

Swindon Borough Council

COMPLAINT FORM CODE OF CONDUCT FOR MEMBERS

(Please read the 'Information for Potential Complainants' before completing this Form).

**To: The Monitoring Officer, Swindon Borough Council, Civic Offices,
Euclid Street, Swindon, SN1 2JH**

A. Your details

1. Please provide us with your name and contact details. Anonymous complaints will only be considered if there is independent evidence to substantiate the complaint.

Title:	
First name:	
Last name:	
Address:	
Contact telephone:	
Email address:	
Signature:	
Date of complaint:	

Your address and contact details will not usually be released unless necessary or to deal with your complaint.

The following people will see this form:

- Members of the Standards Sub-Committee (Initial Assessment)
- Monitoring Officer of the Borough Council
- the Parish Clerk (if applicable)

A brief summary of your complaint may also be shared, by the relevant Sub-Committee with the Member(s) you are complaining against. If you have serious concerns about your name and a summary, or details of your complaint being released, please complete **Section C** of this Form and also discuss your reasons or concerns with the Council's Monitoring Officer.

2. Please tell us which complainant type best describes you:

- ☐ A member of the public
- ☐ An elected or co-opted Member of the Council
- ☐ An independent member of a Standards Committee
- ☐ A Member of Parliament
- ☐ A Monitoring Officer
- ☐ Other council employee, contractor or agent of the Council
- ☐ Other ()

3. Equality Monitoring Form - please fill in the attached form.

B. Making your complaint

The sanctions available to a Standards Committee are governed by law and more serious sanctions are only available to the Adjudication Panel for England. For a brief summary of sanctions available, please see information at the end of this Form.

4. Please provide us with the name of the member(s) you believe have breached the Members Code of Conduct:

Title	First name	Last name	Specify Relevant Borough, Town or Parish Council

5. Please explain in this section (or on separate sheet(s)) what the Member is alleged to have done that you believe breaches the Code of Conduct. If you are complaining about more than one member you should clearly explain what each individual person has done, with dates / witnesses to substantiate the alleged breach.

It is also important that you provide all the evidence you wish to have taken into account by the Standards Committee when it decides whether to take any action on your complaint or not. For example:

- 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 or did to insult you.
- 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 or other relevant documentary evidence to support your allegation(s).
- If the allegation(s) being made occurred over 28 days of the alleged behaviour or conduct, clearly explain why the complaint was not made during that period of time.

Please provide us with the details of your complaint. Continue on a separate sheet if there is not enough space on this form.

(Continue on separate sheet(s), as necessary)

C. Confidentiality of complainant and the complaint details

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

6. In the interests of fairness and in compliance with the rules of natural justice, we believe members who are complained about have a right to know who has made the complaint and the substance of the allegation(s) made against him / her. We are, therefore, unlikely to withhold your personal details or the details of your complaint unless you have good reasons to believe that you have justifiable grounds, for example: -
- to believe you may be victimised or harassed by the Member(s) against whom you are submitting a written complaint (or by a person associated with the same); or
 - may receive less favourable treatment from the Council because of the seniority of the Member against whom you are submitting a written complaint in terms of any existing Council service provision or any tender / contract that you may have or are about to submit to the Council.

Please note that requests for confidentiality or requests for suppression of the personal and complaint details will not automatically be granted. The Standards Sub-Committee (Initial Assessment) will consider the request alongside the substance of your complaint and the Monitoring Officer will then contact you with the decision. If your request for confidentiality is not granted, we will usually allow you the opportunity, if you so wish, of withdrawing your complaint.

However, it is important to understand that - in exceptional circumstances, where the matter complained about is very serious - we may proceed with an investigation (or other action) and may have no choice but to disclose your personal and complaint details, because of the allegation(s) made, 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:

(Continue on separate sheet(s), as necessary)

D. Remedy sought

7. Please indicate the remedy or remedies you are looking for or hoping to achieve by submitting this complaint.

(Continue on separate sheet(s), as necessary)

E. Additional information

8. Complaints must be submitted in writing. This includes fax and electronic submissions. Frivolous, vexatious and politically motivated tit-for-tat complaints are likely to be rejected.
9. In line with the requirements of the Disability Discrimination Act 2000, we can make reasonable adjustments to assist you if you have a disability that prevents you from making your complaint in writing. We can also help if English is not your first language.
10. If you need any support in completing this form, please contact the Monitoring Officer (contact details are set out below) as soon as possible.

F. Process from here

11. Once a valid complaint relating to an alleged breach of the Code of Conduct for Members has been received by the Monitoring Officer, it will be presented to a meeting of the Standards Sub-Committee (Initial Assessment) for consideration/determination. You and the member against whom the complaint has been made will not be allowed to attend the deliberations of the Sub-Committee as the matter will be considered in private.

- 12.** The Sub-Committee may resolve to:
- (a) dismiss your complaint, with reasons;
 - (b) ask you for additional information, with reasons;
 - (c) refer your complaint to the Monitoring Officer for investigation (or other action);
or
 - (d) refer your complaint to the Standards Board for England if the complaint does not fall within the jurisdiction of the Standards Committee.
- 13.** You will be notified after the meeting and given information on any further stage(s) in the process at that time.

Please complete this form and send it to:

Stephen Taylor
The Monitoring Officer
Swindon Borough Council
Civic Offices
Euclid Street
Swindon
SN1 2 JH

Tel: 01793 463612

Fax: 01793 463366

staylor@swindon.gov.uk



SWINDON
BOROUGH COUNCIL

Equalities Monitoring Form

Swindon Borough Council has a Corporate Equalities Strategy, which outlines our commitment to providing high quality, appropriate services which meets the needs of the local population. We aim to ensure that no one is discriminated against in the way they access or receive our services.

As part of that commitment, we are monitoring what we do and would be extremely grateful, if you could complete this questionnaire.

The information you provide will be used to improve service delivery and may be shared with other colleagues in the council for the purpose of monitoring our equalities policies and procedures.

Please place a tick in the boxes where applicable:

Are You? Male ☐ Female ☐

Please indicate your current age band:

Up to 19 ☐ 20-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60-69 ☐ Over 70 ☐

How would you describe your ethnic origin?

White

- ☐ British
- ☐ Irish
- ☐ Polish
- ☐ Italian
- ☐ Any other White background

Black or Black British

- ☐ Caribbean
- ☐ African
- ☐ Any other Black background

Chinese or other Ethnic Group

- ☐ Chinese
- ☐ Any other ethnic group

Mixed

- ☐ White & Black Caribbean
- ☐ White & Black African
- ☐ White & Asian
- ☐ Any other Mixed Background

Asian or Asian British

- ☐ Indian
- ☐ Pakistani
- ☐ Bangladeshi
- ☐ Any other Asian background

Do you consider yourself to have a disability? Yes ☐ No ☐

If yes, please tick the appropriate box:

- | | |
|--|---|
| <input type="checkbox"/> Dyslexia | <input type="checkbox"/> Blind / Partially Sighted |
| <input type="checkbox"/> Deaf / Hearing Impaired | <input type="checkbox"/> Mental Health Difficulties |
| <input type="checkbox"/> Wheelchair User / Mobility Impairment | <input type="checkbox"/> Unseen e.g. Diabetes, Epilepsy |
| <input type="checkbox"/> Other, please state: | |

If you require assistance in completing this form or require a copy of this form in another format please contact Customer Services on 01793 463725.

I agree for the information I have provided to be used by Swindon Borough Council to monitor Equalities with the Council.

Print Name

Signature

Date

I know that I can contact Customer Services at any time if I wish this information to be removed from the Council's records.