

Comments, Compliments and Complaints Policy

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1. Purpose

This policy outlines how the organisation deals with comments, compliments, and complaints from anyone interacting with the organisation. The aim is always to achieve resolution of the service user's complaint at the earliest stage possible.

2. Audience

This policy is intended for:

- Service users
- Supporters & Stakeholders

3. Related Documents

This policy should be read alongside:

- code of conduct
- withdrawal and refusal of Service policy
- confidentiality policy
- data protection & information sharing policy

4. Definitions

For the purposes of this policy, the following definitions apply:

4.1 Service User

The individual who receives support from the organisation. This includes survivors and their family or friends. The terms 'person', 'client' and 'victim' are included also in this definition.

4.2 Supporters & Stakeholders

People who are involved in our services but do not necessarily receive support from the organisation

4.3 Complaint

We define a complaint as "an expression of dissatisfaction, however made about actions taken or a lack of action by the organisation, or someone acting on behalf of the organisation."

4.4 The Organisation

For the purposes of this policy 'the organisation' refers to The Birchall Trust.

5. Background

The organisation is committed to ensuring that its work is of the highest quality. We believe that through effective management and investigation of comments, compliments, and complaints we can identify learning to achieve high quality work and continuous improvement as an organisation.

Compliments, complaints and comments are valuable, and important to the organisation, they enable us to understand from our supporters and stakeholders what we do well and the positive difference this makes, provide positive feedback to our teams, and influence the continued development of the services we provide. They help influence the organisational decisions we make; help maintain the standards of our activities, raise issues and lead to change for the better.

We recognise that there will be times when our trustees, staff, and volunteers or third parties working on our behalf make mistakes or get things wrong. Where this happens and where we receive a complaint, we will always take this seriously, record and report on it internally and externally if required, and deal with it in a timely manner.

6. Guiding Principles

We recognise that comments, compliments, and complaints are an important part of service user feedback. We want to ensure that the process for feedback is fair, easy, and transparent as possible and that it is accessible to all regardless of age, disability, gender identification, ethnicity, belief, or sexual orientation.

We understand that speaking up can be difficult for some service users and we will ensure that in doing so it will not harm or prejudice the service that they receive, we will treat service users with respect, courtesy and support them throughout the process.

We will always take steps to maintain the confidentiality of personal information. We will only disclose it to people who need to look into a complaint, and, rarely, to others where we are legally permitted to do so.

Complaints will be dealt with in a timely and appropriate way, communication with service users is essential so that they understand the outcome and any action that is to be taken in light of the outcome.

Learning from comments, compliments and complaints will be used to improve the organisation's work and drive forward the culture of continuous improvement and reflective learning.

All comments, compliments, complaints will be recorded and reviewed at least annually by the CEO.

Contact details for the organisation can be found at [Appendix A – Who to contact](#)

7. Data Protection

The organisation will keep a written/digital record of any complaints – both informal and formal- received and comply with the Data Protection Act and General Data Protection Regulation. Records will be kept confidential, and not be released externally to the organisation unless statutorily obliged or requested by the service user.

8. Informal complaints

This is the informal stage of the process where an individual may wish to discuss their concern with their counsellor, other member of staff or trustee.

All complaints should be taken seriously and where possible a resolution found which meets the satisfaction of the complainant. This should be recorded and passed onto the Head of Services or CEO to either reflect on the resolution or to find a resolution to the issue.

If the complaint is being made on behalf of the service user it must first be verified that the person has permission to speak for the service user, especially if confidential information is involved. It is very easy to assume that the advocate has the right or power to act for the service user when they may not. If in doubt it should be assumed that the service user's explicit permission is needed prior to discussing the complaint with the advocate.

If the complainant is not willing to accept the resolution, then they should be advised to put their complaint in writing.

9. Formal Complaints

9.1 Stage 1

Written complaints will initially be dealt with by the Head of Services. Should the Head of Services be the subject of the complaint, the complaint may circumvent Stage One and commence at Stage Two.

The Head of Services will acknowledge receipt of the complaint within five working days and carry out a full investigation into the circumstances surrounding it.

The target time for responding in full to a complaint is 25 working days, though, if the issue is complicated, any delay must be explained.

If the complaint is upheld, the complainant should receive a full apology and, where appropriate, be given details of any action that the service was able to take to retrieve the situation or at least put things right for the future.

The letter sent to the complainant informing them of the outcome of the investigation into their complaint at Stage One must also inform them of their right to ask for a review of the investigation should they not be satisfied with the outcome of stage one. Details of how to do this must be provided.

This is the end of the matter if the outcome is accepted – reviews will go to Stage 2 of the process.

9.2 Stage 2

The Chief Executive Officer will check that the investigation so far has been carried out fully and properly. She or he will check that the fundamental point of the complaint has been addressed and look at any outstanding issues raised by the complainant.

The Chief Executive Officer will acknowledge receipt of the complaint within five working days and carry out a full investigation into the circumstances surrounding it.

The target time for responding in full to a complaint is 25 working days, though, if the issue is complicated, any delay must be explained.

The letter sent to the service user must also inform them of their right to ask for an appeal of the decision which will be carried out by the Chair of the Trustee Board, should they not be satisfied with the outcome of Stage Two. Details of how to do this must be provided.

9.3 Appeal

At the Appeal, The Chair of Trustees will appoint a panel consisting of at least 2 members of the Board who will review the original complaint, ensure that the complaints process has

been carried out properly and fairly; and check that the fundamental issues have been investigated fully.

The target time for responding in full to a complaint is 30 working days, though, if the issue is complicated, any delay must be explained.

The review will produce a full response, which will contain sufficient information to show that the complaint has been fully investigated, and an apology where appropriate.

If the complainant is not satisfied with the outcome of the appeal, then they have the right to refer their complaint to the Charity Commission [here](#)

10. Fundraising Activities




If a complainant is dissatisfied with the organisation's response to a specific fundraising complaint, then they can contact the Fundraising Regulator [here](#)

11. Version History

It is recommended that this document is reviewed at minimum every 3 years. However, legal, or technological updates may need to be incorporated more frequently.

Version	Date	Approved by
1.0	September 2021	Board of Trustees

Appendix A – Who to contact

Complaints relating to the CEO or Trustee ONLY	ALL OTHER Compliments, Comments & Complaints
<p style="text-align: center;"><u>FAO Chair of Trustees</u> The Birchall Trust 60 Hartington Road Barrow in Furness Cumbria LA14 5SR</p>	<p style="text-align: center;"><u>FAO Head of Services or CEO</u> The Birchall Trust 60 Hartington Road Barrow in Furness Cumbria LA14 5SR</p>
	<p>01229 820828</p>
	<p>Feedback or Complaints (birchalltrust.org.uk)</p>
	<p>enquiries@birchalltrust.org.uk</p>

Appendix B – Complaints Form

Name of Person Making Complaint	
Contact Details	
Date	
Time	
Type of Complaint	Verbal/Informal Written/Formal
Nature of Complaint	Organisational Policy Service delivery Individual Other
What is the complaint – please tell us as much information as you can.	
What action has already happened to address the complaint	
Outcome	Upheld Not Upheld
Was the complainant happy with the outcome	Yes No
Has the complainant been advised to escalate to the Head of Services or CEO	Yes No
Name of person completing form	
Date	
Signature	
Date Complaints Log updated	