

## **Members’ Code of Conduct Complaint Form**

To be used if you wish to make a complaint that a Member or co-opted Member of the Authority, has failed to comply with the Members’ Code of Conduct.

If English is not your first language, please contact us if you require help to complete this form.

### Your details

### Please provide us with your name and contact details

|  |  |
| --- | --- |
| Title: |  |
| First Name: |  |
| Last Name: |  |
| Address: |  |
| Daytime telephone: |  |
| Evening telephone: |  |
| Mobile telephone: |  |
| Email address: |  |

We will only use the information you provide to us for the purposes of processing your complaint. Your information, including any personal information you provide to us (such as name and contact details) may be shared with the people referred to below, or with other relevant authorities as required, only for the purposes of processing your complaint.

All comments and complaints are treated confidentially and will not disadvantage you in any future dealings with Broads Authority. It may not always be possible to keep your details confidential, such as where your complaint is about a third party or where particular legislation applies to your complaint.

We will tell the following people about this complaint:

* + The Member(s) you are complaining about
  + The Monitoring Officer to the Authority
  + The Authority’s Independent Person
  + The Chair of the Authority
  + The Chief Executive of the Authority

If you have serious concerns about your name and details of your complaint being released, please complete **section 6** of this form.

### Please tell us which complainant type best describes you:

Member of the public

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |

A Member or co-opted Member of an authority Member of Parliament

Local authority monitoring officer Broads Authority employee or volunteer Other (please provide details)

### Making your complaint

1. Once you have submitted your complaint, it will be considered by the Monitoring Officer of the Authority and after reasonable consultation with the Authority’s Independent Person, who will assess, on the basis of your written submission and any additional relevant material, whether the alleged conduct might amount to a failure to comply with the Members’ Code of Conduct.

The Monitoring Officer has the following range of options available to him/her: Formal Investigation (which will involve an investigation of the complaint), referral to the Authority’s Local Resolution Procedure or no further action, for instance if it is considered that any failure to comply with the Code of Conduct is of a trivial nature.

1. Please provide us with the name of the Member(s) you believe have breached the Broads Authority Members’ Code of Conduct and, where the Member is also a Councillor, the name of their authority.

|  |  |  |  |
| --- | --- | --- | --- |
| Title | First Name | Last Name | Authority Name |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Please explain in this section (or on separate sheets) what the Member has done that you believe breached the Members’ Code of Conduct. If you are complaining about more than one Member you should clearly explain what each individual person has done that you believe breached the Code of Conduct.

A copy of the Authority’s Members’ Code of Conduct can be found on the Broads Authority website at [Constitutional documents (broads-authority.gov.uk)](https://www.broads-authority.gov.uk/about-us/committees/constitutional-documents)

Alternatively, a paper copy can be obtained from the Monitoring Officer to the Authority by writing to:

Monitoring Officer, Broads Authority, Yare House, 62-64 Thorpe Road, Norwich, Norfolk. NR11RY

* + You should be specific, wherever possible; about exactly what you are alleging the Member said or did. For instance, instead of writing that the Member insulted you, you should state what it was they said.
  + You should provide the dates of the alleged incidents wherever possible. If you cannot provide exact dates it is important to give a general timeframe.
  + You should confirm whether there are any witnesses to the alleged conduct and provide their names and contact details if possible.
  + You should provide any relevant background information.
  + You should tick the box to confirm that the facts set out are true

**Please provide us with the details of your complaint and the outcome from this complaints process that you would like to see happen. Continue on a separate sheet if there is not enough space on this form.**

Do you wish your complaint to be dealt with under the Authority’s Local Resolution Procedure?

Yes/No

If you answered No, please briefly explain your reason:

* I confirm by ticking this box and sending this form that the facts I have set out in my complaint are true

Date:

### Only complete this next section if you are requesting that your identity is kept confidential.

1. In the interests of fairness and natural justice, we believe Members who are complained about have a right to know who has made the complaint. We also believe they have a right to be provided with a summary of the complaint. We are unlikely to withhold your identity or details of your complaint unless you have good reason to justify the Authority doing so.

Please note that requests for confidentiality or requests for suppression of complaint details will not automatically be granted. The Monitoring Officer to the Authority, in consultation with the Authority’s Independent Person, will consider the request alongside the substance of your complaint. We will then contact you with the decision. If your request for confidentiality is not granted, we will usually allow you the option of withdrawing your complaint.

However, it is important to understand that in certain exceptional circumstances where the matter complained about is very serious, we can proceed with an investigation or other action and disclose your name even if you have expressly asked us not to.

**Please provide us with details of why you believe we should withhold your name and/or the details of your complaint:**

### Additional Help

1. Complaints must be submitted in writing. This includes electronic submissions. However, in line with the requirements of equalities legislation, we can make reasonable adjustments to assist you if you have a disability that prevents you from making your complaint in writing.

If you need support in completing this form, please let us know as soon as possible.

This complaint should be submitted to the Monitoring Officer to the Authority, by sending to the following contact addresses:

By post to: Monitoring Officer, Broads Authority, Yare House, 62-64 Thorpe Road, Norwich, Norfolk. NR11RY

Or by e-mail to: [monitoring.officer@broads-authority.gov.uk](mailto:monitoring.officer@broads-authority.gov.uk)

### Privacy and Data processing 5.

1. The Authority will process any personal information in line with the Data Protection Act 2018 and the EU General Data Protection Regulation.

Information you provide to us on this form will be shared with certain individuals who undertake roles within the complaints process, including the subject Member, Independent Person, Investigating Officer (who may be external to the Authority) and members of the Hearings Committee.

You also acknowledge by making your complaint that personal information which you give us may be placed in the public domain should the matter proceed to a hearing.

The basis of processing will be that of public task i.e. tasks carried out by the Authority in the public interest or power vested in the Authority.

Your information will be retained for 7 years following the outcome of your complaint or last action taken in relation to it. We will process your data in accordance with Data Protection Principles using appropriate technical and organisational measures.

Broads Authority is the Data Controller in relation to your data. It has a Data Protection Officer (DPO) who can be contacted at the postal address on this form or at [dpo@broads-authority.gov.uk](mailto:dpo@broads-authority.gov.uk). Our DPO is currently the Director of Operations.

You have the right to see any personal information that we hold about you. Such requests are called subject access requests. If you would like to make a subject access request please contact the Authority’s Data Protection Officer. We will respond to such requests within one month. There is no fee to make a request.

You may ask us to rectify any personal information which is incomplete or inaccurate. You may also ask us to erase such data once processing is no longer necessary or if you object to processing or consider that we are processing it unlawfully. We will consider such requests and if we refuse, we will give reasons.

5. Section 8 added 12.07.18

### APPENDIX 1a



### Private and Confidential

## **Code of Conduct Complaint Monitoring Form**

The Broads Authority is committed to the provision of equal opportunity and specifically to conducting its affairs in a manner which will not discriminate against, either directly or indirectly, any person on the grounds of: disability; gender; transgender; race; ethnic or national origin; religion or belief; age or sexual orientation.

To help us meet this commitment, it would be helpful if you would complete this form. This monitoring form will be separated from your complaint on receipt and will be used solely for the purposes of monitoring the process.

**Section 1** (please tick the boxes which apply)

My age is:

Under 21

21-30

31-40

41-50

51-60

61-64

65 or over















My gender is:

Female Male





|  |  |  |  |
| --- | --- | --- | --- |
| **Section 2** (please tick one box only) | | | |
| I would describe myself as: | White: | British Irish  Any other |      * please write in |
|  | Mixed: | White and Black Caribbean White and Black African  White and Asian Any other |            * please write in |
|  | Asian or Asian British: | Indian Pakistani |      |

Bangladeshi Any other

* please write in

Black or Black British:

Caribbean African Any other





* please write in

Chinese or other ethnic group:

Chinese Any other



* please write in

|  |  |  |
| --- | --- | --- |
| **Section 3** |  |  |
| Do you consider yourself to have a disability\*? | Yes  | No  |

Thank you for your co-operation. Please return this form with your complaint.

\*The Equality Act 2010 defines disability as ‘a physical or mental impairment which has a substantial and long-term adverse effect on a person’s ability to carry out normal day-to-day activities’.