief Executive will determine if the contact has become unreasonable, persistent or vexatious. For those complaints / concerns / issues that are in relation to the Office of the Chair and Chief Executive, the Chair or an Authority Member who has not been involved previously in the contact should establish if this Policy should be applied.

3.0 Definition and Criteria of an Unreasonable, Persistent or Vexatious Contact

A contact may be deemed to be unreasonable, persistent or vexatious where previous or current contact with the person(s) shows that the contact meets any one of the following criteria:

- a) Persistence by the person in pursuing a further response after the appropriate RQIA policy, eg: the Complaints Policy and/or Concerns Procedure have been fully and properly implemented and exhausted (ie: after all reasonable and appropriate responses have been applied by RQIA in responding to the contact).
- b) Repeated alteration to the substance or focus of a complaint / concern / issue by the person upon receipt of an appropriate response to the initial complaint / concern itself (Note: not all persons who raise further complaints / concerns on receipt of a response are unreasonable, persistent or vexatious and staff must exercise care to ensure that new information provided by the person(s) is responded to appropriately; judgement and discretion must therefore be used when considering whether new information received should be viewed as a separate and legitimate complaint / concern).
- c) Where receipt of an adequate response from RQIA is denied by the person(s) in spite of correspondence specifically answering the questions raised, or denial of the factual accuracy of relevant documented evidence addressing the complaint / concern / issue.
- d) Where the complaint / concern / issue does not clearly identify the precise issue(s) which the person(s) wishes to be investigated, despite reasonable efforts by RQIA staff to help the person(s) specify their concerns, and/or where the issues identified are not within the remit of RQIA to investigate.
- e) Where the person persistently and/or disproportionately focuses on minor aspects of a complaint / concern / issue which have been reasonably addressed by RQIA as a whole (Note: It is recognised that determining what constitutes a 'minor' matter can be subjective; therefore, careful judgement must be used in applying this criterion).
- f) Where the person(s) evidences a refusal to recognise reasonable limitations on RQIA when providing factual information - 'reasonable limitations' may include the age, volume, ability to retrieve, or confidential nature of the information being requested (Note: Freedom of Information and/or Subject Access Requests do not fall under the remit of this policy and should be managed in keeping with relevant policy / procedures).
- g) Where the person(s) engages in communication with RQIA staff in a threatening, intimidating, harassing or otherwise inappropriate manner (such communication

includes but is not limited to verbal, written and electronic forms) all instances of abusive behaviour towards staff should be managed in line with the RQIA Zero Tolerance Policy on The Abuse of Staff, in order that staff welfare is promoted and maintained at all times.

- h) RQIA staff should also recognise that, given the nature of the contact who has concerns / issues, the person(s) may demonstrate emotions and behaviours which are challenging and every effort should be made by staff to respond appropriately in these circumstances as far as it is practicably reasonable and safe to do so. RQIA also recognises that specific behaviours may be as result of the person(s) living with mental ill-health; as such, it is incumbent upon all RQIA staff to bear this in mind when communicating with the person(s) and advice should be sought from relevant colleagues, if required. Staff should remain mindful of this factor at all stages of the procedure as outlined further below.

4.0 Initiating the Process

- 4.1 Once an RQIA staff member considers that a person's actions are potentially unreasonable, persistent or vexatious in nature, they should **immediately inform their line manager and complete Appendix A (Sections 1, 2 and 3) – this is Stage 1.**
- 4.2 Reference should be made to this policy by the staff member making such contact, while outlining which of the criteria under 3 a) to h) are viewed as being potentially applicable.
- 4.3 This assessment should then be shared with an appropriate RQIA Director who will meet with the staff member and the line manager to determine whether the status of unreasonable, persistent or vexatious should be applied – **this is Stage 2.**
- 4.4 **Appendix A** should be completed to record this decision-making and saved within the Concerns module of iConnect (where appropriate) or on the RQIA network. In order to easily search for such entries within the iConnect Concerns module, inspectors should use the term 'vexatious' within the free narrative Details of the Concern section.

5.0 Responding to Unreasonable, Vexatious or Abusive Complaints / Concerns

- 5.1 When Stage 2 has been completed and it has been agreed that unreasonable, persistent or vexatious status applies, the **RQIA Director** will respond in one or more of the following ways:
 - a) Make a recommendation that the person is informed in writing (see **Appendix C**) that their contact about complaint / concern / issue has been viewed as unreasonable, persistent or vexatious in nature. Reference should be made in this correspondence to this Policy and the person(s) should be advised to take account of the criteria contained therein during any further dealings with RQIA.
 - b) Make a recommendation to decline any further contact with the person either face-to-face, by telephone, by email, by other electronic means, by letter or any combination of these, or restrict contact to liaison through a third party. If RQIA staff are to withdraw from any subsequent telephone / face-to-face contact with the

person(s), an agreed form of words should be established in the event of subsequent and unsolicited contact from them.

- c) Make a recommendation that the person is informed in writing (see **Appendix C**) that RQIA has responded fully to the points raised, and has tried to resolve the complaint / concern / issue, as far as reasonably possible. The person should also be advised that all further written communications concerning the complaint / concern / issue which is received by RQIA will be acknowledged but not answered.
- d) Make a recommendation that the person is informed in writing that, in extreme circumstances, RQIA reserves the right to pass unreasonable, persistent or vexatious contacts about complaints / concerns / issues to its legal representatives and/or to the Police Service of Northern Ireland (PSNI) if violence or threats are made against staff.
- e) Make a recommendation to temporarily suspend all contact with the person regarding their complaint / concern / issue whilst seeking legal advice and the person(s) will be advised in writing accordingly.

5.2 RQIA's Office of the Chair and Chief Executive will record all instances whereby contact(s) are considered unreasonable, persistent or vexatious in nature. This may also be recorded in the Concerns Module within iConnect, where appropriate and/or on the RQIA network. Where it is decided to restrict direct personal contact, an entry noting this decision will be made using **Appendix A** and saved in the relevant Concern record within iConnect and in an Office of the Chair and Chief Executive folder on the RQIA electronic network. Any decision to restrict direct personal contact may be reconsidered at a future stage if the person exhibiting unreasonable, persistent or vexatious behaviour demonstrates a more acceptable and conciliatory approach.

5.3 The Director should ensure that a timescale is agreed upon and documented with regard to reviewing the unreasonable, persistent or vexatious status; this review should establish whether the unreasonable, persistent or vexatious status still applies or whether it can be rescinded; such reviews should occur not longer than three months following the initial completion of Stage 2 of this process or any subsequent reviews. It shall be the responsibility of the relevant staff member to convene any agreed review meeting with the relevant Director.

6.0 Withdrawing 'Unreasonable, Persistent or Vexatious' Status

6.1 Once a person's contact about a complaint / concern / issue has been viewed by RQIA as unreasonable, persistent or vexatious, there needs to be a mechanism in place for withdrawing this status at a later date if, for example, the person subsequently demonstrates a more reasonable approach or if they submit a further complaint / concern / issue superseding the initial complaint / concern / issue for which RQIA's Complaints Policy / concerns procedures are appropriate.

6.2 RQIA will seek to withdraw this status as soon as it is reasonable and appropriate to do so.

- 6.3 When RQIA writes to the person(s) (Appendix C), the person(s) will be afforded a right of appeal within 20 working days (to be heard by a senior officer who has not been involved in the application of the unreasonable, persistent or vexatious status).
- 6.4 Should such an appeal be lodged within the specified timeframe, it will be reviewed by either a Director or an appointed senior officer, not previously involved in this process.
- 6.5 This Director or appointed senior officer will review all relevant information and determine whether or not they are satisfied there are sufficient grounds to withdraw the unreasonable, persistent or vexatious status, as outlined in the initial letter (Appendix C) to the person(s).
- 6.6 If following this review, it is RQIA's decision to withdraw the unreasonable, persistent or vexatious status, as outlined in the initial letter (Appendix C) to the person(s), a meeting will be convened between those staff initially involved in Stage 2 of this process in order to review the situation and make a decision on future actions.
- 6.7 Staff should use discretion in recommending unreasonable, persistent or vexatious status at the outset and seek guidance from their line manager. This approach should similarly be used in recommending that this status be withdrawn when appropriate.
- 6.8 Upon recommendation that the unreasonable, persistent or vexatious status is withdrawn, the decision-making should be recorded by the Office of the Chair and Chief Executive and should also be recorded in the relevant Concern record on iConnect, or on the RQIA electronic network, where appropriate.
- 6.9 Following a recommendation to withdraw the unreasonable, persistent or vexatious status, and subject to the Chief Executive's approval, a letter will be issued to the person(s).
- 6.10 Normal contact with the person(s) should be resumed and application of the appropriate RQIA Policy will once again apply.

7.0 Responsibilities

- 7.1 **The Authority** has overall responsibility for ensuring that all relevant RQIA policies and procedures are developed in line with this policy. The Authority has also responsibility to ratify policies / procedures brought to their attention by the Executive Management Team.
- 7.2 The **Chief Executive** is responsible for the effective implementation of this policy and procedure.
- 7.3 The **Office of the Chair and Chief Executive** is responsible for issuing of the relevant letters, while ensuring timescale for review are adhered to.
- 7.4 The **Executive Management Team** has responsibility to approve draft policies and procedures and, when appropriate, to bring relevant policies / procedures to the Authority (through the Business, Appointments and Remuneration Committee) for ratification.

7.5 The **Policy Sub Group** has responsibility to examine draft policies in line with its Terms of Reference before submission to the Executive Management Team for approval.

7.6 All **Staff** have responsibility to adhere to this policy and procedure.

8.0 Equality

This policy and procedure has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998. The screening has identified specific equality impacts for individuals living with mental ill-health and outlines the way these will be addressed. The equality screening has been published and can be accessed [here](#).

9.0 Monitoring and Review

This policy will be reviewed through the RQIA Policy Sub Group and at relevant Executive Management Team meetings for review and update, as necessary. This policy will be reviewed every three years.

Appendix A: Decision-Making Form

Decision-Making regarding a Potential Unreasonable, Persistent or Vexatious Contact

Stage I: Staff member to complete Sections 1, 2 and 3 and discuss with line manager

Sections 1, 2 and 3 Completed by	<Insert Name of Staff Member>
Date	<Insert Date>
Discussed with Line Manager	<Insert Name of Line Manager>
Discussed on	<Insert Date>

Section 1: Background / Context
<p style="color: red;">Insert details of the contact eg:</p> <ul style="list-style-type: none"> • Who / when / how has this contact been made with RQIA? • Does it relate to a regulated / non-regulated service? • Include details of any related intelligence held by RQIA in respect of this contact. • Expand, as necessary. • Has this person(s) previously been dealt with under the RQIA Policy on the Management of Unreasonable, Persistent or Vexatious Contacts?

Section 2: Regulated / Non-Regulated Service – complete boxes as appropriate	
Registered Provider	<Insert Name>
Responsible Individual(s) / Responsible Person	<Insert Name>
Chief Executive / Managing Director	<Insert Name>
Name of Manager (include date of RQIA registration, if applicable)	<Insert Name>
Concern and/or Notification Reference	<Insert Reference and add iConnect link if possible>

Section 3: Application of Criteria (3. a-h) or removal of 'unreasonable, persistent or vexatious' status (as appropriate)

- How does this contact potentially meet any of the criteria (3. a-h) outlined in RQIA's Management of Unreasonable, Persistent or Vexatious Contacts Policy? Please cite each relevant criterion providing evidence of how it applies in this instance.
- Ensure the associated flowchart (Appendix B) is followed.
- Ensure that the RQIA Office of the Chair and Chief Executive is informed, as appropriate.

Stage 2: Meeting with Staff Member, Line Manager and Director

Section 4: Meeting with Staff Member, Line Manager and Director	
Meeting held on	<Insert Date>
Time	<Insert Time>
Location	<Insert Location>

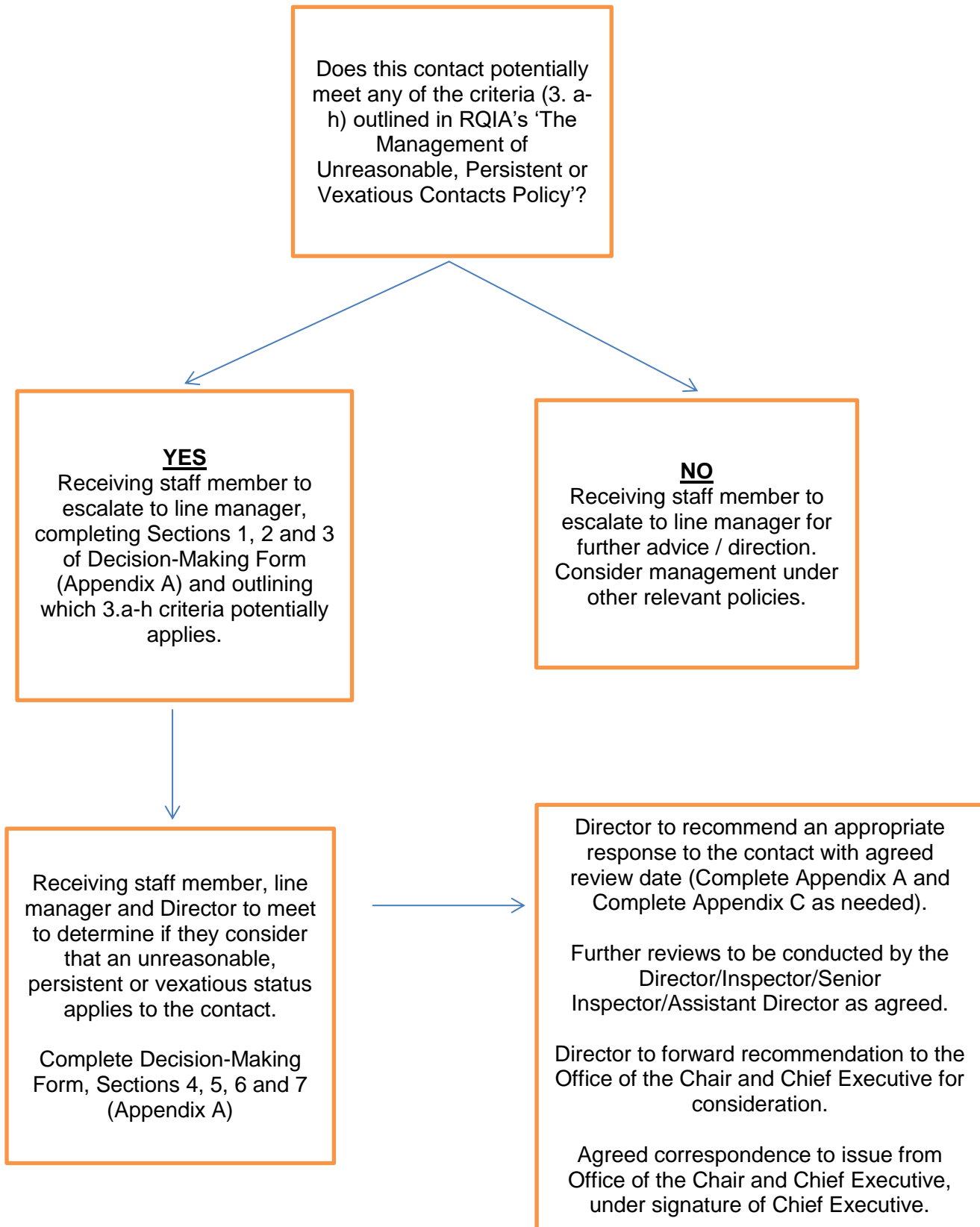
Attendees	Designation
1 <Insert Name>	<Insert Designation>
2 <Insert Name>	<Insert Designation>
3 <Insert Name>	<Insert Designation>
4 <Insert Name>	<Insert Designation>

Section 5: Having considered information provided under Sections 1, 2 and 3:						
Should this be managed using the RQIA Complaints Policy? If yes, refer to the RQIA Complaints and Representations Manager.	Yes		No		N/A	
Should this be managed under the RQIA Zero Tolerance Policy? If yes, invoke the RQIA Zero Tolerance Policy.	Yes		No		N/A	
Should this be managed using the RQIA Policy on the Management of Unreasonable, Persistent or Vexatious Contacts?	Yes		No		N/A	

Section 6: Decisions and Outcomes Agreed (please include timescales, where relevant)						
<ul style="list-style-type: none"> Ensure that other relevant policies have been fully and properly implemented and exhausted, where appropriate. Ensure that the Office of the Chair and Chief Executive has been informed, as appropriate. Ensure that signposting, where appropriate, has been facilitated to organisations, such as: The Patient and Client Council (PCC); Northern Ireland Public Services Ombudsman (NIPSO); relevant Health and Social Care Trust safeguarding teams. Ensure that outcomes include an agreed review period. 						
Review period required?	Yes		No		N/A	
Review date (please refer to Section 6 of this Policy for timescale limit)						

Section 7: Approval		
Attendee Name	Signature	Date
1		
2		
3		
4		

Unreasonable, Persistent or Vexatious Contacts Flowchart



Our ref: <INSERT REFERENCE>

<INSERT DATE>

Private and Confidential

Name of recipient
Street
Town
Postcode

Dear Name of recipient

Nature of Contact

Name of establishment/agency (RQIA ID: XXXXX)
Address of establishment/agency

RQIA acknowledges receipt of your recent **correspondence / communication** by [telephone / email / letter] on [enter date] about XXXXX.

After careful consideration, RQIA views this **correspondence / communication** as **unreasonable / persistent / vexatious [delete as necessary]** in nature due to the following reason(s):

- (a) The **correspondence / communication** is considered unreasonably persistent despite the matter having been addressed already via the RQIA **Complaints Policy / Concerns Procedure**.
- (b) The **correspondence / communication** evidences unreasonable alteration to the substance and / or focus of the initial **complaint / concern / issue**.
- (c) The **correspondence / communication** evidences a refusal on your part to acknowledge receipt of previous correspondence from RQIA addressing the matter and / or denying the factual accuracy of RQIA's findings.
- (d) The **correspondence / communication** does not clearly identify the precise issues which you wish to have investigated / reviewed despite reasonable efforts by RQIA staff to help you specify your **complaint / concern / issue**.
- (e) The **correspondence / communication** evidences a persistent and / or disproportionate focus on elements of the **complaint / concern / issue** which have been reasonably addressed by RQIA as a whole.
- (f) The **correspondence / communication** evidences a refusal on your part to recognise reasonable limitations on RQIA when providing factual information.
- (g) The **correspondence / communication** has been viewed as being in breach of RQIA's Policy on Zero Tolerance on The Abuse of Staff and has it is deemed to be **threatening / intimidating / harassing / abusive** in manner.

Having undertaken this review, we deem this **correspondence / communication** to fall within the RQIA Management of Unreasonable, Persistent or Vexatious Policy and therefore we will **[enter summary of agreed action – refer to Section 5.1 a-e for potential options]**.

If you wish to appeal this decision, you should write formally to the Office of the Chair and Chief Executive via Info@rqia.org.uk within 20 working days of the date of this letter, explaining why you think our decision is incorrect.

RQIA will keep this decision under review and provide you with any relevant update, as appropriate.

Yours sincerely

Briege Donaghy
Chief Executive

Copy: Office of Chair and Chief Executive
Relevant Director
Relevant Assistant Director