

## CLYDESDALE HOUSING ASSOCIATION LIMITED

<b>Policy:</b>	Unacceptable Behaviour Policy
<b>Date:</b>	28 September 2022
<b>Lead Officer:</b>	Depute Chief Executive
<b>Review Date:</b>	24 September 2025

### Regulatory Standard 1:

The governing body leads and directs the RSL to achieve good outcomes for its tenants

Standard 2 The RSL is open about and accountable for what it does. It understands and takes account of the needs and priorities of its tenants, service users and stakeholders. And its primary focus is the sustainable achievement of these priorities.

Guidance 2.1 The RSL gives tenants, service users and other stakeholders' information that meets their needs about the RSL, its services, its performance and its future plans.

2.2 The governing body recognises it is accountable to its tenants, and has a wider public accountability to the taxpayer as a recipient of public funds, and actively manages its accountabilities.

2.3 The governing body is open and transparent about what it does, publishes information about its activities and, wherever possible, agrees to requests for information about the work of the governing body and the RSL.

2.4 The RSL seeks out the needs, priorities, views and aspirations of tenants, service users and stakeholders. The governing body takes account of this information in its strategies, plans and decisions.

2.5 The RSL is open, co-operative, and engages effectively with all its regulators and funders, notifying them of anything that may affect its ability to fulfil its obligations. It informs the Scottish Housing Regulator about any significant events such as a major issue, event or change as set out and required in notifiable events guidance.

**Clydesdale Housing Association will provide this policy on request at no cost, in large print, in Braille, in audio or other non-written format, and in a variety of language.**

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## **Why we need a policy**

1. Clydesdale Housing Association (CHA) is our committed to offering a high-quality service and ensuring we treat everyone with dignity and respect.
2. We aim to support our customers to interact with us positively to help us provide them with the best possible level of service. In some circumstances, we need to take action to protect our staff from types of behaviour which impacts our ability to provide a service or the well-being of our staff. This policy sets out how we identify and respond to those types of behaviour.

## **Who is covered by this policy?**

3. This policy covers anyone who engages with us. Different processes may be appropriate for our work with individuals or organisations who provide services to us under a service level agreement, but the standards of behaviour we support are the same for all.
4. Engagement includes all forms of contact including verbal (over the phone, in person, etc.), written (letters, emails, online forms, etc.) as well as CHA events, training sessions and online. Online comments about the CHA or individual staff members, which are shared publicly or in a forum or in a way that means they are not private, count as behaviour, even when they are not shared directly with CHA.

## **Supporting positive behaviour**

5. We support positive behaviour and will let people know how they can engage positively with us by providing information about how they can access our service and request adjustments, and explaining clearly what we need from them to provide the best possible service.
6. Supporting positive behaviour includes supporting people to express concerns about our office and service in a constructive manner by ensuring:
  - we apply our customer service complaints process fairly and openly when individual concerns are raised;
  - we provide information to help ensure concerns can be made about our service publicly without putting our staff at risk; and
  - people understand what stage they are at in the complaint process and what options they have for challenging decisions both during and at the end of the process.

## **Providing additional support**

7. We understand that people who come to us may have experience of trauma, or have specific needs and requirements. We will ensure our staff have appropriate training to identify where additional support may be needed and are supported to treat our customers with kindness and compassion. We will seek to defuse and de-escalate situations. We regularly signpost to organisations who can provide independent advice and support.

## **Making reasonable adjustments to our service**

8. We are committed to ensuring that all people have an equal opportunity to access our services. We do this actively by considering accessibility when designing the way we provide our service. We try to anticipate our users' requirements and encourage all users to tell us if we need to adjust the way we deliver our service for them. If we decide we need to manage behaviour with an individual, we will consider whether they have accessibility needs that we should take into account when doing so.

## **Our approach to managing behaviour**

9. While we will work to support positive behaviour, there are some situations that we need to respond to or manage because of the negative impact on the wellbeing of our staff and our ability to provide a service. We do not need to actively respond to or manage any form of behaviour simply because it is different or unusual. We also accept that individuals may be upset and distressed when they contact our office, and we want to support them to engage with us.
10. We will seek, whenever possible to restore the relationship and to ensure we can communicate as normal. However, we recognise there may be a need to take action if the situation becomes unacceptably challenging, is resulting in unreasonable demands on our office or unreasonable behaviour towards CHA staff and others.
11. When we need to manage behaviour in this way, we will ensure responses are proportionate to the behaviour and the impact on CHA and our staff. This guidance gives general advice, but we will, whenever possible explain clearly the reason for any specific decision to the person affected and/or keep a separate documented record if that is not possible or appropriate.
12. When making decisions, it is important to remember that we need to assess behaviour reasonably and consistently. Although at times our resources may be under more pressure than others, any assessment should take into consideration whether we would be able to deal with the behaviour if we were operating effectively and normally. We may also take into consideration whether the issue is due to staff training requirements.
13. At all times, we will work to ensure our response is proportionate and necessary and uses the least restrictive method available.
14. The decision whether or not to take a management approach does not affect the right of any member of CHA staff to end contact they find personally distressing or uncomfortable. This is because it is not appropriate for anyone to continue to engage if they are becoming distressed or it is having a negative impact on them. And this is the case even if we decide that the criteria for further management is not met. There is more information on this in the supporting staff section below.

## **Restorative approaches, recovering the relationship**

15. Where possible, we should seek to act in ways that recovers the relationship.
16. For example, staff may seek to defuse and de-escalate by suggesting breaks if conversations are becoming heated and intervene early before behaviour escalates; and make proactive adjustments.

17. Reasonable adjustments should be made when appropriate to help individuals remain actively and positively involved with our service and, in some cases, we may take a multi-disciplinary approach, involving staff from across our service and seeking assistance on a pseudonymised basis from professionals outside the organisation or third sector experts where we consider the person is vulnerable and restrictions would have a disproportionate impact.
18. It can be detrimental to positive behaviour to continue a conversation which has become circular or repeats statements already made by other colleagues. If this happens, we will end the conversation and seek to re-engage again later, if appropriate.

### **Actively managing behaviour, delivering our service**

19. When restorative approaches are not possible, appropriate or have been tried and failed, an active management approach will be taken. Active management seeks to maintain our ability to deliver our services while minimizing the impact of the situation that is causing the disruption. It is important to note that this may not be the fault of an individual but because of circumstances out with their control.
20. The approach used should be tailored to the individual and the situation, this could include:
  - restricting contact by channel (e.g. phone or email) or to a named person
  - not providing direct contact details or staff names (when there is a risk this will lead to harassment)
  - communicating through a third party such as an advocate rather than direct contact
  - restricting time/volume of contact.
21. To ensure consistency, a decision to actively manage a situation needs to be made by a manager. All such restrictions require to be supported by evidence and can be challenged by an appeal to the Chief Executive.
22. Restrictions are normally subject to review at appropriate intervals while we are providing a service. We retain the discretion to not include a review if the reason for the restriction means that would not be appropriate (for example if it is to protect staff from violence). The timing and circumstances where review would be considered should be explained clearly to the person who is under restriction at the time the restriction is put in place.

### **Protecting our staff and others**

23. There are some situations that we are not able to accept and we will always take action. We have zero tolerance of threats, violent and abusive behaviour towards staff. This is to ensure their own safety and wellbeing and also protects the office and others.
24. There is advice below on identifying situations that we do not find acceptable. Staff always need to take action to respond to or disengage when these happen and should always raise with a manager what has happened and any steps they were

able to take. It is important to note that in some situations, the only appropriate action is to end contact immediately.

### **Phone or face-to-face contact**

25. During phone or face-to-face contact staff should issue a warning before ending contact if it is safe and they consider it appropriate to do so, but a warning is not required if it would be unsafe to do so or the language is intense, deeply upsetting or extreme.
26. If staff are informed they are being recorded for later use in public or are being livestreamed, they need to end contact politely but immediately.

### **Written or email correspondence to CHA**

27. If we receive violent or abusive correspondence, the sender should be informed this is unacceptable. This could be done by a manager or from an account that is not linked to an individual if this has been aimed at an individual staff member.
28. We should not respond directly to the correspondence. In some cases, particularly if there is an indication of a risk to health or safety or a public interest, we may use evidence that is supplied with the correspondence but that should not be the default position. See below for specific advice on how to store any abusive correspondence that may need to be kept for evidential purposes.
29. The decision that correspondence is unacceptable should be made by a manager to ensure consistency. Where this behaviour is repeated despite warnings or an individual instance is regarded as at the higher end of abusive we may need to take steps to restrict methods of contact with the office.

### **Online, web and social media**

30. This is a fast-moving and changing area; nevertheless, the principles outlined in this policy will still apply. CHA will follow the best practice advice available at the time of any incident and note and record the reasons for our decisions. Actions may include:
  - blocking accounts or using other technical options available on the relevant platform to minimise exposure
  - using the relevant social media platform's own reporting mechanisms to seek to have the content removed
  - limiting contact with the individual through other channels to reduce risk to staff – this could include ensuring the person is not provided with contact details
  - direct threats on social media should be dealt with like any physical threat (see below).

### **Physical threats**

31. When a physical threat is made, we will normally report it to the police. This includes situations when the threat made is not to us but a threat to harm a third party.
32. It should be noted that deciding to contact the police is a matter of judgment and in some cases may not be appropriate (if, for example, the threat is immediately withdrawn and was clearly flippant). However, this is an important safeguard and the

person who receives the threat, and particularly anyone who has been personally threatened, should not make a decision to not inform the police alone. It should be made by a manager who should clearly record the decision. The manager should take into account not only the views of the staff member but also consider the impact on other staff who may come into contact with the individual. If other staff have witnessed the event, they should all be asked to put this on record.

### **Identifying types of behaviour we need to manage**

33. It is important we are consistent when we take approaches to manage behaviour and below are examples of when we may need to use one of the approaches above. This list is not exhaustive and we can manage types of behaviour or behaviour not listed if it is impacting negatively on individuals or our ability to provide a service.

### **Violence towards staff or others will not be tolerated**

34. Violence is not restricted to acts of aggression that may result in physical harm. It also includes actions or language (whether verbal or written) that would reasonably cause someone to feel offended, afraid or threatened.

### **Abuse of staff or others will not be tolerated**

35. Abusive language includes all language that is designed or could be perceived as designed to insult or degrade, is racist, sexist or homophobic, or which makes serious allegations that individuals have committed criminal, corrupt or perverse conduct without any supporting evidence.

36. Language which makes unfounded allegations about an individual's professional ability or capability or seeks to belittle or denigrate them personally is also unacceptable.

37. Violent or abusive comments sent to CHA which are not aimed at us but at third parties are still unacceptable because of the effect that listening or reading them may have on our staff.

38. Comments made about CHA or CHA staff on social media which are designed to be, or which it is reasonable to assume may be, shared or made public are also covered for the same reason, even if they are not shared directly with us.

### **Harassment**

39. Harassment of staff, whether accompanied or not by violence or abusive comments, is not acceptable.

40. Harassment would include:

- repeatedly contacting or continuing to contact individual staff members when previously asked not to
- contacting staff outside of the office to seek to influence them
- targeting and naming them on public or other easily shared social media.

### **Contact outside the office**

41. Any contact with a complainant outside the office should be discussed with a manager who should decide whether this should be recorded. This includes contact via social network sites and includes social contact in public places. This, in part,

reflects the need to ensure there is no appearance of bias and that any conflicts of interest that may not have been apparent at the point of service delivery are picked up (for example, where there is significant social overlap).

42. However, it also helps to quickly identify any pattern of the complainant seeking direct contact in an inappropriate manner.

### **Naming and targeting staff publicly**

43. Statements that individuals intend to record and then use that recording publicly or to live stream would be regarded as harassment even if there is no directly abusive content to the statement. We support and can assist in providing recordings for personal use as a reasonable adjustment.

### **Demands on our office**

44. A demand becomes unacceptable when it starts to (or when complying with the demand would) impact substantially on the work of CHA. An example of such impact would be that the demand takes up an excessive amount of staff time and, in so doing, disadvantages other users/stakeholders and prevents us from providing a service to the person making the demands within a reasonable timescale.

45. Examples of actions grouped under this heading include:

- repeatedly demanding responses within an unreasonable timescale
- insisting on seeing or speaking to a particular member of staff when that is not possible
- repeatedly changing the substance of their issue or raising unrelated concerns.

### **Levels of contact**

46. Sometimes the volume and duration of contact made to our office causes problems. This can occur over a short period, for example, a number of calls in one day or one hour. It may occur when someone repeatedly makes long telephone calls to us or inundates us with information that has been sent already or that is irrelevant to the service we are providing or sends repeated emails raising the same or similar issues.

47. We consider that the level of contact has become unacceptable when the amount of time spent on the telephone, or responding to, reviewing and filing emails or written correspondence or managing the contact impacts on our ability to provide a service to that person, or to provide a service to others.

48. This contact becomes unreasonable when the effect of the repeated complaints is to harass, or to prevent us from pursuing a legitimate aim or implementing a legitimate decision. We consider access to a complaints system to be important, and it will only be in exceptional circumstances that we would consider such repeated use is unacceptable, but we reserve the right to do so in such cases. Such decisions can only be made by a Manager.

### **Supporting staff**

49. Staff will receive training to defuse and actively manage situations. They are encouraged to seek support if any contact causes them concern or distress.



### **Empowering staff to end contact they find distressing**

50. All staff have the authority to end any behaviour or interaction which they find personally distressing or difficult at the point of occurrence. Staff should not feel they need to continue to engage in contact if it is having a negative impact on them or which is making them feel uncomfortable. This is the case whether or not they consider it meets the zero tolerance criteria. Whenever possible and appropriate, staff should seek to end the behaviour professionally and politely. This can include:

- explaining they find the situation uncomfortable or distressing and explaining what they need to happen to be able to continue
- ending a call
- ending an interview/meeting
- not reading an email or other correspondence to the end
- disengaging from CHA social media.

51. When this occurs, they should take a note and discuss with their line (or, if not available, other) manager as soon as possible.

### **Supporting staff**

52. When a zero tolerance incident has occurred or active management approach has had to be used, all staff involved are encouraged to have a de-brief meeting with their line manager and agreed actions from that discussion noted. This ensures that we are providing support to all colleagues. Staff will be able to take a short time away from all contact if requested and may request to no longer have contact with a specific individual.

53. CHA has a number of policies in place to support the wellbeing of staff and have access to a confidential support line. Staff who experience an incident should be reminded of these options and supported to access them if they wish.

### **Requesting removal from direct contact with a customer**

54. Staff can ask for correspondence to be sent in the name of a Manager or to be removed completely from involvement in behaviour in a particular case or interaction. This may be appropriate if they have concerns about threats; have been or are at risk of being named publicly; or any other factor makes them more vulnerable.

### **Approach to communicating decisions**

55. We provide guidance and support to staff to help them meet our standards to communicate with respect. When communicating that the situation needs to change or an active management technique is being introduced, we should always bear in mind the following;

- Explain the situation neutrally and avoid blame, there may be many reasons why the situation has become difficult. Engaging with public bodies can be stressful, people's situations, needs and abilities are complex. We may inadvertently trigger a memory of a difficult experience or engage in a way that is difficult for someone who has different needs or perspectives.

- Look for opportunities to restore the relationship. Try to see the situation from the points of view of all involved. When possible or appropriate, seek ways to help someone demonstrate their needs and perspective rather than asking them to defend their position. This can help move the relationship forward.
- Be clear and straightforward. We can provide access to more information, for example a copy of this policy, but that will not be required in all situations. Instead, a clear statement which focuses on the interaction and explains what has been decided and why is sufficient. Provide evidence but avoid dwelling on detail unnecessarily.
- Ensure the communication is accessible, inclusive and meets the needs of the person.

## **Recording and sharing information**

### **Recording**

56. It is important that we keep a clear record whenever we have had to:

- actively work to restore a relationship to avoid restrictions
- put restrictions in place
- take a zero tolerance approach.

57. This should include storing any online evidence such as screenshots.

58. Material that is being stored as evidence may be distressing. This should always be stored in a way that it cannot be accidentally or unintentionally accessed – files should be named to indicate they contain distressing material. Physical documents can be stored inside envelopes.

59. Individuals can feel shame and distress about situations that have become difficult. While we need to record what has happened, we should do so factually and ensure it can only be accessed by those who need to do so. Some of the actions we take may need to be highlighted in our system to allow staff to implement decisions or to be aware that steps may need to be taken to manage some interactions. When doing so, we should record the minimum required.

### **Sharing information**

60. There is specific advice in the section on physical threats about sharing with other agencies. Internally, we need to ensure all relevant staff are aware of actions taken and restrictions to make sure our actions are effective. This will vary depending on the action and decisions on sharing should be noted and recorded but as a minimum:

- where the behaviour relates to phone contact, staff who respond to our publicly available numbers on our website should be informed
- for emails, we should ensure this information is shared with people who monitor online and other web contact.

### **Recording and sharing when staff named publicly (e.g. online)**

61. If you find that a member of CHA staff has been publicly named in relation to their duties, the following step should be taken:

- An email should be sent to the member of staff's line manager. Where applicable, a link to the relevant webpage should be provided.
62. To minimise impact on the named person, this information should not be shared any more widely than necessary to enable action to be taken.
63. The member of staff's line manager will inform the member of staff in private of the content of the material. The affected member of staff will have a say in what, if any, action is taken in response.
64. Action to support the member of staff may include an informal discussion and an offer of counselling.
65. Any instances of CHA staff being publicly named online will be recorded and kept confidentially by the Line Manager. We may actively seek to have the person's name removed unless the risk that would escalate the situation are felt to be significant. The incident will be shared with the Management Team of CHA. It is for the affected individual to determine whether a record is made in the staff member's personal records.

<b>Approved by the Committee of Management on:</b>	
<b>Signed:</b>	<b>Signed:</b>
<b>Secretary/Chairperson</b>	<b>Chief Executive/Senior Staff Member</b>