Item 14
For Noting

GLASGOW KELVIN COLLEGE

FINANCE AND RESOURCES COMMITTEE – 11 MAY 2021

ASSESSMENT OF PROCEDURES – SCOTTISH FUNDING COUNCIL - CALL FOR INFORMATION

REPORT BY DIRECTOR OF HUMAN RESOURCES AND DIRECTOR OF CORPORATE SERVICES

1. Introduction

The Scottish Funding Council issued a call for information on the assessment of college procedures in response to the University of Strathclyde Inquiry Report and Independent Review Report at Heriot-Watt University.

The purpose of this report is to provide a brief summary of this assessment.

2. Assessment of Procedures

The College considered in detail the content and recommendations of both reports. These were looked at from both a Human Resources and Corporate Services perspective. The recommendations made were fully considered against the policies, procedures and practices in place within Glasgow Kelvin College and an in-depth analysis and assessment was conducted. This covered the following areas:

- Recruitment
- Complaints
- Working Culture and Working Relationships

The full, completed return submitted by the College by the due date is contained within **Appendix 1**. This included a covering letter, report on the assessment conducted, any resulting actions identified, links to key policies and the provision of associated and relevant procedures.

3. Resource Implications

There will be some resource implications in terms of the Action Plan, however, the vast majority of the items identified within the actions identified were already planned or underway.

4. Equalities

There are equality implications arising from these reports i.e. the importance of ensuring zero tolerance of sexual misconduct within the College. However, the College were already aware of this and various items have been planned to raise the current zero-tolerance profile.

5. Risk and Assurance

There is a risk of complaints arising in relation to sexual misconduct largely due to media attention and awareness raising. The College has also been advised of this via UMAL, the insurance providers. The College will strengthen the messaging around this area and training is also planned.

6. Data Protection

There are no data protection implications arising as a consequence of this report.

7. Recommendations

i) It is recommended that members note the content of this report and its appendices.

8. Further Information

Further information can be obtained from Derek Smeall, Principal, dsmeall@glasgowkelvin.ac.uk, Doreen Shiels, Director of Human Resources, dshiels@glasgowkelvin.ac.uk or Lisa Clark, Director of Corporate Services, lisaclark@glasgowkelvin.ac.uk

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The Board of Management of Glasgow Kelvin College is a Scottish Registered Charity. Registration no. SC021207

DS/LC/1290421

29 April 2021

isg-returns@sfc.ac.uk
Martin Fairbairn
Chief Operating Officer
Scottish Funding Council
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EDINBURGH
EH12 5HD

Dear Martin

Assessment of Procedures – SFC/C1/03/2021

As requested in the above correspondence, we have provided a brief report summarising the outcome of Glasgow Kelvin College's self-assessment exercise against the key findings from the University of Strathclyde Inquiry Report and the Independent Review Report at Heriot-Watt University.

The College considered, in detail, the content and recommendations of both reports. It undertook a comprehensive self–assessment of its own policies, procedures and practices against the key findings of the two reports. A copy of the assessment outcome and associated actions is attached as Appendix 1.

The self-assessment of the College procedures involved a contrast and comparison of its policies, procedures and associated practice in the following areas:

- Recruitment and Selection
- Complaints and management of student complaints
- Dignity and Respect
- Equality and Diversity
- Safeguarding, Children, Young People and Vulnerable Adults
- Disciplinary and management of complaints
- Grievance
- Acceptable Use of ICT
- Social Media
- Professional Development Review
- Staff Development
- Report and Support processes
- Record keeping
- Working relationships
- Communication channels between staff and management
- Use of Settlement Agreements

A number of actions were identified, some of which were already planned, and will be actioned by the College. These include:

- The provision of refresher training for managers in managing harassment incidents and in complaints procedures.
- The progression of the implementation of the Report and Support Tool online as part of the Fearless Glasgow Collaboration to enable students and staff to report anonymously, or directly, gender-based violence and racial harassment issues. This will be launched in session 2021/22.
- A review/amendment of the Disciplinary Procedure and the Dignity and Respect Policy.
- The development and implementation of a Gender-based Violence Policy for staff and students.

The College has provided links to the policies and copies of the procedures and associated documentation referred to as part of the self-assessment process. These include:

- Recruitment and Selection Policy
- Reference Request Form (Character)
- Reference Request Form (Employment)
- Dignity and Respect Policy and Procedure
- Disciplinary Policy and Procedure
- Attendance Management and Support Policy and Procedure
- Equality and Diversity Policy
- Grievance Policy and Procedure
- ICT Acceptable Use Policy
- Safeguarding Children, Young People and Vulnerable Adults Policy and Procedure
- Safeguarding Guidance Card
- Social Media Procedures
- Complaints Handling Procedure

We trust that this is sufficient, however, please do not hesitate to contact me if you require any further information or clarification.

Yours sincerely

Derek Smeall
Principal & Chief Executive

Enc

cc:

I Patrick, Chair of the Board of Management, Glasgow Kelvin College
D Wilson, Clerk to the Board of Management, Glasgow Kelvin College
M Fairbairn, Scottish Funding Council
A Miller, Scottish Funding Council
D Carson, Scottish Funding Council

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Assessment of procedures

SFC Call for Information

Issue Date: 11 February 2021

Assessment of procedures

Issue date: 11 February 2021

Deadline: 30 April 2021

Reference: SFC/CI/03/2021

Summary: This Call for Information requests institutions, following the publications of the independent QC-led reports, commissioned by the University of Strathclyde and Heriot-Watt University, to carry out a self-assessment of their own procedures against the key findings, implement any necessary improvements, and report on the outcome of that exercise.

FAO: Principals / Chairs / Board Secretaries of Scotland's colleges and universities

Further information:
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Assessment of procedures

Assessment of procedures in response to University of Strathclyde Inquiry Report and Independent Review Report at Heriot-Watt University

Purpose

1. This Call for Information requests institutions, following the publications of the independent QC-led reports, commissioned by the University of Strathclyde and Heriot-Watt University, to carry out a self-assessment of their own procedures against the key findings, implement any necessary improvements, and report on the outcome of that exercise.

University of Strathclyde Inquiry Report

2. University of Strathclyde published, on 9 November 2020, the independent QC-led Inquiry Report into the University's handling of past complaints of sexual misconduct against a former member of staff. The report, along with a statement from the University's Principal and Vice Chancellor, can be downloaded through the following link:

   https://www.strath.ac.uk/whystrathclyde/news/statementfromprofessorsirjimmcdonaldprincipalvicechancellor/

3. The report was commissioned following the conviction of Kevin O'Gorman in 2019 for a range of offences committed while in employment at the University of Strathclyde.

Heriot-Watt University Independent Review

4. Kevin O'Gorman was employed subsequently at Heriot-Watt University which also commissioned an independent QC-led review of the systems and processes around his recruitment, the collation of complaints and concerns and his dismissal. The Heriot-Watt University report was published on 18 May 2020 and this report, along with a statement from the University's Principal and Vice Chancellor is available through the following link:

   https://www.hw.ac.uk/news/articles/2020/heriot-watt-university-welcomes-publication.htm

Information requested

5. Both reports will be of interest to all institutions' governing bodies and senior management teams. Given the serious nature of Kevin O'Gorman's crimes, it is important that the findings in the reports are carefully considered and acted upon. Institutions are therefore requested to carry out a self-assessment of

their own procedures against the key findings and implement any necessary improvements.

6. I would be grateful if you could provide a brief report summarising the outcome of your institution's self-assessment exercise against the key findings from the University of Strathclyde Inquiry Report and the Independent Review Report at Heriot-Watt University and, if appropriate, an action plan to address any issues that need to be addressed by 30 April 2021.

7. Electronic copies of the report and supporting documents should be sent to isg-returns@sfc.ac.uk.

Further information

8. Please contact Andrew Millar, Assistant Director, Finance, tel: 0131 313 6538, email: amillar@sfc.ac.uk or Dorothy Carson, Senior Financial Analyst, Finance, tel: 0131 313 6607 email: dcarson@sfc.ac.uk to discuss any aspect of this letter.

Yours sincerely,

Martin Fairbairn
Chief Operating Officer

Appendix 1 - Glasgow Kelvin College

Assessment of Procedures

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Recruitment		
(a) Where the recruitment is not competitive (i.e. only one candidate) special care should be taken in scrutinising that application.	All posts are externally advertised, except under exceptional circumstances. Posts when internally advertised are subject to the same robust process as those advertised externally. The Recruitment and Selection Policy and Procedure is applied to all vacancies. All recruitment and appointments are authorised by the Principal as part of the Recruitment and Selection Procedure. Where an advert attracts one applicant, the College will normally reassess the position and re-advertise it in order to attract a wider range of applicants. On the rare occasion where only one applicant applies for a post and the College proceeds on this basis the application is carefully scrutinised and assessed against the essential criteria and competencies for the role. Any gap(s) in employment history are explored with the candidate. The College's robust recruitment process is consistently applied to all roles regardless of contract status or duration and all candidates are fully assessed for a role to ensure that they are suitable for the position. All pre-employment checks are carried out prior to a formal offer being made, membership of PVG Scheme, references, right to work in the UK, etc. The College review and revise its Recruitment and Selection Policy every three years, or earlier if required, for example due to changes in the legislation, developing case law or operational requirements, in partnership with stakeholders including representatives of its recognised Trade Unions. A PVG update is undertaken for each employee every five years from the date of the previous PVG.	No Action

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Recruitment		
(b) References should not be restricted to academic references only. Employment references should also be obtained.	The recruitment and selection process is centrally managed by the Human Resources Department. Human Resources contact referees as part of this process. Applicants are required to provide the name and address of two referees, one of whom must be the current or most recent employer. References must cover a least three consecutive years. Applicants would be required to provide details of more than two referees where necessary. All references are carefully scrutinised. Any gaps in employment are explored with the applicant during the interview process. References are obtained prior to the candidate commencing employment and fully discussed with the manager. References are held until the employment ends. The same reference procedure is followed for internal candidates.	No Action
(c) Where information is provided about candidates through informal channels, and where that information appears to be credible and to raise matters of concern, it should be referred to the HRdepartment. Decisions about what use can be made of information which is conveyed informally, and what weight, if any, should be placed on it, should be managed by the HR department.	Human Resources manage the recruitment process centrally and no one can commence employment with the College without going through the recruitment and selection procedure or having satisfactorily completed the pre-employment checks. Human Resources ensure that the Recruitment Procedures are consistently applied working in partnership with managers. Any informal information or areas of concern raised are followed up by the HR Department and discussed with management. A record of the discussion and decision are recorded and retained in the Recruitment File. Recruitment files are destroyed after 6 months in line with the HR Data Retention Schedule. New entrants are processed through the HR computerised information system and notified to the HR payroll staff who integrate staff onto the payroll. There is a complete segregation of duties.	No Action

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Recruitment		
Strathclyde University Report, Section E – Para 112. 1. Recruitment and Employment	An audit was undertaken by the College internal auditors in session 2018/19 and the systems were satisfactory, no major weaknesses were identified. The College compare and contrast its policy and procedures with other colleges/organisations, the Chartered Institute for Personnel and Development, the legislation and other sources to ensure compliance and a process which results in the best candidate for the position. Personnel files are maintained by the Human Resources Team to ensure all required documentation is in place and files are audited every two years to remove any unnecessary documentation under GDPR legislation. Files will be converted from paper files to electronic files by the end of session 2021/22. The current Professional Development Review (PDR) process for staff is currently under consideration in light of the GTCS registration requirements for teaching staff. The PDR takes place between the line manager and the employee with both signing off the process. The College make limited use of fixed-term contracts, these are mainly associated with external funding, and the decision to extend a contract of employment is made at senior management level.	No Action.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
(d) The University should consider whether there should be express provision in the Complaints Policy to the effect that members of staff can make representative complaints on behalf of students, and whether it is necessary to review practice in relation to the treatment of issues raised informally.	The College has in place a range of Policies and Procedures which cover appropriate conduct and procedures for raising informal and formal complaints, relating to staff and students, these include: • Dignity and Respect • Equality and Diversity • Safeguarding, Children, Young People and Vulnerable Adults • Disciplinary • Grievance • Acceptable Use ICT • Social Media • Code of Student Discipline • Code of Student Conduct • Student Charter The Dignity and Respect Policy and Procedure applies to staff and students, although the primary responsibility for providing an environment free from harassment rests with the College, informs staff and students that individual employees at all levels and students have a responsibility to assist in the prevention of such acts and help protect themselves and the College from allegations. Responsibility for the application of the policy lies with all managers and supervisors. The Policy is: • contained within the employees self-service account, staff are required to make themselves familiar with policies and procedures. Human Resources monitor the access for new starts and updates. • covered during staff and student induction • contained within the student and staff electronic handbooks • on the staff and student intranet • accessible for students through the MyKevlin app	Organise refresher training and development for managers in managing harassment incidents and cases. Prominent displays of posters throughout the College and displays on the computer screens at logons advising how to complain ie awareness raising. Further promotion of the Zero Tolerance culture.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
	The Policy highlights various contacts for staff and students for reporting concerns or incidents and a range of mechanisms exist for staff and students to raise concerns. Including: • Management • Lecturers • Trade Union representatives • Student Counsellors • Student Association • Student Class representatives • Course Tutor • Colleague • Advice and Guidance The College Complaints Handling Procedure (CHP) is based on the Scottish Public Sector Ombudsman (SPSO) Model CHP. The CHP contains guidance on third party complaints, however, does not reference third party complaints from staff members. Third party complaints from staff members are appropriately managed under the Disciplinary and Grievance Policy. The College has alternative reporting mechanisms in place accessible to staff including the Safeguarding Team, various policies such as the Dignity and Respect Policy and Procedure and the Grievance Procedure. College policies are updated in line with our governance cycle or as legislation dictates. College policies are approved by the Board of Management and staff are advised/directed to review, when amendments are made and at induction. Complaints may be raised by the student, the class as a group or staff member or someone may raise the complaint on their behalf, formally or informally. Complaints raised informally are discussed with the complainant and appropriate advice is provided.	

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
	Informal complaints may be raised by staff through the College Grievance Procedure, this is the first step in the process. Students may raise concerns informally through their class representative, the Student Association, class tutor, their lecturer or through the Advice and Guidance Department. In addition, the College conducts staff and student surveys. The Student Association conduct a pulse check with students titled Stop and Check. Furthermore, the College has a Public Interest Disclosure (Whistleblowing) Policy where individuals may lodge a complaint with the Clerk to the Board of Management who acts independent of the College staff cohort. The College intends to enhance its zero-tolerance culture with increased signage/an enhanced process to report incidents ensuring accessibility for all. At present, information on how to complain is provided to students via the Student Handbook and the MyKelvin app. This could be more prominent throughout the College ie posters and displays on the computer screens at logons. Concerns can be raised through other channels such as the Safeguarding Team or the Dignity and Respect Policy and Procedure/Grievance Procedure. (Staff are notified of changes to policy as they are approved by Board). It is intended that we will increase/raise awareness of existing communication channels to highlight concerns anyone has. Draft guidance for staff and students i.e. who to report to, support available etc. that could be used at staff and student induction, posted on intranet/MyKelvin. Information sessions at staff development days/induction etc. Promote Zero Tolerance culture further throughout the College.	
(e) The University should keep the Report-It app under careful review, paying particular	Matters managed under the College's policies and procedures, including Attendance Management and Support Policy and Procedure, Disciplinary, Grievance and Dignity and Respect Policy are evaluated and the impact of these procedures assessed using information taken from a variety of sources, including:	No additional action. Action was already planned and is well underway.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
attention tothe number and nature of anonymous reports, and should keep a careful record of how they are followed up. At an appropriate future point, the University should consider whether maintaining an anonymous reporting function is merited.	• recorded incidents of harassment through these policies; • information gained from the use of Exit Interviews; • feedback from the general staff through the Joint Forums; • staff attitude surveys; • learner satisfaction surveys; • recorded incidents of harassment raised through the Complaints Handling Procedure (CHP); • quarterly statistics from the Employee Counselling Service; and • information gained from return to work interviews after periods of sickness absence. The College is part of the Fearless Glasgow Collaboration. This is a grouping of further and higher education institutions (Glasgow Caledonian University, the University of Glasgow, the University of Strathclyde, the University of the West of Scotland, the Royal Conservatoire of Scotland, Glasgow School of Art, Glasgow Clyde College, Ayrshire College and the City of Glasgow College), led by Glasgow Caledonian University, for the purchase from Culture Shift of a Report and Support Tool. This online tool will enable students and staff in institutions across Fearless Glasgow to report anonymously, or indeed directly, gender-based violence and harassment issues. It is anticipated that the online tool will be launched in session 2021/22. The website will provide specific advice in relation to sexual harassment and gender-based violence and the support available. Furthermore, in relation to the Report and Support Tool we are launching in session 2021/22, we will undertake an audit of policies and procedures as part of its introduction. Anonymous complaints to the Complaints Team are logged/recorded and investigated/acted upon if sufficient information has been provided.	
(f) The University should take steps to ensure that there is proper coordination and oversight of the various means of making complaints and raising issues	Matters raised under the College employment policies are coordinated by Human Resources Team who advise and support managers and staff throughout the process. A complaint against a staff member by a student is initially investigated through the Complaints Handling Procedure. If there is sufficient evidence to support a formal investigation the matter is concluded under this Procedure and the College Disciplinary Policy and Procedure is invoked.	Advice on how to complain anonymously to be made more prominent. Possible amendment of the Complaints Handling Procedure.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
of concern, and appropriate record-keeping in relation to these matters.	A record of complaints raised under College policies, informal or formal is maintained by the Human Resources Department. The details of a case are anonymised at the appropriate time in accordance with the College data retention schedule and the content of the file destroyed. The College monitor and manage any patterns or trends that become apparent. Each stage of the process is fully documented in written notes. The manager will produce a written report articulating a justification for the decision/action proposed/take at each stage of the procedure. There is a segregation of roles between the manager conducting the investigation and the manager hearing the complaint. Discipline and Grievance numbers and the nature of issues are reported annually to the Board of Management. As part of Fearless Glasgow, the College is also part of the Erase the Grey campaign which has key messages which challenge stereotypical attitudes and behaviours and reiterates a zero-tolerance policy towards gender-based violence. The College has trained 30 staff, including front line staff, HR, Student Association, Safeguarding Team, Trade Union representatives, as first responders. The College has Safeguarding, Children, Young People and Vulnerable Adults Procedure supported by a comprehensive framework including a trained Safeguarding Team. The details of the Safeguarding Team are promoted throughout the College. A briefing is delivered by managers to their Team at the start of each session. The College was the first in Scotland to be accredited under White Ribbon and continues to campaign and provide training in partnership with staff and students to support its commitment to prevent and eradicate gender-based violence. It is currently developing a Gender Based Violence Policy for staff and students.	The College had already planned to produce a Gender Based Violence Policy; this is underway.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
	The College ensures the Complaints Handling Procedure is accessible to all. Complaints may be raised digitally, submission of a paper form, face to face and anonymously. As aforementioned, where anonymous complaints are received, these are acted on when there is sufficient information provided by the complainant. The CHP includes a caveat, that a decision not to investigate a complaint is contained within the remit of the Director of Corporate Services or a member of the Complaints Team. The College has a robust recording system in place capturing the entire complaint journey. In line with SPSO requirements, the College captures the details of the complaint, actions taken to resolve and reasons for actions taken. Complaints data is held for 25 years in line with the retention schedule and SPSO requirements. In addition to the CHP, the College has a Complaints – Guide for Students which summarises the procedure. This current guide does not refer to anonymous complaints. In advance of the next academic year, the guide could be amended to include guidance on how to submit complaints anonymously and the requirement to provide enough information for an investigation to take place. The Public Interest Disclosure (Whistleblowing) Policy should also be referred to which provides stakeholders with the mechanism to report matters of concern in relation to staff conduct to the Clerk to the Board. The Clerk to the Board acts as an independent member of staff. Concerns raised through the Complaints are recorded on the complaints database with details of any action taken. As aforementioned, anonymous complaints are investigated when there is sufficient information provided.	
(g) The University should consider whether it is necessary to put in place formal guidance on the used of social media by members of staff in communicating with students.	The College has in place a Social Media Procedure. This is included in the induction for staff and students, readily accessible on the intranet and routinely promoted to both staff and students. The College have a formal procedure in place for curriculum teams who wish to establish a social media connection within a student group for the enhancement of learning and teaching. The use of social media is recorded, monitored and managed centrally by the Colleges Marketing and Communications Department.	Re-circulate guidance on the use of social media.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
	Lecturing staff are discouraged from using Facebook/social media platforms to engage with students, however, some Glasgow Kelvin College Facebook accounts are running and have been approved via the Marketing Department. It would not be unfeasible for there to be other Facebook class groups which have been set up without the permission of the College. Guidance on the use of Facebook and other social media channels have been circulated to all staff which highlights the danger of professional boundaries becoming blurred. The College should re-circulate its guidance on the use of social media expressing the informal nature of this contact which can stray into the private lives of those concerned ie Using Microsoft Teams for Staff-Student Collaborative Projects. The College has in place an ICT Acceptable Use Policy which outlines the acceptable and prohibited use of College computer equipment and network access which covers staff students, partners and guests of the College. This Policy advices staff that the College Staff and students are required to comply with the College's ICT Acceptable Use Policy and that it does not, as a matter of routine, monitor email, Internet or other network or information systems use. However, where usage is suspected to breach the College's policies and procedures, contain illegal material or be in support of an illegal act, The College will take appropriate action. Users are advised to note that email messages form part of the public record and are therefore actionable. Any e-mail which contravenes the College's rules may constitute a disciplinary offence. Accordingly, such messages are not and should not be considered private. The College's contract of employment and Privacy Notices reflect the Policy. The Policy is: • contained within the employees self-service account, staff are required to make themselves familiar with policies and procedures. Human Resources monitor the access for new starts and updates. • covered during staff and student induction • contained within the student and staff electronic handbooks • on the staff and student intranet • accessible for students through the MyKevlin app	

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
	• a summary of the Procedure is promoted routinely on the College Desktop, the staff newsletter and in communal areas for staff and students.	
(h) The University should keep under review the support provided to members of staff who havedirect responsibility for providing advice and support to students.	The College delivers three Staff Development Days per session in addition to formal training provided on specific topics. All Continuing Professional Development undertaken by staff is recorded and monitored. Online mandatory training modules are required to be completed every two years. A Professional Development Review is conducted each year between the line manager and the employee. Training identified is sent to the Quality Enhancement and Development Manager who works with the Director of HR to develop the programme for the staff development days, develop training packages or sourcing of training providers. The management of complaints from students involve an investigating manager who liaises (where appropriate) with a more senior manager for advice and guidance when required. The College has in place an external Employee Assistance Programme and Student Counsellors.	No Action.
Strathclyde University Report, Section E – Para 122 2. The Complaint	The College has in place a Complaints Handling Procedure for students/stakeholders which complies with SPSO guidance and a Disciplinary Policy and Procedure for staff which follows the ACAS Code for Discipline and Grievance. Both documents set out a clear procedure for dealing with complaints and are applied consistently. Managers are trained in both processes and training is offered on an ongoing basis as part of the Staff Development Day activities and management training programme. The College Disciplinary Policy identifies the level of management who will manage each stage of the process. Staff are advised who will investigate and who will be appointed to chair a hearing if it proceeds. Staff are invited to inform Human Resources if they feel there is a conflict of interest and any party involved in the process at the start of the process. Informal discussions between the individual under investigation and the investigating officer(s) is not permitted under the procedure. The decision/action taken at each stage of the process is formally recorded. Where there is a potential risk to the investigation, students or staff the individual will be suspended.	Refresher training for staff on the Complaints Handling Procedure was already underway – no further action required.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Complaints		
	The Investigating Officer will make the decision as to whether or not there is a case to answer. The report detailing the investigation is considered by a different manager who is identified to Chair the hearing should the matter proceed. If a criminal offence may have been committed individuals are advised to discuss it directly with the police. Human Resources advise throughout the process and legal advice is taken when appropriate. The College Disciplinary Policy and Procedure is clear and regards the following conduct as gross misconduct; such conduct could lead to action up to and including dismissal: • staff posting social media content that has the sufficient potential to or does bring the College into disrepute, or reflects negatively on the College, colleagues or learners (in line with the College's Social Media Procedures and ICT Acceptable Use Policy) • acts of indecency or sexual harassment, at, but not limited to, work, social events associated with the College, attendance at external events or on residential excursions. The policies and procedures for staff and students do not specify an indicative time limit. In certain circumstances where it is possible to protect the identify of a witness(es) the College may consider taking this approach.	

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Working culture and working relationships		
(i) The University should make urgent efforts to repair working relationships in the School of Social Sciences and should consider using external facilitation to achieve this.	The College provide advice and support to Teams where there has been a breakdown in working relationships through the Human Resources Team. It has access to external mediator(s) if this is deemed necessary. It is currently exploring joint training to create a shared pool of trained mediators with City of Glasgow College and Glasgow Clyde College as part of a collaboration initiative under the GCG Sustainability Group.	No Action
(j) The University should take steps to address concerns about communication between the University Executive and staff and to promote a culture of listening and support.	The College has in place several informal and formal channels which provide communication and structure to two way and multi-directional dialogue between staff and senior management. These include: • Joint Negotiation and Consultation Committee, formal and informal, senior managers and Trade Union representatives • Transformation and Renewal Consultative Committee – senior and operational managers, Trade Union representatives and representatives from the Student Association. • Joint Consultative Committee - senior managers and Trade Union representatives • Board of Management and Standing Committee meetings - senior and operational managers, Trade Union representatives and representatives from the Student Association. • Strategic Planning Events - senior and operational managers, Trade Union representatives and representatives from the Student Association. • Management Team Meetings - senior and operational managers. • Staff and Student Surveys. • Utilisation of technology – including a consultation Tool – FAQs for all staff; staff presentations; monthly all staff FAQ sessions with the Principal. • Continuous Improvement – several staff trained across functions and grades to deliver continuous improvement for the College through project working. • Line managers; Trade Union representatives and Human Resources.	No Action

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Working culture and working relationships		
	• Policies and Procedures – impact assessment, monitoring and reporting. • Exit Interview Data • Focus groups and consultation exercises.	
Strathclyde University Report, Section E – para 142 3. The Departure from Employment	In accordance with the Scottish Funding Council, '*Guidance on seeking approval for severance schemes and settlement agreements'*, the College do not use Settlement Agreements. In a case where an employee is problematic however the College may consider requesting the use of such an Agreement after careful discussion with its legal advisors. This would only be used where it does not pose a future risk to the welfare or wellbeing of students or staff and it protects the interests of the College. It is the policy of the College to provide a basic factual reference for staff and the Human Resources Department are responsible for the provision of employment references for staff. Staff may provide a character reference if they wish, however, this is not on College headed paper and should not relate to their working relationship with the individual.	No Action
Strathclyde University Report, Section E – Para149 4. Response to Allegations	There are a number of mechanisms, informal and formal, and staff throughout the College structure to support students who have concerns as previously described above. The College Safeguarding, Children, Young People and Vulnerable Adults Policy and Procedure contains things that staff 'must do and must not do' to protect those as risk and the adults who work with them. Staff are provided on how to protect themselves and the students that they work with. The Safeguarding Guidance Card is distributed at the start of each academic. The policy and procedure is routinely promoted in the staff newsletter.	No Action
Para 156 – Recommendations	157. Dignity and Respect Policy is currently distributed to all students and staff as part of their induction, it is readily available to students and staff on the College internet/intranet and is routinely promoted. The College promote activities relating to equality and diversity throughout the academic year for students and staff. 158. Complaint handlers are trained in the procedure to ensure that a complainant is not disadvantaged during or after the process is concluded. A follow up discussion takes place with individual(s) after the conclusion of a process to review their situation and obtain feedback on the policy, procedure and experience to ensure the ongoing development of policies, procedures and practices.	Ensure that staff responsible for managing complaints are aware that the staff member against whom allegations have been made may have implied or directly expressed that they have the power to

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Working culture and working relationships		
	159. The Dignity and Respect Policy and Procedure should incorporate as a specific example of the above as bullying.	influence the academic career of a student or the career of a staff member who raises a complaint against them. Amend the Disciplinary Policy and Procedure to incorporate the above into minor/gross misconduct. Review the Dignity and Respect Policy. Specifically include the following as an act of bullying and harassment: where staff, implied or expressed, threaten that they have the power to influence the academic career of a student or the career of a staff member who raises a complaint against them.

Recommendations	Assessment of Glasgow Kelvin College Procedures	Action
Working culture and working relationships		
Strathclyde University Report, Section E – Para160 5. Safeguarding Provisions	Anonymous complaints are discussed with a member of the senior management team and recorded accordingly. Details are retained in accordance with the College Data Retention Schedule.	No Action

Links to the following documents are given below for information:

- Recruitment and Selection Policy
- Dignity and Respect Policy and Procedure
- Disciplinary Policy and Procedure
- Attendance Management and Support Policy and Procedure
- Equality and Diversity Policy
- Grievance Policy and Procedure
- ICT Acceptable Use Policy
- Safeguarding Children, Young People and Vulnerable Adults Policy and Procedure

The Annexes listed below are attached:

- Annex 1 - Reference Request Form (Character)
- Annex 2 - Reference Request Form (Employment)
- Annex 3 - Social Media Procedures Summary
- Annex 4 - Social Media Procedures
- Annex 5 - Using Microsoft Media Teams for Staff-Student Collaborative Projects
- Annex 6 - Safeguarding Guidance Card
- Annex 7 - Complaints Handling Procedure

GLASGOW KELVIN COLLEGE
A p p o i n t m e n t s a n d P r o m o t i o n s
Character Reference

Post Details	
Name of Applicant:	Relationship:
Post Applied for:	Interview Date:

The above named person has applied for the position indicated with Glasgow Kelvin College and has named you as a referee.

I would be grateful if you could complete this form, answering all of the questions relevant to you, or giving an explanation as to why you are unable to provide a reply to a specific question. Please submit any required additional information on a separate sheet. Thank you for your assistance.

1. How long have you known the applicant and in what capacity? (e.g. Employer, Immediate Supervisor etc)
2. In your opinion, is the applicant honest and trustworthy? (If not, please give reasons)
3. In your opinion, what are the applicant's main strengths and weaknesses? (e.g. ability to work on own initiative, organisational ability, reaction to pressure etc)
4. Would you be willing to discuss this reference over the telephone if further information is required? Yes/No
Under the Data Protection Act 1998, if the College receives a request for access to this reference from the individual concerned we may allow access. Do you agree to the individual having access to this reference without informing you? Yes/No

Please print your name and position, and sign below:

Name: ..... Relationship: .....

Signed: ..... Date: .....

Address: .....

.....

GLASGOW KELVIN COLLEGE

Appointments and Promotions

Employment Reference

Post Details	
Name of Applicant:	Position Held with your Organisation:
Post Applied for:	Dates of Employment:
Job Description Attached:	Interview Date:

The above named person has applied for the position indicated with Glasgow Kelvin College and has named you as a referee.

I would be grateful if you could complete this form, answering all of the questions relevant to you, or giving an explanation as to why you are unable to provide a reply to a specific question. Please submit any required additional information on a separate sheet. Thank you for your assistance.

1. Please give exact dates during which the applicant was/has been employed by you, and the contracted hours that the applicant works/worked.
2. How long have you known the applicant and in what capacity? (e.g. Employer, Immediate Supervisor etc)
3. Please give details of the applicant's job title and duties.

4. In your opinion, is the applicant honest and trustworthy? (If not, please give details)
5. In your opinion, what are the applicant's main strengths and weaknesses? (e.g. ability to work on own initiative, organisational ability, reaction to pressure etc.)
6. Please confirm the applicant's earnings while in your employment (please show overtime and bonuses separately and confirm if these are contractual).
7. What was/is the applicant's reason for leaving your employment?
8. If a suitable vacancy arose in your organisation, would you re-employ this person?
9. Please give any other relevant information about the applicant, which you feel a prospective employer should be aware (e.g. Time Keeping).
10. Did the applicant receive a statutory redundancy payment in respect of their service with the organisation (only applicable to organisations covered by the Redundancy Payments (Continuity of Employment in Local Government, etc) (Modification) Order 1999) as amended Yes / No .
11. Would you be willing to discuss this reference over the telephone if further information is required? Yes / No
Under the Data Protection Act 1998, if the College receives a request for access to this reference from the individual concerned we may allow access. Do you agree to the individual having access to this reference without informing you? Yes/No

Please print your name and position, and sign below:

Name: ..... Position: _____

Signed: ..... _____ Date: _____

Organisation's Name: .....

Address: .....

_____

GKC Social Media Procedures Summary

(Extracted from the relevant Procedure)

Social Media is a board term for any kind of online platform which enables people to intact with each other directly. GKC recognises the benefits and opportunities that social media offers to the college to enhance its learners experience.

Purpose: The Procedure provides advice and support to all staff in their use of social media and other online platforms, especially around the issues of safeguarding, data protection, acceptable use and organisational or personal reputation.

Scope: The Procedure is subject to a wide variety of policies and legislations and applies to all staff and all online communications that represent the college directly or in directly at any time and from anywhere.

Principles: The procedure encourages a safe and responsible use of social media and defines the responsibilities and monitoring of public social media activities related to the college. Also, helps staff to protect themselves, and the college reputation.

Definitions:

- **Professional Communications;** are those made through official and the college social media account/s or using the college name.
- **Personal Communications;** are those made via personal social media accounts, but where a personal account associates itself with college it must be made clear that the employee is not communicating on behalf of the college by using an appropriate disclaimer as stated in the procedure.

SMT/OMT Responsibilities:

- Facilitating training and guidance on social media use.
- Implementing and developing the social media procedures.
- Investigating any reported incidents.
- Receiving, considering and approving new social media accounts creation.

Administrator/Moderator Responsibilities (Marketing Team):

- Monitoring the internet for public postings relating to the college.
- Monitoring, moderating and contributing to the college social media accounts.
- Ensuring the integrity of the college brand.
- Creating and storing the new social media accounts details following SMT approval.

Staff Responsibilities:

- Ensuring that any use of social media is carried out in line with the procedures.
- Attending at training sessions provided by the college.
- Regularly monitoring and updating content posted via college related accounts.
- Adding a disclaimer when naming the college in personal communications.

Process for Creating a New Account: Staff are encouraged to use social media if helps them in their work to communicate internally or externally. To create an account staff/departments should:

- Contact the Marketing Team to ensure that they are not duplicating a similar existing account and also to seek assistance to draw up a proposal to establish a new account.
- The proposal should be presented to their Head of Department to approve and submit to SMT for consideration.
- Following consideration by SMT an application will be approved, rejected or returned for amendment.

Monitoring: Accounts must be monitored regularly (preferably everyday) by the account administrators and any comments, queries or complaints should be responded to within 24 hours.

Acceptable and Unacceptable Behaviours/Content: Digital communications must be professional and respectful at all times and all users must adhere to GDPR and the standards of behaviour as stated in the procedure. The college social media accounts must not be used for personal gain and personal details should not be posted online. The college will take serious action within the Disciplinary Policy (if appropriate) in the event of breaches of the policies and unacceptable conduct.

Legal Considerations: Users must ensure that their use of social media and photographic images does not infringe upon the Copyright law, the Safeguarding Policy, GDPR Legislation or breach confidentiality.

Handling Abuse:

- Staff must bear in mind **the college's Zero Tolerance** approach to all forms of abuse or offensive behaviour.
- Staff are encouraged to apply the process mentioned in the procedure (Appendix 1) to handle abusive or offensive posts.
- Account administrators can block, report or delete comments/posts if conversation escalates or becomes offensive or unacceptable.
- If you feel someone else is subject to abuse by others through use of a social networking site, then this must be reported using the college protocols under the ICT Acceptable Use Policy (AUP).

Use of Images: Permission will be required from the subjects using their image/s as detailed in the procedure. Please note that, under **No Circumstances** should school pupils, people aged under 16 years or vulnerable learners be photographed without expressed written permission from their schools or parents/guardians in line with GDPR and the Safeguarding Policy.

Reposting and Endorsements: The College supports its Partner organisations and charities by posting/sharing their promotional, services and other information if appropriate. The Marketing Team will be happy to provide guidance on this.

A list of unacceptable and inappropriate content and the Do's and Don'ts in managing college social media accounts is available in the Procedure**.**

Glasgow Kelvin College

Social Media Procedures for Staff

August 2018

This document has been produced to support all staff in their use of social media and other online platforms. It provides advice and guidelines for staff to use in their professional interactions but is equally useful for personal social media use.

To encourage increasing numbers of staff to engage with social media in a confident and mindful way, the procedures provide a brief list of helpful Do's and Don'ts. In addition, there is a Social Media Process Map for those staff who are account administrators/holders (Appendix 1). There is also a list of FAQs relating to the new GDPR (General Data Protection Regulations) legislation (Appendix 2) and a copy of the Image Release Form for photographic/video permission from data subjects (Appendix 3).

However, if in doubt about how to proceed, please don't hesitate to contact the Marketing Team on ext. 2624 for support and guidance.

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Glasgow Kelvin College

Social Media Procedures – Staff

Social media (e.g. Facebook, Twitter, LinkedIn, Instagram) is a broad term for any kind of online platform which enables people to directly interact with each other. Some games and video sharing platforms such as You Tube have social media elements to them.

Glasgow Kelvin College recognises the numerous benefits and opportunities which a social media presence offers. It has become ubiquitous and has the potential to enhance the learner experience. There are, however, considerations associated with social media use, especially around the issues of safeguarding, data protection, acceptable use and organisational or personal reputation. This document aims to encourage the safe, legal, considerate and ethical use of social media by the College and its staff.

1. Scope

This document is subject to the following policies and procedures:

ICT Acceptable Use Policy
Safeguarding Children, Young People and Vulnerable Adults Policy & Procedure
GDPR Policy
Disciplinary Policy and Procedure
Grievance Policy and Procedure
Dignity and Respect Policy
Equality and Diversity Policy
Commendations and Complaints Procedure
Complaints Handling Procedure

And Legislation:

Data Protection Act 1998 (GDPR 2018)
Copyright, Designs and Patents Act 1998
Freedom of Information (Scotland) Act 2002
The Human Rights Act 1998
Malicious Communications Act 1988
Offences (aggravation by Prejudice) (Scotland) Act 1990
Anti-Terrorism, Crime and Security Act 2001
Regulation of Investigatory Powers Act (RIPA) 1990
Equality Act 2010

These Social Media procedures:

- **Apply to all staff and to all online communications which directly or indirectly represent the College.**
- **Apply to such online communications posted at any time and from anywhere.**
- **Encourage the safe and responsible use of social media through training and education**
- **Define the responsibilities and monitoring of public social media activity pertaining to the College**
- **Seek to help staff protect themselves, their reputation and that of the College in their use of professional and personal social media accounts**

The College respects privacy and understands that staff and students may use social media forums in their private lives. However, personal communications likely to have a negative impact on professional standards and/or the College's reputation are within the scope of this document.

Professional communications are those made through official channels, posted on a College social media account or using the College name. All professional communications are within the scope of this document.

Personal communications are those made via personal social media accounts. In all cases, where a personal account is used which associates itself with the College or impacts on it, it must be made clear that the member of staff is not communicating on behalf of the College using an appropriate disclaimer, e.g. "All text, posts, images and opinion on my account are my own and do not reflect the views of my employer." Such personal communications are within the scope of this document.

Personal communications which do not refer to or impact upon the College are outside the scope of this document.

Digital communications with students are also considered. Staff may use social media to communicate with learners via a College social media account for teaching and learning purposes but should consider whether this is appropriate and be mindful of the potential implications. If in doubt, staff should refer to the list of Do's and Don'ts on p.8/9 of this document.

2. Organisational control

Roles & Responsibilities

- **SMT/OMT**
    - Facilitating training and guidance on Social Media use.
    - Developing and implementing the Social Media procedures.

  - Taking a lead role in investigating any reported incidents.
  - Making an initial assessment when an incident is reported and involving appropriate staff and external agencies as required.
  - Receiving completed applications for social media accounts.
  - Ensuring new social media accounts are in line with the Marketing recommendations.
  - Approving Social Media account creation.

- **Administrator / Moderator (Marketing Team)**
  - Ensuring the integrity of the College brand.
  - Creating the social media accounts following SMT approval.
  - Storing social media account details, including passwords securely.
  - Being involved in monitoring, moderating and contributing to College social media accounts.
  - Controlling the process for managing an account after the lead staff member has left the organisation (closing or transferring).
  - Monitoring the internet for public postings relating to the College.

- **Staff**
  - Knowing the contents of and ensuring that any use of social media is carried out in line with these procedures and other relevant policies.
  - Attending training as appropriate.
  - Regularly monitoring, updating and managing content posted via College related accounts.
  - Adding an appropriate disclaimer to personal accounts when naming the College (see above).

3. Process for creating new accounts

Staff are encouraged to consider if a social media account will help them in their work to communicate and share information, both internally and externally, e.g. a Catering & Hospitality team Twitter account or a Fashion Event Facebook page.

Anyone wishing to create such an account must, in the first instance, contact the Marketing Team for advice and to ensure they are not duplicating a similar existing account. If necessary, Marketing will assist staff to draw up a proposal to establish a new account. This proposal should be presented to their Head of Faculty/Department to approve and submit to the SMT for consideration. The proposal should contain:

- The aim of the account
- How it supports the College ethos and brand

- The intended audience
- How the account will be promoted
- Who will run the account (at least two staff members plus the Marketing Team Member should be named as account administrators)
- Whether or not the account is open or private/closed

A pro-forma for this proposal is available as a download from the Marketing pages on the College intranet.

Following consideration by the SMT an application will be approved or returned for amendment. In all cases, the SMT must be satisfied that anyone running a social media account on behalf of the College has read and understood these procedures and has received/ will receive appropriate training before the account is set up.

Only once authorisation has been granted to use a social media account for learning and teaching purposes can it be deployed with a group.

4. Monitoring

Accounts must be monitored regularly and frequently by the account administrators (preferably every day, including weekends and during holidays). Any comments, queries or complaints made through those accounts should be responded to within 24 hours, even if the response is only to acknowledge receipt. Regular monitoring and intervention is essential in case a situation arises where inappropriate behaviour occurs. Appendix 1 provides information on the handling of such posts.

5. Acceptable and Unacceptable Behaviours

The College requests that all users using social media adhere to the standards of behaviour as stated in this document and other relevant policies. Digital communications by staff must be professional and respectful at all times and in accordance with these procedures.

- Staff must not use social media to infringe on the rights and privacy of others or make ill-considered comments.
- College social media accounts must not be used for personal gain.
- Staff must ensure that confidentiality is maintained on social media even after they leave the employment of the College. That includes identifying any other party, without prior permission, either by their name or job title.

- Personal details should not be posted online, including addresses, telephone numbers etc. In addition staff should also be wary of posting personal details, photographs or current location details online.
- Users must declare who they are in social media posts or accounts. Anonymous posts are discouraged in relation to College activity.
- If a journalist/media outlet makes contact about posts made using social media, staff should refer to the College Press & Media Protocols and, where appropriate, pass to the Communications & Planning Manager.
- Unacceptable conduct, (e.g. defamatory, discriminatory, offensive, harassing content or a breach of data protection, privacy, confidentiality, copyright) will be considered seriously by the College and may be managed formally within the Disciplinary Policy and procedure where appropriate.
- The College permits reasonable and appropriate access to private social media sites by staff. However, where excessive use is suspected and is considered to be interfering with the work of the College, appropriate action will be taken.
- The College will take appropriate action in the event of breaches of the relevant policies as they relate to social media use. Where conduct is found to be unacceptable, the College will deal with the matter internally. Where conduct is considered illegal, the College will report the matter to the police and other relevant external agencies, and may take action according to the disciplinary procedure.
- All behaviours must comply with the General Data Protection Regulations as outlined in Appendix 2.

6. Legal considerations

- **Users of social media should consider the copyright of the content they are sharing and, where necessary, should seek permission from the copyright holder before sharing.**
- **Users must ensure that their use of social media and photographic images does not infringe upon the Safeguarding Policy, GDPR legislation, or breach confidentiality. Use of images is dealt with below and also in Appendices 2 and 3.**

7. Inappropriate and Unacceptable Content

Inappropriate content includes, but is not limited to, content which is:

- Abusive
- Commercially sensitive
- Confidential

- Defamatory
- Discriminatory
- Fraudulent
- In violation of copyright law
- In violation of GDPR
- Indecent
- Likely to be considered bullying or victimisation
- Likely to be considered harassment (related to protected characteristics)
- Likely to be considered offensive
- Likely to cause reputational damage to the College
- Likely to identify an individual without their permission
- Likely to promote violence or terrorism
- Malicious
- Misleading
- Obscene
- Offensive (for example, racially, religiously, sexually or politically)
- Pornographic
- Unlawful

This list is not exhaustive. If you are not sure, seek advice from Marketing.

8. Handling abuse

- When establishing an account, Marketing will advise on the application of ‘profanity rules’ to counter the use of offensive language.
- The handling of abusive or offensive posts is the subject of Appendix 1 and staff are encouraged to apply that process.
- If a conversation escalates and becomes offensive or unacceptable, account administrators can block, report or delete other users or their comments/posts.
- Staff should bear in mind the College’s Zero Tolerance approach to all forms of abuse or offensive behaviour.
- If you feel that you or someone else is subject to abuse by colleagues through use of a social networking site, then this action must be reported using the agreed College protocols under the ICT Acceptable Use Policy.

9. Use of images

If you have taken photographs or video, use of images of people can no longer be assumed to be acceptable under the privacy provisions of the College Safeguarding Policy and the new GDPR guidelines (Appendix 2). Unless photography or video images have been taken at a public event, expressed permission will be required from the subjects agreeing to the use of their image. More detail is available from Appendix 2. The Image Consent Form is available as Appendix 3.

- If anyone, for any reason, asks not to be filmed or photographed then their wishes must be respected.
- **Under no circumstances should school pupils, people aged under 16yrs or vulnerable learners be photographed without expressed written permission from their school or parent/guardian, in line with the Safeguarding Policy and GDPR legislation.**
- When obtaining permission, the photographer must make it clear to the subject
    - What the image is being used for
    - Where it is liable to be reproduced
    - How long it will be stored
- Once permission is obtained, Staff should exercise their professional judgement about whether an image is appropriate to share on College social media accounts.
- If a member of staff inadvertently takes a picture which could be misconstrued or misused, they must delete it immediately.

10. Reposting and Endorsements

College social media account administrators may be approached by third parties requesting that you repost or share information advertising their services or events to target students and others. The College is happy to support its partner organisations and charities by reposting or sharing promotional and other information if appropriate. It does not, as a rule, advertise or endorse services or products from non-affiliated companies or organisations.

Should you have any concerns regarding such a request, the Marketing Team will be happy to provide guidance on this.

11. Managing Personal Use of Social Media

- Personal communications are those made via personal social media accounts. In all cases, where a personal account is used which associates itself with the College or impacts on the College, it must be made clear that the member of staff is not

communicating on behalf of the College by using an appropriate disclaimer. Such personal communications are within the scope of this policy.

- Staff should ensure they have appropriate privacy settings on personal social media accounts and be mindful of what posts they are sharing and with whom.
- Personal communications which do not refer to or impact upon the College are outside the scope of this policy.
- Where excessive personal use of social media in College is suspected, and considered to be interfering with relevant duties, action may be taken.
- Where staff do engage with current or prior students on their personal account, good judgement should be exercised.
- Consideration should be given by staff to having both a professional and personal account.

Remember:

- "Nothing" on social media is truly private.
- On some social media platforms, once it is 'out there' it cannot be changed or deleted.
- Social media can blur the lines between your professional and private life. Try to avoid crossover by retaining both a professional and personal account.
- Don't use the College logo and/or branding on personal accounts.
- Check your settings regularly and test your privacy.
- Keep an eye on your digital footprint.
- You are advised to keep your personal information private
- Regularly review your connections – keep them to those you want to be connected to.
- When posting online consider; Scale, Audience and Permanency of what you post.
- If you must criticise, do it constructively and politely.
- Take control of your own images and be mindful of the images you share.
- Know how to report a problem.

12. Managing College social media accounts

The Do's

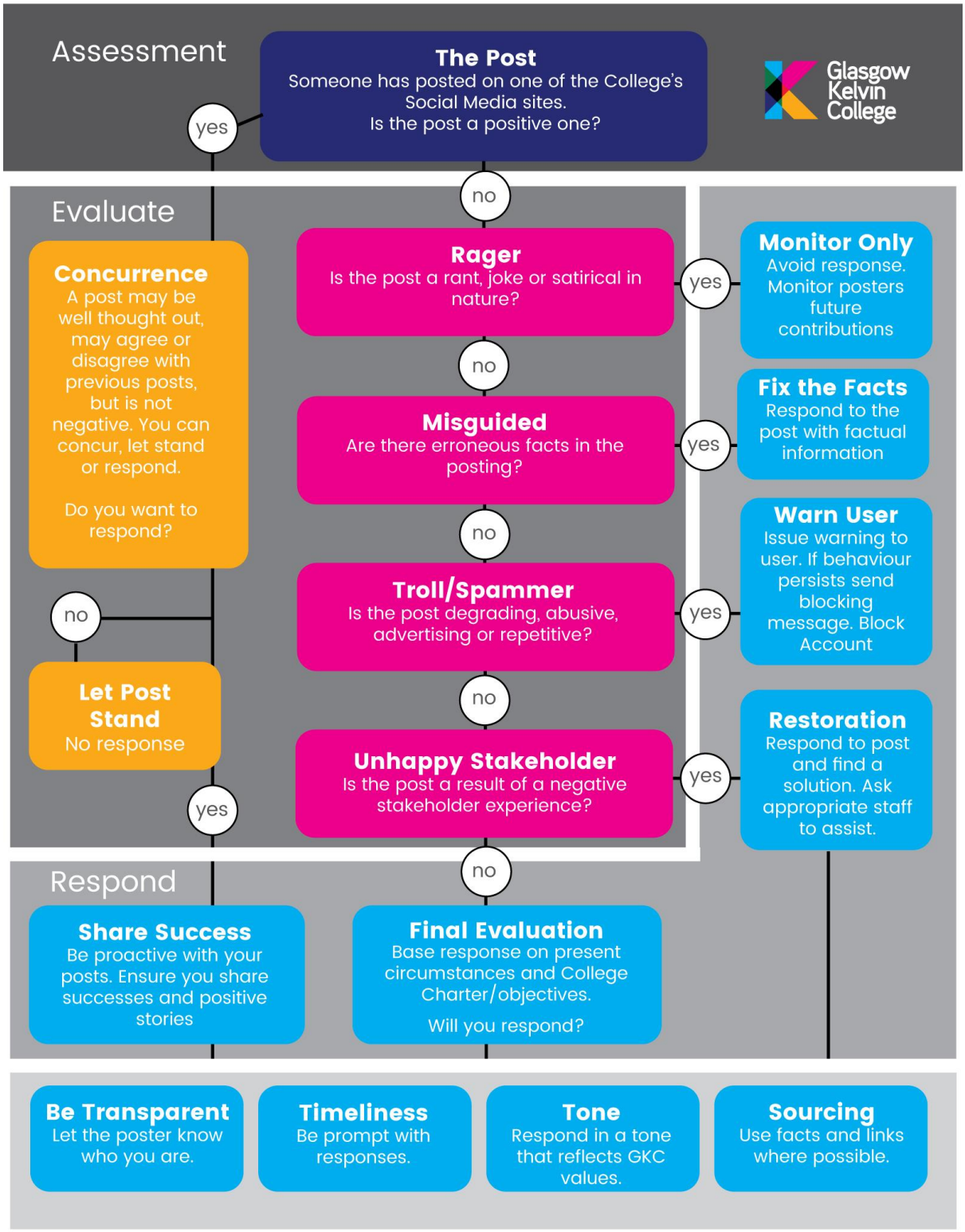
- Check with a line manager or your account administrator in Marketing before publishing content that may have controversial implications for the College
- Ensure compliance with College policies and procedures at all times
- Use a disclaimer when expressing personal views
- Make it clear who is posting content

- Use an appropriate and professional tone
- Be respectful to all parties
- Ensure you have permission to ‘share’ other peoples’ materials and acknowledge the author
- Be mindful of the privacy of others
- Express opinions but do so in a mature and measured manner and not on behalf of the College
- Think before responding to comments and, when in doubt, get a second opinion.
- Seek advice and report any mistakes using the College’s reporting process.
- Consider turning off tagging people in images where possible.
- Consider the appropriateness of content for any audience of College accounts. Where possible, check your facts and avoid posting hearsay or gossip
- If a post is inaccurate, where possible correct the mistake. If the original post cannot be altered or deleted, acknowledge the initial mistake and correct the inaccuracy.
- Not ALL comments require a response – see Appendix 1.
- Try to avoid the discussion of contentious or inflammatory issues liable to cause offence.

The Don’ts

- Don’t make comments, post content or link to materials which may bring the College into disrepute.
- Don’t publish others’ personal details, confidential or commercially sensitive material.
- Don’t breach copyright, data protection, equalities or other relevant legislation.
- Don’t post images of people where consent has not been sought appropriately.
- Don’t link to, embed or add potentially inappropriate content.
- Don’t post derogatory, defamatory, offensive, harassing or discriminatory content.
- Don’t use social media to air internal grievances.
- Don’t allow or encourage contentious conversations to escalate.

Social Media Post Assessment



GLASGOW KELVIN COLLEGE

GDPR FAQs

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Glossary of Terms

Background

The General Data Protection Regulation (GDPR) comes into force on 25 May 2018 and will replace the current Data Protection Act governing how Glasgow Kelvin College processes personal data. The GDPR is an EU regulation and, despite Brexit, the Government has confirmed that it will apply to the UK (through the Data Protection Bill).

What is the General Data Protection Regulation?

The General Data Protection Regulation (GDPR) was developed to create a more up to date law for data protection reflecting the changes in the digital age and strengthening the rights of individuals and how their personal data is processed and protected. Many of the GDPR's main concepts and principles are much the same as those in the Data Protection Act, but with new elements and enhancements and a greater emphasis on accountability and how organisations demonstrate their compliance.

When is the GDPR coming into effect?

The GDPR was approved and adopted by the EU Parliament in April 2016. The regulation will take effect after a two-year transition period and, unlike a Directive it does not require any enabling legislation to be passed by government; meaning it will be in force May 2018.

Will we still have this Regulation after the UK leaves the EU?

We will still keep this regulation once the UK leaves the EU for two reasons:

- this Regulation comes into effect before we leave the EU so we need to implement it for the time we are in the EU, and
- when the UK is no longer part of the EU it will be necessary for the UK to prove that our standards for processing personal data are at least as good as those throughout the EU, for the remaining countries to be able to transfer data to the UK. One way of proving the UK data processing standards is to retain the basis of the EU Regulation on which all other Member States are using to regulate data processing.

GDPR Principles

Under the GDPR, the data protection "principles" set out the main responsibilities for organisations. The principles are similar to those in the Data Protection Act, with added detail at certain points, and a new accountability requirement.

Lawfulness, fairness and transparency

Transparency: Tell the subject what data processing will be done.

Fair: What is processed must match up with how it has been described

Lawful: Processing must meet the tests described in GDPR

Purpose limitations

Personal data can only be obtained for "specified, explicit and legitimate purposes". Data can only be used for a specific processing purpose that the subject has been made aware of and no other, without further consent.

Data minimisation

Data collected on a subject should be “adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed” i.e. no more than the minimum amount of data should be kept for specific processing.

Accuracy

Data must be “accurate and where necessary kept up to date”. Baselining ensures good protection and protection against identity theft. Data holders should build rectification processes into data management / archiving activities for subject data.

Storage limitations

Regulator expects personal data is “kept in a form which permits identification of data subjects for no longer than necessary” i.e. data no longer required should be removed.

Integrity and confidentiality

Requires processors to handle data “in a manner [ensuring] appropriate security of the personal data including protection against unlawful processing or accidental loss, destruction or damage”.

What are the differences between the outgoing Data Protection Act and the new GDPR?

On a basic level, the GDPR is designed as a direct replacement for the “Data Protection Act”, which was introduced in 1998 as a UK equivalent to the EU's 1995 “Data Protection Directive”. Here are some of the key differences between the old and new rules:

Geographic reach and scope: The previous European Data Protection Directive utilised much more of a light-touch approach than GDPR, setting out aims and requirements for data protection standards that were then implemented through national legislation, such as the UK's Data Protection Act. By contrast, GDPR is a binding piece of regulation, which will be legally enforceable as soon as it comes into effect on May 25th, and will apply to all EU nations and every company holding data on EU citizens.

Definition of personal data: GDPR will expand the definition of "personal data" to include a much wider range of information. Whereas the Data Protection Act only pertains to information used to identify an individual or their personal details, GDPR broadens that scope to include online identification markers, location data, genetic information and more.

Consent policies: This is one of the defining differences between GDPR and the Data Protection Act. Under the old rules, data collection does not necessarily require an “opt-in”, but under GDPR clear “privacy notices” must be provided to individuals, allowing them to make an informed decision on whether they consent to allow their data to be stored and used. This consent can then be withdrawn at any time.

Data breach policies: With the current Data Protection Act (1998), organisations are under no obligation to report when data breaches occur (although they are encouraged to do so). This will change with the advent of GDPR, with any future breaches having to be reported to the relevant authorities within 72 hours of the incident.

Accountability: GDPR will place a much greater focus on explicit accountability for data protection, placing a direct responsibility on companies to prove they comply with the principles of the regulation, rather than the hands-off approach of the Data Protection Act. This means firms will need to commit

to mandatory activities such as staff training, internal data audits and keeping detailed documentation if they wish to avoid falling foul of the GDPR rules.

Data protection governance: The Data Protection Act does not stipulate how the governance of data security functions should be allocated, requiring only a basic commitment to the concept from management. GDPR will change this, as any company employing more than 250 people will be mandated to appoint a dedicated data protection officer, as will any firm processing more than 5,000 subject profiles annually.

Penalties and compensation: Currently, non-compliance with the Data Protection Act can see companies fined up to £500,000, or one per cent of annual turnover. Under GDPR, these limits will rise significantly to €20 million, or four per cent of annual turnover, whichever is higher. It's also worth remembering that GDPR will allow individuals to claim compensation for material and non-material damage resulting from data security lapses, whereas the current rules only cover material damage.

Who does the GDPR affect?

The GDPR not only applies to organisations located within the EU but it will also apply to organisations located outside of the EU if they offer goods or services to, or monitor the behaviour of, EU data subjects. It applies to all companies processing and holding the personal data of data subjects residing in the European Union, regardless of the company's location.

What is "data"?

An employee's name, address, photo etc. In fact, it is "any information relating to an identified, or identifiable natural person (data subject)".

Who are "data subjects"?

A "data subject" is simply an individual who is the subject of "personal data". Thus, from the time of their birth to the time of their death, a person will be a "data subject" where another party is collecting personal data about them.

What constitutes "personal data"?

Any information related to a natural person or 'data subject', that can be used to directly or indirectly identify the person. It can be anything from a name, a photo, an email address, bank details, posts on social networking websites, medical information, or a computer IP address.

What is the difference between a "data processor" and a "data controller"?

A "data controller" determines the purposes, conditions and means of processing of personal data (i.e. the College), while a "data processor" is responsible for processing data on behalf of the controller. The significance of this is the new responsibilities of a data processor under the GDPR. Importantly, if there are breaches of the GDPR, both the data processor and the data controller are liable.

What are the contractual responsibilities of a data processor?

Under the GDPR a data processor must provide guarantees to implement measures to ensure compliance with the GDPR, including security for the data they process, ensuring staff are compliant with confidentiality requirements, and only employing sub-processors with the agreement of the data controller (the College). The data processor must comply with any data breach notification

requirements set out by the data controller. Any data breach fines can now be imposed on a data processor as well as a data controller.

This information must be included in any new contracts set up with, and brought to the attention of, data processors employed by the College.

What is a Privacy Notice?

A "privacy notice" (also known as a "transparency notice") is to inform data subjects (e.g. staff, students and other individuals the College holds information about) how their personal data is used. Providing a privacy notice is part of the obligation to process personal data fairly, which is a fundamental principle of data GDPR compliance.

The College has two statements: one for students and one for staff which cover the main processing carried out by the College, but if we collect data on a school/departmental level, we need to provide this data to the students at the time we collect their data. Examples of such processing will be the collection of data for research purposes, organising field trips etc.

What is a "Subject Access Request" and how do I recognise one?

Under the rules of the GDPR, any individual whose data is being held by an organisation can make a Subject Access Request (SAR). An individual has a right to request a copy of the personal data held about them. This is known as making a "subject access request" or SAR. A SAR does not have to be labelled as such and does not even have to mention data protection. The only requirement is that the request is made in writing, verbal requests are not valid. For example, an email from a student or member of staff which simply states "Please send me copies of all emails you hold about me" is a valid SAR.

What rights do data subjects have under GDPR?

The General Data Protection Regulation (GDPR) provides some new rights for individuals and strengthens some of the rights that currently exist under the Data Protection Act 1998 (DPA).

The right to information and transparency

The GDPR requires organisations to supply the following information to individuals:

- identity and contact details of the controller and where applicable, the controller's representative and the data protection officer
- purpose of the processing and the lawful basis for the processing
- the legitimate interests of the controller or third party, where applicable
- any recipient or categories of recipients of the personal data
- details of any proposed transfers of personal data to third countries or international organisations and the existence of an adequacy decision by the European Commission, or where applicable, the appropriate safeguards
- the period for which the data will be stored or criteria used to determine the retention period
- the existence of each data subject's rights
- the right to lodge a complaint with the Information Commissioner

- whether the provision of personal data is part of a statutory or contractual requirement or obligation and the possible consequences of failing to provide the personal data
- the existence of automated decision making, including profiling and information about how decisions are made, the significance and the consequences
- the categories of personal data (where data is not obtained directly from the data subject)
- the source the personal data originates from and whether it came from publicly accessible sources (where data is not obtained directly from the data subject)
- the right to withdraw consent at any time

The information provided must be:

- concise, transparent, intelligible and easily accessible, and
- written in clear and plain language, particularly if addressed to a child.

The right of access

The "right of access" to an individual's own personal data existed under the DPA, but organisations must provide more information than was previously required and reply within one month from the date of receipt of the request.

The right to rectification

The GDPR requires organisations to ensure that personal data is accurate, kept up to date and is erased or corrected without delay when it is inaccurate.

The right to erasure (right to be forgotten)

Data subjects can request deletion of their personal data in certain situations. Under the GDPR, controllers must erase data "without undue delay" if the data is no longer needed, the data subject objects to processing, or the processing was unlawful.

The right to restrict processing

This is a new right giving individuals the right to restrict data processing in certain circumstances.

The right to data portability

Individuals have a new right under GDPR to obtain a copy of their personal data from the data controller in a commonly used and machine readable format and have the right to transmit that data to another controller.

The right to object

Individuals have the right to object to the processing of his or her personal data including profiling unless the data controller can demonstrate legitimate grounds for the processing which override the individual's rights.

Where personal data is processed for direct marketing purposes, individuals have the right to object to processing for such purpose.

The right to be notified of a data security breach

Where the personal data breach is likely to result in a high risk to the rights and freedoms of an individual, the data controller must notify the individual without undue delay.

Rights in relation to automated decision making and profiling

Individuals will have the right not to be subject to a decision based solely on automated processing, including profiling, which has legal effects on the individual or similarly affects the individual. Organisations that engage in profiling activities will need to consider how to implement appropriate consent mechanisms to continue these activities.

Why must I obtain "consent" from the data subject?

"Consent" from the data subject was a ground for legal processing under the DPA and it remains so under the GDPR. However, the GDPR imposes more stringent requirements on consent, meaning that organisations will need to revisit the ways in which they obtain consent from data subjects for the processing of their personal data. There is also a higher threshold for the consent of children.

How does this concept differ from the current position?

In order to be able to lawfully process an individual's personal data, an organisation must be able to establish a legal basis under Article 6 of the GDPR. One of the grounds for lawfully processing data is consent of the individual whose data is being processed. Consent under the GDPR must be:

Freely given - rather than a data subject feeling like they must consent due to an imbalance between the subject and the controller (especially where the controller is a public authority), or the controller making data processing a condition for the performance of a contract (e.g. a service). Consent is presumed not to be freely given if the data subject does not have a genuine free choice or if they are put at a disadvantage by withdrawing or refusing their consent.

Specific and informed – the individual must be given sufficient information regarding the controller, the purpose(s) of the processing and consent cannot be 'bundled' together where different processing activities are taking place. Where different processing activities are taking place, consent must be given to such activities separately.

Distinguishable and in clear and plain language - where consent is given in a written document which also concerns other matters (for example, terms of service).

Given by an affirmative action – inactivity (e.g. pre-ticked boxes) cannot constitute consent. However, consent through a course of conduct remains valid.

Verifiable – the controller must maintain a record.

As easy to withdraw as to give – the individual must be given the right to withdraw consent at any time. Individuals should be made aware of this right prior to them giving consent and on a continuing basis.

Consent must be explicit - if you are processing sensitive personal data or transferring personal data outside the EU. Explicit consent cannot be obtained through a course of conduct.

What is automated decision making and profiling?

"Automated decision making" and "profiling" are two separate, but often interlinked concepts.

"Profiling" is a form of automated processing of personal data used to analyse or predict matters relating to an individual. For example, analysing an individual's performance at work, financial status, health, interests or location.

"Automated decision making" is the ability to make decisions without human involvement. In practice, profiling can often be a precursor to automated decision making.

Profiling and automated decision making can be used in three ways:

General profiling – where individuals are segmented into different groups, based on data analysis.

Decision-making based on profiling – where a human makes a decision based on profiling.

Solely automated decision making – where an algorithm makes a decision, with no human intervention.

Under Article 22(1) of the GDPR, decisions based solely on automated decision making which produces legal effects or similarly significantly affects an individual are prohibited unless:

- It is necessary for the performance of or entering into a contract;
- It is authorised by law; or
- It is based on the data subject's explicit consent

Automated decision making that involves "special categories" of personal data, such as information about health, sexuality, and religious beliefs, is only permitted where it is carried out on the basis of explicit consent or where it is necessary for reasons of substantial public interest, such as fraud prevention and operating an insurance business.

"Necessity" is interpreted narrowly, and organisations must be able to show that it is not possible to use less intrusive means to achieve the same goal.

"Explicit consent" can be thought of in much the same way as the GDPR's standard requirements for obtaining consent. The difference is that it must be obtained in a way that leaves no room for misinterpretation. This means it must be provided in a clear statement – whether written or spoken.

An explicit consent statement will also need to specifically refer to the element of the processing that requires explicit consent. For example, as the Information Commissioner's Office (ICO) states, "the statement should specify the nature of data that's being collected, the details of the automated decision and its effects, or the details of the data to be transferred and the risks of the transfer".

Other than that, the requirements for explicit consent are the same as the GDPR's definition of consent, which is:

any freely given, specific, informed and unambiguous indication of the data subject's wishes by which he or she, by a statement or by a clear affirmative action, signifies agreement to the processing of personal data relating to him or her.

This in itself means that consent must be obtained more explicitly. The addition of the term "clear affirmative action" is key here, as it nullifies opt-out consent, such as pre-ticked boxes. As with general consent under the GDPR, any consent must be freely given, unambiguous, specific and informed.

What are the provisions for children under GDPR?

With regard to children, the ICO has stated that if an organisation offers services over the internet directly to children (in the UK, under the draft Data Protection Bill, this will be anyone under the age of 13), then you will need parental consent in order to process their personal data lawfully.

Other than this, there is little fundamental change to the rights of children, who are considered as individuals in the own right. Children's data, (where on-line services are not involved) is covered by the fact that children are considered to be a vulnerable group and therefore warrant specific

consideration and protection (i.e. they must be provided with clear information about what, why, how etc., and must be able to understand the risks, consequences and safeguards and their rights),

but otherwise are accorded the same protections as adults in the DPA and the GDPR.

Specifically:

a. You must have clear and age-appropriate privacy notices for children.

b. The right to request erasure is particularly relevant when consent was given when the

individual was a child.

c. The concept of "competence" remains valid under GDPR – you may wish to give an individual

with parental responsibility for a young child the ability to assert that child's data protection

rights on their behalf or consent to processing their data.

d. If an older child is not deemed competent to consent or exercise their own rights you may

allow an adult to do this.

e. You can still process a child's data under legitimate interests.

f. "Privacy by design" is the same and should be properly considered when processing children's

data.

g. So, for example, with regard to a youth group mailing list – parental consent may be

considered appropriate depending on age and competence i.e. do the children understand

the implications of the collection and processing? If yes, they can give their own consent

unless it is clear they are acting against their own interests.

What is "pseudonymisation" of data and why is it important?

The GDPR defines "pseudonymisation" as "the processing of personal data in such a way that the data can no longer be attributed to a specific data subject without the use of additional information."

Pseudonymisation takes the most identifying fields within a database and replaces them with artificial identifiers, or pseudonyms. For example, a name is replaced with a unique number. The purpose is to render the data record less identifying and therefore reduce concerns with data sharing and data retention.

To pseudonymise a data set, the "additional information" must be "kept separately and subject to technical and organisational measures to ensure non-attribution to an identified or identifiable person." In sum, it is a privacy-enhancing technique where directly identifying data is held separately and securely from processed data to ensure non-attribution. An example of this within the college would be to refer to students by their I.D. number which would mean nothing to someone outside the organisation without access to our student records system.

Why should personal data be encrypted?

In recent years there have been several well reported episodes where personal data has been stolen, lost or subject to unauthorised access. In many of these cases, these data breaches were caused by data being inadequately protected or the devices the data was stored on being left in inappropriate places – and in some cases both. The Information Commissioner has formed the view that in future, where such losses occur and where encryption software has not been used to protect the data, regulatory action may be pursued.

"Encryption" protects information stored on mobile and static devices and in transmission. It is a way of safeguarding against unauthorised or unlawful processing of data.

Encryption should be considered alongside a range of other technical and organisational security measures.

Information is encrypted and decrypted using a secret key (some algorithms use a different key for encryption and decryption). Without the key the information cannot be accessed and is therefore protected from unauthorised or unlawful processing.

What to do if a data breach occurs

It is important that any personal data breaches, or indeed suspected breaches, across the College are reported as soon as possible to the Vice Principal Finance and Corporate Services and/or the Director of Corporate Services. Under the terms of the Data Protection Act 2018, data controllers have no longer than 72 hours to report a breach to the Information Commissioners Office after having become aware of it.

If a breach (or suspected breach) has occurred, then staff should follow the flow chart as detailed in Appendix 1 of the College Data Breach Procedure. The relevant member of the College's Privacy Network should also be consulted. For a full list of Privacy Network members please refer to Appendix 2 of the Procedure. The table in Appendix 3 - Data Protection Breach Question/Answer Form - should be completed as fully as possible by staff member(s) who are aware of the breach in order that all information can be gathered.

Staff should recognise the difference between an "incident" (where personal data is at risk but any loss can be contained before it becomes a breach) and a "data breach" (where a failure in security leads to e.g. the loss, damage or compromise of personal data).

Examples of a data breach include:

- The loss or theft of data in any format (e.g. papers taken from car, post intercepted, unauthorised download)
- Loss or theft or equipment used to store College data (e.g. a laptop, smartphone or USB stick)
- Compromised IT user account (e.g. through spoofing, hacking, shared password)
- "Blagging" where information is obtained by deception (a person claims to be someone else)

- Accidental or unauthorised disclosure of information (e.g. through an email or letter to wrong recipient or incorrect system permissions/filter failure)
- Corruption or unauthorised modification of vital records (e.g. alteration of master records)
- Computer systems or equipment compromise (e.g. virus, malware, denial of service attack)
- Break-in at a location holding sensitive information or containing critical information processing equipment such as servers.

Data breach fines have increased substantially under the new guidelines: the maximum fine has increased from £500,000 to €20 million (£17 million) OR 4% global turnover. Failure to report a breach, when required to do so, can result in fines.

Summary

What's going to change after the GDPR comes into force?

Transparency: individuals will have the right to more extensive information about the processing of their personal data.

Accountability: organisations will need to be able to demonstrate their compliance with GDPR principles. They will need to adopt certain 'data protection by design' measures such as policies, audits, protective measures and record-keeping.

Consent: Currently, many organisations use a 'consent to processing' clause within their business processes in order to obtain an individual's consent to process their personal data. Under GDPR, this won't be sufficient. Prior to an individual giving their consent, they must be informed of who will be processing their personal data and of their right to withdraw their consent at any time.

Data processors: The GDPR places a statutory obligation on data processors. This means they will be subject to enforcement by supervisory authorities, fines and compensation claims by data subjects.

Data breaches: Data controllers will have to report personal data breaches to the Information Commissioner's Officer within 72 hours, as well as maintain a 'breach register'.

Data subjects: The rights of 'data subjects' will be enhanced and will include the 'right to be forgotten' and the right to object to data processing for specific purposes. The existing £10 fee for subject access requests will be removed and organisations will have only 30 days to respond such requests.

Profiling: Regulations will be imposed on data which is processed automatically and used to evaluate individuals, i.e. their performance at work.

Penalties: The penalty will depend on the type of breach that has occurred. A fine of up to €20 million or 4% of the total worldwide annual turnover (whichever is greater) may be imposed. The current maximum is much lower than this (£500,000). Compensation may also be awarded for any loss caused to the individual.

What steps do I need to take?

You should ensure that you are aware, and have a basic understanding, of the changes that will come with the GDPR, and the work that the College is doing to become GDPR compliant.

You should continue to make sure that you consider data protection whenever you are handling personal data - including not just students, but applicants, staff, and anybody else whose personal data you are handling.

Be aware that some of the College's work on GDPR compliance may require input from you about your working practice, or about some of the IT systems that you work with. Be prepared to assist with this where requested.

Glossary of Terms

Biometric Data

Any personal data relating to an individual's physical, physiological, or behavioural characteristics that allow unique identification – such as a fingerprint or retina image. It's important to remember that this kind of data is treated as "sensitive personal data" under GDPR.

Data Subject

The "data subject" is the living individual (person)whose personal data is being processed by an organisation.

Data Controller

The "data controller" is the organisation that determines the purposes and means for which the personal data is processed i.e. the College.

Data Processor

The person or business which "processes" personal data under instruction from the data controller. This could be a system integrator or a hosting provider for example. Under GDPR both Data Controllers and Data Processors are jointly responsible for compliance with the new regulation.

Personal Data

This is the broad term for any information related to an individual or 'Data Subject', that can be used to directly or indirectly identify the person. This can be anything from a name or address to a fingerprint or banking details. See also "sensitive personal data".

Data Protection Act (DPA)

The Data Protection Act (1998) is a United Kingdom Act of Parliament designed to protect personal data stored on computers or in an organised paper filing system. It follows the EU Data Protection Directive 1995 protection, processing and movement of data. Individuals have legal rights to control information about themselves. Most of the Act does not apply to domestic use,[1] for example keeping a personal address book. Anyone holding personal data for other purposes is legally obliged to comply with this Act, subject to some exemptions. The Act defines eight data protection principles to ensure that information is processed lawfully.

Data Protection Bill

The Data Protection Bill was published in September 2017 and is currently making its way through Parliament. The Bill updates data protection laws in the UK, supplementing the General Data Protection Regulation (GDPR), implementing the EU Law Enforcement Directive, as well as extending data protection laws to areas which are not covered by the GDPR. It is intended to provide a comprehensive package to protect personal data.

Data Protection Officer (DPO)

An expert on data privacy who works independently to ensure that a business is adhering to the policies and procedures set forth in the GDPR. If a DPO is required, the role can be fulfilled by an employee either on a part-time basis or combined with other duties.

Encrypted Data

Encryption uses complex mathematics to render data unintelligible to anyone without the "keys" to decode it. Used properly, it can ensure that data can only be read or accessed by those with the appropriate permission, making encryption an integral part of GDPR compliance.

General Data Protection Regulations (GDPR)

The General Data Protection Regulation (GDPR) is a regulation in EU law on data protection and privacy for all individuals within the European Union. It addresses the export of personal data outside the EU. The GDPR aims primarily to give control back to citizens and residents over their personal data and to simplify the regulatory environment for international business by unifying the regulation within the EU. When the GDPR takes effect, it will replace the 1995 Data Protection Directive. It was adopted on 27 April 2016. It becomes enforceable from 25 May 2018, after a two-year transition period

Personal Data Breach

A "data breach" is a breach of security leading to unlawful access to, destruction, or misuse of personal data. If a company suffers a data breach under GDPR it could face fines of up to €20 million or 4 per cent of annual global turnover.

Privacy by Design

A principle that calls for data protection to be included from the onset of the designing of systems – rather than as an additional step. Ensuring this approach to projects will go a long way to achieving GDPR compliance.

Privacy Impact Assessment (PIA)

A tool used to identify and reduce privacy risks by analysing the personal data that is processed by businesses and the policies in place to protect the data. A PIA can help design more effective processes for handling personal data.

Processing

An automated or manual action performed on personal data, for example collection, organisation or recording. For processing of personal data to be lawful under the GDPR, businesses must identify a lawful basis for this action.

Profiling

Any automated processing of personal data intended to evaluate, analyse, or predict an individual's behaviour. This could be analysis of someone's location or perhaps evaluation of their work performance. Under GDPR appropriate safeguards must be in place when profiling to ensure compliance.

Pseudonymisation

A means of processing personal data that reduces some of the risks of infringing personal data rights. With this approach data is separated so that additional information is required to identify an individual. By rendering data pseudonymous, data handlers can be granted some lenience under GDPR rulings.

Right to Access

Also known as “Subject Access Right”, gives data subjects access to and information about the personal data that a controller has concerning them. This enables individuals to confirm that their data is being processed legally.

Right to Data Portability

The requirement for controllers to allow the data subject to obtain and reuse their personal data for their own purposes across different services. This enables personal data to be moved, copied or transferred easily from one IT environment to another in a safe and secure way.

Right to be Forgotten

Also known as “Data Erasure”, this entitles an individual to have their personal data deleted. This is a key change under GDPR and controllers must respond to these requests within one month – although this can be extended in difficult cases.

Sensitive Personal Data

Sensitive data is personal information that could result in illegal discrimination against an individual or pose a serious risk to an individual, such as financial loss or identity theft. Therefore, its handling is subject to certain conditions or requirements. The elements of sensitive personal data points include: Racial or ethnic origin, Political opinions, Religious or philosophical beliefs, Trade union membership, Genetic data, Biometric data where processed to uniquely identify a person, Health data, Data about a person’s sex life or sexual orientation.

Glasgow Kelvin College

Photographs and Filming Consent Form

In line with the privacy requirements of the College Safeguarding Policy and in order to comply with the General Data Protection Regulations (GDPR) and Data Protection Act 2018, we need your permission before we take any official photographs or images of you for use by the College in promotional or marketing material.

It should be noted that various photographs are taken across the campuses/learning centres associated with Glasgow Kelvin College and your image may be captured; as these are public buildings, this is difficult to avoid.

Purposes and use of images

Photographs and images taken will be used solely to promote the activities of Glasgow Kelvin College and our partners, in the UK and overseas. Your images may be used for educational purposes and appear in any of our promotional material in printed or electronic form including: web sites, social media including Facebook and Twitter, in multimedia productions, course leaflets, posters or prospectus. Please note that websites can be seen worldwide and not just in the UK where UK law applies. This means that your photographs and images would be in the public domain.

If, during events such as awards ceremonies, shows and performances you do not wish your photo to be taken then please advise the photographer of this in order that appropriate steps can be taken.

How long we keep photographs and images

Photographs and video material will be stored securely in our image library only for as long as necessary for the purposes described below. However, if your photograph(s) is used, it would be included in our historical archive and be retained indefinitely unless you requested it was deleted or the College deleted it as part of our image library maintenance. You can contact us using the details at the end of this form to request removal of photos at any time in-line with your privacy rights, but please note that in certain circumstances we may not be able immediately to erase or delete images which have already been published. Further information on your rights under GDPR is available on the College website under the Student Privacy Notice.

☐ I am over 13 years of age.

☐ I am under 16 years of age. My parent/guardian has agreed to consent to the College using my photograph(s) and image(s) as mentioned above.

☐ I am over 13 years of age. My parent/guardian has agreed to my undertaking and to the use of my photograph(s) and image(s) as mentioned above.

Consent

I hereby consent to the College, its successors, licensees or assignees, taking, storing, making use of and deleting photographs of me (in whole or in part, as adapted or otherwise) for promotional and marketing purposes of the College in all media, worldwide, in perpetuity, without restriction and in any format. The purpose of such material is to include, without limitation, use in prospectuses, the College website, College social media channels and College publications including matters relating to the College's promotional and marketing functions. The College may also attach my contact details to the image on its database in the event that it needs to contact me in relation to this material or in the event that I need to contact the College to exercise my privacy rights in relation to the material.

I acknowledge that I do not own the copyright in the photographs.

I hereby waive any moral rights under s77 and s80 of the Copyright, Designs and Patents Act 1988 as I have or may acquire in relation to the material.

I acknowledge that use of the photographs is not for any payment or deferred payment and there is no obligation on the College to use the photographs.

I understand that the College may transfer the photographs and my contact details to a destination outside the European Economic Area (EEA) or storing them at a destination outside the EEA for the purposes set out above, specifically in relation to social media use.

By signing this form, I acknowledge that I have read and fully understand the above statement and, should I give consent, agree to be bound thereby. This does not affect my privacy rights under data protection law. I hereby release any and all claims against the College releasing this material into the public domain in the form of promotional and marketing material.

Name	Signature
Course	
Email	Date

Withdrawing Consent

You can withdraw your consent at any time. To do this please contact: gdpr@glasgowkelvin.ac.uk

Opt out Disclaimer

If you do not wish to be photographed/filmed/recorded, please tick this box. ☐

For further information concerning photography please contact: Glasgow Kelvin College, 123 Flemington Street, Springburn, Glasgow, G21 4TD. Tel: 0141 630 5000. Glasgow Kelvin College Scottish Charity No. SCO21207

Using Microsoft Teams for Staff-Student Collaborative Projects

The College recognises that Facebook "Groups" has evolved as a popular means for bringing staff and students together with a common interest for the purpose of communicating, sharing news, and collaborating on projects. This report discusses the drawbacks of Facebook and sets out an alternative option.

Facebook – Pros and Cons

Facebook Groups is popular for a number of reasons, but it also has its drawbacks.

PROS	CONS
It's "free"	Many people don't use Facebook
Many people have a Facebook account	You can be added to a Group without permission
It's simple to set-up	Content "disappears" after scrolling past it
It's useful for small groups	Limited control over functionality
It has email alerts	Limited integration with native software
It's easy to embed videos and photos	Mobile support for Groups is poor
It offers mobile support	Group content competes against other content in the user's Facebook stream which is often more provocative

Facebook Groups was not designed for secure collaboration, and is inevitably used by many to coordinate work that may be vulnerable to cyber-attack or surveillance by other, malicious Facebook users.

The College has a small number of Facebook groups set up:

- Glasgow Kelvin College (main College FB page): https://www.facebook.com/GlasgowKelvinCollege/
- Glasgow Chinese School Kelvin College: https://www.facebook.com/glasgowchineseschool/
- Glasgow Kelvin College Adventure Sports: https://www.facebook.com/gkcadventuresports/?ref=br_rs
- Glasgow Kelvin College Jewellery: https://www.facebook.com/GlasgowKelvinJewellery/
- Glasgow Kelvin College Student Association: https://www.facebook.com/gkcstudentassociation/
- Glasgow Kelvin College Music and Sound: https://www.facebook.com/GKCMusic/
- Sustain Glasgow Kelvin College: https://www.facebook.com/sustainGKC/
- Electric Honey: https://www.facebook.com/Electric-Honey-819840208380184/
- Glasgow Kelvin Dance. https://www.facebook.com/groups/1465214550420679/
- Glasgow Kelvin College Friends: https://www.facebook.com/groups/1804859436412067/
- The Fashion Collective: https://www.facebook.com/GKCfashioncollective/?__tn__=%2Cd%2CP-R&eid=ARABdEt2UUgYmBxWMglF6VRRqzju9G2hmW3IPQWauax3FBNSNkoJygJ_1hS0KXKAxyH2ckv_hak4XUls

Facebook Groups and Facebook Workplace

Facebook Groups and Workplace are essentially the same. They both collect, process and share large amounts of data, often breaching GDPR. Facebook is, primarily, a social media platform and, due to its familiarity, it is likely to result in staff and/or students using it informally. Thus, it carries certain risks where professional conduct is required.

The College does not have a contract with Facebook and Facebook retains overall control of any data, meaning that the College cannot determine how that data is processed. Should Facebook have a data breach, the College could find itself liable if it is likely to result in a high risk to the rights and freedoms of students or staff; this is particularly the case if a College member of staff has instructed individuals to use e.g. Facebook Groups for a collaborative project. It is important to note that the Information Commissioner's Office (ICO) have issued fines following breaches of GDPR. Maximum fines of £17 million or 4% of turnover (whichever is greater) can be issued.

Moreover, in the event of a data breach, staff or students could sue the College for such breaches or unlawful data processing undertaken by external service providers. In such circumstances, the College may become liable for compensation to students or staff who have suffered material or no-material damage because of a breach by Facebook if the College has instructed students (or indeed staff) to use those systems.

*For a comparison of data security arrangements between Facebook and Microsoft Teams see Appendix 1.

Moving from Facebook Groups to Microsoft Teams

The College recognises its duty of care to both students and staff and this extends to protecting their data. Following increasing concerns about the security and privacy of Facebook being expressed across the College sector, the College has decided to encourage staff and students to use "Microsoft Teams" as a basis for group collaboration. This is being done with a view to protecting both staff and students as Facebook links professional and private profiles no matter how hard people try to keep them separate. This can lead to unwelcome intrusion and blurring of professional boundaries which can cause dilemmas; this can be avoided.

The College has an existing license with Microsoft meaning that it has control over the use of data. Microsoft Teams is available to Office 365 users and can be activated in the dashboard with one click. This deep integration with Office 365 is one of the main benefits of Microsoft Teams. There is no need for additional accounts.

Microsoft Teams

"Microsoft Teams" is a prime example of "Workstream Collaboration" (WSC) technology i.e. software that offers a "persistent conversational workspace" segregated into discrete "channels". WSC technology aims to foster better communication within teams, increase organisational engagement, and better connect remote groups and teams.

What does Teams do?	Key benefits of Teams
Work together on documents and notes	One centralised hub
Seamless file search, backup, and collaboration	Office 365 integration
Work and chat as a team (Skype)	Easily customisable
Organise and hold meetings (Skype)	Focus on data security and compliance
“Activity” feed for you and your team’s work	Azure active cloud storage integration
Integrates with Office 365 applications	No extra cost to Office 365 users
Work on desktop browser or with a mobile app	

Unlike Facebook Groups or Workplace, Microsoft Teams, from its inception, was designed specifically for hosting teamwork. One of the benefits of using Microsoft Teams is that users can quickly get an understanding of what everybody is working on within the team through the “Activity” feed. It offers a single “portal” or “hub” to get things done. Users can collaborate within Teams using real-time co-authoring in Word Online, while Outlook Calendar displays meeting schedules while allowing users to join remotely via voice or video.

Given Teams collaborative structure, there is an increased emphasis on data security and compliance, some of which comes from native integrations rather than relying on third party applications. The enhanced security features are a crucial factor in convincing the College to recommend using Teams in staff/student collaborative projects.

A Beginner’s Guide to using Microsoft Teams can found here:

https://www.chorus.co/resources/news/microsoft-teams-a-beginners-guide-to-teams-in-office-365

Appendix 1

Comparison of Facebook, Microsoft Teams and Facebook Workplace

	Facebook	**Microsoft Teams**	**Workplace@Facebook**
Cost	Free	Free – contract in place	Free – as charity use
Usability	Good	Excellent Better customer support	Excellent Better customer support
Features	Poor	Excellent	Excellent
Security	Poor	Good – overall provided by MS, with College IT managing/tailoring in-house	Poor
Location	Poor - Globally (not transparent where this includes) including US, based on adequacy decisions (NB: US Privacy Shield about to be challenged in court again)	Good - EU (UK Servers requested)	Poor - Globally (not transparent where this includes) including US, based on adequacy decisions (NB: US Privacy Shield about to be challenged in court again)
Controller/ Processor	Joint controller (based on case law)	College/Microsoft	The College must share data with Workplace, even under a Premium account. This appears to be a Joint Controller arrangement.
Contract/ Agreement	None	Yes	None

Glasgow Kelvin College

Safeguarding and Corporate Parenting

Children, Young People and Vulnerable Adults

Advice to All Staff

This advice is drawn from the College's Safeguarding Children, Young People and Vulnerable Adults Policy and Procedure. The purpose of the Policy is to protect those at risk and the adults who work with them.

Every person must take account of their responsibilities in ensuring that children, young people and vulnerable adults are safe and get the help they need. It is everyone's job to ensure the safety of children, young people and vulnerable adults.

Things You Must Do:

- Treat all individuals, including children, young people and vulnerable adults with respect.
- Ensure photographic identification issued by the College is be worn at all times in the College and when on College business.
- Ensure that your own conduct is at all times an example of good practice.
- If you are alone with a child, young person or vulnerable adult (referred hereafter as the child for the purpose of this section) during your College activities, you should ensure:
    - that someone else is in close proximity, for example, in the next room or in sight even if not within hearing distance;
    - someone else (always) knows the time and place when you are alone;
    - the child, parent/carer and person in charge know the reasons for the one to one contact and agree for it to take place;
    - you and the child know what to do in an emergency, how to contact the parent/carer and/or another worker;
    - you have access to a phone or can summon help by calling out;

- the child is given permission to stop the one to one contact and knows how to complain or to get help;
- you, stop the session if you become aware that the child is uncomfortable with being alone with you, and
- you make a record of the fact that you were alone with a child or children, the reason for this, and what happened.

If for any reason you are not able to inform the parent/carer and person in charge in advance that you have been alone with a child, you do so as soon as possible afterwards.

- Respect the right of individuals to have their privacy and dignity assured.
- Do not discourage children, young people or vulnerable adults who want to talk about attitudes or behaviour they do not like.
- Remember that someone else might misinterpret your actions, no matter how well-intentioned.
- Recognise that special caution is required if you are discussing sensitive issues with children, young people vulnerable adults and/or their parents or carers.
- Be aware of other staff, be vigilant and act to help them keep themselves and children, young people and vulnerable adults safe. Be prepared to challenge their actions.
- Operate within College policies, including the Safeguarding Children, Young People and Vulnerable Adults Policy and the Protecting Vulnerable Groups (Scotland) Act 2007.
- Record on A Safeguarding – Confidential Reporting Form a concern or a disclosure of abuse, detailing where possible exactly what was said and recording times and the individual(s) involved. The Confidential Reporting Form is available on the intranet under:
  - Safeguarding; or
  - A copy can be obtained from the Human Resources Department.

Things You Must Not Do:

- Have inappropriate physical contact with children, young people or vulnerable adults, including ‘caring’ physical contact (e.g. a hug).

- Encourage inappropriate attention-seeking behaviour.
- Speak in an inappropriate way to or make suggestive/derogatory remarks or gestures in front of children, young people or vulnerable adults.
- Discourage children, young people or vulnerable adults who want to talk about attitudes or behaviour of others they do not like.
- Draw conclusions about others without reasonable cause.
- Exaggerate or trivialise child abuse issues.
- Rely on your good name or that of the College to protect you from scrutiny of your conduct.
- Think it could never happen to you.
- Take a chance when informed common sense, policy and practice suggest another more prudent approach.
- Ignore the Protecting Vulnerable Groups (Scotland) Act 2007 or College policies or guidelines and procedures operating within any establishment in which you may be on duty.

What To Do:

If a child, young person or vulnerable adult talks to you about abuse by someone else:

- Advise the child, young person or vulnerable adult that you **must** pass the information on.
- Allow him or her to speak without interruption, listen to what is said, but **do not investigate**.
- Be sensitive to feelings of guilt and isolation, but do not make any judgement.
- Let them know that they were right to share this information with you.
- Tell the individual what is likely to happen next.

If you suspect a child, young person or vulnerable adult is being abused, emotionally, physically or sexually:

- Report the matter immediately to one of the College's Safeguarding and Corporate Parenting Team, who will notify the Principal or Vice Principal. In

the event of an issue outwith normal working hours the please contact on the mobile number provided.

Safeguarding and Corporate Parenting Team contact details

Patricia Currie – 07557 863 958

Monica McKerlie – 07867 193 243

Elaine Mitchell – 07917 734 217

Doreen Shiels – 07711 795 032

John Gallagher – 07909 882 715

Maggie Murphy – 07824 866 176

Valerie Robertson – 07554 554 792

Jenny McKay – 07557 863 964

Josephine Smith – 07468 709 260

Fiona Templeton – 07775 586 225

Stuart Lowe – 07876 216 560

or

- email a concern to: safeguarding@glasgowkelvin.ac.uk

- Where local authority or private agencies are involved the Principal or Vice Principal will notify the Executive Director (Education and Social Work Services), Director of Education or Social Services or the Head of Establishment. Where the head of establishment is the subject of the allegations, then the Director should be informed. The establishment's own Child Protection policy should then operate.

If you receive an allegation about any adult or about yourself:

- Immediately tell a member of the College's Safeguarding and Corporate Parenting Team who will inform the Principal or Vice Principal.

- Try to ensure that no-one is placed in a position which could cause compromise.

In all cases:

- Record the **facts** as soon as possible on the Colleges Confidential Reporting Form and pass to a member of the College Safeguarding and Corporate Parenting Team as a matter of urgency.

- You **must** refer; you **must not** investigate and you **cannot** ignore.

Reviewed: 12 December 2016. Next review date by 13 December 2018

Complaints Handling Procedure (CHP)

Document Control Information	
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The Board of Management (or any person/group with delegated authority from the Board) reserves the right to amend this document at any time should the need arise following consultation with employee representatives.

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Foreword

Our Complaints Handling Procedure reflects the College'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 was first developed by college staff who are experienced complaints handlers, working closely with the Scottish Public Services Ombudsman (SPSO). The Model Complaints Handling Procedures (MCHPs) were revised in 2019 by the SPSO in consultation with all sectors. This new edition includes a core text, which is consistent across all public services in Scotland, with some additional text and examples specific to this sector. As far as is possible we have produced a standard approach to handling complaints across Scotland's public services, which complies with the SPSO's guidance on a MCHP. This procedure aims to help us 'get it right first time'. We want quicker, simpler and more streamlined complaints handling with local, early responses by capable, well-trained staff.

All staff across the College must cover this procedure as part of their induction and must be given refresher training as required, to ensure they are confident in identifying complaints, empowered to resolve simple complaints on the spot, and familiar with how to apply this procedure (including recording complaints).

Complaints give us valuable information we can use to improve service provision and customer satisfaction. Our Complaints Handling Procedure will enable us to address a customer's dissatisfaction and may help us prevent the same problem from happening again. For our staff, complaints provide a first-hand account of the customers' 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.

Handling complaints early creates better customer relations. Handling complaints close to the point of service delivery 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 handle swiftly can greatly add to our workload and are more costly to administer.

The Complaints Handling Procedure will help us do our job better, improve relationships with our customers and enhance public perception of the College. 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.

Overview of the CHP

1. Anyone can make a complaint, either verbally or in writing, including face-to-face, by phone, letter or email.

2. We will try to resolve complaints to the satisfaction of the customer wherever this is possible. Where this isn't possible, we will give the customer a clear response to each of their points of complaint. We will always try to respond as quickly as we can (and on the spot where possible).

3. Our complaints procedure has two stages. We expect the majority of complaints will be handled at stage 1. If the customer remains dissatisfied after stage 1, they can request that we look at it again, at stage 2. If the complaint is complex enough to require an investigation, we will put the complaint into stage 2 straight away and skip stage 1.

Stage 1: Frontline response	**Stage 2: Investigation**	**Independent external review (SPSO or other)**
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), at peak periods throughout the academic year this may be extended to **ten working days** 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 advise the customer how to escalate their complaint to stage 2	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 *We will advise the customer how to seek an internal review*	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 Some complaints may also have an alternative route for independent external review

Expected behaviours

4. We expect all staff to behave in a professional manner and treat customers with courtesy, respect and dignity. We also ask customers bringing a complaint to treat our staff with respect. We ask customers to engage actively with the complaint handling process by:

   - telling us their key issues of concern and organising any supporting information they want to give us (we understand that some people will require support to do this)
   - working with us to agree the key points of complaint when an investigation is required; and
   - responding to reasonable requests for information.

5. The College has a number of policies to address situations when these standards are not met. These can be viewed on the Policies and Procedures page of our website.

6. We recognise that people may act out of character in times of trouble or distress. Sometimes a health condition or a disability can affect how a person expresses themselves. The circumstances leading to a complaint may also result in the customer acting in an unacceptable way.

7. Customers who have a history of challenging or inappropriate actions, or have difficulty expressing themselves, may still have a legitimate grievance, and we will treat all complaints seriously. However, we also recognise that the actions of some customers 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 actions such as unreasonable persistence, threats or offensive behaviour from customers. Where we decide to restrict access to a customer under the terms of our policies, we have procedures in place to communicate that decision, notify the customer of their right of appeal, and review any decision to restrict contact with us.

8. If we decide to restrict a customer's contact, we will be careful to follow the process set out in our policies and to minimise any restrictions on the customer's access to the complaints process. We will normally continue investigating a complaint even where contact restrictions are in place (for example, limiting communication to letter or to a named staff member). In some cases, it may be possible to continue investigating the complaint without contact from the customer. Our policies allows us in limited circumstances to restrict access to the complaint process entirely. This would be as a last resort, should be as limited as possible (for a limited time, or about a limited set of subjects) and requires approval from the Interim Assistant Principal. Where access to the complaint process is restricted, we must signpost the customer to the SPSO.

9. The SPSO has guidance on *promoting positive behaviour and managing unacceptable actions. promoting positive behaviour and managing unacceptable actions*.

Maintaining confidentiality and data protection

10. Confidentiality is important in complaints handling. This includes maintaining the customer's confidentiality and confidentiality in relation to information about staff members, contractors or any third parties involved in the complaint.

11. This should not prevent us from being open and transparent, as far as possible, in how we handle complaints. This includes sharing as much information with the complainant (and, where appropriate, any affected staff members) as we can. When sharing information, we should be clear about why the information is being shared and our expectations on how the recipient will use the information.

12. We must always bear in mind legal requirements, for example data protection legislation, as well as internal policies on confidentiality and the use of customer information. The College Data Protection Officer can provide further guidance on data protection matters and can be contacted by email at gdpr@glasgowkelvin.ac.uk.

13. Examples of situations where a response to a complaint may be limited by confidentiality, such as:

    - where a complaint has been raised against a staff member and has been upheld – we will advise the customer that their complaint is upheld, but would not share specific details affecting staff members, particularly where disciplinary action is taken.

    - where someone has raised a concern about a child or an adult's safety and is unhappy about how that has been dealt with – we would look into this to check whether the safety concern had been properly dealt with, but we would not share any details of our findings in relation to the safety concern.

What is a complaint?

14. Glasgow Kelvin College's definition of a complaint is: 'an expression of dissatisfaction by one or more members of the public about the College's action or lack of action, or about the standard of service provided by or on behalf of the College.'

15. For clarity, where an employee also receives a service from the College as a member of the public, they may complain about that service.

16. A complaint may relate to the following, but is not restricted to this list:

    - the admissions process
    - the disciplinary process
    - a request for a service or for information which has not been actioned or answered
    - wrong information about academic programmes or college services
    - the quality and availability of facilities and learning resources
    - accessibility of our buildings or services
    - failure or refusal to provide a service
    - inadequate quality or standard of service, or an unreasonable delay in providing a service
    - dissatisfaction with one of our policies or its impact on the individual
    - failure to properly apply law, procedure or guidance when delivering services
    - failure to follow the appropriate administrative process
    - conduct, treatment by or attitude of a member of staff or contractor (**except** where there are arrangements in place for the contractor to handle the complaint themselves: see **Complaints about contracted services**); or
    - disagreement with a decision, (**except** where there is a statutory procedure for challenging that decision, or an established appeals process followed throughout the sector).

17. **Appendix 1** provides a range of examples of complaints we may receive, and how these may be handled.

18. A complaint **is not**:

    - a request for information or an explanation of policy or practice
    - a disagreement with academic judgment
    - a concern about student conduct (see **Complaints and student conduct procedures)**
    - a routine first-time request for a service (see **Complaints and service requests)**
    - a request for compensation only (see **Complaints and compensation claims**)
    - issues that are in court or have already been heard by a court or a tribunal (see **Complaints and legal action**)
    - disagreement with a decision where there is a statutory procedure for challenging that decision (such as for freedom of information and subject access requests), or an established appeals process followed throughout the sector (see also **Complaints and appeals**)

- a request for information under the Data Protection or Freedom of Information (Scotland) Acts
- a grievance by a staff member or a grievance relating to employment or staff recruitment
- a concern raised internally by a member of staff (which was not about a service they received, such as a whistleblowing concern)
- a concern about a child or an adult's safety
- an attempt to reopen a previously concluded complaint or to have a complaint reconsidered where we have already given our final decision
- abuse or unsubstantiated allegations about our organisation or staff where such actions would be covered by our policies and procedures; or
- a concern about the actions or service of a different organisation, where we have no involvement in the issue (**except** where the other organisation is delivering services on our behalf).

19. **Appendix 2** gives more examples of 'what is not a complaint' and how to direct customers appropriately.

20. We will not treat these issues as complaints, and will instead direct customers to use the appropriate procedures. Some situations can involve a combination of issues, where some are complaints and others are not, and each situation should be assessed on a case-by-case basis.

21. If a matter is not a complaint, or not suitable to be handled under the CHP, we will explain this to the customer, and tell them what (if any) action we will take, and why.

Who can make a complaint?

22. Anyone who receives, requests, or is affected by our services can make a complaint. In this procedure these people are termed 'customers', regardless of whether they are or were using a service.

23. We also accept complaints from the representative of a person who is dissatisfied with our service.

Supporting the customer

24. All members of the community have the right to equal access to our complaints procedure. It is important to recognise the barriers that some customers may face complaining. These may be physical, sensory, communication or language barriers, but can also include their anxieties and concerns. Customers may need support to overcome these barriers.

25. We have legal duties to make our complaints service accessible under equalities and mental health legislation. For example:

    - the Equality Act (Scotland) 2010 – this gives people with a protected characteristic the right to reasonable adjustments to access our services (such as large print or BSL translations of information); and
    - the Mental Health (Care and Treatment) (Scotland) Act 2003 – this gives anyone with a 'mental disorder' (including mental health issues, learning difficulties, dementia and autism) a right to access independent advocacy. This must be delivered by independent organisations that only provide advocacy. They help people to know and understand their rights, make informed decisions and have a voice.

26. Examples of how we will meet our legal duties are:

    - proactively checking whether members of the public who contact us require additional support to access our services
    - providing interpretation and/or translation services for British Sign Language users; and
    - helping customers access independent advocacy (the Scottish Independent Advocacy Alliance website has information about local advocacy organisations throughout Scotland).

27. In addition to our legal duties, we will seek to ensure that we support vulnerable groups in accessing our complaints procedure. Actions that we may take include:

    - helping vulnerable customers identify when they might wish to make a complaint (for example, by training frontline staff who provide services to vulnerable groups)
    - helping customers access independent support or advocacy to help them understand their rights and communicate their complaints (for example, through the Scottish Independent Advocacy Alliance or Citizen's Advice Scotland); and
    - providing a neutral point of contact for complaints (where the relationship between customers and frontline staff is significant and ongoing).]

28. These lists are not exhaustive, and we must always take into account our commitment and responsibilities to equality and accessibility.

How complaints may be made

29. Complaints may be made verbally or in writing, including face-to-face, by phone, letter or email.

30. Where a complaint is made **verbally**, we will make a record of the key points of complaint raised, confirm these with the complainant, investigate and reach resolution where possible.

31. Complaint issues may also be raised on **digital platforms** (including **social media**).

32. Where a complaint issue is raised via a digital channel managed and controlled by the College (for example an official Twitter address or Facebook page), we will explain that **we do not take complaints on social media**, but we will tell the person how they can complain.

33. Where a complaint issue is raised via a digital channel managed and controlled by the College (for example an official Twitter address or Facebook page):

    - we will normally respond by explaining that we do not normally take complaints on social media and telling the person how they can complain;
    - in exceptional circumstances, we may respond to very simple complaints on social media. This will normally only be appropriate where an issue is likely to affect a large number of people, and we can provide a very simple response (for example, an apology for a cancelled bus service or late cancellation of a class).

34. We may also become aware that an issue has been raised via a digital channel not controlled or managed by us (for example a youtube video or post on a private facebook group). In such cases we **may** respond, where we consider it appropriate, by telling the person how they can complain.

35. We must always be mindful of our data protection obligations when responding to issues online or in a public forum.

Time limit for making complaints

36. The customer must raise their complaint within six months of when they first knew of the problem, unless there are special circumstances for considering complaints beyond this time (for example, where a person was not able to complain due to serious illness or recent bereavement).

37. Where a customer has received a stage 1 response, and wishes to escalate to stage 2, unless there are special circumstances they must request this either:

    - within six months of when they first knew of the problem; or
    - within two months of receiving their stage 1 response (if this is later).

38. We will apply these time limits with discretion, taking into account the seriousness of the issue, the availability of relevant records and staff involved, how long ago the events occurred, and the likelihood that an investigation will lead to a practical benefit for the customer or useful learning for the organisation.

39. We will also take account of the time limit within which a member of the public can ask the SPSO to consider complaints (normally one year). The SPSO have discretion to waive this time limit in special circumstances (and may consider doing so in cases where we have waived our own time limit).

Particular circumstances

Complaints by (or about) a third party

40. Sometimes a customer may be unable or reluctant to make a complaint on their own. We will accept complaints from third parties, which may include relatives, friends, advocates and advisers. Where a complaint is made on behalf of a customer, we must ensure that the customer has authorised the person to act on their behalf. It is good practice to ensure the customer understands their personal information will be shared as part of the complaints handling process (particularly where this includes sensitive personal information). This can include complaints brought by parents on behalf of their child, if the child is considered to not have capacity to make decisions for themselves.

41. Verbal consent direct from the customer to deal with a third party will normally be sufficient for us to investigate a complaint. The Complaints Team would normally follow up in writing to confirm this.

42. In certain circumstances, a person may raise a complaint involving another person's personal data, without receiving consent. The complaint should still be investigated where possible, but the investigation and response may be limited by considerations of confidentiality. The person who submitted the complaint should be made aware of these limitations and the effect this will have on the scope of the response.

Serious, high-risk or high-profile complaints

43. We will take particular care to identify complaints that might be considered serious, high-risk or high-profile, as these may require particular action or raise critical issues that need senior management's direct input. Serious, high-risk or high-profile complaints should normally be handled immediately at stage 2 (see **Stage 2: Investigation**).

44. We define potential high-risk or high-profile complaints as those that may involve:

- an allegation of corruption against a college employee
- a claim of dereliction of duty by a college employee
- a claim of personal injury that has incapacitated the customer
- a potentially significant risk to the college's operations
- a claim of discrimination, with due regard to protected characteristics as set out in section 149(7) of the Equality Act 2010
- an allegation of significant harm or abuse or where there is a suspicion that someone may suffer significant harm
- serious service failure, for example major delays in providing, or repeated failures to provide, a service; or
- significant and ongoing press interest.

Anonymous complaints

45. We value all complaints, including anonymous complaints, 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. Any decision not to pursue an anonymous complaint must be authorised by the Interim Assistant Principal.

46. If we pursue an anonymous complaint further, we will record it as an anonymous complaint together with any learning from the complaint and action taken.

47. If an anonymous complainant makes serious allegations, these should be dealt with in a timely manner under relevant procedures. This may not be the complaints procedure and could instead be relevant child protection, adult protection or disciplinary procedures.

What if the customer does not want to complain?

48. If a customer has expressed dissatisfaction in line with our definition of a complaint but does not want to complain, we will explain that complaints offer us the opportunity to improve services where things have gone wrong. We will encourage the customer to submit their complaint and allow us to handle it through the CHP. This will ensure that the customer is updated on the action taken and gets a response to their complaint.

49. If the customer insists they do not wish to complain, we are not required to progress the complaint under this procedure. However, we should record the complaint as an anonymous complaint (including minimal information about the complaint, without any identifying information) to enable us to track trends and themes in complaints. Where the complaint is serious, or there is evidence of a problem with our services, we should also look into the matter to remedy this (and record any outcome).

Complaints involving more than one area or organisation

50. If a complaint relates to the actions of two or more areas within our organisation, we will 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.

51. If a customer complains to us about the service of another organisation or public service provider, but we have no involvement in the issue, the customer should be advised to contact the appropriate organisation directly.

52. If a complaint relates to our service and the service of another organisation or public service provider, and we have a direct interest in the issue, we will handle the complaint about the College through the CHP. If we need to contact an outside body about the complaint, we will be mindful of data protection.

53. These ‘joint-service’ complaints may be about such things as:

- property maintenance, where the customer's dissatisfaction relates to our service and that of an external facilities body
- third-party services, for example IT systems; or
- a student loan, where the customer is dissatisfied with our service and that of the Student Awards Agency for Scotland.

Complaints about contracted services

54. Where we use a contractor to deliver a service on our behalf we recognise that we remain responsible and accountable for ensuring that the services provided meet the College’s standard (including in relation to complaints). We will either do so by:

- ensuring the contractor complies with this procedure; or
- ensuring the contractor has their own procedure in place, which fully meets the standards in this procedure. At the end of the investigation stage of any such complaints the contractor must ensure that the customer is signposted to the SPSO.

55. We will confirm that service users are clearly informed of the process and understand how to complain. We will also ensure that there is appropriate provision for information sharing and governance oversight where required.

56. The College has discretion to investigate complaints about organisations contracted to deliver services on its behalf even where the procedure has normally been delegated.

Complaints about academic staff and senior management

57. Complaints about academic 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 academic or 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. The investigating officer as part of the complaint investigation will be required to liaise with the staff member.

58. Complaints raised against senior staff, including the Principal, should be submitted to Douglas Wilson, Clerk to the Board of Management at douglaswilson@glasgowkelvin.ac.uk. He will investigate the matter, aiming to respond as per the timescales outlined in this CHP.

Complaints and other processes

59. Complaints can sometimes be confused (or overlap) with other processes, such as disciplinary or whistleblowing processes. Specific examples and guidance on how to handle these are below.

Complaints and appeals

60. In some cases, an issue may be raised as a complaint which should be considered under alternative arrangements (for example, an academic appeal), or vice versa. Complaints and appeals are handled under separate processes. It is not appropriate for the same issue to be considered under both procedures.

61. Where the complaint and appeal issues can be clearly distinguished, we will identify the points to be investigated as a complaint and progress those in line with this procedure. This will include confirming the points of complaint and outcomes sought. We will also identify and set out the issues of appeal.

62. In determining which process applies, we may need to clarify our approach with the customer (for example, where the customer is focussed solely on the appeal outcome they may not wish to also pursue a complaint). However, we will not normally ask the customer to resubmit issues they have already raised (for example, to reframe part of their appeal as a complaint).

63. We may also decide to complete consideration under one procedure before considering residual issues under another procedure (for example, we may delay consideration of any complaint until the academic appeal has been concluded, or vice versa). This would normally only be appropriate where it is difficult to distinguish which issues should be dealt with under which procedure.

64. In all cases, we will explain to the student which issues have been considered under which process, and signpost them to the appropriate independent review.

Complaints and student conduct procedures

65. A concern about the conduct of another student is not a complaint, and should be handled under the Student Disciplinary Procedure and Code of Learner Behaviour. However, the customer may wish to complain about how the College handled the situation (for example, where a teacher allowed a student's behaviour to disrupt a class or exam). Where the complaint is about our service, we will consider it under the CHP.

Complaints and service requests

66. If a customer asks the College to do something (for example, provide a service or deal with a problem), and this is the first time the customer has contacted us, this would normally be a routine service request and not a complaint.

67. Service requests can lead to complaints, if the request is not handled promptly or the customer is then dissatisfied with how we provide the service.

Complaints and disciplinary or whistleblowing processes

68. If the issues raised in a complaint overlap with issues raised under a disciplinary or whistleblowing process, we still need to respond to the complaint.

69. Our response must be careful not to share confidential information (such as anything about the whistleblowing or disciplinary procedures, or outcomes for individual staff members). It should focus on whether the College failed to meet our service standards, where relevant, or expected standards and what we have done to improve things, in general terms.

70. Staff investigating such complaints will need to take extra care to ensure that:

    - we comply with all requirements of the CHP in relation to the complaint (as well as meeting the requirements of the other processes)

    - all complaint issues are addressed (sometimes issues can get missed if they are not also relevant to the overlapping process); and

    - we keep records of the investigation that can be made available to the SPSO if required. This can problematic when the other process is confidential, because SPSO will normally require documentation of any correspondence and interviews to show how conclusions were reached. We will need to bear this in mind when planning any elements of the investigation that might overlap (for example, if staff are interviewed for the purposes of both the complaint and a disciplinary procedure, they should not be assured that any evidence given will be confidential, as it may be made available to the SPSO).

71. The SPSO's report *Making complaints work for everyone* has more information on supporting staff who are the subject of complaints.

Contact from MPs, MSPs or Councillors

If the College receives correspondence from MPs, MSPs or Councillors relating to a complaint on behalf of a constituent, we will handle the correspondence in line with the CHP.

Complaints and compensation claims

72. Where a customer is seeking financial compensation only, this is not a complaint. However, in some cases the customer may want to complain about the matter leading to their financial claim, and they may seek additional outcomes, such as an apology or an explanation. Where appropriate, we may consider that matter as a complaint, but deal with the financial claim separately. It may be appropriate to extend the timeframes for responding to the complaint, to consider the financial claim first.

Complaints and legal action

73. Where a customer says that legal action is being actively pursued, this is not a complaint.

74. Where a customer indicates that they are thinking about legal action, but have not yet commenced this, they should be informed that if they take such action, they should notify the Complaints Team or the Interim Assistant Principal and that the complaints process, in relation to the matters that will be considered through the legal process, will be closed. Any outstanding complaints must still be addressed through the CHP.

75. If an issue has been, or is being, considered by a court, we must not consider the same issue under the CHP.

What to do if the CHP does not apply

76. If the issue does not meet the definition of a complaint or if it is not appropriate to handle it under this procedure (for example, due to time limits), we will explain to the customer why we have made this decision. We will also tell them what action (if any) we will take (for example, if another procedure applies), and advise them of their right to contact the SPSO if they disagree with our decision not to respond to the issue as a complaint.

77. Where a customer continues to contact us about the same issue, we will explain that we have already given them our final response on the matter and signpost them to the SPSO. We may also consider whether we need to take action under any of our *policies/procedures.*

Appendix 1 – Complaints that may be handled at the frontline stage

The following table gives examples of complaints that may be considered at the frontline stage, and suggests possible actions.

Complaint	Possible actions
Two related lectures have been cancelled due to bad weather. A student complains to the course leader that this will disadvantage her and her classmates in the forthcoming exam.	The course leader contacts all affected students and apologises for the cancellation. The course leader tells the students that two extra lectures have been scheduled and gives details of times and locations. This action and the complaint's outcome are logged on the college complaints database.
A woman complains to college reception that students threw food out of a window as she was passing. She said this had been very unpleasant and it had damaged her clothes.	The receptionist apologises on the college's behalf and takes a note of her contact details. The receptionist passes them to a member of the Complaints Team, who writes the following day offering an apology and saying that the college expects its students to be positive members of the community. The residence manager offers to pay the cost of any dry-cleaning, and explains that the college will seek to identify the students to ensure that their behaviour does not recur. This action and the complaint's outcome are logged on the college complaints database.
A student complains that his profile, which he had provided for use in the college prospectus, had been incorrectly reproduced, attributing information to him that belonged to someone else.	The college writes to the student with an apology, an explanation of how the mistake happened, and details of how it will resolve the issue. This would include replacing the version on the college website, amending printed copies of the prospectus and making sure the correct text was included in future printed versions. These actions and the complaint's outcome are logged on the college complaints database.
A student complains that she has received a fine for the late return of library books when she had, in fact, returned the books on time.	A member of the library staff checks and confirms that the books had been returned on time, but the librarian had failed to update the computer system to reflect this. The student receives an explanation and an apology from the member of staff. This action and the complaint's outcome are logged on the college complaints database.

Appendix 2 – What is not a complaint?

1. A concern may not necessarily be a complaint. For example, a customer might make a routine first-time request for a service. This is not a complaint, but the issue may escalate into a complaint if it is not handled effectively and the customer has to keep on asking for the service.

2. A customer may also be concerned about college decisions, which may have their own specific review or appeal procedures. So, where appropriate, the college must direct customers to the relevant procedure. The following examples give details of the type of issues or concerns for which you should not use the CHP. This is not a full list, and you should decide the best route for each individual case.

3. Remember that although the customer may have another form of redress as detailed above, you must consider carefully whether or not you should manage a customer's comments within the CHP. Dissatisfaction with certain college decisions may simply require an explanation and direction to the correct route. If, however, a customer says they are dissatisfied with the administrative process we have followed in reaching a decision, you may consider that dissatisfaction through the CHP. An example may be a complaint from a customer who is dissatisfied with a decision and alleges that we failed to follow or apply the appropriate guidance in making it.

<table>
<tr><td><u>Example 1:</u>

Appeal against an academic decision (separate appeals procedure)

Learner Academic Appeals Policy</td><td><u>Example 2:</u>

Appeal against a student funding award/non-award

Student Funding Appeals Procedure</td></tr>
<tr><td colspan="2"><u>Example 3:</u>

Claim for compensation against the college

Contact: Derek Smeall, Principal
Email: secretariatgkc@glasgowkelvin.ac.uk
Telephone: 0141 630 5000</td></tr>
<tr><td colspan="2"><u>Example 4:</u>

Request under the Data Protection or Freedom of Information Acts

Contact: Lisa Clark, Interim Assistant Principal
Data Protection: gdpr@glasgowkelvin.ac.uk
Freedom of Information: foi@glasgowkelvin.ac.uk
Telephone: 0141 630 5000</td></tr>
<tr><td><u>Example 5:</u>

National qualification results

Refer to Independent External Review, Point 153</td><td><u>Example 6:</u>

College exam results

Contact: Mae Smillie, MIS Manager
Email: MISstaff@glasgowkelvin.ac.uk
Telephone: 0141 630 5000</td></tr>
</table>

The complaints handling process

78. 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 advise 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.

We will advise the customer how to seek an internal review

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

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 opportunities.
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

79. A complaint is **resolved** when both the College 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.

80. We will try to resolve complaints wherever possible, although we accept this will not be possible in all cases.

81. 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.

82. It may be helpful to use alternative complaint resolution approaches when trying to resolve a complaint.

83. 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.

84. 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 independent external review as usual.

85. If the customer and the College 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

86. 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)?

87. 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.

88. 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.

89. If the matter is not suitable for handling as a complaint, we will explain this to the customer (and signpost them to SPSO).

90. In most cases, this step will be straightforward. If it is not, the complaint may need to be handled immediately at stage 2.

What does the customer want to achieve by complaining?

91. 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?

92. 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.

93. The customer may expect more than we can provide. If so, we will tell them as soon as possible.

94. Complaints which can be resolved or responded to quickly should be managed at stage 1.

If I cannot respond, who can help?

95. 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.

96. 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.

Stage 1: Frontline response

97. Frontline response – the College aims to respond quickly to straightforward complaints that require little or no investigation, usually within five working days. However at peak times throughout the year this may be extended to ten working days.

98. 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.

99. 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.

100. Complaints which are not suitable for frontline response should be identified early, and handled immediately at stage 2: investigation.

101. Appendix 1 gives examples of the types of complaint we may consider at this stage, with suggestions on how to handle them.

Notifying staff members involved

102. 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

103. The College will aim to provide a response to frontline complaints 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 after 4pm of a working day or on a weekend or public holiday). Academic holidays should be counted as normal working days (except for weekends or public holidays).

Extension to the timeline

104. 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 the Complaints Team or Interim Assistant Principal. 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).

105. 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.

106. If a complaint has not been closed within ten working days, it should be escalated to stage 2

for a final response.

107. **Appendix 3** provides further information on timelines.

Closing the complaint at the frontline response stage

108. 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; 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).

109. 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.

110. 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).

111. The complaint should then be closed and the complaints system updated accordingly.

112. At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified.

Stage 2: Investigation

113. 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.

- 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.

114. 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).

115. 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.

116. The beginning of stage 2 is a good time to consider whether complaint resolution approaches other thani nvestigation may be helpful.

Acknowledging the complaint

117. Complaints must be acknowledged within three working days of receipt at stage 2.

118. We must issue the acknowledgement in a format which is accessible to the customer, taking into account their preferred method of contact.

119. 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.

120. 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

121. 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.

122. Where the points of complaint and outcome sought are clear, we can confirm our understanding of these with the customer when acknowledging the complaint.

123. 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.

124. 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 College policies and procedures, 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**.**

- **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

125. 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: via the Line Manager

- 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).

126. If it is likely that internal disciplinary processes may be involved, the requirements of that process should also be met**.**

Investigating the complaint

127. 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 the College responsible?

128. 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).

129. If we need to share information within or outwith the organisation, we will be mindful of our obligations under data protection legislation.

130. The SPSO has resources for conducting investigations, including:

- Investigation plan template

- Decision-making tool for complaint investigators

Alternative complaint resolution approaches

131. 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.

132. 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.

133. The SPSO has guidance on alternative complaint resolution approaches.

134. If the College 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

135. 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.

136. 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

137. 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 is received after 4pm on a working day or received on a weekend or public holiday). Academic holidays should be counted as normal working days (except for weekends or public holidays).

- 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

138. 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.

    Any extension must be approved by the Complaints Team or Interim Assistant Principal. 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.

139. 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.

140. **Appendix 3** provides further information on timelines.

Closing the complaint at the investigation stage

141. The response to the complaint should be in writing (or by the customer's preferred method of contact) and must be signed off by the Interim Assistant Principal or a member of the Complaints Team who is empowered to provide the final response on behalf of the College.

142. We will tell the customer the outcome of the complaint (whether it is resolved, 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
- 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.

143. 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.

144. 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).

145. We will record the decision, and details of how it was communicated to the customer, on the complaints system.

146. At the earliest opportunity after the closure of the complaint, the staff member handling the complaint should consider whether any learning has been identified. .

Independent external review

147. Once the investigation stage has been completed, if the customer is still dissatisfied with the decision or the way we dealt with the complaint, they can ask the SPSO and/or, the Scottish Qualifications Authority (SQA) (or other awarding body) to look at it. For qualifications that are regulated, if the customer remains dissatisfied with the way the awarding body has handled a complaint they may complain to the qualifications regulator, SQA Accreditation.

148. It is important for students to be given full and clear information about the types of independent external review available, to ensure that they can progress their complaint to the organisation best-placed to achieve the outcome they are seeking:

- The SPSO considers complaints about the quality of service and maladministration, which may include issues surrounding course delivery (for example, poor quality of photocopying on course materials, or failure to properly communicate changes to class times and locations). The SPSO may also look at the way we have handled complaints raised by a student (for example, concerns about plagiarism or abusive communication from other students), or the way we have handled a complaint.

  There are some subject areas that are outwith the SPSO's jurisdiction. Importantly, the SPSO are not able to look at academic judgment, and they do not have the power to revise course awards.

  It is the SPSO's role to determine whether an individual complaint is one that they can consider (and to what extent), and all investigation responses must signpost to the SPSO, as well as to the SQA (or other awarding body) where relevant.

- **SQA (or other awarding body)** is responsible for safeguarding quality in assessment and certification of the qualifications that it awards through colleges and other approved centres. SQA (or other awarding body) stipulates how further education centres must operate and fulfil their functions in terms of qualifications assessment and certification, via a set of standard terms. Examples of complaints that the SQA (or other awarding body) may consider include situations where a candidate believes that there has been perceived unfairness in assessment arrangements, assessment feedback or re-assessment opportunities.

  Students seeking a change to academic judgement can only do this through an academic appeals process.

  If a customer is dissatisfied with the response from the awarding body, they may ask SQA Accreditation to consider their complaint further.

- **SQA Accreditation** accredits a wide range of qualifications other than degrees and regulates those awarding bodies that submit qualifications for accreditation. SQA Accreditation may investigate complaints about the accredited qualification or the awarding body. SQA Accreditation may also investigate complaints of malpractice and/or maladministration in relation to the qualification delivery, assessment and certification (once these have been considered by the awarding body).

149. **In all cases, the complaint must first have been considered by the college.**

Signposting to the SPSO

150. 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.

151. 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.

152. 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 College'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 Further Education 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 the College, 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 College'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 www.spso.org.uk/complain 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
Website: www.spso.org.uk

Post-closure contact

153. 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.

Appendix 3 - 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 academic holidays as non-working days. Complaints received during academic 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)

3. We will aim to achieve frontline response within five working days. The date of receipt is **day one**, (or next working day if received after 4pm) and the response should be provided (or the complaint escalated) on **day five**, at the latest.

4. 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

5. 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)

6. 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 (or next working day if received after 4pm),* if it is handled immediately at stage 2.

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

8. 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.

9. 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?

10. 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?

11. 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.

12. If we cannot meet the extended timeframe at stage 2, a further extension may be approved by the Interim Assistant Principal or a member of the Complaints Team 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?

13. 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).

Appendix 4 – The complaint handling process (flowchart for staff)

<table>
<tr><td colspan="3">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).</td></tr>
<tr><td colspan="2">Stage 1: Frontline response

Always try to respond quickly, wherever we can</td><td>Stage 2: Investigation

Investigate where:
• The customer is dissatisfied with the frontline response or refuses to engage with attempts to handle the complaint at stage 1
• It is clear that the complaint requires investigation from the outset</td></tr>
<tr><td colspan="2">Record the complaint and notify any staff complained about</td><td>Record the complaint and notify any staff complained about

Acknowledge the complaint within three working days</td></tr>
<tr><td colspan="2"></td><td>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)</td></tr>
<tr><td colspan="2">Respond to the complaint within five working days unless there are exceptional circumstances</td><td>Respond to the complaint as soon as possible, but within 20 working days unless there is a clear reason for extending the timescale</td></tr>
<tr><td colspan="2">Is the customer satisfied?

You must always tell the customer how to escalate to stage 2</td><td>Communicate the decision, normally in writing

Signpost the customer to SPSO and advise of time limits</td></tr>
<tr><td>(Yes) Record outcome and learning, and close complaint.</td><td>(No) -> to stage 2</td><td>Record outcome and learning, and close complaint</td></tr>
<tr><td colspan="3">Follow up on agreed actions flowing from the complaint

Share any learning points</td></tr>
</table>

Roles and responsibilities

154. All staff will be aware of:

- the Complaints Handling Procedure (CHP)
- how to handle and record complaints at the frontline response stage
- who they can refer a complaint to, in case they are not able to handle the matter
- the need to try and resolve complaints early and as close to the point of service delivery as possible; and
- their clear authority to attempt to resolve any complaints they may be called upon to deal with.

155. Training on this procedure will be part of the induction process for all new staff. Refresher training will be provided for current staff on a regular basis.

156. Senior management will ensure that:

- the College's final position on a complaint investigation is signed off by the Interim Assistant Principal, a member of the Complaints Team or the Principal in order to provide assurance that this is the definitive response of the College and that the complainant's concerns have been taken seriously
- it maintains overall responsibility and accountability for the management and governance of complaints handling (including complaints about contracted services)
- it has an active role in, and understanding of, the CHP (although not necessarily involved in the decision-making process of complaint handling)
- mechanisms are in place to ensure a consistent approach to the way complaints handling information is managed, monitored, reviewed and reported at all levels in the College; and
- complaints information is used to improve services, and this is evident from regular publications.

157. **Principal and Chief Executive**:

The Principal 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 Principal may take a personal interest in all or some complaints, or may delegate responsibility for the CHP to senior staff. Regular management reports assure the Principal of the quality of complaints performance.

158. The Principal is also responsible for ensuring that there are governance and accountability arrangements in place in relation to complaints about contractors. This includes:

- ensuring performance monitoring for complaints is a feature of the service/management agreements between the College and contractors
- setting clear objectives in relation to this complaints procedure and putting appropriate monitoring systems in place to provide the College with an overview of how the contractor is meeting its objectives

159. **Vice Principals**:

On the Principal's behalf, Vice Principals 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; and
- deputising for the Principal on occasion.

160. They may also be responsible for preparing and signing off decisions for customers, so they should be satisfied that the investigation is complete and their response addresses all aspects of the complaint. However, Vice Principals may decide to delegate some elements of complaints handling (such as investigations and the drafting of response letters) to other senior staff. Where this happens, Vice Principals should retain ownership and accountability for the management and reporting of complaints.

161. **Directors/Heads of Department**:

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.

162. **Complaints investigator**:

The complaints investigator is responsible and accountable for the management of the investigation. They may work in a service delivery team or as part of a centralised customer service team, and will be involved in the investigation and in coordinating 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 and identifying wider opportunities for learning across the organisation.

163. **The Human Resources Business Partner:**

The HR Business Partner is responsible for ensuring all new staff receive training on the CHP as part of the induction process, and that refresher training is provided for current staff on a regular basis.

164. **The organisation's SPSO Liaison Officer (Interim Assistant Principal)**:

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.

Recording, reporting, learning from and publicising complaints

165. Complaints provide valuable customer feedback. One of the aims of the CHP is to identify opportunities to improve services across the College. By recording and analysing complaints data, we can identify and address the causes of complaints and, where appropriate, identify training opportunities and introduce service improvements.

166. We also have arrangements in place to ensure complaints about contractors are recorded, reported on and publicised in line with this CHP.

Recording complaints

167. It is important to record suitable data to enable us to fully investigate and respond to the complaint, as well as using our complaint information to track themes and trends. As a minimum, we should record:

- the customer's name and contact details
- the date the complaint was received
- the nature of the complaint
- the service the complaint refers to
- staff member responsible for handling the complaint
- action taken and outcome at frontline response stage
- date the complaint was closed at the frontline response stage
- date the investigation stage was initiated (if applicable)
- action taken and outcome at investigation stage (if applicable)
- date the complaint was closed at the investigation stage (if applicable); and
- the underlying cause of the complaint and any remedial action taken.
- the outcome of the SPSO's investigation (where applicable).

168. If the customer does not want to provide any of this information, we will reassure them that it will be managed appropriately, and record what we can.

169. Individual complaint files will be stored in line with our document retention policy.

Learning from complaints

170. We must have clear systems in place to act on issues identified in complaints. As a minimum, we must:

- seek to identify the root cause of complaints
- take action to reduce the risk of recurrence; and
- systematically review complaints performance reports to improve service delivery.

171. Learning may be identified from individual complaints (regardless of whether the complaint is upheld or not) and from analysis of complaints data.

172. Where we have identified the need for service improvement in response to an individual complaint, we will take appropriate action:

- the action needed to improve services must be authorised by an appropriate manager
- an appropriate manager (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; and
- any learning points should be shared with relevant staff.

173. Senior management will review the information reported on complaints regularly to ensure that any trends or wider issues which may not be obvious from individual complaints are quickly identified and addressed. Where we identify the need for service improvement, we will take appropriate action (as set out above). Where appropriate, performance in the service area should be monitored to ensure that the issue has been resolved.

Reporting of complaints

174. We have a process for the internal reporting of complaints information, including analysis of complaints trends. Regularly reporting the analysis of complaints information helps to inform management of where services need to improve.

175. We will report at least **quarterly** to senior management and the Quality Enhancement Committee on:

- performance statistics, in line with the complaints performance indicators published by SPSO
- analysis of the trends and outcomes of complaints (this should include highlighting where there are areas where few or no complaints are received, which may indicate either good practice or that there are barriers to complaining in that area).

Publicising complaints information

176. We publish on a **quarterly** basis information on complaints outcomes and actions taken to improve services.

177. This demonstrates the improvements resulting from complaints and shows that complaints can help to improve our services. It also helps ensure transparency in our complaints handling service and will help to show our customers that we value their complaints.

178. We will publish an **annual** complaints performance report on our website in line with SPSO requirements, and provide this to the SPSO on request. This summarises and builds on the quarterly reports we have produced about our services. It includes:

- performance statistics, in line with the complaints performance indicators published by the SPSO; and
- complaint trends and the actions that have been or will be taken to improve services as a result.

179. These reports must be easily accessible to members of the public and available in alternative formats as requested.