

## Enquiries, Corporate Complaints & Priority Correspondence

Version: 2.0

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<b>Policy Owner</b>	Governance Team	
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<b>Approving forum</b> (tick all that apply)	<input type="checkbox"/> Chief Executive/Registrar/Accounting Officer <input checked="" type="checkbox"/> Executive Management Team (EMT) <input type="checkbox"/> Senior Leadership Team <input type="checkbox"/> Head of Function <input type="checkbox"/> Senior Information Risk Owner	<input type="checkbox"/> Audit & Risk Committee <input type="checkbox"/> Finance & Performance Committee <input type="checkbox"/> Remuneration & Nomination Committee <input type="checkbox"/> Statutory Panellists Assurance Committee <input type="checkbox"/> Council
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## 1. Purpose and scope

- 1.1. This document sets out how the General Dental Council (GDC) defines enquiries, corporate complaints and priority correspondence. It also sets out the way in which the organisation will respond to them.
- 1.2. The GDC is committed to providing excellent customer service and will provide consistent, accurate and timely responses to all enquiries, complaints and correspondence. We will also respond in line with the GDC's organisational values, which are:
  - **Fairness** – we aspire to treat everyone we deal with fairly.
  - **Transparency** – we are open how we work and how we reach decisions.
  - **Responsiveness** – we are agile and can adapt to changing circumstances.
  - **Respect** – we treat our partners, our registrants and our employees with respect.
- 1.3. The Governance team have overall oversight of this area of the business and will coordinate the administration of responses on behalf of the GDC in line with the Standard Operating Procedure (SOP) of the team.
- 1.4. A corporate complaint is defined as *“An expression of dis-satisfaction with the service provided by the GDC or by its employees. It will generally require investigation, review or an explanation”*.
- 1.5. An enquiry is defined as a *“Request for information or clarification on policy or service provided by the GDC. It generally will not use the words ‘complaint’ or intimate dis-satisfaction with the service provided by the GDC”*.
- 1.6. Priority correspondence is defined as *“A request for information or explanation which originates from a source that requires particular care or engagement”*.

## 2. Policy Content

### Principles

- 2.1. The GDC will:
  - Treat every matter raised with us equally and on its merits.
  - Respond courteously and in a timely way to concerns or requests made of us.
  - Escalate correspondence appropriately, and in line with this policy.
- 2.2. In formulating a response to an enquiry, corporate complaint or priority correspondence, the author should bear in mind the following guiding principles:
  - All relevant issues should be addressed in the response.
  - The tone of the response should be courteous and appropriate to the correspondence.
  - If an apology is merited, it should be offered.
  - If action has been taken, or will be taken, to address the issues raised it should be outlined in summary to the enquirer and any learning outcomes that have been arrived at through the complaint investigation and resolution process should also be included.
  - A thorough, well-investigated and clear response can serve to assist the enquirer with the issue that they have raised and to enhance public confidence in the role

the GDC plays in promoting public safety and public confidence in the dental profession. The converse can also be true.

- 2.3. The organisation will also follow the six core principles, established in conjunction with 28 other organisations, to handle complaints effectively in relation to the dental sector. These six core principles are:
- All of your feedback is important to us.
  - We want to make it easy for you to raise a concern or complaint, if you need to.
  - We follow a complaints procedure and keep you informed.
  - We will try to answer all your questions and any concerns you raise.
  - We want you to have a positive experience of making a complaint.
  - Your feedback helps us to improve our service.
- 2.4. The definitions (outlined above) for handling correspondence in these key areas are designed to ensure that the organisation responds to feedback appropriately and provides high quality customer service to the public. Examples and recommended action to take can be found in **Appendix 1**.
- 2.5. Nothing within these policies will act in any way to fetter the discretion of the Chief Executive as to whom he delegates any action that relates to the handling of correspondence.
- 2.6. First line attempts at resolution by the team to whom the complaint relates may take the form of verbal conversations or other appropriate approaches to mediation and may require several iterations of communication. Nothing in this policy is designed to prevent the reasonable attempts of the first line teams to satisfactorily resolve complaints themselves.

### Handling Corporate Complaints

- 2.7. If a corporate complaint (in line with the definition above) is received by the organisation, it should be promptly sent to the Governance team to co-ordinate the response ([governance@gdc-uk.org](mailto:governance@gdc-uk.org)).
- 2.8. For clarity, a matter should only be treated as a corporate complaint if it is a renewed concern after an initial handling of a complaint by the team to which the complaint relates. If the complaint is linked to an existing complaint, the correspondence should usually be joined to the open complaint and a joint response given to any new concerns raised in a single response letter.
- 2.9. Acknowledgement should be provided to the complainant within **3 working days of correspondence received**. This acknowledgment will be drafted and sent out by the Governance team.
- 2.10. Substantive responses to the correspondence received should be drafted within the relevant Directorate and approved by the relevant Member of EMT. The approved

response should be sent to the Governance team who will send out the final response to the complainant and log the date of response.

- 2.11. Responses should be provided to the complainant **within 20 working days of receipt**. Performance against this target is reported to EMT, the Finance and Performance Committee and the Council.
- 2.12. If a complainant is dis-satisfied with the response provided, they may request a review.
- 2.13. The individual who will conduct the review should consider whether they are satisfied that the concerns raised in the original complaint have been taken seriously, properly examined, addressed in full and, if any concerns remain, request that they be addressed promptly. If this individual is not a Member of EMT, the response should be reviewed and approved by an appropriate Member of EMT. The response will also likely need to be circulated to the Chief Executive for information and, if appropriate, comment.
- 2.14. Responses to requests for a review should be provided **within 20 working days of receipt**.
- 2.15. The initial complaint and the GDC's response should be kept securely on file, in line with the GDC's retention schedule, and the complaints handling process will be considered closed at this point.

### Handling priority correspondence

- 2.16. If priority correspondence (in line with the definition above) is received by the organisation, it should be promptly sent to the Governance team to co-ordinate the response ([governance@gdc-uk.org](mailto:governance@gdc-uk.org)). For clarity, this does not mean that business as usual correspondence needs to be sent on to the Governance team.
- 2.17. Acknowledgement should be provided to the enquirer **within 1 working day of correspondence received**.
- 2.18. Responses should be provided to the correspondent within **20 working days of receipt**.
- 2.19. No information should be provided which concerns personal or sensitive personal data, without discussion and guidance being sought from the Information Governance team.
- 2.20. The initial correspondence and the GDC's response should be kept securely on file, in line with the GDC's retention schedule, and the correspondence will be considered closed at this point.

### Lessons Learned

- 2.21. The GDC is committed to reflecting upon the way in which it regulates and the impact that this has on public safety and public confidence in the dental profession. When it receives correspondence that raises lessons to be learned about its performance or interaction with the public, it is vital that these lessons are identified and acted upon to improve customer service and organisational performance.
- 2.22. In relation to corporate complaints, the Head of Service or manager who responded to the complaint should identify whether there are any lessons to be learned and

make appropriate recommendations for acting upon these lessons. If these lessons relate to any issues pertaining to equality, diversity and inclusion, these should be flagged with the Governance and EDI teams by the local manager.

- 2.23. The Governance team will ensure that complaint outcomes are recorded as either *not upheld, partially upheld or upheld*.
- 2.24. Action plans should be agreed by the relevant Member of the EMT and timescales should be agreed. Performance against these timescales should be monitored appropriately and reported back to the EMT, any relevant Committees or to the Council, as appropriate.
- 2.25. Where it is clear that processes or procedures require change, this should take place swiftly and training should take place, at a local level, to ensure staff engagement with any changes.
- 2.26. The importance of sharing feedback should be instilled within the GDC. This can be done via sharing recommendations for change, discussions of learning points and actions at team or management meetings, engagement with staff via the intranet or newsletters and action planning within directorate workplans.
- 2.27. Significant lessons learned that emanate out of corporate complaints should be shared with the Governance team to facilitate reporting upwards to the EMT, Committees of the Council or Council, as appropriate.
- 2.28. Any templates that are developed as this work evolves will be stored centrally and available to the wider organisation.

### **Unreasonably Persistent Contact and Unacceptable Behaviour**

- 2.29. The GDC's '*Unreasonably Persistent Contact and Unacceptable Behaviour Policy*' will be followed if a complainant demonstrates unreasonably persistent contact or unacceptable behaviour in corresponding with the GDC, within the definitions of that policy.

### **3. Related legislation and other supporting information**

- 3.1. The GDC is responsible for ensuring there are appropriate systems and controls throughout the organisation in order to ensure the organisation is compliant with its legal and regulatory obligations. These include compliance with the UK General Data Protection Regulation (UK GDPR) and Data Protection Act 2018 (DPA 2018).
- 3.2. If complaints or priority correspondence received by the organisation contain personal data, it will be processed in accordance with our obligations under this legislation.

### **4. Related policies and procedures**

4.1. Related procedures:

- [Managing Corporate Complaints and Priority Correspondence SOP \(L&GGOV/003\)](#)
- [Managing Corporate Complaints and Priority Correspondence - CRM User Guide \(L&GGOV/004\)](#)

4.2. Related policies:

- Unreasonably Persistent Contact and Unacceptable Behaviour Policy

## 5. Compliance

5.1. Deadlines for responses provided forwarding complaint to the relevant directorate will be measured in the Governance Team's quarterly KPI Balanced Scorecard.

## 6. Monitoring and review

6.1. This policy is due to be reviewed **every two years**, will be monitored by the EA to EMT and the key themes and lessons learned from the work in this area will be fed back to EMT not less than annually.

6.2. Approval for changes will need to be accepted by the Head of Governance.

## 7. Appendices

7.1. Definitions and Examples

### Appendix 1 - Definitions

#### Definitions

Term	Definition	Example	Action to Take
Enquiry	Request for information or clarification on policy or service provided by the GDC. It generally will not use the words 'complaint' or intimate dis-satisfaction with the service provided by the GDC. Treated as 'business as usual' requests.	<i>'What is the current level of the ARF?'</i> <i>'How do I submit my CPD?'</i> <i>'How do I make a complaint about poor treatment?'</i>	<ul style="list-style-type: none"> <li>• Answer the enquiry, if possible, or direct the enquirer to the appropriate GDC department (including the Customer Advice and Information Team).</li> <li>• Signpost the enquirer to an appropriate resource, such as the GDC website.</li> <li>• Endeavour to reply within 24 hours or outline the time frame by which a response will be provided.</li> </ul>
Corporate Complaint	An expression of dissatisfaction with the service provided by the GDC or by its employees. It will generally require investigation, review or an explanation. <b>To note:</b> <b>For complaints about the service provided by the GDC, a matter will only be treated as a corporate complaint if the team managing the initial process has responded to the concerns raised but the complainant has</b>	<i>'I'm unhappy with the way in which my previous concerns about case were handled by the GDC.'</i> <i>'I am a member of the public and I want to complain about this staff member.'</i> <i>'I don't understand why you made you the decision you did about this matter.'</i>	<ul style="list-style-type: none"> <li>• Follow the Corporate Complaints Handling Process and, for the Governance team, follow the SOP.</li> <li>• Acknowledge the complaint and outline a timescale for a substantive response to be provided.</li> <li>• Conduct an appropriate investigation or review.</li> <li>• Provide an approved response</li> </ul>

	<b>renewed their concerns.</b>		within 20 working days.
Priority Correspondence	A request for information or explanation which originates from a source that requires particular care or engagement. <b>To note: The fact that a requestor asks for a response from a particular source will be indicative, rather than determinative, as to whether they will receive a response from that source, nor that the correspondence will be treated as priority. Each request will be considered on its facts and allocated to the most appropriate responder.</b>	<i>'I require a response from the EMT/Chief Executive/Chair/Council itself'</i> <i>'I am the MP<sup>1</sup> for XX'</i> <i>'I am the Chair/Chief Executive/Minister for XX'</i> <i>'My organisation represents a part of the dental profession.'</i> <i>'I have been in previous correspondence with a member of the EMT on this point'.</i>	<ul style="list-style-type: none"> <li>Follow the Priority Correspondence Handling Process and, for the Governance team, follow the SOP.</li> <li>Acknowledge the complaint and outline a timescale for a substantive response to be provided.</li> <li>Conduct an appropriate investigation or review.</li> <li>Ensure the appropriate sign off has been obtained.<sup>2</sup></li> <li>Provide an approved response within 20 working days</li> </ul>

**Other Types of Correspondence/Requests:**

<b>Type of Enquiry</b>	<b>Definition</b>	<b>Example</b>	<b>Action to Take</b>
Request for Information under the Freedom of Information Act or Data Protection Act. 'FOI request' 'Subject Access Request'	Request for information held by the GDC or held about the enquirer.	<i>'How many registrants are currently on the dentists' register?'</i> <i>'What personal data do you hold on me?'</i> <i>'What happened at this hearing?'</i>	<ul style="list-style-type: none"> <li>Follow the guidance contained on the Information Governance intranet page.</li> <li>Signpost the enquirer to an appropriate resource, such as the GDC website, or to the Information Governance team on foirequests@gdc-uk.org.</li> <li>If in doubt, please check with your line manager in the first instance or the Information Governance team.</li> <li>Answer the enquiry within 20 working</li> </ul>

<sup>1</sup> England – Member of Parliament (MP), Scotland – Member of the Scottish Parliament (MSP), Wales – Member of the Welsh Assembly (AM), Northern Ireland – Member of the Northern Ireland Assembly (MLA). All should be treated as priority correspondence.

<sup>2</sup> Questions to Council itself should be signed off by the Chair of the Council and will be handled by the Governance team.

			days (FOI) or 30 calendar days (SAR).
Concerns about the Fitness to Practise of a registrant	A complaint about the fitness to practise of a registrant that arises out of misconduct, deficient professional performance or health.	<i>'I've suffered harm at the hands of my dentist'. 'I am concerned about my dental nurse's health'. 'I have reason to believe my dental professional has an undeclared conviction'.</i>	<ul style="list-style-type: none"> <li>The complaint must be dealt through the GDC's fitness to practise process.</li> <li>Complainants should be signposted to our website or, in appropriate cases, the GDC may become the informant in the case and the matter should be forwarded directly to the Fitness to Practise team for consideration. If in doubt, guidance should be sought from the Initial Assessment Team.</li> </ul>
Concerns about private dental treatment	A complaint about dental treatment provided privately.	<i>'I'm unhappy with the treatment provided in light of its cost'. 'I did not get what I asked for during my private treatment'.</i>	<ul style="list-style-type: none"> <li>The complaint may be suitable to referral to the Dental Complaints Service.</li> <li>Complainants should be signposted to our website or, in appropriate cases, the GDC may become the informant in the case and the matter should be forwarded directly to the Dental Complaints Service for consideration. If in doubt, guidance should be sought from the Dental Complaints Service.</li> </ul>
Concerns about the process followed to decide to close a fitness to practise case	A complaint that the process followed to reach a decision to close a fitness to practise case at initial assessment, assessment or Case Examiner stage.	<i>'My case was closed and I think this might have been the wrong thing to do as a witness wasn't contacted'. 'I don't think the GDC followed its own guidance when the decision was made to close my case'. 'Since you closed my case, there have been some significant changes that you should know about and I'd like it re-opened'.</i>	<ul style="list-style-type: none"> <li>The concern might be suitable for an application for a Rule 9 Review.</li> <li>Complainants should be signposted to our website.</li> </ul>



Concerns about FtP panellists	A complaint about the actions or behaviour of a Fitness to Practise panellist.	<i>'I don't feel I got a fair hearing'. 'My panel did not provide an interpreter for my witness'.</i>	<ul style="list-style-type: none"> <li>• These concerns should be referred to the Hearings team in the first instance.</li> </ul>
Concerns about the Overseas Registration Examination (ORE)	A concern about the ORE which falls within the exam suppliers' policies.	<i>'The ORE is not taking place on a convenient date for me'. 'I can't get a place on the ORE'</i>	<ul style="list-style-type: none"> <li>• These concerns should be referred to the Registration Operations team in the first instance, who may signpost to an appropriate external provider if the complaint relates to the experience of the examination.</li> </ul>
Concerns raised by staff about GDC staff	A complaint about the treatment of a member of staff or the behaviour of a member of staff.	<i>'I'm suffering from bullying'. 'I'm being discriminated against'</i>	<ul style="list-style-type: none"> <li>• These complaints are likely to fall within the remit of the grievance procedures and should be referred to People Services in the first instance.</li> </ul>