

POLICY

Acceptable behaviour when communicating with the GOC

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Contents

- 1. Policy Statement 2
- 2. Purpose..... 2
- 3. Scope..... 3
- 4. Unacceptable and unreasonable behaviour 3
- 5. Managing unacceptable or unreasonable behaviour in a telephone or face to face conversation with employees 5
- 6. Managing unacceptable or unreasonable behaviour in emails and letters with employees..... 5
- 7. Managing contact with our members 6
- 8. Restricting access to the GOC 6
- 9. Failure to comply with access restrictions 7
- 10. Appeals 8
- 11. Reviewing access restrictions 8
- 12. Managing further communications 9
- 13. Access to additional support and further information 9
- 14. Monitoring and review 10
- 15. Transparency 10

- Annex 1 - Flowchart..... 11

1. Policy Statement

- 1.1. We are committed to providing a high quality service for those who contact us and are committed to resolve all complaints in a satisfactory manner. We will:
 - 1.1.1. treat them politely and considerately;
 - 1.1.2. respect their dignity and privacy;
 - 1.1.3. listen and respect their views;
 - 1.1.4. ensure that they are treated fairly and consistently and are provided with equality of opportunity regardless of protected characteristic (<https://www.equalityhumanrights.com/en/equality-act/protected-characteristics>) ;
 - 1.1.5. always try to provide information in a way that can be understood;
 - 1.1.6. always give a fair hearing before considering invoking this policy; and
 - 1.1.7. where possible, make reasonable adjustments to our service.
- 1.2. Most people who contact us are responsible and display acceptable behaviour; this policy is concerned with those rare occasions when this is not the case. We accept that when contacting us to raise an issue, individuals may be distressed, frustrated or angry.
- 1.3. Our employees and members will not tolerate unacceptable or unreasonable behaviour which could compromise their human rights, personal dignity and security. Nor will our employees or members allow our capacity to offer an acceptable level of service to stakeholders in the public interest to be hindered by such behaviour.
- 1.4. We are committed to ensuring that our customer service approach is consistent with our Values.

2. Purpose

- 2.1. The purpose of this policy is to provide guidance on:
 - 2.1.1. what we mean by unacceptable and unreasonable behaviour;
 - 2.1.2. how we will manage such behaviour;
 - 2.1.3. the options available to us to restrict or cease contact with those who behave unacceptably or unreasonably should the need arise; and
 - 2.1.4. the appeal process.
- 2.2. This policy outlines how we will deal with unreasonable or unacceptable behaviour and will be provided to individuals who display unacceptable or unreasonable behaviour. In addition, the end of the document provides some useful contacts where further information or additional support can be found.

3. Scope

- 3.1. The policy covers anyone who demonstrates unacceptable or unreasonable behaviour when contacting employees and members.¹
- 3.2. If the person demonstrating unacceptable or unreasonable behaviour is a GOC registrant, we will need to consider if the behaviour is in breach of our Standards/and/or requires further consideration under our fitness to practise function.
- 3.3. No action will be taken under this policy which might allow concerns affecting patient safety or wider public interest go un-investigated.
- 3.4. All employees and members are expected to behave in an acceptable manner consistent with this policy when contacting registrants or members of the public and other employees and members. If an employee has behaved in an unacceptable or unreasonable way with registrants or members of the public this will be dealt with in accordance with our corporate complaints policy. Employees who demonstrate unacceptable or unreasonable behaviour when contacting other employees of the GOC will be dealt with in accordance with our human resources policies.
- 3.5. This policy does not include freedom of information requests as they are specifically covered by guidance from the Information Commissioners Office “Dealing with vexatious requests (section 14)²”.

4. Unacceptable and unreasonable behaviour

- 4.1. Unacceptable behaviour (both oral and written, including posts on social media or websites) may cause our employees and members to feel threatened, abused or intimidated and could compromise their human rights, personal dignity and security. We will not tolerate behaviour towards our employees and members which is considered to be unacceptable.
- 4.2. Examples of the types of behaviour which we consider to be unacceptable include, but are not limited to:
 - 4.2.1. swearing and foul language;
 - 4.2.2. abusive or aggressive language;
 - 4.2.3. threats of physical violence;
 - 4.2.4. emotional bullying;

¹ ‘Employees and members’ include: employees (permanent and temporary), Council and Committee members and workers, and will be referred to collectively in this policy as “employees and members”.

² <https://ico.org.uk/media/for-organisations/documents/1198/dealing-with-vexatious-requests.pdf>

- 4.2.5. personal grudges where correspondence is targeted at a particular employee or member;
 - 4.2.6. derogatory and offensive remarks;
 - 4.2.7. inappropriate questions, harassment and rudeness; and/or
 - 4.2.8. a deliberate intention to cause annoyance or be deceitful.
- 4.3. Unreasonable behaviour may hinder our capacity to offer an acceptable level of service to stakeholders in the public interest. We will not tolerate this kind of behaviour.
- 4.4. Examples of the types of behaviour which we consider to be unreasonable include, but are not limited to:
- 4.4.1. making frequent, overlapping, disproportionate or unjustified demands on our time and resources whilst an issue is being considered, such as excessive telephoning/emailing, writing excessively long and complex letters and expecting responses outside of timescales set within our policies and procedures;
 - 4.4.2. failing to specify the grounds for a complaint or not clearly identifying the precise issues to be investigated despite reasonable attempts by us to obtain relevant information;
 - 4.4.3. continually changing the substance of a complaint or seeking to delay or prolong investigation by continually raising further issues in relation to the original complaint;
 - 4.4.4. refusing to co-operate or trying to circumnavigate our processes whilst still wishing us to deal with an issue;
 - 4.4.5. attempting to inappropriately or improperly use a formal procedure;
 - 4.4.6. unreasonable persistence about the same issue(s) after formal procedures have been fully and properly implemented and exhausted, including with additions and/or variations (provided that these do not substantially alter the issue or evidence previously submitted);
 - 4.4.7. persistent and unreasonable refusal to take advantage of constructive guidance about alternative options and possible sources of help;
 - 4.4.8. persistent and unreasonable refusal to accept our decision, repeatedly arguing the point and complaining about the decision and/or denying that an adequate response has been given;
 - 4.4.9. refusing to accept that issues are not within our remit despite having been provided with information about our regulatory scope and signposting to other more appropriate sources of advice and help;
 - 4.4.10. insisting that the issue be dealt with in ways that are incompatible with the GOC's formal procedures or good practice;
 - 4.4.11. continuing to pursue an issue with a range of employees and/or members at the same time after being advised which team is dealing with the issue;

- 4.4.12. issuing futile requests - complaining about an issue or challenging a decision based on a historic and irreversible decision or incident; and/or
- 4.4.13. making unfounded accusations about us, our employees and/or members or seeking to have them replaced and/or dismissed.

4.5. The lists at paragraphs 4.2 and 4.4 are not intended to be exhaustive. We will use these to help us identify such behaviour but will take all relevant circumstances into account when deciding on whether and what action should be taken.

5. Managing unacceptable or unreasonable behaviour in a telephone or face to face conversation with employees

- 5.1. If an employee considers that the behaviour of an individual is unacceptable or unreasonable during a telephone conversation or at a meeting they will:
- 5.1.1. explain why they consider the behaviour to be unacceptable or unreasonable and refer the individual to this policy (providing them with a copy);
 - 5.1.2. provide the individual with an opportunity to modify or stop their behaviour;
 - 5.1.3. explain that if the unacceptable or unreasonable behaviour continues then it could result in the conversation/meeting being terminated and the GOC having to restrict access; and/or
 - 5.1.4. if the unacceptable or unreasonable behaviour continues and the individual has been given a fair hearing, the call/meeting will be terminated and a 'termination log' will be completed. The log will be held on the individual's file and provided to the employee's line manager.

6. Managing unacceptable or unreasonable behaviour in emails and letters with employees

- 6.1. If an employee considers that the behaviour of an individual is unacceptable or unreasonable via letters or emails they will:
- 6.1.1. respond in writing and explain why they consider the behaviour to be unacceptable or unreasonable and provide the individual a copy of this policy;
 - 6.1.2. provide the individual with an opportunity to modify or stop the unacceptable or unreasonable behaviour;
 - 6.1.3. explain that if the unacceptable or unreasonable behaviour continues then it could result in the GOC having to restrict access; and/or
 - 6.1.4. all correspondence will be logged and the employee's line manager informed.

- 6.1.5. if the unacceptable or unreasonable behaviour continues and the individual has been given a fair hearing, the emails/letters will be deleted and a 'deletion log' will be completed. The log will be held on the individual's file and provided to the employee's line manager.

7. Managing contact with our members

- 7.1. Our members remain independent of the operational work undertaken by the GOC in order that they are able to hold the Executive to account for operational performance and make strategic decisions. Some members have specific roles in relation to considering FTP cases, corporate complaints or other appeals and therefore must remain independent of the issues being considered. It is therefore important that individuals do not correspond directly with our members when raising issues with us (including in telephone conversations, letters, emails and social media) whilst we are investigating those issues.
- 7.2. If individuals contact a member via phone or face to face, the member will politely advise them to contact the GOC directly to raise their issues via the proper processes. A record will be completed and passed to the Governance and Compliance Manager to ensure it is logged with the appropriate team.
- 7.3. If individuals contact a member via written correspondence this will be passed to the Governance and Compliance Manager to ensure it is logged with the appropriate team and managed by an employee via the proper processes.

8. Restricting access to the GOC

- 8.1. We are committed to providing a high quality service for those who contact us and wish to resolve all complaints in a satisfactory manner. However if an individual behaves in an unacceptable or unreasonable manner we will consider imposing access restrictions. We will make two attempts (oral or written) to get an individual to modify or stop their unacceptable or unreasonable behaviour. Following this if their behaviour continues, we will impose access restrictions.
- 8.2. If an individual does not modify or stop their behaviour, we will consider taking the following actions to restrict access without further warning:
 - 8.2.1. requiring contact only in writing or other specified means;
 - 8.2.2. requiring contact be limited to a named person or specific mailbox;
 - 8.2.3. restricting telephone calls to specified days and times;
 - 8.2.4. requesting that they sign an undertaking which will set out the behaviours we expect;
 - 8.2.5. limiting direct contact until the standards of their behaviour improve;
 - 8.2.6. prohibiting personal visits to the GOC offices which have not been agreed in advance;
 - 8.2.7. apply a 'read only' approach to correspondence; and

- 8.2.8. in extreme cases, notify the police, refer the individual (if a registrant) for investigation relating to their fitness to practise or take legal action.
- 8.3. A decision to restrict access can be made only by a Director, the Chief Executive and Registrar or the Chair of Council. In taking this decision we will take into account any reasonable adjustments which are required and ensure that such action will not restrict us from fulfilling our regulatory functions. We will also take into account other considerations such as whether the individual has received a fair hearing, whether the issue has been dealt with appropriately and a full response given, whether the individual has been communicated with appropriately, the individual's circumstances and that sufficient opportunities have been provided for the behaviour to be amended.
- 8.4. If we decide to restrict access we will:
- 8.4.1. write to the individual to inform them why we have restricted access;
 - 8.4.2. advise what restrictions we have imposed;
 - 8.4.3. state how long the restrictions will apply for;
 - 8.4.4. explain the consequences of non-compliance with the restrictions; and
 - 8.4.5. provide details of the appeal mechanism available.
- 8.5. The restrictions placed will apply as soon as the letter has been sent and will also apply for the duration of any appeal.
- 8.6. In exceptional circumstances, where employees may be victimised or harassed by an individual, correspondence with the individual may be signed anonymously.

9. Failure to comply with access restrictions

- 9.1. If the individual does not agree to the restrictions placed on them, or they breach the restrictions we will automatically cease direct contact, until they are prepared to modify their behaviour to a standard which we consider acceptable or are willing to comply with the access restrictions.
- 9.2. A decision to cease direct contact until their behaviour improves can be made only by a Director, the Chief Executive and Registrar or the Chair of Council. In taking this decision we will take into account any reasonable adjustments which are required and ensure that such action will not restrict us from fulfilling our regulatory functions. We will also take into account other considerations such as whether the issue has been dealt with appropriately, whether the individual has been communicated with appropriately, the individual's circumstances and that sufficient opportunities have been provided for the behaviour to be amended.
- 9.3. If we decide to cease direct contact we will:

- 9.3.1. write to inform the individual why we have ceased direct contact;
- 9.3.2. identify the third party through whom we will accept contact;
- 9.3.3. advise the individual what actions they need to take in order for us to engage with them directly, such as modifying behaviour or signing an undertaking; and
- 9.3.4. provide details of the appeal mechanism available.

10. Appeals

- 10.1. Individuals may appeal the decision to have their access restricted, or direct contact ceased, within fifteen working days from being notified of the restriction or ceasure.
- 10.2. They should write to the Head of Secretariat³ detailing why the restriction should be cancelled or varied.
- 10.3. We will acknowledge receipt of the appeal within two working days.
- 10.4. In order for us to ensure that our decision-making is fair and robust we will ensure that the appeal is not considered by the same person(s) who requested that the restrictions be put in place, as follows:

Decision to restrict access or cease contact with you made by:	Appeal will be considered by:
Director	Another Director or Chief Executive and Registrar
Chief Executive and Registrar	Chair of Council
Chair of Council	Senior Council Member

- 10.5. We will notify the individual of the outcome of their appeal within fifteen working days. Following an appeal, the decision to cancel, vary or maintain the restrictions will be final. There is no further appeal.

11. Reviewing access restrictions

- 11.1. All access restrictions will have a time limit. Prior to the restriction expiring the GOC employee who originally made the decision to apply the access restriction or in the case of appeal the person who considered the restriction should remain in place, will consider whether the restriction should be:
- 11.1.1. modified, for example if more than one restriction is in place some could be removed or if the behaviour has not changed more restrictions could be imposed;

³ Please address your written correspondence to the Head of Secretariat, General Optical Council, 10 Old Bailey, London, EC4M 7NG or email governance@optical.org

- 11.1.2. extended, for example if the removal of a restriction is likely to result in the unacceptable or persistent behaviour resuming; or
 - 11.1.3. lifted, for example, where the individual has satisfactorily modified or stopped their behaviour and therefore the restriction is no longer required.
- 11.2. If something changes, we will write to the individual before the restriction expires, notifying them of the outcome. The letter will:
- 11.2.1. advise whether the restrictions have been modified, extended or lifted and explain the reasoning for the decision;
 - 11.2.2. state how long the restriction will apply for (where a restriction has been modified or extended);
 - 11.2.3. explain the consequences of non-compliance with the restriction; and
 - 11.2.4. provide details of the appeal mechanism available.
- 11.3. All access restrictions may be reviewed sooner should the need arise.
- 11.4. If the individual wishes to appeal the decision they should follow the process set out in paragraph ten of this policy.

12. Managing further communications

- 12.1. Further communications received from individuals whose behaviour has previously been deemed unacceptable or unreasonable or where there are access restrictions in place, will be treated on their merits. Restrictions imposed in respect of earlier correspondence will not automatically apply to a new matter, but may be taken into account if a new decision to restrict access due to further unacceptable and unreasonable behaviour is being made.
- 12.2. All further communications (concerning matters previously raised and concluded) will be read but will not be acknowledged unless substantially new issues are raised relevant to the GOC's remit.
- 12.3. New relevant issues will be passed to the appropriate team for acknowledgement and action, when appropriate.
- 12.4. Other correspondence, which does not require acknowledgement or action, will be filed.

13. Access to additional support and further information

- 13.1. We accept that there will be times when individuals remain unhappy about a decision we have made, where we cannot provide them with the information or outcome they are seeking or where they may need additional support that we are unable to provide. Below are some suggested services who may be able to provide support and information:

Professional Standards Authority	www.professionalstandards.org.uk
<i>Responsible for overseeing the UK's nine health and care professional regulatory bodies, including the GOC.</i>	
Parliamentary and Health Service Ombudsman	www.ombudsman.org.uk
<i>Responsible for investigating complaints that individuals have been treated unfairly or have received poor service from government departments and other public organisations and the NHS in England.</i>	
Optical Consumer Complaints Service	www.opticalcomplaints.co.uk
<i>An independent and free mediation service for consumers (patients) of optical care and the professionals providing that care.</i>	
Citizens Advice Bureau	www.citizensadvice.org.uk
<i>Provision of free, independent, confidential and impartial advice to everyone on their rights and responsibilities.</i>	
Support Empower Advocate Promote (SEAP)	www.seap.org.uk
<i>Providers of independent advocacy services to help resolve issues or concerns you may have about your health and well-being or your health and social care services.</i>	
Information Commissioners Office	www.ico.org.uk
<i>Independent advice and guidance about the Freedom of Information (Fol) and Data Protection (DP) Acts.</i>	






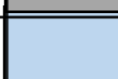
14. Monitoring and review

- 14.1. All restrictions applied under this policy will be reported to the Audit and Risk Committee as part of routine complaint reporting.
- 14.2. The Secretariat Team will be responsible for reviewing this policy every three years, taking into account new or changes to legislation and regulations as well as best practice.

15. Transparency

- 15.1. All records relating to access restrictions will be retained by the GOC for a period of five years from the date the restriction was lifted, at which point they will be deleted.

Annex 1 - Unacceptable Behaviour Process Flowchart

Key:			
	Unrestricted access		Review of restrictions
	Medium level restrictions in place		Individual's behaviour
	High level restrictions in place		Opportunity for appeal

