



Sunray & Egmont Community Residents Association

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Managing Unreasonable Resident Conduct

Foreword

Before proceeding with this guidance, we must ensure that we have fully taken into account any potential disability or communication requirements that may be relevant to any behaviour that could be considered 'unreasonable'. For example, does an individual have a communication need that is not being met which is prompting repeated requests?

In a minority of cases people pursue their complaints in a way that is unreasonable. They may behave unacceptably or be unreasonably persistent in their contacts and submission of information. This can impede investigating their complaint (or complaints by others) and can have significant resource issues. These actions can occur either while their complaint is being investigated, or once the complaint investigation has concluded.

However, it is important that complainants are dealt with in a way that is open, fair, and proportionate. The aim of this guidance is to ensure SECra committee members understand clearly what is expected of them, what options for action are available, and who can authorise these actions.

The approach and the strategies in this guidance are based on the clear understanding that:

- They are equally relevant and applicable to all volunteers within SECra.
- All residents are treated with fairness and respect.
- In the absence of very good reasons to the contrary, all residents have a right to access SECra services & information.
- Volunteer safety and well-being is paramount when dealing with unreasonable resident conduct.
- This document will form the guidance to enable volunteers to develop and maintain the skills and confidence needed to appropriately deal with preventing and managing residents who may display unreasonable conduct.

1.0 What is unreasonable resident conduct?

Unreasonable conduct by a resident can be defined as any behaviour by a resident, because of its nature or frequency, which raises substantial health, safety, resource, or equity issues for SECra. Unreasonable conduct by a resident can happen anywhere.

Please refer to Appendix A for further examples. See page 5

Using the term 'unreasonable conduct' allows us to focus on the problematic behaviour and respond to it openly and transparently and without the worry that we might be incorrectly or offensively labelling someone.

The Sunray and Egmont Community Residents Association (SECra) was officially formed on 3rd July 2019.
SECra is a voluntary, non-profit organisation run by and for the whole community that lives, works and plays on the Sunray and Egmont estate, Tolworth, Surrey.

If you would like to make a donation, please visit our online store: <https://shop.secra.org.uk/> or you can make a direct payment to our account: Bank: Metro, Account Name: Sunray Community, Sort code: 23 05 80, Account Number: 31012066



This guidance covers ‘unreasonable complainant behaviour’ which may include one or two isolated incidents, as well as ‘unreasonably persistent behaviour’ which is usually a build-up of incidents or behaviour over a longer period.

Some complainants may have justified complaints but may pursue them in inappropriate ways. Others may pursue complaints which appear to have no substance, or which have already been investigated and determined. Their contacts with organisations may be amicable but still place heavy demands on staff time, or they may be emotionally charged and distressing for all involved.

1.1 Why do some residents behave unreasonably?

There are a wide range of reasons why some residents behave unreasonably, these triggers can include:

Attitudes The resident is dissatisfied with a person, the organisation or the systems and processes that they are interacting with.

Emotions and psychologies The resident is highly angry, frustrated or disappointed and expresses those emotions in their unacceptable conduct; they have an inflated sense of entitlement or are unable to accept any personal blame for their issue.

Aspirations The resident is seeking ‘justice’, a ‘moral outcome’ or is obsessively pursuing their issue on ‘a matter of principle’; they want revenge, vindication, or retribution.

Recreational interests The resident is carrying out an all-consuming hobby or is making a career of complaining.

Needs and expectations The resident’s expectations, physical needs or emotional needs are not/have not been met.

1.2 The impact of unreasonable conduct

Although residents who behave unreasonably are very few in number, their behaviour can have profound effects on the organisation’s resources and efficiency levels, and the productivity, safety and wellbeing of its volunteers. In some cases a resident’s unreasonable conduct can be a major source of stress for the volunteers who have to deal with it.

1.3 When does resident conduct become unreasonable?

The following points (not exhaustive) can assist you to assess whether a resident’s conduct is, or has become, unreasonable.

- The merits of the enquiry - is there substance or value in the matter?
- The resident’s circumstances – e.g. personal issues, disability or communication requirements; e.g. mental health, visual impairment.
- Proportionality – is the resident’s behaviour or demands on time and resources proportionate to the matter?
- The resident’s responsiveness – is this the resident’s first time they have displayed this type of conduct or have they previously been warned?
- Personal boundaries - have your personal boundaries been crossed? For example, do you feel unusually stressed, anxious, threatened or otherwise uncomfortable when interacting with the resident?
- Conduct that is unreasonable and unacceptable under all circumstances - does the Conduct involve aggression, harassing words or actions, threats, violence or assault which should not be tolerated under any circumstances?

2.0 How the process will be applied

If any volunteer experiences unreasonable resident conduct, they should immediately speak with either the Chair, Vice-Chair or the committee member they feel most comfortable discussing this with.



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After consultation with either the Chair/vice-chair and appropriate committee members, a written warning should be sent to inform the resident that if their actions continue then SECra may decide to take appropriate action.

This will be recorded on SECra's 'Central Log' (only accessible by the chairs & Vice Chairs)

If the resident persists, SECra will follow the process outlined below seeking advice from an independent advisor where appropriate.

The options for action (not exhaustive) open to SECra include:

- Placing limits on the number and duration of contacts with volunteers per week or month.
- Offering a restricted time slot for necessary calls.
- Limiting the complainant to one medium of contact (telephone, letter, email etc).
- Requiring the complainant to communicate only with one named member of SECra
- Requiring any personal contacts to take place in the presence of a witness and in a suitable location.
- Refusing to register and process further complaints about the same matter.

Where a decision on the complaint has been made, you can tell the complainant that future correspondence will be read and placed on the file but not acknowledged, unless it contains material new information. A designated volunteer (not necessarily a committee member) should be identified who will read future correspondence.

Any action taken must be proportionate to the nature and frequency of the complainant's current contacts. The decision to apply the process and to take appropriate action will be made by the Committee. The decision should normally be time limited; however for some situations it may be appropriate to continue indefinitely (for example, where a specific matter has been considered previously and there is no material to alter a further investigation into the matter).

The Committee making a decision shall note in writing the decision and this information will be recorded on a central log. This note shall include the details of the decision, the restrictions and time limits where appropriate.

Before deciding whether the guidance should be applied, the Committee should be satisfied that:

- the resident enquiry is being or has been investigated properly;
- any decision reached is the right one;
- communications with the resident have been adequate; and
- the resident is not now providing any significant new information that might affect SECra's view on the matter.

If a decision is taken to apply the procedure, the resident must be provided with a copy of the process and informed in writing that:

- the decision has been taken;
- what it means for his / her contact with SECra
- the time period for which the restrictions will last; and
- what they can do to have the decision reviewed.

Records must also be kept to show when:

- a decision is taken not to apply the guidance when a volunteer asks for this to be done, or
- a decision is taken to make an exception to the guidance once it has been applied, or



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- when a decision is taken not to put a further complaint from this complainant through your complaints procedure for any reason, and
- a decision is taken not to respond to further correspondence, make sure any further letters, messages or emails from the complainant are checked to pick up any significant new information. (When complaints about new issues are made, these should be treated on their merits. You should consider whether any restrictions previously applied are still appropriate and necessary.)

2.1 Who should be informed

All volunteers who have experienced the resident's unreasonable conduct shall be informed of the decision to impose contact restrictions.

In exceptional and relevant circumstances, the Ward Councillors may be informed & if appropriate, RBK council will be notified.

2.2 Rights of review or appeal

Appeals against a decision or restrictions attached to a decision may be considered by an independent local resident.

When imposing a restriction on access, there should be a specified review date.

Limits should be lifted and relationships returned to normal unless there are good grounds to extend them.

When reviews are carried out, the resident should be advised of the outcome and, if restrictions are to continue to be applied, when these will next be reviewed. If the restrictions are removed, urgent consideration should be given to re-introducing the restrictions if the conduct which led to the original decision re-commences.

2.3 Information and record-keeping

Whenever this guidance is applied, then recording of the following is necessary:

- any correspondence or interactions with the resident written, verbal (to be documented), e-mail or otherwise should be saved in a file with the time and date of the occurrence;
- all the details of the resident should be recorded, including name, address, telephone number, and any other relevant details;
- if the implementation of the guidance states that no further correspondence from the resident will be responded to, any further letters, messages or emails from the resident should be checked to pick up any significant new information.
- Adequate records should also be kept when a decision is taken not to apply the guidance despite the request of a member of staff or when an exception is made to the process once it has been applied.

2.4 Other relevant policies and legislation

- The Data Protection Act is important when storing and processing information about residents and must be referred to for reference. Information can only be stored on residents for the necessary period of time.



Appendix A - Unreasonable Conduct

Any behaviour which places people at immediate risk should be referred to the police immediately.

If a resident is threatening self-harm/suicide this should be referred to the police immediately so that they can visit the resident to carry out a welfare check.

If a resident states that they have taken an overdose an ambulance should be called immediately.

Unreasonable persistence

This includes residents persisting with their issues even though they have been dealt with to finality, refusing to accept final decisions and sending excessive amounts of correspondence. Adopting a 'scattergun' approach: pursuing parallel complaints on the same issue with various organisations, making excessive demands on the time and resources of staff with lengthy phone calls, emails to numerous council staff, or detailed letters every few days, and expecting immediate responses, submitting repeat complaints with minor additions/variations the complainant insists make these 'new' complaints. Refusing to accept the decision; repeatedly arguing points with no new evidence.

The overarching management strategy for dealing with unreasonable persistence is saying 'no' – not necessarily using the word but the same principle.

Unreasonable demands

This includes residents insisting on outcomes that are unattainable, moving the goalposts or demanding to have their matters dealt with in particular ways, refusing to accept that certain issues are not within the scope of a complaint's procedure, insisting on the complaint being dealt with in ways which are incompatible with the adopted complaints procedure or with good practice. Raising many detailed but unimportant questions, and insisting they are all answered.

The overarching management strategy for dealing with unreasonable demands is setting limits e.g. limiting how often a customer can contact the council and who they can contact.

Unreasonable lack of cooperation

This includes customers providing disorganised, excessive or irrelevant information, being unwilling to consider other valid viewpoints, or refusing to specify the grounds of a complaint, despite offers of help, refusing to cooperate with the complaint's investigation process.

The management strategy for dealing with unreasonable lack of cooperation is setting conditions e.g. requiring a customer to define their issues or organise information they have submitted in relation to their matter.

Unreasonable arguments

This includes customers seeing cause and effect arguments where there are clearly none, holding conspiracy theories unsupported by evidence, making unjustified complaints about staff who are trying to deal with the issues and seeking to have them replaced, and irrationally interpreting facts or laws and refusing to accept other more reasonable interpretations.

The management strategy for dealing with unreasonable arguments is declining and discontinuing – e.g. refusing to deal with complaints that are not supported by any evidence.

Unreasonable behaviours

This includes aggression, threats or other threatening or violent conduct.

The management strategy for dealing with unreasonable behaviours is setting limits and conditions about acceptable and unacceptable behaviour and, if necessary, applying risk management strategies.