



Registrar of  
Community Housing



# NSW Registrar of Community Housing

## Guidelines for Managing Unreasonable Complainant Conduct

*This guideline document has been developed based on the NSW Ombudsman's guidelines for Managing Unreasonable Complainant Conduct.*

*This guideline document is designed to complement the NRSCH Complaints Management Policy and the NSW Registrar of Community Housing Enquiry and Complaint Procedure. The guidelines been developed to assist all staff members to better manage unreasonable complainant conduct.*

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# 1 Purpose of Managing Unreasonable Complainant Conduct

## 1.1 Purpose

The Office of the Registrar for Community Housing is committed to being accessible and responsive to all complainants who approach our office for assistance with a complaint. At the same time the success of our office depends on:

- our ability to do our work and perform our functions in the most effective and efficient ways possible
- the health, safety and security of our staff, and
- our ability to allocate our resources fairly across all the complaints we receive.

When complainants behave unreasonably in their dealings with us, their conduct can significantly affect our success. As a result, the Registrar will take proactive and decisive action to manage any complainant conduct that negatively and unreasonably affects us and will support our staff to do the same in accordance with this policy.

## 1.2 Background

This policy has been developed to assist all staff members to better manage unreasonable complainant conduct ('UCC'). Its aim is to ensure that all staff:

- Feel confident and supported in taking action to manage UCC.
- Act fairly, consistently, honestly and appropriately when responding to UCC.
- Are aware of their roles and responsibilities in relation to the management of UCC and how this policy will be used.
- Understand the types of circumstances when it may be appropriate to manage UCC using one or more of the following mechanisms:
  - Strategies to change or restrict a complainant's access to our services.
  - Alternative strategies to deal with conflicts involving complainants and members of our organisation.
  - Legal instruments such as trespass laws/legislation to prevent a complainant from coming onto our premises and orders to protect specific staff members from any actual or apprehended personal violence, intimidation or stalking.
- Have a clear understanding of the criteria that will be considered before we decide to change or restrict a complainant's access to our services.
- Are aware of the processes that will be followed to record and report UCC incidents as well as the procedures for consulting and notifying complainants about any proposed actions or decisions to change or restrict their access to our services.

The following documents are linked to this document:

- [NRSCH Complaints Management Policy](#)
- NSW Registrar for Community Housing Complaints Management Procedure

## 2 Defining Unreasonable Complainant Conduct

### 2.1 Unreasonable complainant conduct

Most complainants who come to our office act reasonably and responsibly in their interactions with us, even when they are experiencing high levels of distress, frustration and anger about their complaint. However in a very small number of cases some complainants behave in ways that are inappropriate and unacceptable – despite our best efforts to help them. They are aggressive and verbally abusive towards our staff. They threaten harm and violence, bombard our offices with unnecessary and excessive phone calls and emails, make inappropriate demands on our time and our resources and refuse to accept our decisions and recommendations in relation to their complaints. When complainants behave in these ways we consider their conduct to be ‘unreasonable’.

Unreasonable complainant conduct (‘UCC’) is any behaviour by a current or former complainant which, because of its nature or frequency raises substantial health, safety, resource or equity issues for our organisation, our staff, other service users and complainants or the complainant himself/herself.

UCC can be divided into five categories of conduct:

- Unreasonable persistence
- Unreasonable demands
- Unreasonable lack of cooperation
- Unreasonable arguments
- Unreasonable behaviours

### 2.2 Unreasonable persistence

Unreasonable persistence is continued, incessant and unrelenting conduct by a complainant that has a disproportionate and unreasonable impact on our organisation, staff, services, time and/or resources. Some examples of unreasonably persistent behaviour include:

- An unwillingness or inability to accept reasonable and logical explanations including final decisions that have been comprehensively considered and dealt with.
- Persistently demanding a review simply because it is available and without arguing or presenting a case for one.
- Pursuing and exhausting all available review options when it is not warranted and refusing to accept further action cannot or will not be taken on their complaints.
- Reframing a complaint in an effort to get it taken up again.
- Bombarding our staff/organisation with phone calls, visits, letters, and emails (including cc’d correspondence) after repeatedly being asked not to do so.

- Contacting different people within our organisation and/or externally to get a different outcome or more sympathetic response to their complaint – internal and external forum shopping.

## 2.3 Unreasonable demands

Unreasonable demands are any demands (express or implied) that are made by a complainant that have a disproportionate and unreasonable impact on our organisation, staff, services, time and/or resources. Some examples of unreasonable demands include:

- Issuing instructions and making demands about how we have/should handle their complaint, the priority it was/should be given, or the outcome that was/should be achieved.
- Insisting on talking to a senior manager or the Registrar personally when it is not appropriate or warranted.
- Emotional blackmail and manipulation with the intention to guilt trip, intimidate, harass, shame, seduce or portray themselves as being victimised – when this is not the case.
- Insisting on outcomes that are not possible or appropriate in the circumstances – e.g. for someone to be sacked or prosecuted, an apology and/or compensation when no reasonable basis for expecting this.
- Demanding services that are of a nature or scale that we cannot provide when this has been explained to them repeatedly.

## 2.4 Unreasonable lack of cooperation

Unreasonable lack of cooperation is an unwillingness and/or inability by a complainant to cooperate with our organisation, staff, or complaints system and processes that result in a disproportionate and unreasonable use of our services, time and/or resources. Some examples of unreasonable lack of cooperation include:

- Sending a constant stream of comprehensive and/or disorganised information without clearly defining any issues of complaint or explaining how they relate to the core issues being complained about – only where the complainant is clearly capable of doing this.
- Providing little or no detail with a complaint or presenting information in ‘drips and drabs’.
- Refusing to follow or accept our instructions, suggestions, or advice without a clear or justifiable reason for doing so.
- Arguing frequently and/or with extreme intensity that a particular solution is the correct one in the face of valid contrary arguments and explanations.
- Displaying unhelpful behaviour – such as withholding information, acting dishonestly, misquoting others, and so forth.

## 2.5 Unreasonable arguments

Unreasonable arguments include any arguments that are not based in reason or logic, that are incomprehensible, false or inflammatory, trivial or delirious and that disproportionately and unreasonably impact upon our organisation, staff, services, time, and/or resources. Arguments are unreasonable when they:

- fail to follow a logical sequence
- are not supported by any evidence and/or are based on conspiracy theories
- lead a complainant to reject all other valid and contrary arguments
- are trivial when compared to the amount of time, resources and attention that the complainant demands
- are false, inflammatory or defamatory.

## 2.6 Unreasonable behaviour

Unreasonable behaviour is conduct that is unreasonable in all circumstances – regardless of how stressed, angry or frustrated that a complainant is – because it unreasonably compromises the health, safety and security of our staff or the complainant. Some examples of unreasonable behaviours include:

- Acts of aggression, verbal abuse, derogatory, racist, or grossly defamatory remarks
- Harassment, intimidation or physical violence.
- Rude, confronting and threatening correspondence.
- Threats of harm to self or third parties, threats with a weapon or threats to damage property including bomb threats.
- Stalking (in person or online).
- Emotional manipulation.

All staff should note that Registrar has a zero tolerance policy towards any harm, abuse or threats directed towards them. Any conduct of this kind will be dealt with in accordance with our duty of care and occupational health and safety responsibilities.

# 3 Scope and Application

This document is to be followed by: Staff within the Office of the Registrar for Community Housing with the responsibility for managing complaints received regarding the activities of community housing providers registered under the provisions of the National Regulatory System for Community Housing (NRSCH)

This policy should be read in conjunction with the [NRSCH Complaints Management Policy](#) and NSW Complaint Management procedures.

## 4 Responding to and Managing Unreasonable Complainant Conduct

A formal warning letter will generally be given to a complainant about their conduct prior to the execution of these guidelines; however, there may be instances where the enactment of these guidelines is necessary without a formal warning.

UCC incidents will generally be managed by limiting or adapting the ways that we interact with and/or deliver services to complainants by restricting:

- **Who they have contact with** – e.g. limiting a complainant to a sole contact person/staff member in our organisation.
- **What they can raise with us** – e.g. restricting the subject matter of communications that we will consider and respond to.
- **When they can have contact** – e.g. limiting a complainant's contact with our organisation to a particular time, day, or length of time, or curbing the frequency of their contact with us.
- **Where they can make contact** – e.g. limiting the locations where we will conduct face-to-face interviews to secured facilities or areas of the office.
- **How they can make contact** – e.g. limiting or modifying the forms of contact that the complainant can have with us. This can include modifying or limiting face-to-face interviews, telephone and written communications, prohibiting access to our premises, contact through a representative only, taking no further action or terminating our services altogether.

When using the restrictions provided in this section we recognise that discretion will need to be used to adapt them to suit a complainant's personal circumstances, level of competency, literacy skills, etc. In this regard, we also recognise that more than one strategy may need to be used in individual cases to ensure their appropriateness and efficacy.

### 4.1 Who – limiting the complainant to a sole contact point

Where a complainant tries to forum shop internally within our organisation, changes their issues of complaint repeatedly, reframes their complaint, or raises an excessive number of complaints it may be appropriate to restrict their access to a single staff member (a sole contact point) who will exclusively manage their complaint(s) and interactions with our office. This may ensure they are dealt with consistently and may minimise the chances for misunderstandings, contradictions and manipulation.

To avoid staff 'burn out' the sole contact officer's supervisor will provide them with regular support and guidance – as needed. Also, the Principle Compliance Officer or

Investigation Manager will review the arrangement every three months to ensure that the officer is managing/coping with the arrangement.

Complainants who are restricted to a sole contact person will however be given the general contact phone number (1800 330 940) and the Registrar's office email address ([registrar@facfs.nsw.gov.au](mailto:registrar@facfs.nsw.gov.au)) so they can make contact if their primary contact is unavailable – e.g. they go on leave or are otherwise unavailable for an extended period of time.

## 4.2 What – restricting the subject matter of communications that we will consider

Where complainants repeatedly send written communications, letters, emails, or online forms that raise trivial or insignificant issues, contain inappropriate or abusive content or relate to a complaint/issue that has already been comprehensively considered and/or reviewed (at least once) by our office, we may restrict the issues/subject matter the complainant can raise with us/we will respond to. For example, we may:

- Refuse to respond to correspondence that raises an issue that has already been dealt with comprehensively, that raises a trivial issue, or is not supported by clear/any evidence. The complainant will be advised that future correspondence of this kind will be read and filed without acknowledgement unless we decide that we need to pursue it further in which case, we may do so on our 'own motion'.
- Restrict the complainant to one complaint/issue per month. Any attempts to circumvent this restriction, for example by raising multiple complaints/issues in the one complaint letter may result in modifications or further restrictions being placed on their access.
- Return correspondence to the complainant and require them to remove any inappropriate content before we will agree to consider its contents. A copy of the inappropriate correspondence will also be made and kept for our records to identify repeat/further UCC incidents.

## 4.3 When – limiting how a complainant can contact us

If a complainant's telephone, written or face-to-face contact with our organisation places an unreasonable demand on our time or resources because it is overly lengthy (e.g. disorganised and voluminous correspondence) or affects the health safety and security of our staff because it involves behaviour that is persistently rude, threatening, abusive or aggressive, we may limit when and/or how the complainant can interact with us. This may include:

- Limiting their telephone calls or face-to-face interviews to a particular time of the day or days of the week.
- Limiting the length or duration of telephone calls, written correspondence or face-to-face interviews. For example:
  - Telephone calls may be limited to [10] minutes at a time and will be politely terminated at the end of that time period.

- Lengthy written communications may be restricted to a maximum of [15] typed or written pages, single sided, font size 12 or it will be sent back to the complainant to be organised and summarised – This option is only appropriate in cases where the complainant is capable of summarising the information and refuses to do so.
- Limiting face-to-face interviews to maximum of [45] minutes.
- Limiting the frequency of their telephone calls, written correspondence or face-to-face interviews. Depending on the natures of the service(s) provided we may limit:
  - Telephone calls to [1] every two weeks/ month.
  - Written communications to [1] every two weeks/month.
  - Face-to-face interviews to [1] every two weeks/month.
- For irrelevant, overly lengthy, disorganised or frequent written correspondence we may also:
  - Require the complainant to clearly identify how the information or supporting materials they have sent to us relate to the central issues that we have identified in their complaint.
  - Restrict the frequency with which complainants can send emails or other written communications to our office.
  - Restrict a complainant to sending emails to a particular email account (e.g. the organisation’s main email account.)

### **Writing only restrictions**

When a complainant is restricted to ‘writing only’ they may be restricted to written communications through:

- Australia Post only
- Email only to a specific staff email or our general office email account
- Some other relevant form of written contact, where applicable.

If a complainant’s contact is restricted to ‘writing only’, the specific means that the complainant can use to contact our office (e.g. Australia Post only) will be clearly identified and conveyed to the complainant by the Registrar, Principle Compliance Officer or Investigation Manager. Also if it is not suitable for a complainant to enter our premises to hand deliver their written communication; this must be communicated to them as well.

Any communications that are received by our office in a manner that contravenes a ‘write only’ restriction will either be returned to the complainant or read and filed without acknowledgement.

### **4.4 Where – limiting face-to-face interviews to secure areas**

If a complainant is violent or overtly aggressive, unreasonably disruptive, threatening or demanding or makes frequent unannounced visits to our premises, we may consider restricting our face-to-face contact with them.

These restrictions may include:

- Restricting access to particular secured premises or areas of the office – such as the reception area or secured room/facility.
- Restricting their ability to attend our premises to specified times of the day and/or days of the week only – for example, when additional security is available or to times/days that are less busy.
- Allowing them to attend our office on an ‘appointment only’ basis and only with specified staff. **Note** – during these meetings staff should always seek support and assistance of a colleague for added safety and security.
- Banning the complainant from attending our premises altogether and allowing some other form of contact – e.g. ‘writing only’ or ‘telephone only’ contact.

### Contact through a representative only

In cases where we cannot completely restrict our contact with a complainant and their conduct is particularly difficult to manage, we may also restrict their contact to contact through a support person or representative only. The support person may be nominated by the complainant but must be approved by the Investigation Manager, Principle Compliance Officer or Registrar.

When assessing a representative/support person’s suitability, the Investigation Manager, Principle Compliance Officer or Registrar should consider factors like: the nominated representative/support person’s competency and literacy skills, demeanour/behaviour and relationship with the complainant.

If the Investigation Manager, Principle Compliance Officer or Registrar determines that the representative/support person may exacerbate the situation with the complainant the complainant will be asked to nominate another person or we may assist them in this regard.

## 4.5 Completely terminating a complainant’s access to our services

In rare cases, and as a last resort when all other strategies have been considered and/or attempted, the Registrar may decide that it is necessary for our organisation to completely restrict a complainant’s contact/access to our services.

A decision to have no further contact with a complainant will only be made if it appears that the complainant is unlikely to modify their conduct and/or their conduct poses a significant risk for our staff or other parties because it involves one or more of the following types of conduct:

- Acts of aggression, verbal and/or physical abuse, threats of harm, harassment, intimidation, stalking, assault.
- Damage to property while on our premises.

- Threats with a weapon or common office items that can be used to harm another person or themselves.
- Physically preventing a staff member from moving around freely either within their office or during an off-site visit – e.g. entrapping them in their home.
- Conduct that is otherwise unlawful.

In these cases the complainant will be sent a letter from the Registrar notifying them that their access has been restricted.

A complainant's access to our services and our premises may also be restricted (directly or indirectly) using the legal mechanisms such as trespass laws/legislation or legal orders to protect members of our staff from personal violence, intimidation or stalking by a complainant.

#### 4.6 Using other strategies to manage conflicts with complainants

If the Registrar determines that we cannot terminate our contact with a complainant in a particular case or that we/our staff bear some responsibility for causing or exacerbating their conduct, he may consider using a representative of the community housing provider, an alternate staff member or senior staff to attempt to resolve the conflict with the complainant and attempt to rebuild our relationship with them. However, we recognise that in UCC situations, this approach may not be an appropriate or effective strategy particularly if the complainant is uncooperative or resistant to compromise. Therefore, each case will be assessed on its own facts to determine the appropriateness of this approach.

## 5 Roles and Responsibilities

The main roles and responsibilities for the implementation of this policy are as follows:

### 5.1 All staff

All staff are responsible for familiarising themselves with these guidelines and encouraged to explain the contents of this document to all complainants particularly those who engage in UCC or exhibit the early warning signs for UCC.

However, it must be emphasised that any strategies that effectively change or restrict a complainant's access to our services must be considered at the level of Investigation Manager or higher.

Staff are also responsible for recording and reporting all UCC incidents they experience or witness (as appropriate) to a Principal Compliance Officer, the Investigation Manager or the Registrar within 24 hours of the incident occurring. A file note of the incident should also be attached to the relevant case or account in CHRIS.

## 5.2 The Registrar, Principal Compliance Officers and Investigation Manager

The Registrar, Principal Compliance Officers or Investigation Manager in consultation with relevant staff, has the responsibility and authority to change or restrict a complainant's access to our services in the circumstances identified in this policy. When doing so they will aim to impose any service changes/restrictions in the least restrictive ways possible. Their aim, when taking such actions will not be to punish the complainant, but rather to manage the impacts of their conduct.

When applying this policy the Registrar, Principal Compliance Officers or Investigation Manager will also aim to keep at least one open line of communication with a complainant. However, we do recognise that in extreme situations all forms of contact may need to be restricted for some time to ensure the health and safety and security of our staff and/or third parties.

The Investigation Manager is also responsible for recording, monitoring and reviewing all cases where this policy is applied to ensure consistency, transparency and accountability for the application of this policy. They will also manage and keep a file record of all cases where this policy is applied.

## 5.3 Principal Compliance Officers, the Investigation Manager or the Registrar

Following a UCC and/or stressful interaction with a complainant senior managers are responsible for providing affected staff members with the opportunity to debrief and vent their concerns either formally or informally. Principle Compliance Officers or Investigation Manager will also ensure that staff are provided with proper support and assistance including medical and/or police assistance and support through programs such as Employee Assistance Program (EAPS), if necessary.

Depending on the circumstances senior managers may also be responsible for arranging other forms of support for staff.

# 6 Monitoring, evaluation and review

It is the responsibility of Case, Complaint and Investigation Team to monitor and update this document when required. This document will be reviewed every three years and when any significant new information, legislative or organisational change warrants amendments to this document.

# 7 Support and advice

You can get advice and support about this document from:

- Investigation Manager – Case, Complaint and Investigation Team
- Principal Compliance Officer
- Registrar (NSW)

who has carriage of this document.

If you are reviewing a printed version of this document, please refer to the NRSCH Intranet to confirm that you are reviewing the most recent version of the guidelines. Following any subsequent reviews and approval this policy will be uploaded to the intranet and all previous versions removed.

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