

Reasonable Adjustments

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Scope: - What is expected when handling complaints from people:

- 1. Diagnosed/potential mental health conditions:**
(eg: depression, anxiety disorders, bipolar disorder, personality disorders, stress, grief, PTSD, OCD, schizophrenia, alcohol/substance abuse).
- 2. Diagnosed/potential autistic preference/spectrum disorders:** *(eg: ADHD, ADD, autism, mental retardation, depersonalisation disorder).*
- 3. How do you respond to complex clinical matters in a non-clinical setting?**

Characteristics

Mental Health – can range from highly emotional states, including extreme sadness, being disconsolate, depressed and tearful; to mistrust, disbelief, a feeling of being targeted or singled-out; and possibly even aggression, abuse and, ultimately, violence.

Learning Disability – as well as possibly a low IQ, people with disabilities such as autism, aspergers can be affected in terms of: -

- ❖ **Social interaction – can have problems interacting socially; rarely using gestures or facial expressions when communicating; avoiding eye contact; having repetitive movements.**
- ❖ **Communication – can have problems with over elaborate or double meaning language and may interpret things literally.**

Characteristics

- ❖ **Imagination** – *can be very rigid thinkers and relay timetables and routines; have problems grasping concepts that are not black and white.*

Complaints Managers

As a rule, and in my opinion, need to have the ability to : -

- **Empathise.**
- **Be patient and understanding.**
- **Retain knowledge (of the complaint).**
- **Be thorough and pay attention to detail.**
- **Be open-minded and forward thinking.**
- **Communicate effectively.**
- **Ask pertinent questions.**
- **Be robust and firm, without causing offence.**
- **Think on their feet and be flexible.**
- **Suggest options for potential resolution, ie know the process.**
- **Maintain control of situations.**
- **Manage expectations.**
- **Maintain accurate records.**

Reasonable Adjustments

- **In respect of complainants with diagnosed or potential mental health or learning disabilities, these skills can be severely tested.**
- **Increased potential for these complainants to become unreasonable, unaccepting, vexatious or abusive.**
- **Nonetheless, the Complaints Procedure must be fair to both sides and seen to be so.**
- **Complaints are about people and while there is a standard system in place and a procedure to be followed, people should be treated as individuals and not be discriminated against.**

Reasonable Adjustments - Contact

So, in terms of dealing with people with these conditions, it is all about communication and interaction: - language, tone, attitude, behaviour, demeanour.

Letters:

- **Avoid jargon.**
- **Keep it simple and explain abbreviations, clinical references, medications and insider terminology/colloquialisms.**
- **Address the specific points and in chronological order.**
- **Use headings to help highlight the separate points.**
- **Possibly increase type size.**
- **Be as definitive as possible.**
- **Do not overcomplicate – sometimes less is more!**

Reasonable Adjustments - Contact

Telephone:

- **Stay calm.**
- **Speak clearly.**
- **Have the file to hand.**
- **Do not get involved in clinical/professional arguments/debates.**
- **Be robust and, where necessary, be prepared to interrupt.**
- **Be aware that you could, potentially, be being recorded.**

In person/formal or scheduled meetings:

- **As well as the aforementioned.**
- **Be accompanied.**
- **Keep control of the situation.**
- **Be aware of the exit and have close access to it.**

Getting Nowhere

- **Complaint answered.**
- **Explanations given, apologies issued where necessary, learning identified, procedures changed.**
- **Responses issued, meetings convened (or offered and possibly declined).**
- **If necessary or warranted, independency has been utilised.**
(either clinical/professional expert or lay person)
- **Complaints Procedure has been correctly implemented and no issues overlooked or inadequately addressed.**
- **Close complaint and advise of right to approach Ombudsman.**
- **Re-state and advise that further communication/contact will not be responded to.**

Unreasonable, vexatious or abusive complainants

- **HSC staff must be trained to respond with patience and empathy to the needs of people who make a complaint.**
- **There will be times when there is nothing further that can reasonably be done.**
- **Where further communications would place inappropriate demands on HSC staff and resources.**
- **Consideration may be given to classifying the complainant as an unreasonable, demanding or persistent complainant.**

**Complaints in Health and
Social Care:
Standards and
Guidelines for Resolution
and Learning (April 2009)**

Unacceptable Actions Policy

[Unreasonable, vexatious or abusive complainants]

- 1. Aggressive or abusive behaviour.**
- 2. Unreasonable demands.**
- 3. Unreasonable levels of contact.**
- 4. Unreasonable use of the Complaints Procedure.**

****Based on Scottish Public Services Ombudsman Best Practice Guidelines (January 2011).***

Determining arrangements: staff need to: -

- **Ensure that the Complaints Procedure has been correctly implemented as far as possible and that no material element of a complaint is overlooked or inadequately addressed.**
- **Appreciate that even habitual complainants may have grievances which contain some substance.**
- **Ensure a fair approach.**
- **Be able to identify the stage at which a complainant has become habitual.**

Examples of 1- 4:

- **Threats, physical violence, personal verbal abuse, derogatory remarks and rudeness, language (verbal or written) that may cause staff to feel afraid, threatened or abused.**
- **Repeatedly demanding responses within an unreasonable timescale; insisting on speaking to a particular member of staff when that is not possible; repeatedly changing the substance of complaint or raising unrelated concerns.**
- **Level of contact has become unacceptable, when the amount of time spent talking to a complainant on the telephone, or dealing with emails or written correspondence impacts on the ability to deal with the complaint, or with other people's complaints.**

Examples cont'd

- **When the effect of repeated complaints is to harass, or to prevent the organisation from pursuing a legitimate aim or implementing a legitimate decision.**

Managing unreasonable behaviour:

- **All incidents of verbal and physical abuse will be reported to the police.**
- **Staff will end calls if they consider the caller aggressive, abusive or offensive.**
- **Staff members have the right to make this decision and can tell the caller that they will terminate the call if their behaviour persists.**
- **Inform the complainant, in writing, that their name is on a “*no personal contact list*”, ie it limits contact to either written communication or through a third party.**
- **Limit contact to telephone calls from the complainant at set times on set days.**

Managing unreasonable behaviour:

- **Restrict contact to a nominated member of staff who will deal with the future calls or correspondence from the complainant.**
- **See the complainant by appointment only.**
- **Restrict contact from the complainant to writing only.**
- **Return any documents to the complainant or, in extreme cases, advise the complainant that the further irrelevant documents will be destroyed.**
- **Take any other action that the HSC organisation considers appropriate.**

Process to follow:

- **HSC staff who directly experience aggressive or abusive behaviour have the authority to deal immediately with that behaviour in a manner they consider appropriate to the situation in line with the policy.**
- **When an immediate decision is made the complainant is advised at the time of the incident.**
- **With the exception of such immediate decisions (above); decisions to restrict contact are only taken after careful consideration of the situation by a more senior member of staff.**

Process to follow: -

- **When the decision is made by senior management, the complainant will always be told in writing why a decision has been made to restrict contact, the restricted contact arrangements and, if relevant, the length of time that these restrictions will be in place. This ensures the complainant has a record of the decision.**

Note: - Complainants can appeal the decision. For further information, please refer to Annexe 14: Complaints in HSC: Standards and Guidelines for Resolution and Learning.

Thank you.

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