

# **PCC's Complaints Policy**

## **(includes PCC's unacceptable actions policy)**

March 2024

Version	5
Date Equality Screened	
Approved by EMT	15/4/24
Approved by Business Committee	23/4/24
Approved by Council	22/5/24
Review Date	2027

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Our Journey**

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## **COMPLAINTS POLICY**

### **1. INTRODUCTION**

- 1.1 The Patient and Client Council (PCC) is an Arms-Length Body of the Department of Health. Established as part of the 2009 reform of Health and Social Care, we are tasked with providing a powerful, independent voice for the public on health and social care issues across Northern Ireland.
- 1.2 Our vision is for a Health and Social Care Service, actively shaped by the needs and experience of patients, clients, carers and communities. The public are experts, by experience, in the care they or their loved ones receive. It is vital that organisations, clinicians and planners recognise the public as assets in their own care and in helping to develop and deliver new services.
- 1.3 We provide advocacy services for the public, which range from helpline advice, early resolution of issues, individual advocacy, to supporting people through formal complaints and Serious Adverse Incidents. We provide crucial support when people are often at their most vulnerable.
- 1.3 The PCC employ 35 staff working full-time and part-time to support this work. Staff are headquartered at our office base (Great Victoria Street, Belfast) as well as operating from three other sites in Ballymena, Lurgan and Omagh. Back office arrangements are in place with the Business Services Organisation (BSO) including IT, Finance, HR and Procurement.

### **2. Aim of the Complaints Policy**

- 2.1 The PCC strives at all times to deliver high quality services in all aspects of its business and works to identify how improvements can be made on an on-going basis. The organisation recognises that sometimes things can go wrong and when this happens it is in everyone's best interest to resolve concerns and complaints at the earliest possible stage. This Policy is therefore designed to encourage early and local resolution of complaints at the front line

but also puts in place a system to investigate and resolve complaints where local resolution has not worked, for whatever reason.

## 2.2 The Policy aims to:

- Seek to resolve problems by informal means at an appropriate level wherever possible, and provide a straightforward and accessible means of resolution where informal means do not work;
- Assist the PCC in improving its services by learning from the feedback, experiences and concerns of its stakeholders, customers and others;
- Protect the rights and confidentiality of those who raise concerns with the PCC;
- Ensure that senior management are informed of issues being raised through complaints so that services can be improved;
- Provide consistent equal treatment of all persons who raise concerns through this Policy with the PCC.

## 3. Responsibilities for Complaints Management in the PCC

3.1 All staff within the PCC have a responsibility for the effective and efficient resolution of complaints in support of this Complaints Policy and to respond to complaints in a positive way. In addition, there are also designated roles and responsibilities to support complaints management within the organisation:

All complaints will be managed in accordance with this policy and the escalation process followed as per the policy. No complaints will be directly managed by the Head of Operations or Chief Executive Officer.

**Complaints Manager** – this is the Business and Governance Manager. All complaints go to the Complaints Manager in the first instance so that they can be registered. The Complaints Manager will also acknowledge receipt of the complaint within three working days and will be responsible for investigating complaints in the first instance. This may include delegating some aspects to other members of the team.

They are responsible for providing quarterly data to the Executive Management Team (EMT) and Business Committee. The Complaints Manger is responsible for the review of complaints, and ensuring the implementation and operation of the Complaints Policy, including ensuring administrative errors are put right and flaws in processes are remedied;

**Head of Operations** - the Head of Operations has been designated by the Chief Executive to be responsible for the overall management of the complaints arrangements in the PCC (under review). They will also investigate complaints escalated by the Complaints Manager where the individual is unsatisfied with the Complaints Manager's response or investigation.

**Chief Executive** - the PCC's Chief Executive has overall responsibility for the Complaints Policy and ensuring its effective application and providing assurance to the Board in this regard;

**Business Committee** – the Business Committee is responsible for providing assurance and challenge in relation to the application and compliance of the organisation in respect of complaints management;

**Council** – the PCC's Council are responsible for ensuring there is an effective complaints policy in place and that complaints are monitored, reported on, and lessons learnt;

**All staff** – all staff are responsible for undertaking their roles and responsibilities in line with the procedures and processes in line with the organisation's values and behaviours. All staff must be familiar with this Policy and how complaints are managed within the organisation.

#### **4. What is a Complaint?**

- 4.1 The PCC considers that a complaint is any oral or written expression of dissatisfaction by any person, however made, about the service, actions or inactions of the PCC or its staff which requires a response. The PCC also

recognises the benefits of getting it right first time and this applies to how concerns are dealt with across the organisation.

- 4.2 Normally complaints should be submitted within 6 months of the event occurring however delayed complaints may be considered by the PCC depending on the nature of the complaint and the reasons for the delay.
- 4.3 The Complaints Policy does not cover complaints in relation to Freedom of Information or the UK General Data Protection Regulation (GDPR).
- 4.4 It is important that the person impacted by the service/incident (in whichever form) is the person who makes the complaint to the PCC, however sometimes that may not be possible and a third party may need to make a complaint on the person's behalf. In those circumstances it is important for data protection purposes that the aggrieved individual provides clear written authority to the PCC that they have designated a person to act on their behalf.
- 4.5 PCC staff who have concerns should raise these internally through already existing PCC policies including the Grievance Procedure and Whistleblowing Policy rather than the Complaints Policy.

## **5. Complaints Procedure**

### **Informal Complaints**

- 5.1 The best way to resolve most complaints, feedback or concerns is informally and directly with the member of staff in the PCC who is providing the service. Most often these complaints/feedback take the form of phone calls, face to face contact or email. PCC staff have been trained in managing complaints including the benefits to all parties of resolving concerns quickly and efficiently at local level.
- 5.2 If the informal complaint is about the behaviour of a member of staff, a line manager or more senior manager may deal with the individual directly. A line manager assisting with the complaint at local level might also occur if the staff member is on leave or if the person raising the concern would rather speak to another member of staff.

5.3 It is important that lessons learnt through this informal process are shared and changes made where these are relevant. Therefore any complaints which have been resolved informally will be discussed at practice team meetings so there is learning for all at a local level and recognition for the staff member who successfully resolved the complaint. Furthermore, PCC staff are required to note any informal complaints as an '*expression of dissatisfaction*' so that outcomes from these complaints continue to inform service delivery and are not repeated. Managers must inform the Complaints Manager of any 'expression of dissatisfaction' so that these can be recorded together with any lessons learnt. This also helps the organisation identify if there are any trends.

### **Formal Complaints**

5.4 There may be times when an individual is not satisfied with how their concerns or feedback were managed under the informal complaints procedure (above) or it may be that they wish to elevate their concern directly under the formal complaints procedure. There are two stages in the PCC's formal complaints procedure.

#### 5.5 **Stage One**

If an individual wants to raise a complaint under the formal complaints procedure they can do so in a number of ways:

- They can inform the PCC staff member who they have been dealing with under the informal stage above in which case the member of staff will supply the individual with the PCC's Complaints form (by email or hard copy). A copy of this Policy will accompany the Complaints form;
- The individual can email the PCC directly at [info@pcc-ni.net](mailto:info@pcc-ni.net) and detail their complaint by email.
- The individual can write to the PCC.

5.6 Complaints in the PCC are received in the first instance by the Complaints Manager who will ensure that the complaint is acknowledged within three

working days. This will include contacting the individual before formal investigation takes place to acknowledge their dissatisfaction and to determine the following:

- Agreeing the issues of complaint and outcome sought.
- Is there anything that can't be considered under the CHP?
- What outcome does the customer want to achieve by complaining?
- Are the customer's expectations realistic and achievable?

5.7 The Complaints Manager will investigate the complaint and aim to respond to the complaint within 20 working days. A number of complaints can be responded to sooner than this and the PCC will try to resolve formal complaints as quickly as possible.

5.8 The format of the investigation will include but is not limited to:

- Determining what happened (this could include, for example, records of phone calls or meetings, work requests, recollections of staff members or internal emails);
- Assessing what should have happened (this should include any relevant policies or procedures that apply);
- Assessing is there a difference between what happened and what should have happened, and is the organisation responsible;
- Identifying a potential resolution.

5.9 The Complaints Manager is also responsible for:

- Reviewing the outcome of complaints received under the informal procedure;
- Ensuring compliance with the Complaints Policy;
- Ensuring lessons learnt are shared as relevant across the PCC;
- Ensuring changes to process/systems take place as relevant;
- Reporting on the application of the complaints policy to the EMT on a regular basis, including the nature and outcome of complaints;

- Ensuring complaints are reflected if required in the PCC Risk Registers (local and corporate) and that outcomes or lessons learnt are reflected in service improvement initiatives.
- 5.10 To resolve complaints the Complaints Manager may need to contact the individual directly for additional information or clarity during the investigation. This will be within the 20-working day timeframe. In addition, the Complaints Manager may decide that an alternative form of resolution is required depending on the nature of the complaint e.g. mediation, face to face meeting.
- 5.11 It is important that formal complaints to the PCC are made in writing and contain the detail of the issue being raised. This is so complaints can be fully understood and the matters investigated promptly. There may be times however that due to reasons such as disability that a complaint cannot be made in writing. In these circumstances the Complaints Manager will work with the individual (this may include a meeting) to best understand the issues being raised. The Complaints Manager will also agree the best way to provide a response to the individual.
- 5.12 No employee of the PCC will be involved in investigating or determining a complaint in relation to their own acts, omissions or decisions.
- 5.13 In addition, if the complaint is in relation to the Complaints Manager then this will be automatically be dealt with by the Head of Operations.
- 5.14 **Stage Two**
- Should the individual remain unsatisfied with the response they receive from the Complaints Manager under Stage one (above) they have a right of review by the Head of Operations and will be informed of this in the reply to the complaint.
- 5.16 The review will be acknowledged within three working days and again the Head of Operations will seek to reply to the individual within 20 working days, or sooner where possible. In addition, the Head of Operations may decide that an alternative form of resolution is required depending on the nature of the complaint e.g. mediation, face to face meeting.

- 5.17 To ensure the independence of the review the Complaints Manager will not be involved in the stage two Complaints Procedure but will be required to supply the Head of Operations with copies of the original complaint, any additional material received or sought to inform the investigation and a copy of the final response to the complainant.
- 5.18 Should the complainant remain dissatisfied following the review by the Head of Operations they will be advised in the response that they may raise the complaint with the Northern Ireland Public Services Ombudsman (see contacts at end). There are three ways in which a person may raise a complaint with the Ombudsman: by completing an online complaint form; downloading and returning a complaint form; or by contacting their office by phone, email or in writing.
- 5.19 While every effort will be made to investigate and reply to formal complaints within 20 working days there may be times when additional time is needed. If this happens the complainant will be advised at the earliest possible opportunity and within the 20 days. The complainant will be advised of why additional time is required and how long it may take to provide a full response.
- 5.20 At any stage of an investigation of a complaint, it may become apparent that the Disciplinary Procedures should be invoked. If this is the case the Complaints Manager will refer the matter to the Head of Operations in the first instance for those matters to be considered.

## **6. Support for Complainant**

- 6.1 The PCC acknowledges that making a complaint can be difficult and therefore we aim to make the process as easy as possible. We take complaints seriously and aim to resolve them as quickly as possible – the complainant will be supplied with the contact details for the BGM who will be their point of contact and keep them updated as the complaint progresses.
- 6.2 We welcome complainants using advocacy support in the complaints process. This may include other individuals supporting them or attending meetings and notifying this to PCC in advance. On occasion PCC may be able to direct to advocacy support should this be necessary

## **7. Support for Staff**

- 7.1 All PCC staff will be trained in responding to expressions of dissatisfaction and complaints under this policy, and in handling difficult conversations. New staff will also receive this training as part of their induction. In addition, PCC staff who are the subject of complaints may experience anxiety and stress. The PCC will ensure that such staff are supported and that they have access to support (e.g. Trade Union, Inspire, etc.) and if necessary, to appropriate counselling.

## **8. Exceptions**

### Legal Correspondence

- 8.1 In accordance with the directions issued by the Department of Health a complaint about which the complainant has stated that they intend to take legal proceedings will not be considered under this Policy.

### Anonymous Complaints

- 8.2 Where complaints are made anonymously, all issues raised will be reviewed and an investigation carried out if appropriate and feasible given the anonymous nature of the complaint. PCC cannot respond to an anonymous complaint as we cannot contact the complainant.

### 8.3 Safeguarding

If a complainant raises a safeguarding concern about a member of PCC staff, this will be immediately escalated to the Head of Operations/Safeguarding Champion and as appropriate to the Safeguarding Champion at Council Level.

- 8.4 Zero Tolerance Approach towards Unreasonable, Vexatious or Abusive Behaviour including complaints.

While the PCC aims to provide a service which is accessible to all, and to treat those individuals fairly, honestly, consistently and appropriately, it has arrangements in place to deal with complaints which it considers to be unreasonable or vexatious, or in the instance of a complainant becoming abusive or aggressive. Staff are advised under the PCC's Zero Tolerance

Policy that they should be able to undertake their duties without fear of abuse and may terminate calls politely after giving due warning and may report calls that are abusive to their line manager.

## **9. Potential Outcomes**

9.1 Due to the varied nature of complaints the potential outcomes can vary considerably, however in general you can expect the outcome of upheld complaints to result, where feasible and applicable, in:

- An apology;
- An explanation;
- Addressing the error;
- Undertaking service improvement;
- Training for staff;
- A change in policy or procedure.

9.2 This is not a definitive list and a complainant is encouraged to explain the potential outcome they seek when making the complaint.

## **10. Policy Monitoring and Reporting**

10.1 It is essential that the PCC monitors the outcome of complaints (both formal and informal) to ensure that complaints are treated seriously and agreed action is delivered in a timely manner. Monitoring complaints in this way can also identify trends, common issues, whether the procedure for managing complaints about PCC services is accessible and working as defined in this Policy, and to ensure effective oversight including reporting to senior management and the Board.

10.2 To support this the PCC:

- Reviews its Complaints Policy every three years (or sooner if required);
- Logs all complaints whether formal or informal;
- Reports on complaints and outcomes to the EMT on a quarterly basis;
- Reports on complaints and outcomes to the Business Committee and Council of the PCC on a quarterly basis;

- Reports to the EMT, Business Committee and Council on any appeals to the NI Public Service Ombudsman;
- Reports to DoH Accounting Officer on any complaints about PCC accepted by the Ombudsman for investigation, and about the proposed response to any subsequent recommendations from the Ombudsman.
- Reports to DoH via PCC Sponsor Branch on any complaints against PCC Council members or Chair;
- Reports on its complaints management in its Annual Report and Accounts;
- Elevates risks where relevant to its risk register.

## **10. Equality Screening**

- 10.1 This policy has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998. Equality Commission guidance states that the purpose of screening is to identify those policies which are likely to have a significant impact on equality of opportunity so that greatest resources can be devoted to these.
- 10.2 Using the Equality Commission's screening criteria, no significant equality implications have been identified. Similarly, the policy has been considered under the terms of the Human Rights Act 1998, and was deemed compatible with the European Convention Rights contained in the Act.

## **11. Endorsement and Review**

- 11.1 This Policy was endorsed by the Council in XXX 2024 and is due for review by XXX 2027.

## **UNACCEPTABLE ACTIONS POLICY**

### **1 Introduction**

- 1.1 The PCC is committed to providing high quality services and to undertaking its responsibilities to the highest standards possible. PCC wishes to hear about and address any concerns or complaints regarding the way in which it has carried out, or failed to carry out, any of its functions.
- 1.2 The PCC values complaints and views them as a significant source of learning, enabling the organisation to continually improve the quality of its services.
- 1.3 However, on rare occasions, the PCC may receive a complaint which it considers to be unreasonable or vexatious, or may deal with an individual whose actions or behaviour it deems to be unacceptable. This policy sets out the approach which the organisation will follow on these occasions.
- 1.4 This policy is based on Department of Health guidance: Complaints in Health and Social Care – Standards and Guidelines for Resolution and Learning (April 2009).
- 1.5 This policy relates to anyone who contacts the PCC seeking to access PCC services, or to an individual or anyone acting on behalf of an individual who contacts PCC in connection with a complaint or dissatisfaction about the services provided by the PCC.
- 1.6 This policy should be read in conjunction with the PCC's Complaints Policy.

### **2 Aim of the Policy**

The key aims of this policy are:

- 2.1 To make it clear to all individuals both at initial contact and throughout their interactions with the organisation, what the PCC can or cannot do in relation to their issue or complaint. In doing so, the PCC aims to be open and not raise hopes or expectations that cannot be met.

- 2.2 To deal fairly, honestly, consistently and appropriately with all individuals, including those whose actions are considered unacceptable. All individuals have the right to be heard, understood and respected. PCC staff have the same rights. This policy therefore aims to set out the expected standards of conduct and behaviour to which the PCC will subscribe, and which it expects of individuals contacting the PCC.
- 2.3 To provide a service that is accessible to all. However, the PCC retains the right, where it considers a person's actions to be unacceptable, to restrict or change access to the service.

### **3 Defining Unacceptable Actions**

- 3.1 People may act out of character in times of distress. There may have been upsetting or distressing circumstances leading up to a complaint which can affect their behaviour. PCC aim to take a trauma-informed approach to the provision of PCC services.
- 3.2 The PCC does not view behaviour as unacceptable just because a complainant is assertive or determined. In fact, the organisation recognises that being persistent can be a positive advantage when pursuing a complaint, and unfortunately has often been necessary in the experience of many of those who contact PCC for support.
- 3.3 However, the actions of an individual who is angry, demanding or persistent may result in unreasonable demands on the PCC or unacceptable behaviour towards staff.
- 3.4 It is these actions which the PCC considers unacceptable and aims to manage under this policy.
- 3.5 The PCC has categorised these actions under the following headings.

#### **Aggressive or Abusive Behaviour**

- 3.6 PCC recognise that the anger felt by many individuals can be related to the subject matter of their complaint, which is often emotive and borne of difficult

experiences. Whilst PCC recognise this, it is not acceptable however, when anger escalates into aggression toward PCC staff.

- 3.7 The PCC expects its staff to be treated courteously and with respect. Violence of any kind and physical or verbal abuse is unacceptable and a zero tolerance approach will be adopted.
- 3.8 Aggressive or abusive behaviour is considered to be behaviour or language (whether verbal or written, across all mediums and platforms, including email, by phone or on social media) that causes a staff member to feel afraid, threatened or abused – examples of this include threats, physical violence, personal verbal abuse, derogatory remarks and rudeness.
- 3.9 The PCC also considers that inflammatory statements and unsubstantiated allegations can be abusive behaviour.

#### **Unreasonable Demands**

- 3.10 Individuals may make what the PCC considers to be unreasonable demands through the amount of information they seek, the nature and scale of service they expect or the number of approaches they make. What amounts to unreasonable demands will always depend on the individual circumstances surrounding the behaviour and the seriousness of the issues raised by the complainant.
- 3.11 Examples of this would include:
- demanding responses within an unreasonable timescale;
  - insisting on seeing or speaking to a particular member of staff;
  - continual telephone calls, letters or emails;
  - repeatedly changing the substance or nature of the complaint;
  - raising unrelated or unsubstantiated concerns
- This list is not exhaustive.
- 3.12 The PCC considers these demands as unacceptable and unreasonable if they start to impact substantially on the work of the organisation, such as taking up an excessive amount of staff time to the disadvantage of other Individuals or functions.

## **Unreasonable Persistence**

3.13 It is sometimes the case that some Individuals will not or cannot accept that the PCC is unable to assist them further or provide a level of service other than that previously provided. Individuals may persist in disagreeing with the action or decision taken in relation to their complaint or contact the PCC persistently about the same issue.

3.14 Examples of this would include:

- Persistent refusal to accept a decision made in relation to a complaint;
- Persistent refusal to accept explanations relating to what the PCC can do or cannot do;
- Continuing to pursue a complaint without presenting any new information.

The ways in which these individuals approach the PCC may be entirely reasonable, but it is their persistent behaviour in continuing to do so that is not.

3.15 The PCC would consider the actions of persistent individuals to be unacceptable when they take up what the organisation regards as being a disproportionate amount of time and resources.

## **4 Managing Unacceptable Actions**

4.1 There are relatively few individuals whose actions the PCC consider unacceptable. How we manage these depends on their nature and extent. If it adversely affects the PCC's ability to do its work and provide a service to others, the organisation may need to restrict complainant contact in order to manage the unacceptable action.

4.2 The PCC will do this in a way, wherever possible, that allows a complaint to progress to completion through the complaints process.

4.3 The PCC may restrict contact in person, by telephone, fax, letter or electronically or by any combination of these. The PCC will try, however, to maintain at least one form of contact.

- 4.4 In extreme circumstances, the PCC will inform the complainant in writing that their name is on a 'withdraw contact' list. This means that we may restrict contact to either written communication or through a third party, or cease to accept or reciprocate contact entirely.
- 4.5 The threat or use of physical violence, verbal abuse or harassment towards PCC staff is likely to result in the ending of all direct contact with the complainant. All incidents of verbal and physical abuse will be reported to the police.
- 4.6 The PCC does not deal with correspondence (letter, fax or electronic) that is abusive to staff or contains allegations that lack substantive evidence. When this happens, the organisation will tell the complainant that it considers their language to be offensive, unnecessary and unhelpful. The PCC will ask the complainant to stop using such language and state that it will not respond to their correspondence if it continues. The PCC may require further contact through a third party.
- 4.7 PCC's Freephone line is answered by a receptionist whose only role is to appropriately direct a call etc. The PCC recognise that callers may phone in distress but that in order to respond appropriately to their call, there needs to be opportunity for our staff to speak and to respond.
- If the caller does not provide this opportunity, or allow PCC staff to direct the call appropriately from reception, or if the call lasts in excess of 5 mins at the reception stage without redirection, we will advise the caller that we may need to end the call in order to prevent the line being blocked for other callers. If they still do not respond, we will have to end the call.
- The PCC will end telephone calls if the caller is considered aggressive, abusive or offensive. The staff member taking the call has the right to make this decision, tell the caller that their behaviour is unacceptable and end the call if the behaviour continues.
- 4.8 PCC aims to provide a service which is accessible to all. PCC is a small team which responds to a high level of calls and we aim to support the greatest number of people whilst providing a high-quality service. This requires PCC

to manage its resource appropriately, transparently and fairly. Where an individual repeatedly phones, visits the PCC, sends irrelevant documents or raises the same issues, the PCC may decide to, for example:

- only take telephone calls from the individual at set times on set days;
- put an arrangement in place for only one member of staff to deal with calls or correspondence from the individual in future;
- require the individual to make an appointment to see a named member of staff before visiting the PCC;
- require the individual to contact the PCC in writing only;
- return the documents to the individual or, in extreme cases, advise the individual that further irrelevant documents will be destroyed;
- take other action that the PCC considers to be appropriate.

The PCC will inform the complainant of the action it is taking and why.

4.9 Where an individual continues to correspond on a wide range of issues and the action is considered excessive, they will be informed that only a certain number of issues will be considered in a given period and asked to limit or focus their requests accordingly.

4.10 Individual action may be considered unreasonably persistent if all internal review mechanisms have been exhausted and the individual continues to dispute the PCC's decision relating to their complaint.

4.11 In this instance, the individual will be told that no future phone calls will be accepted or engagement granted concerning this complaint. Any future contact by the individual on this issue must be in writing. Future correspondence will be read and filed, but only acknowledged or responded to if the individual provides significant new information relating to the complaint.

## **5 Deciding to Restrict Complainant Contact**

5.1 PCC staff who directly experience aggressive or abusive behaviour from an individual have the authority to deal immediately with that behaviour in a manner they consider appropriate to the situation in line with this policy.

5.2 With the exception of such immediate decisions taken at the time of an incident, decisions to restrict contact with the PCC will be raised by the appropriate Service Manager to the Principal Practitioner or Head of Operations for any further decision on restrictions. Wherever possible, the PCC will give the individual the opportunity to modify their behaviour or action before a decision is taken.

5.4 Individuals will be told in writing why a decision has been made to restrict future contact, the restricted contact arrangements and, if relevant, the length of time that these restrictions will be in place.

## **6 Appealing a Decision to Restrict Contact**

6.1 A complainant can appeal a decision to restrict contact to the Head of Operations. The individual will be advised in writing that either the restricted contact arrangements still apply or a different course of action that has been agreed. There is no further internal appeal. An individual retains the right, having explored this mechanism, to raise the issue with the Northern Ireland Public Services Ombudsman.

## **7 Recording and Reviewing a Decision to Restrict Contact**

7.1 The PCC will record all incidents of unacceptable actions by individuals. Where it is decided to restrict individual contact, an entry noting this is made in the relevant file and on appropriate computer records in accordance with the General Data Protection Regulation.

7.2 A decision to restrict individual contact may be reconsidered if the individual demonstrates a more acceptable approach.

7.3 A quarterly report of this activity will be submitted to the EMT, Business Committee and the Council alongside the annual report for complaints.

