The UK Quality Code for Higher Education - Advice and Guidance

Sector-Agreed **Principle 12** - Operating concerns, complaints, and appeals processes

September 2026

Contents

About this Guidance

Context

This Advice and Guidance supports the UK Quality Code for Higher Education (Quality Code) and is designed to unpack **Sector-Agreed Principle 12 - Operating concerns, complaints and appeals processes** and the Key Practices that sit under it. It has been produced by QAA in partnership with a writing group of sector experts and peer-reviewed by colleagues across UK higher education. This is in accordance with the ethos that the Quality Code remains a sector-agreed reference point, built on a shared understanding of what providers can expect of themselves and each other in the assurance and enhancement of quality and the maintenance of standards across post-secondary education throughout the UK. QAA would like to thank the writing group and peer readers for their invaluable contribution in developing this guidance. Details of the writing and reading groups can be found on page 50 of this guidance.

An important contextual note relates to the diversity of higher education providers in the UK. Providers can be large universities, operating with significant infrastructure, or small specialist providers, operating on a significantly smaller scale, or any number of other different operating models. The Advice and Guidance is designed to be useful for all providers (and representatives from a range of providers formed the writing and peer review groups), but we recognise that, on occasion, the nomenclature used could suggest a larger provider's context. It is important that each reader interprets the Advice and Guidance in the context of their own operating environment and that all readers recognise that quality and homogeneity are not synonymous.

Scope

This Advice and Guidance encourages providers to reflect on their practice and processes in relation to the Sector-Agreed Principle. Following the Advice and Guidance is not mandatory, but illustrative of approaches that can help providers meet the relevant Principle. National regulators and QAA do not view the information in the Advice and Guidance as compliance indicators. This guidance does not interpret statutory requirements.

The language we use

Where the word 'should' (or any other similarly directive language) appears in the Advice and Guidance this represents a shared understanding within the UK higher education community. On some occasions an institution can align with the Sector-Agreed Principle in a range of different ways, and in such cases an institution may have a different approach to that set out here. Ultimately, to be aligned with the Quality Code, an institution must be able to demonstrate how it meets the Sector-Agreed Principles in practice. No provider or individual should feel that the Advice and Guidance is prescriptive or impinges their autonomy or freedoms.

Structure

In response to sector demand, the Advice and Guidance aligns directly with the overarching Sector-Agreed Principles to provide clear navigation between the different elements. The guidance begins by unpacking the Principle in an operational context. It is then divided into subsections focusing on each Key Practice outlining practical considerations and approaches for providers to benchmark their own way of working. This features practical tips and experience shared by providers on operational practice. Finally, in each subsection there are tools to enable reflection on the guidance. These tools offer the opportunity to explore what 'good' might look like through reflective questions and practical scenarios that enable interrogation of current practice with a view to enhancing quality.

Commonly used terms

The following terms are used throughout this advice. Other terms which benefit from a precise definition are listed at the end of this document.

- **Students**: refers to all individuals studying towards a higher-level award regardless of demographic, mode of delivery, level of study, subject area, or geographic location.
- **Provider**: describes all types of organisations that provide higher level learning, including universities, colleges, institutes of learning, and employers. We also use 'institution' in some instances where 'provider' might not suit the context.
- **Student representative body**: a formal body or mechanism that represents and promotes the interests of students. This may be known as a students' union, a students' association, or guild, or by another bespoke name where these specific organisations do not exist.

Sector-Agreed Principle 12 and its Key Practices

Providers operate processes for complaints and appeals that are robust, fair, transparent and accessible, and clearly articulated to staff and students. Policies and processes for concerns, complaints and appeals are regularly reviewed and the outcomes are used to support the enhancement of provision and the student experience.

Key Practices

a. Policies and processes for concerns, complaints and appeals are accessible, robust and inclusive, and enable early resolution wherever possible and include information relating to recruitment, selection and admission.

b. Concerns, complaints and appeals policies and procedures, including information about them, are clear and transparent to students, those advising them and those implementing the processes. Formal and informal stages of the processes are clearly articulated.

c. Providers meet (where applicable) the national and international requirements of external bodies with responsibility for hearing or overseeing concerns and complaints.

d. Actions resulting from concerns, complaints and appeals are proportionate and enable cases to be resolved as early as possible.

e. Processes for concerns, complaints and appeals are monitored and reviewed to ensure they promote enhancement throughout the provider and operate as intended, to the benefit of students and staff.

f. Outcomes from concerns, complaints and appeals are used to develop and enhance teaching and learning and the wider student experience.

Principle 12 - Operating concerns, complaints and appeals processes

Providers operate processes for complaints and appeals that are robust, fair, transparent and accessible, and clearly articulated to staff and students. Policies and processes for concerns, complaints and appeals are regularly reviewed and the outcomes are used to support the enhancement of provision and the student experience.

What do we mean by concerns, complaints and appeals

Concerns, complaints and appeals are a fundamental right for students and other applicants. However well a provider operates, the unique needs of individual students may mean their experience is not what they expected. Distinguishing between the right to raise concerns, make complaints, and submit appeals can help students navigate what can be confusing terms, and will help staff operate processes effectively.

Concerns are typically an opportunity for early, informal resolution of issues before they escalate or a formal process becomes necessary. Concerns may be raised verbally, by email, or through informal feedback mechanisms. A student or applicant might raise a concern if, for instance, lecture slides are not uploaded on time, an admissions enquiry has not been answered, or a placement briefing session was cancelled at short notice. The term 'concerns' also has a specific meaning in Scotland, Wales and Northern Ireland, where it refers to regulatory quality assurance issues of sufficient systemic seriousness or persistence to warrant formal scrutiny. In this guidance, 'concerns' should be interpreted in its everyday sense of a minor issue or complaint capable of early resolution.

A **complaint** is a formal expression of dissatisfaction about the standard or quality of a service or learning experience, about something the provider has done or failed to do, or about how an individual has been treated within the provider's community. Complaints focus on processes, services and treatment, and not on academic judgement.

A student or applicant might make a complaint about poor communication, inadequate supervision or academic support, failure to implement agreed reasonable adjustments, or poor facilities, accommodation, or placement support. Complaints may also relate to the behaviour or conduct of staff or other students, including how an individual has been treated in social, residential or other non-academic settings.

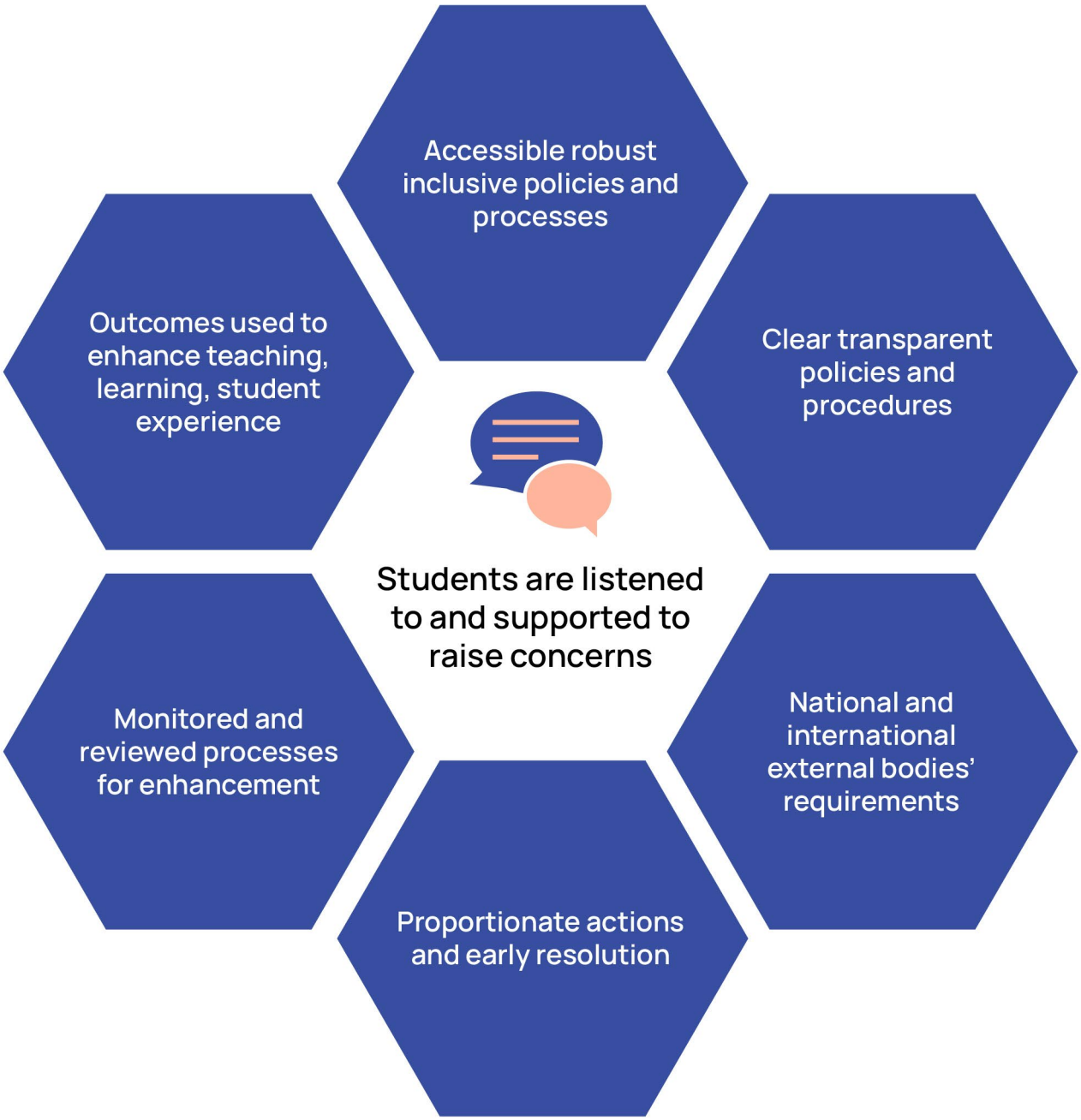
An **appeal** is a request for a review of a specific decision, usually made by an academic, admissions, progression, or disciplinary body. Appeals are not about general dissatisfaction but about whether the decision-making process was fair, consistent and properly applied. Appeals review **how** a decision was made, not whether staff were 'right' academically. A student might appeal against a final assessment or degree classification outcome, a progression decision, or an academic misconduct penalty. Appeals processes are open to more people than just students - for example, an applicant to a course of study may make an appeal against a provider's decisions to refuse admission.

What this Principle aims to do

Principle 12 considers the mechanisms for handling concerns, complaints and appeals and offers guidance on operating effective processes which put students at the centre of the process, focus on early resolution, and enable providers to improve their services by learning from applications and decisions.

Figure 1 illustrates the key elements that together make an effective concerns, complaints and appeals process that centres students (and other applicants), making sure they are listened to and supported, reflecting the Key Practices in this guidance.

Figure 1: Key elements of an effective concerns, complaints and appeals process



This Principle focuses on building a culture that treats complaints as a valuable opportunity for a genuine dialogue with a student, enabling students to feel they have been listened to and will be treated fairly. Swiftly addressing a concern, complaint or appeal, close to the point of service delivery, can help restore a student's confidence and enables a provider to resolve matters locally and quickly, avoiding escalation where possible. This helps foster a culture of student engagement and partnership which underpins many other aspects of a positive educational experience.

The Principle places students at the heart of these processes. Concerns, complaints and appeals processes must be open and transparent in their design and operation, recognising the different ways in which students may need to engage with them at points within their studies. Applicants need to raise issues informally or formally without fear of disadvantage or reprisal. Students should have access throughout the process to guidance on indicative timelines and potential outcomes.

All staff who directly or indirectly support concerns, complaints and appeals processes should have access to guidance and training appropriate for their role.

Another key element is the commitment to making concerns, complaints and appeals processes inclusive and accessible for all students. Careful thought should be given to the needs of marginalised and vulnerable groups when designing processes. Where appropriate, providers should offer reasonable adjustments and support to help students access and use the processes.

These practices are applied consistently by providers throughout the student lifecycle - including recruitment, selection and admission - and structured to support early and effective resolution wherever possible, while recognising that approaches to achieving this may vary across different national frameworks. Clear escalation pathways are in place where issues cannot be resolved at an initial stage.

The Principle also reflects the requirement for providers to align with national and international standards established by external bodies. This includes meeting the requirements of relevant professional, statutory and regulatory bodies (PSRBs), in addition to the frameworks and guidance provided by relevant ombudsman services.

A good complaints handling process is guided by a commitment to continuous improvement, learning from complaints and appeals, and taking appropriate action when issues are identified. The outcomes can drive wider institutional enhancements in teaching, learning and the overall student experience. To meet this Principle, providers not only regularly monitor and review their processes for handling concerns, complaints and appeals, ensuring they operate effectively, but that the monitoring contributes to the correction of errors and drives best practice, leading enhancement throughout the institution.

Enhancement

Handling concerns, complaints and appeals well can give providers considerable opportunity to identify and implement enhancement work. In embedding this Principle, providers may wish to consider the following activities and ideas for good practice.

Key Practice a -
Accessible, robust and inclusive policies and processes for concerns, complaints and appeals

Key Practice a

Accessible, robust and inclusive policies and processes for concerns, complaints and appeals

Policies and processes for concerns, complaints and appeals are accessible, robust and inclusive, and enable early resolution wherever possible and include information relating to recruitment, selection and admission.

All students and applicants have the right to raise concerns, make complaints and submit appeals, and to do so without fear of disadvantage. Providers ensure that this right is clearly communicated and supported through accessible, inclusive and well-designed processes.

Policies and processes for concerns, complaints and appeals are accessible, robust and inclusive, enable early resolution wherever possible, and include information relating to recruitment, selection and admission. Processes are designed with the needs of students and other applicants in mind.

Providers ensure that concerns, complaints and appeals processes are clearly applicable to applicants as well as enrolled students, with specific guidance on how issues arising during recruitment, selection and admission can be raised and resolved. This includes making clear the distinction between enquiries, concerns, complaints and appeals in the admissions context, and how these relate to decisions such as offers, rejections or conditions of entry. Processes are communicated in a way that is accessible to prospective students, with clear routes for informal resolution where appropriate and transparent information about how formal complaints or appeals can be submitted. Providers ensure that these processes are aligned with principles of fairness, consistency and transparency, and are integrated with admissions processes rather than operating in isolation.

Staff are equipped to identify and remove barriers and to respond effectively to concerns, complaints and appeals raised, modelling inclusive language and behaviour. This may be done through training, or they could be supported by dedicated teams, or those with a role in student well-being. Appropriate levels of detail about cases are shared with internal governance processes to allow them to have clear oversight of concerns, complaints and appeals within the organisation, leading a proactive culture in identifying emerging issues and addressing systemic challenges through timely intervention.

Figure 2 shows three key features underpinning accessible, robust and inclusive complaints processes. Each feature consists of a number of elements which providers may wish to review their processes against, or consider building them into their processes.

Information relating to recruitment, selection and admission

Providers ensure that concerns, complaints and appeals processes are clearly articulated for applicants as well as enrolled students, with accessible guidance linked to recruitment, selection and admission activities. This includes helping applicants understand the difference between enquiries, concerns, complaints and appeals in the admissions context, and how these processes relate to decisions such as offers, rejections, or conditions of entry. Processes are clearly signposted within admissions information and communications, so that applicants can raise issues early and seek resolution without needing detailed prior knowledge of institutional structures.

Figure 2: Key features of accessible, robust and inclusive policies and processes

Clarity of policies and processes

Clear and transparent processes are discussed in more detail in Key Practice b, but that guidance is stated here as well due to its importance in creating truly accessible, robust and inclusive processes.

Providers should ensure that their concerns, complaints and appeals processes are clearly articulated, student-centred, and proportionate to the needs of their student body. A strategic approach to clarity of process and accessibility should include the following areas:

Clear and understandable policies and processes: Processes are written in plain English, avoiding legal terminology which can be intimidating. Documents have clear headings, step-by-step guidance and visual aids where appropriate. Where technical terminology or acronyms are used, definitions should be readily available.

Providers ensure that processes are appropriately resourced, with sufficient staffing, time and support for both specialist teams and wider staff to carry out their roles effectively, particularly where processes rely on contributions from across the organisation.

Informal opportunities: Providers offer informal opportunities to address concerns before more formal processes are initiated. It should be noted that in the Scottish context, the SPSO Model Complaints Handling Procedure has no informal stage - resolution at Stage 1 or Stage 2 is part of a formal, logged complaint.

Reassurance of confidentiality: Providers explain how, why and with whom information will be shared. They do not request or share sensitive information unless it is necessary, as this may form a barrier to engaging in processes. Providers offer context for why sensitive information is being requested, or why it will be shared, where relevant. Providers also assure applicants that they will not face reprisal for raising concerns, complaints or appeals.

Use of inclusive and supportive language: Providers use inclusive, person-centred, neutral language and terminology, and should offer options for self-description, avoiding binary choices, reductive grouping, or assumptions. Providers affirm their commitment to inclusive practice, minimising worries about discrimination and reassure students through supportive language that they will be treated with compassion, dignity and respect throughout the process.

Clear strategy for communications and updates: Communications use neutral and compassionate language: neutral in being clear, factual and free from judgement or blame, and compassionate in acknowledging the student's experience, demonstrating empathy, and recognising distress or impact. Guidance explains how information received will be acknowledged, how students will be updated on the progress of their case, and when and how the outcome will be communicated. Verbal updates and outcomes are followed up in writing, with any relevant appeal process clearly stated. Communications signpost to advice and support, including independent services, and take into account potential impact on mental health and well-being.

Navigability across partnerships: Where multiple organisations are involved, providers should ensure students and other applicants can easily navigate the relevant processes. Students should not have to provide or repeat the same information multiple times or to multiple teams, as this could be an unreasonable barrier to raising a complaint or appeal. Thought is given to how this can be achieved where applicants have multiple issues.

Shared resources: Smaller providers may benefit from shared panels or review mechanisms, such as using staff from partner organisations or external reviewers, to support independent decision making and mitigate resource constraints. Processes ensure that only required, relevant information is shared.

Multi-format availability: Forms and guidance should be available in various formats. To avoid version control issues, documentation is stored in one place (for example, a dedicated web page) but with links to it from various locations, including digital platforms and student handbooks. Providers follow their duties under the Equality Act 2010 or equivalent legislation. Accessibility should be taken into account when designing forms or online guidance, ensuring visually accessibility and compatibility with screen readers and other accessibility tools. Avoid time limited steps in online forms unless absolutely necessary and offer the ability to save and return to forms later.

Alignment with regulatory frameworks: Processes should align with Competition and Markets Authority (CMA) consumer law advice for higher education providers, the Office of the Independent Adjudicator's Good Practice Framework (in England and Wales), the Scottish Public Services Ombudsman's How to handle complaints, the Northern Ireland Public Services Ombudsman's Principles of Good Complaints Handling, and other relevant regulatory expectations.

Feedback and support: Providers include details on how to request advice or support, ideally with options (live chat, email, phone). They offer mechanisms to feedback on accessibility barriers when they are encountered, and set out applicants' rights to seek representation, for example. Accessible error notifications indicate how and where the issue can be resolved, for example 'Provide valid email address' above the relevant box. Processes should be designed to enable submission on behalf of a student, for example where an application is linked to a known reasonable adjustment or an emerging need which necessitates this. Processes enable students to indicate factors that may require prioritisation of their case, which are considered as part of the initial assessment.

Fairness and individual consideration

Providers ensure that concerns, complaints and appeals processes are underpinned by principles of fairness, transparency and individual consideration. Each case is assessed on its specific circumstances and merits, promoting confidence in institutional processes and reflecting a commitment to natural justice. A strategic approach includes the following elements:

Fairness with individual consideration: Concerns, complaints and appeals are reviewed on their own merits, acknowledging individual circumstances while applying processes consistently. This balance ensures outcomes are proportionate, justifiable and contextually sensitive, avoiding rigid or procedural injustice.

Equitable and unbiased treatment: All parties are treated respectfully and fairly, with reassurance that raising a complaint will not result in disadvantage. Complaint handlers avoid stereotypes or assumptions, ensuring decisions are based solely on evidence and facts, free from conscious or unconscious bias.

Accessibility and inclusion: Providers actively remove barriers to participation and offer reasonable adjustments, aligning with duties under the Equality Act 2010 and relevant sector guidance. Policies and processes must be accessible and inclusive for students with disabilities or protected characteristics, using clear, non-exclusionary language and signposting advice from disability or welfare support/student services teams.

Transparent, evidence-based processes: Complainants have clear opportunities to present information and supporting evidence. Robust processes operate consistently and fairly for all users while allowing reasonable flexibility where needed. Outcomes are based on fair assessment of that evidence, supported by clear reasoning and documentation. Decision notifications explain how conclusions were reached, aligning with sector principles of transparency and accountability.

Impartiality of decision-makers: Those involved in considering or deciding complaints are independent and have no prior involvement in the matter. Providers maintain clear separation between investigative and decision-making functions to safeguard impartiality.

Supportive and respectful handling: Complaints are managed sensitively and confidentially, with respect for the dignity and well-being of all parties. Students are informed how information will be used and reassured that confidentiality will be upheld except where disclosure is legally or procedurally required. Students are also permitted accompaniment or representation at meetings, ensuring the process remains supportive and non-intimidating.

Clear communication and timescales: Providers set and communicate realistic timescales, particularly for complex or multi-party cases, and keep students updated on any delays. These timescales need to bear in mind oversight bodies' requirement. Transparency in timescale management reinforces trust and demonstrates procedural fairness.

Tailored outcomes where appropriate: While consistency is essential, providers retain discretion to tailor outcomes to reflect individual circumstances. This may include restorative actions or alternative resolutions that best support fairness, learning and the student experience. Such actions are focused on returning the student to the position they would reasonably have been in, and may include extension of deadlines, or opportunities to resit or submit an alternative assessment where the original opportunity was compromised.

The right to appeal: The decision notification should also make clear the further steps available to the applicant if the decision they receive is not satisfactory to them, including progressing within the provider's processes or escalation to the relevant ombudsman or similar national authority.

Continuous improvement and staff development

A strategic approach to continuous improvement and staff development ensures that providers maintain high standards of quality and academic integrity through reflective practice, robust governance and inclusive training. This approach should be embedded across the provider and informed by internal feedback and external reference points.

Key elements include:

EDI training and awareness: Staff receive regular training on equality, diversity and inclusion (EDI), including the impact of mental health, disability, protected characteristics, and other vulnerabilities. Training enables staff to recognise disclosures and respond appropriately, with clear referral pathways and support mechanisms.

Use of external guidance: Providers incorporate guidance from relevant external bodies such as their national adjudicator or ombudsman, the Competition and Markets Authority (CMA), and the outcome of legal cases within the sector. This ensures that institutional policies remain aligned with sector expectations and legal obligations.

Governance and evaluation: Providers should maintain robust governance structures that oversee concerns, complaints, appeals, and related quality assurance processes. Emerging issues are dealt with promptly. Trends are examined to identify and respond to systemic issues. Providers undertake regular reviews of processes and outcomes, with clear accountability and reporting lines. It may be that a central quality team, with oversight from a learning and teaching committee, has responsibility for this review - arrangements will differ from provider to provider.

Continuous improvement is monitored and evaluated through strategic planning cycles, ensuring that enhancements are evidence-based and responsive to emerging needs. Key Practice f discusses how to use outcomes from concerns, complaints and appeals in more detail.

Feedback-driven improvement: Providers actively use feedback from students, staff and external stakeholders to refine and improve processes. This includes learning from previous cases and embedding changes into policy and practice.

Design of guidance

Importantly, the entire approach should be underpinned by a design ethos that prioritises the student experience and their well-being. This includes clear signposting to welfare and pastoral support before, during and after the resolution of a concern, complaint or appeal. In line with inclusive practice, providers should also clearly advertise the availability of reasonable adjustments and explain how students can request them, ensuring fair and equitable participation in the process.

Reflective questions

1. How do our processes for concerns, complaints, and appeals enable early and informal resolution (or resolution at Stage 1 or Stage 2 of the SPSO Model Complaints Handling Procedures as part of a formal, logged complaint), and are these options clearly communicated?
2. How are our staff development programmes aligned with current EDI legislation and sector guidance, and responsive to developments as they occur?
3. How do we ensure consistent support for reasonable adjustments across academic and professional service settings, particularly where responsibilities are devolved across schools, faculties or departments?
4. How do we use external guidance (for example OIA, CMA) and internal best practice to inform and review our policies, and how do we update processes in response to feedback, regulatory changes and sector developments?
5. How clearly are our concerns, complaints and appeals processes articulated to applicants, students and staff?
6. Are roles and responsibilities defined and understood across all partner organisations?
7. How do we ensure consistency and clarity when multiple organisations are involved?
8. How accessible and understandable are our policies and processes for all students and applicants, including those with diverse backgrounds or needs?
9. How are outcomes from concerns, complaints and appeals reviewed and reported within our governance structures, and how does this support improvement?
10. To what extent do we use informal feedback and early resolution data to inform enhancement activities?
11. How do we ensure that our processes are proportionate and scalable for smaller providers if/when we enter into partnership agreements?
12. How do we ensure consistency across schools or faculties, particularly where devolved arrangements may lead to variation in practice, as highlighted by recent cases?
13. How do we evaluate the impact of staff development initiatives on the quality of the student experience?
14. How is the student voice considered in our concerns, complaints and appeals process design?
15. How do we make sure that our institutional complaints and concerns processes extend appropriately to applicants and prospective students as well as current students?

Scenarios

Scenario 1: A prospective student encounters confusion during the admissions process and seeks guidance on whether this constitutes a complaint

Context

A potential student applying to a provider is unsure whether their concern about inconsistent admissions communication qualifies as a complaint. The provider's website offers a structured section on concerns, complaints and appeals, with guidance that clearly signposts the complaints process relevant to recruitment, selection and admissions. However, the individual misses this, relying instead on an FAQ section, where the precise query they have is not featured.

The individual is feeling anxious and contacts the admissions team, who identifies the relevant process and advises them about the options for informal resolution (or resolution at Stage 1 or Stage 2 of the SPSO Model Complaints Handling Procedures as part of a formal, logged complaint), which the individual chooses. The admissions team addresses the issue promptly, and the student receives a clear explanation. The provider logs the feedback, and updates its admissions FAQs to improve clarity for future applicants.

Considerations

- Are opportunities for informal resolution before formal processes begin (or resolution at Stage 1 or Stage 2 of the SPSO MCHP as part of a formal, logged complaint) available across all processes, not just admissions?
- How easy is it for prospective students to identify the correct route for raising concerns about recruitment, selection and admissions?
- What support is available when an individual is unsure whether an issue should be raised as a complaint?
- How effectively do staff signpost applicants to the appropriate procedure and resolution options?
- How are issues identified through admissions enquiries used to improve information and guidance?

Scenario 2: A provider receives feedback from students indicating inconsistent handling of mental health disclosures during complaints processes.

Context

The team responsible for student complaints reviews recent cases and identifies that some indicators of neurodivergence are being missed. This could suggest that there are gaps in staff training. In response, the provider introduces a mandatory EDI module on mental health, disability and protected characteristics. The module includes guidance on recognising disclosures, responding sensitively, and staff responsibilities such as signposting support services.

The provider also updates its complaints policy to include a section on reasonable adjustments and third-party submissions. A review panel is established to monitor the impact of these changes, and feedback is gathered from students and staff six months post-implementation.

Considerations

- Do you support staff across your provider to recognise potential undisclosed issues related to mental health, disability and other vulnerabilities?
- How do you ensure staff know when and how to refer these issues to colleagues who are better placed to respond?
- How do you ensure your processes are robust, fair and free from bias or barriers to participation for all students? Where does oversight for this lie?

Key Practice b - Clear and transparent policies and procedures

Key Practice b

Clear and transparent policies and procedures

Concerns, complaints and appeals policies and procedures, including information about them, are clear and transparent to students, those advising them and those implementing the processes. Formal and informal stages of the processes are clearly articulated.

Providers need to ensure that concerns, complaints and appeals policies and processes are clearly defined, consistently implemented, and easily accessible to all stakeholders, regardless of programme delivery mode or study location. It is essential that providers clearly distinguish between concerns, complaints and appeals, and communicate these differences effectively to students, ensuring they understand which process applies to their situation and how to access the appropriate procedure.

For students, concerns, complaints and appeals policies must be presented in clear, student-friendly language and formats, distinguishing between regulatory documents and practical student-facing guides. Such policies and processes must be provided in jargon-free language to ensure ease of understanding.

To enable this, providers are strongly encouraged to adopt a range of accessible media, such as infographics, videos, or interactive web pages, to broaden reach and support diverse learning preferences. Key information should be clearly signposted at relevant stages throughout the student journey, rather than relying on a single point such as induction, with any significant changes communicated transparently and without delay.

Where a student is studying with a partner it should be clear how they access the concerns, complaints or appeals processes, including opportunities for escalation to the awarding body where appropriate.

For staff involved in the process, providers are expected to offer comprehensive regular training and consistent procedural guidance to those directly responsible for managing or supporting complaints and appeals.

For wider institutional staff, including student representatives, internal unions or support services, who may be approached to offer independent advice to students, they must be kept well-informed of any updates to relevant policies or procedures. This will ensure a shared and accurate provider-level understanding that supports student trust and coherence.

For other relevant stakeholders, where provision is delivered through partner institutions, it should include in the contractual arrangements the expectations for consistency and shared understanding of the complaints and appeals processes across all parties involved.

Information provision and record keeping

To support clarity and engagement, providers should provide information in a variety of accessible media, including simple visual tools such as process maps or step-by-step flowcharts. It is good practice to map each procedural stage, outline indicative timelines, clarify staff responsibilities, and outline potential outcomes. Providers should also explain the difference between informal resolution of concerns and formal escalation (or resolution at Stage 1 or Stage 2 of the SPSO MCHP as part of a formal, logged complaint) and help students identify appropriate grounds for submitting a complaint or appeal, potentially through case studies or FAQs. Other key considerations include addressing language barriers and being aware of different terminologies used across regions, countries or providers (for example, in partnership provision).

Providers also need to consider any requirements and legislation related to information, record keeping and evidence sharing, ensure compliance with data protection laws, and have clear reporting channels for data breaches.

Timeframes

Procedural timeframes align with those of external bodies responsible for independent oversight, and consultation with these bodies is recommended when policies or processes are being changed (see Key Practice c). Where delays occur, providers communicate clearly with students, explaining the reasons and expected timelines.

Purpose of the concerns, complaints and appeals processes

To manage expectations, guidance should explicitly address common misconceptions about what the concerns, complaints and appeal processes can achieve. Students should not be required to navigate separate, department-specific guidance for concerns, complaints, appeals, or academic issues. Instead, where possible, guidance is designed centrally, holistically and with consistent language, with student experience in mind.

Defined roles and responsibilities: Roles are clearly outlined to avoid confusion, especially in collaborative arrangements. Providers are also aware that identification of what each person can help with can be an issue for students with complex issues. For example, personal tutors may be the first point of contact for students but they may refer complex issues like mental health, academic, fitness to practice, harassment and bullying to others within the provider.

Notification of decisions and outcomes

Students should be provided with written notification of outcomes with clear explanations of decisions and the rationale behind them. Providers must also respect students' rights to escalate unresolved issues to external bodies such as the Office of the Independent Adjudicator (OIA) in England and Wales, the Northern Ireland Public Services Ombudsman, or the Scottish Public Services Ombudsman (SPSO) in Scotland. To support this, providers should communicate clear, structured steps to students both in the policy/process overview documents, and again when conveying a specific decision, including explicit guidance on the next steps available to them.

Reflective questions

1. Do we clearly distinguish between informal concerns resolution routes (or resolution at Stage 1 or Stage 2 of the SPSO MCHP as part of a formal, logged complaint) and formal complaints or appeals in our policy?
2. Do students receive consistent advice and support, regardless of which staff member or department they approach?
3. How easy is it for students and staff across the institution to find and understand our concerns, complaints and appeals processes?
4. How clearly do we signpost the process at key touchpoints along the student journey (for example admission, induction, assessment periods)?
5. Do our processes include timeframes that are both realistic and responsive to student needs?
6. How have we assessed and mitigated the risk of bias within the process?
7. How do we ensure that our staff members receive regular and up-to-date training on complaints and appeals policies?
8. How do we ensure our policies are clear, understandable and usable for students with additional learning needs, disabilities, or for those who are non-native English speakers?
9. Are we using tools such as flowcharts, infographics, FAQ pages, or interactive platforms to help students better understand the process? How could we leverage new or emerging technologies to enhance this?
10. What methods or tools are we using to evaluate transparency of information for different student groups? Are we identifying patterns in which groups engage - or don't engage - with the process?
11. How have we embedded student voice and feedback into the design, review, and refinement of our concerns, complaints and appeals processes?
12. To what extent have we co-created or tested our guidance with students to ensure it is truly understandable and user-friendly?
13. Do we seek input from independent areas such as the Students' Union, or equivalent, to understand different perspectives on the information we provide and student needs?

Scenario

An online postgraduate student raises concerns about her lecturer's teaching

Context

Maria, a postgraduate student studying online at a provider in England, was dissatisfied with how her lecturer delivered live-streamed seminars. The teaching style did not align with the learning outcomes in the course description, and she felt her concerns were not being acknowledged when she raised them during virtual sessions. While accessing her provider's student portal, Maria found a clearly signposted Concerns and Complaints section. The page featured a short explainer video with subtitles, a visual flowchart, and a downloadable step-by-step guide that explained the difference between informal concerns and formal complaints. Maria, who experiences anxiety, appreciated that the guidance included information about how to request reasonable adjustments, such as extra time to prepare a written statement or the option to communicate via email rather than live meetings.

Following the guide, Maria first attempted an informal resolution by contacting her module leader, explaining her concerns in writing. When this did not lead to a satisfactory response, she submitted a formal complaint through the online portal, using a form designed to be intuitive and accessible. Maria's case was promptly assigned to a trained and impartial Complaints Officer, who acknowledged receipt of her submission. The officer explained the process, checked whether Maria needed any additional support or adjustments, outlined the indicative timeline for reviewing the complaint and provided ongoing updates at each key stage. Throughout, Maria was also signposted to the provider's student support team for well-being advice to reduce any additional stress.

After a thorough review, the outcome was shared with Maria along with clear reasoning, and she was given information on how to request an appeal or escalation to further stages, as appropriate. Maria appreciated the clarity, fairness and empathy shown throughout this process.

Considerations

- Which formats for presenting complaints information (such as captioned videos, visual flowcharts, and written guides) are genuinely useful and accessible for students?
- How can a provider support and equip staff to respond appropriately to concerns raised informally during teaching sessions, particularly in online or live-streamed settings?
- How can feedback from complaints like Maria's be used to inform improvements in teaching practice, staff development and the delivery of online learning?
- How can the provider ensure that students have access to independent, informed sources of advice, such as the Students' Union?

Key Practice c - Meeting oversight bodies' requirements

Key Practice c

Meeting oversight bodies' requirements

Providers meet (where applicable) the national and international requirements of external bodies with responsibility for hearing or overseeing concerns and complaints.

Providers ensure compliance with all relevant national and international regulations, standards, or expectations established by external organisations or authorities that handle or oversee concerns, complaints and appeals. This could be the Office of the Independent Adjudicator (in England and Wales), the Scottish Public Services Ombudsman, the Northern Ireland Public Services Ombudsman, and other relevant regulatory expectations. Following the QAA's Quality Code may also help achieve this as it is mapped to ESG standards.

Providers also take into account the cultural and legal contexts, both nationally and internationally, when managing or addressing concerns, complaints and appeals. Additionally, providers build their systems around any time-sensitive or planning requirements of external bodies that may influence how concerns, complaints and appeals are handled.

Providers also meet expectations around the reporting and publication of information on concerns, complaints and appeals, ensuring appropriate transparency about processes, outcomes and trends, in line with regulatory or external body requirements.

Procedures

As set out in Key Practices a and b, providers establish clear, transparent and accessible procedures, published in an easy to find way, that are up to date and easily understandable. These procedures are in line with relevant OAI/ombudsman requirements. Roles and responsibilities are clearly defined to ensure accountability and clarity at all levels and stages. Processes should be fair, impartial and timely, aiming for effective resolution with a clear understanding of remit and what is reasonable. Providers communicate what frameworks or standards they are adhering to and why.

Data management

Providers understand external bodies' specific information requirements, how information should be recorded and what systems will be used for secure storage and access. In the context of transnational education (TNE) and international accreditation, alignment with the European Standards and Guidelines (1.7) will ensure that information on concerns, complaints and appeals is systematically collected, analysed and used to support effective decision making, quality assurance and enhancement. Providers ensure that data is accurate, relevant and fit for purpose, and that appropriate information is published to support transparency and meet the expectations of stakeholders and external bodies.

Signposting and communications

Good approaches involve clear signposting to external bodies and transparent communication about which entities are responsible for hearing or overseeing concerns, complaints and appeals (where applicable). Providers maintain up-to-date processes in alignment with external expectations and ensure transparency in how data is shared, stored, and accessed. Accountability should be embedded throughout the process.

Staff responsible for operating concerns, complaints and appeals processes, and designing those processes, understand the requirements for notifying applicants of when they can, and cannot, escalate their issue to the relevant oversight body. In England and Wales this will be via the Completion of Procedures (COP) letter, and in Scotland and Northern Ireland, the final investigation response with signposting. Providers inform applicants that the COP letter or final response represents the provider's definitive position, and that applicants cannot escalate externally before this point. Providers issue guidance that avoids implying that all outcomes generate such a letter - only the final internal position does.

Providers remain proactive in monitoring changes in regulatory requirements, laws, cultural norms, and both national and international contexts to ensure their policies and practices remain fit for purpose wherever their courses are delivered.

Reflective questions

1. How do we ensure that we are meeting all legal and regulatory requirements?
2. How do we ensure that students and staff are clearly informed about what to expect during the process?
3. Do we communicate decisions, timelines and outcomes clearly and promptly?
4. How do we make sure that we apply the same standards to students studying through partners or abroad as those studying at our institution?
5. To what extent are we resolving concerns, complaints and appeals within timeframes set by our institution and those expected by the relevant national oversight body?
6. How do we review and benchmark our processes against national guidance? How regular is this?
7. How do our processes reflect the diversity of our student body, including international and transnational education students?
8. How well do our concerns, complaints and appeals processes reflect the values and expectations of external bodies?
9. How do we know that students trust and understand the process?
10. How do we reflect on and apply learning from external body recommendations?

Scenario

A higher education provider receives a formal student complaint that cannot be resolved internally

Context

Although the provider completes its internal complaints process, several points of weakness become apparent: communication with the student is occasionally delayed, documentation lacks consistency across departments, and there is some uncertainty among staff about required timeframes.

After closing the internal stage, the provider informs the student of their right to escalate the issue to the relevant national external complaints oversight body. While the provider's policies are intended to align with the external body's requirements, the complaint highlights gaps between policy and practice - particularly around clarity of written explanations, accuracy of records and the timeliness of responses.

The external oversight body reviews the case and confirms that, although the provider broadly followed a fair and transparent process, there were avoidable weaknesses that created confusion and prolonged the student's experience. In response, the provider engages constructively with the feedback: reviewing workflow inefficiencies, improving staff training, updating templates for communications, and strengthening its overall quality assurance arrangements.

Considerations

- Do any of your internal processes fail to meet the standards you set for yourselves, and how might this impact the student experience?
- How effectively do staff understand and apply external oversight body requirements in day to day case handling?
- Which steps in your complaints workflow create the greatest risk of delay, miscommunication or inconsistent documentation?
- In what ways has any feedback from your oversight body challenged your assumptions about the fairness and transparency of your processes?
- What enhancements can be made to your concerns, complaints and appeals processes to avoid a recurrence of these issues?

Key Practice d - Actions resulting from concerns, complaints and appeals

Key Practice d

Actions resulting from concerns, complaints and appeals

Actions resulting from concerns, complaints and appeals are proportionate and enable cases to be resolved as early as possible.

Early resolution

Providers prioritise the early and informal resolution (or resolution at Stage 1 or Stage 2 of the SPSO Model Complaints Handling Procedures as part of a formal, logged complaint) of minor or straightforward concerns, complaints and appeals. This approach supports a more positive student experience and helps reduce the need for escalation to the formal stages. Some cases may not be suitable for informal consideration, and these cases are dealt with through the formal stages due to their seriousness and/or level of complexity.

Providers have systems in place to triage concerns, complaints and appeals at the point of receipt, enabling early identification of cases that require immediate attention. Those involved in triaging cases are trained to help recognise priority cases.

Staff training

Providers offer training and guidance to relevant staff, highlighting the benefits of trying to resolve concerns early and as locally (within their team/department) as possible. Staff responding to concerns, complaints and appeals should have a clear understanding of their individual role and responsibility to take action to resolve them.

Consideration and decision making

Providers consider cases thoroughly, in proportion to the issues raised. Cases can be moved between processes to ensure the most proportionate and timely outcome. This might include moving to more informal processes.

Some cases may require quick decision making. Providers therefore have mechanisms to identify and prioritise those requiring immediate attention, including cases involving a risk of serious harm or significant distress. These mechanisms also include referral to safeguarding where appropriate. Providers ensure that staff are able to recognise indicators of vulnerability or distress and act appropriately, including escalating concerns and signposting to relevant support services.

Throughout the process, communication with students is clear, timely and handled with sensitivity, particularly where individuals may be experiencing distress. Providers take a compassionate approach, ensuring that processes do not exacerbate harm and that students feel heard, supported and treated with dignity.

Cases are reviewed by colleagues with the appropriate expertise, specialist knowledge and skills to make well informed decisions. As cases progress through stages, they may be considered by colleagues with greater levels of relevant expertise and/or the appropriate level of decision making authority, depending on the nature and complexity of the issue. Requests for evidence should be proportionate, to avoid burdening the student. Consideration should involve no more stages than necessary to ensure a fair outcome. Case management systems can help to log, track and monitor concerns, complaints and appeals, and provide management information to identify trends and support effective oversight (see Key Practice f).

Flexibility and discretion for decision makers

Providers operate their processes flexibly to allow for appropriate action in unique circumstances that are beyond the scope of regulations, guidance and other normal decision-making frameworks. Processes should explain clearly what is meant by such circumstances without setting exhaustive criteria, to enable decision makers to use appropriate discretion. Providers also allow opportunities to negotiate a satisfactory solution with the student at any stage of the process.

Providers may offer alternative complaint resolution approaches for complex cases, such as mediation, conciliation or facilitated discussions, to support mutually satisfactory outcomes and avoid unnecessary escalation.

Decisions and actions

When a complaint or appeal is successful, the aim is usually to return the student to the position they would have been in if the issue had not happened. If that is not possible, the provider will need to consider other ways to put things right. For group complaints or appeals that are successful, the provider should offer remedies that are fair and consistent for everyone involved, while also considering each student's individual situation. Providers should also consider whether others who were not directly part of the complaint or appeal may have been affected by the underlying issue, and whether it is appropriate to extend remedial action more widely.

Where the outcome of a concern, complaint or appeal represents the provider's final position, the decision notification comes from an appropriate senior staff member.

When taking action in response to a concern, complaint or appeal, providers consider not only the actions required to resolve the individual case, but also consider any actions required to address systemic issues that have been identified and to prevent the issue recurring in future. Clear ownership of these actions is established, with named individuals or teams responsible for delivery, and appropriate oversight to ensure actions are implemented and completed.

Where a provider offers an apology, they do so genuinely and acknowledge what has gone wrong. They explain what they will do to put things right and to minimise the likelihood of a similar issue recurring.

Enhancement

Concerns, complaints and appeals outcomes can offer valuable opportunities for critical evaluation of processes and decisions, and, therefore, enhancement. See Key Practice f for more guidance.

Reflective questions

1. How do we monitor and analyse the time taken to resolve concerns, complaints and appeals to ensure they are being handled within set timeframes? Who is responsible for this?
2. How do our procedures enable cases to be resolved as early as possible, with the lowest level of intervention?
3. What approaches do we take when cases are not handled within set timeframes? How do we keep students informed when delays occur?
4. How do we ensure that the level and type of evidence requested is proportionate to the seriousness and complexity of the issue?
5. How do we ensure actions taken when considering concerns, complaints and appeals are proportionate to the issues raised?
6. How do we ensure fairness and consistency when offering remedies to students that are affected by similar issues? What about in group complaint scenarios?
7. How do we know if staff are clear on their roles and responsibilities when it comes to early resolution of concerns, complaints and appeals?
8. How do we support staff to make decisions around appropriate and proportionate action in response to concerns, complaints and appeals?
9. How confident do our teams feel to give an apology if appropriate? Who, if anyone, oversees this?
10. Do our processes enable staff to consider alternative approaches to resolving concerns, complaints and appeals? How effective have these approaches been?
11. How do we ensure that concerns, complaints and appeals requiring urgent attention are identified and prioritised, and is this effective in supporting timely resolution?
12. How do we effectively signpost students to early resolution, and what methods are used to check that students understand and can access this process when needed?

Scenario

A disabled student makes an urgent appeal

Context

A disabled student submits an urgent appeal as they were dissatisfied with the outcome of a reasonable adjustment request for a practical assessment, which is scheduled to take place the following week.

Upon receipt, the case is flagged as urgent due to the imminent assessment date and the potential for significant disadvantage to the student if not resolved quickly. The provider's triage system, supported by trained staff, recognises the need for immediate attention.

The case is escalated to a senior member of staff with expertise in reasonable adjustments and disability support. The provider prioritises early resolution, aiming to avoid unnecessary escalation and minimise distress for the student.

The provider operates flexibly, allowing for a rapid review of the appeal outside the standard timescales. The student is invited to discuss their needs informally with the relevant team, and the provider negotiates a solution that enables participation in the assessment.

The provider communicates clearly with the student about the steps being taken to review the appeal, expected timelines, and any supporting evidence required for the appeal (kept proportionate to avoid burdening the student). The student receives the outcome in line with the timelines stated.

After resolving the case, the provider reviews the process to identify any systemic issues, such as gaps in staff training or unclear processes, and takes steps to prevent recurrence.

The student receives the necessary adjustment in time for the assessment. The provider follows up with the student to further discuss future reasonable adjustments and to explain what will be done to inform future practice.

Considerations

- What would you do in this situation?
- What are the risks associated with this scenario and how might you mitigate them?
- Who needs to be aware of this issue and who is responsible for resolving it?
- How would you ensure that follow-up actions are monitored and evaluated?

Key Practice e - Monitoring and reviewing processes

Key Practice e

Monitoring and reviewing processes

Processes for concerns, complaints and appeals are monitored and reviewed to ensure they promote enhancement throughout the provider and operate as intended, to the benefit of students and staff.

To support a culture of continuous improvement and ensure fair and effective handling of concerns, complaints and appeals, providers regularly monitor and review the associated processes. This means not only verifying that policies are being followed, but also assessing whether the processes themselves are fit for purpose, comply with oversight bodies' requirements, align with the provider's core values, such as accessibility, inclusivity, sustainability and enhancement, and genuinely serve the needs of students, staff and the provider. This includes monitoring and analysing the time taken to resolve cases to ensure processes operate effectively and within expected timeframes.

How may providers approach this?

A structured process review schedule can be an effective tool for achieving this. Such a schedule should involve regular and systematic assessments with clear criteria to evaluate process efficiency, relevance, fairness and fitness for purpose. Importantly, the review should not be limited to those who administer the processes; incorporating independent observers or cross-departmental participants may assist in ensuring balanced perspectives and objective scrutiny. Those observers would first need to understand the case handling processes.

Providers may find it useful to conduct both retrospective reviews of decisions - focusing on the consistency, impartiality, and clarity of outcomes - and forward-looking reviews of processes, examining whether systems still meet current needs and expectations. Providers, in meeting any mandatory national or international requirements set by external oversight bodies, may identify patterns or themes across cases and address them proactively to minimise future concerns, complaints and appeals.

Governance structures play a critical role in reinforcing accountability and driving improvements. Mechanisms such as annual monitoring reports, performance indicators, and oversight by relevant senior committees or boards ensure transparency and responsiveness. It is vital that these bodies are not only reviewing outputs but are engaged with the operational assurance that the systems are delivering fair and effective outcomes. Providers should also ensure integration with other key teams, such as equality, diversity and inclusion (EDI), data and insights teams, and student support services, to ensure that findings are contextualised and acted upon in meaningful ways.

Sharing the insights and lessons learned (appropriately anonymised) across departments and with relevant stakeholders also helps to embed transparency and drive awareness of institutional responsibilities and opportunities for change.

Providers are encouraged to cultivate a review culture that welcomes reflection and uses it as an opportunity for innovation, rather than treating it as a compliance exercise. Approaching reviews with openness can help providers better understand how the process is functioning in practice and ensure it continues to deliver fair, inclusive and constructive outcomes that benefit the entire learning community. Incorporating feedback from students can help inform reviews and therefore future enhancement.

Reflective questions

1. Do we have a defined and consistently followed schedule for reviewing key processes and policies?
2. Are our review criteria clearly stated, transparent and applied consistently across different reviews?
3. Have we identified the most appropriate individuals or teams to carry out the review, ensuring a balanced and objective perspective?
4. Are decisions made through this process demonstrably consistent, fair and free from bias?
5. Is the process still appropriate and effective in the current context (for example, evolving learning models, digital systems), and does it still align with our institutional values, such as accessibility, inclusivity and equity?
6. Have we considered how the process supports students and staff with diverse needs, and are there alternative formats or support mechanisms in place to eliminate potential barriers?
7. Is the process achieving its intended outcomes without creating unnecessary burden? If not, how might it be improved?
8. How are we communicating process updates and outcomes to stakeholders - who needs to be informed, what should be shared, and how frequently?
9. How is information about the process being recorded and managed? Do we have a central log or tracking system, for instance?
10. Are there clear distinctions between our monitoring and review practices, and how do these activities inform and complement each other?
11. How do we ensure that follow-up actions arising from concerns, complaints and appeals processes are monitored and evaluated?
12. How do we incorporate external perspectives (such as sector benchmarks, external examiners or experts, or independent review) to test, validate and enhance our processes?
13. How are we fostering a culture that values continuous monitoring, learning and enhancement across teams and departments?
14. Are staff and students encouraged and supported to provide feedback that informs process improvement?
15. Are enhancement efforts aligned with wider strategic priorities, such as digital transformation, equity or student success?

Scenario

A higher education provider identified rising delays in complaint responses and implemented targeted short and long-term improvements

Context

Quarterly monitoring reports of a medium-sized higher education provider identified a sustained year-on-year increase in late responses to formal complaints, prompting concern among governance bodies and student representatives about the provider's ability to meet regulatory expectations and uphold student trust.

A process review team was formed, comprising representatives from student services, academic departments and the EDI team to ensure objective scrutiny. The review team undertook a retrospective analysis of complaints data, staff interviews and case logs over the past 18 months.

Key findings included:

- delays due to poor coordination during peak academic periods
- limited staff availability caused by annual leave and a lack of trained backup personnel
- variability in training across departments, leading to inconsistency in handling timelines.

Based on the review, the provider adopted a multi-pronged enhancement plan.

Short-term solutions include:

- developing standard scripts and guidance for frontline staff to empower them to manage low-risk issues early
- creating a pool of trained complaints case handlers from across the provider to provide cover during peak periods and staff absence
- introducing mandatory complaint-handling training, with modules on time management, communication and regulatory compliance.

Long-term enhancement:

- adjusting case management software to include automated reminders, escalation alerts, and a dashboard to monitor progress against timeframes in real time.
- extending these system improvements to other departments to support consistency and efficiency across the provider.
- reviewing relevant governance mechanisms to ensure that concerns, complaints and appeals are monitored and reviewed centrally.

During the next review, it was established that the proportion of complaints handled within the agreed timeframe had risen from 65% to 90%. The proportion of cases resolved through informal channels had increased by 35%, helping to ease pressure on formal routes. Staff confidence in managing complaints had improved significantly, as measured through internal surveys, and student satisfaction with the complaints process also rose.

Considerations

- What warning signs might have been overlooked in earlier reporting cycles?
- Was the review team's composition sufficiently objective and cross-institutional?
- What should the role of institutional leadership be in ongoing oversight of this area?
- What learning could be taken to improve monitoring systems going forwards to allow earlier intervention?

Key Practice f - Using outcomes to develop and enhance teaching and learning and the student experience

Key Practice f

Using outcomes to develop and enhance teaching and learning and the student experience

Outcomes from concerns, complaints and appeals are used to develop and enhance teaching and learning and the wider student experience.

Providers use learning from the outcomes of concerns, complaints and appeals to develop and enhance teaching and learning and the wider student experience. Effective records systems enable outcomes to be analysed, identifying those that could develop and enhance teaching and learning and the wider student experience to be shared through mechanisms such as forums and committees, closing the feedback loop (see Key Practice e).

Recording mechanisms

Formal outcomes of cases are recorded in a robust manner with sufficient and proportionate detail. Outcomes are clearly communicated, including any decisions to provide consistency, transparency and fairness of outcomes. Consistent approaches to recording and categorisation of outcomes allow for year-on-year comparisons in relation to numbers, demographics, and types and outcomes of cases, analysed on the basis of course and faculty with focused learning, accountability and closing of feedback loops.

Providers record actions taken to resolve complaints and appeals to support analysis and enhancement. Recording concerns that are resolved locally and informally (or at Stage 1 or Stage 2 of the SPSO MCHP as part of a formal, logged complaint) may pose a challenge over formal complaints and appeals: periodically bringing together those responsible for handling lower-level concerns to share experiences is one way of meeting this challenge.

Review and evaluation

Providers review and evaluate outcomes of concerns, complaints and appeals considered internally (and externally by independent ombudsman where relevant) to identify systematic issues, interventions and lessons learned. The outcomes of theses reviews are shared with senior management involved in the process, as well as governance structures, such as education committees and senior boards, with overall responsibility for programme delivery and quality. These may be formal reports and analyses of concerns, complaints and appeals so that themes are identified, and the implementation of remedies are systematic and go across the provider. Improvements and recommendations may also be made to regulations and processes, and support operational and strategic planning.

There is a risk that sharing outcomes by way of high-level anonymous data through governance structures and reports can give rise to a blame culture or increase lack of transparency. It is important to recognise this risk and address it by making the case that considering outcomes presents a positive opportunity to develop, reduce concerns, complaints and appeals, and enhance teaching and learning and the wider student experience. It can also help create an open culture and partnership with students and staff, building trust in processes through transparent outcomes.

Issues to consider

When implementing practice as a result of reviewing trends in concerns, complaints and appeals, providers should consider the inconsistencies that can occur across outcomes. Sometimes outcomes may differ as a result of addressing specific matters which are unique to individuals or particular circumstances; understanding the context is therefore key.

By recording and categorising complaint and appeal outcomes consistently, providers can maintain accurate data, spot trends, and identify outliers or systemic issues. This also makes it easier to track outcomes that influence systemic change and reduce recurring or one off fixes. Consistent and transparent outcomes can also help where internal complaints are reviewed by an external ombudsman.

Providers should be aware of how outcomes are used to enhance teaching and learning in different national contexts and ensure ownership of outcomes are clear from the onset, including, where applicable, the remit and scope for local flexibility across different contexts when resolving concerns, complaints and appeals.

Providers are cautioned against viewing an absence of complaints as a sign of a healthy system.

Finally, providers should review their practices regularly to ensure they remain fit for purpose, and that outcomes can be positivity utilised to develop and enhance teaching and learning and the wider student experience.

How to use outcomes effectively

Effective use of outcomes to inform quality improvement is essential to continuous enhancement. Key aspects of doing this well include the following.

Analyses of outcomes are carried out by a mix of academic and professional services staff, with relevant skills, seniority and experience to extract trends from outcomes and recommend, if not directly enact, change.

Outcomes from concerns, complaints and appeals directly inform change across the provider. Actions are monitored as part of quality assurance and enhancement activity (see Key Practice e). Concerns, complaints and appeals data informs staff development and training, particularly where patterns emerge within specific departments or areas of operation. Where feasible, changes to processes are considered within the academic year rather than deferred until annual reviews, allowing for a more agile and responsive approach to improvement. There is clear communication of any changes to policies and processes resulting from outcomes, supported by a feedback loop that shares complaint themes, outcomes and resulting enhancements. Providers may wish to consider a 'you said, we did' approach.

Data pertaining to outcomes is used to identify and analyse trends with findings actively disseminated to relevant staff. This includes communications to academic faculties through appropriate channels (for example, through faculty committees/boards, or quality teams) with consideration given to establishing standing items on agendas. Such information should also inform staff development and training, particularly where patterns emerge within specific departments or areas of operation.

Providers integrate data collection and analysis across relevant activities. This includes collating information from sources such as accreditation reporting, PSRB reporting, and internal monitoring to identify trends and emerging issues. Taking an integrated approach enables providers to identify concerns early and address them proactively and informally, reducing reliance on formal complaint processes to highlight or resolve issues. Providers also ensure that data is handled in accordance with GDPR and other applicable data protection requirements, including where operating internationally.

Providers' policies are regularly reviewed and updated in response to outcomes and sector best practice (see Key Practice e).

Where providers have partnerships and/or franchised arrangements, there must be clear processes for using outcomes from concerns, complaints and appeals across all collaborative provision, with scope for local flexibility, as appropriate.

Reflective questions

1. How do we demonstrate that outcomes from concerns, complaints and appeals have led to improvements?
2. How do concerns, complaints and appeals outcomes inform curriculum review, assessment practice and student services?
3. How are we celebrating successful learning and change arising from complaints? For example, a department might share a reflective piece about how the change made in response to a complaint has improved practise.
4. How do we communicate improvements back to the student body?
5. Is relevant data being captured and analysed to identify systematic trends?
6. What part do outcomes play in supporting operational or strategic objectives or key performance indicators?
7. How do we involve student feedback when changing processes in the light of concerns, complaints and appeals outcomes?
8. Do we ensure that concerns are communicated in a timely way, enabling teams to make in-year changes where possible, or proactively address early signs rather than wait for escalation to a formal complaint?
9. How is concerns, complaints and appeals data disseminated beyond the responsible team, to ensure it informs and drives enhancement across our institution?
10. How are concerns, complaints and appeals considered as a valuable teaching and learning opportunities and a positive source of feedback?
11. How are senior leaders involved or accountable for institutional learning from the outcomes of concerns, complaints and appeals?
12. What feedback mechanisms are used to inform the wider student body of improvements made to learning, teaching and student experiences that were as a result of concerns raised or outcomes of complaints and appeals.
13. How are we using outcomes from concerns, complaints and appeals to drive improvement and to address any trends or wider issues?
14. How do we evaluate the impact of staff training on the effectiveness of concern, complaint and appeal resolution, and what evidence do we collect to support this analysis?

Scenario

A higher education provider receives several concerns from students about an unclear marking rubric on a core module

Context

A higher education provider begins receiving informal concerns from students enrolled on a large undergraduate module. Several students report that the marking rubric is unclear, particularly in how marks are allocated for analysis versus description. Some students feel disadvantaged because different markers appear to interpret the criteria inconsistently.

Following its established processes, the provider investigates and finds that the rubric was ambiguous and had been interpreted in different ways by different markers. The complaint is upheld, and the provider clearly communicates the outcome and available remedies to students.

In its next termly meeting, the Teaching and Learning Committee reviews the complaints and appeals report and notes that issues with rubric clarity have appeared elsewhere. The level of concerns also prompts the provider to review the student voice feedback mechanisms, as this could indicate they are not working as effectively as they should.

Recognising this as a systemic concern, the committee commissions a long-term project to develop a provider-wide policy for marking rubrics, alongside staff guidance and training. In time, this leads to clearer assessment expectations and more consistent marking.

Considerations

- How would your own processes detect repeated concerns early, before they escalate into multiple formal cases?
- How do you know that your mechanisms for listening to the student voice are operating correctly?
- How do you ensure that your staff understand and apply marking rubrics consistently?
- How do you use concerns, complaints and appeals data to identify patterns or systemic issues across programmes or modules?
- What mechanisms do you have to ensure that lessons learned lead to genuine and sustained quality improvement?

Terminology

Term	Definition
Appeal	A request for a review of a specific decision, usually made by an academic, admissions, progression or disciplinary body. Appeals consider whether the decision-making process was fair, consistent and properly applied. A student might appeal against a final assessment or degree classification outcome, a progression decision, or an academic misconduct penalty. Appeals are not limited to students; an applicant to a course of study may make an appeal against a provider's decisions to refuse admission.
Complaint	A formal expression of dissatisfaction about the standard or quality of a service or learning experience, about something the provider has done or failed to do, or about how an individual has been treated within the provider's community. Complaints focus on processes, services and treatment, and not on academic judgement. A student or applicant might make a complaint about poor communication, inadequate supervision or academic support, failure to implement agreed reasonable adjustments, or poor facilities, accommodation, or placement support. Complaints may also relate to the behaviour or conduct of staff or other students, including how an individual has been treated in social, residential or other non-academic settings.
Concerns	An opportunity for early, informal resolution of issues before they escalate or a formal process becomes necessary (or resolution at Stage 1 or Stage 2 of the SPSO MCHP as part of a formal, logged complaint). Concerns may be raised verbally, by email, or through informal feedback mechanisms. A student or applicant might raise a concern if, for instance, lecture slides are not uploaded on time, an admissions enquiry has not been answered, or a placement briefing session was cancelled at short notice. The term 'concerns' also has a specific meaning in Scotland and Wales, where it refers to regulatory quality assurance issues of sufficient systemic seriousness or persistence to warrant formal scrutiny. In this guidance, 'concerns' should be interpreted in its everyday sense of a minor issue or complaint capable of early resolution.
Escalation	Moving the case to the next stage of the process (for example, from informal to formal, or from stage 1 to stage 2). 'Progression to the next stage' is a more neutral/student-friendly phrasing sometimes used instead of 'escalation'.

Term	Definition
Review / request a review	Often used when asking for an independent reconsideration of how a decision was made rather than a full re-hearing.
Referral (to an external body)	Used once internal processes are exhausted (for example, referral to the OIA, SPSO, NIPSO).

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Continue exploring the Advice and Guidance

This publication is part of a suite of Advice and Guidance that accompanies the UK Quality Code for Higher Education 2024.

Select the Principles below to access additional guidance, practical considerations and resources that support the enhancement of quality and the maintenance of academic standards.

Principle 1
Taking a strategic approach to managing quality and standards

Principle 2
Engaging students as partners

Principle 3
Resourcing delivery of a high-quality learning experience

Principle 4
Using data to inform and evaluate quality

Principle 5
Monitoring, evaluating, and enhancing provision

Principle 6
Engaging in external quality and standards review and accreditation

Principle 7
Designing, developing, approving, and modifying programmes

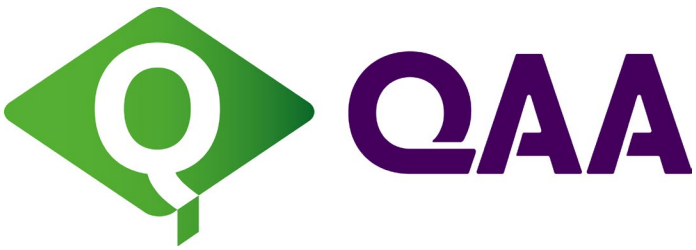
Principle 8
Operating partnerships with other organisations

Principle 9
Recruiting, selecting and admitting students

Principle 10
Supporting students to achieve their potential

Principle 11
Teaching, learning and assessment

Principle 12
Operating concerns, complaints and appeals processes



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