

1 Introduction

1.1 Foundation Scotland welcomes feedback, both positive and negative on the services it provides. These comments are regarded as a useful tool to enable a review and improvement of the services we provide.

2 Scope

2.1 This policy applies to individuals or groups external to the Foundation. Complaints or concerns from employees should be managed through the Grievance Policy. Serious concerns about malpractice and wrong-doing in the Foundation should follow the Whistleblowing Policy.

3 Abbreviations and Definitions

Abbreviations

- CEO Chief Executive Officer
- CFOO Chief Finance and Operations Officer
- LMS Foundation Scotland's Learning Management System

Definitions

• A Complaint - A complaint arises when an individual or group is dissatisfied with the service they have received from the Foundation.

4 Policy

Action in the event of a complaint

- 4.1 Details should be sent via the complaints handling link on the FS website.
- 4.2 A complaint should include:
 - What the complaint is about.
 - The name[s] of our employees, and any other people, involved.
 - When the event about occurred and if it is still happening.
 - If anyone at the Foundation has been contacted about the concern, e.g. expressing dissatisfaction, before making a complaint.

How a complaint is received

- 4.3 A complaint will be acknowledged within five working days from the date of receipt advising the complainant who is dealing with it and when to expect a fuller response.
- 4.4 The person responsible will investigate all aspects of the complaint, allowing others involved to make their contribution, possibly returning to the complainant for supporting information or evidence.
- 4.5 The person responsible might also seek an independent review by a third party.

- 4.6 A response with details of any action taken or recommendations for further action will be sent to the complainant within the proposed timescale. If it is not possible to provide a full response within this time, they will be advised, and an interim response given including details of action still to be taken.
- 4.7 The Risk Committee of FS reviews on a quarterly basis the status of any complaints received by the Foundation and ensures their timely resolution.

What to do in the event of remaining dissatisfied by the FS response

- 4.8 Should a complainant remain dissatisfied, they may ask for the complaint to be reviewed by the CEO. If the initial response was from the CEO, then the complainant may ask for the complaint to be reviewed by the Chair of Trustees.
- 4.9 If the complainant is dissatisfied with the decision, the Foundation is regulated by the Office of the Charity Regulator and further information about how to complain can be found at https://www.oscr.org.uk/contact-oscr/charity-concern-form/.
- 4.10 Complaints about any fundraising activity the Foundation may undertake can be made to the Scottish Fundraising Standards Panel, here: <u>https://www.goodfundraising.scot/</u>.

Additional information

4.11 The Foundation has an online complaints system which ensures that all complaints are logged and automatically notified to designated persons within the Foundation who are responsible for ensuring that the complaint is responded to.

Reporting positive stories to us

4.12 In addition to complaints, the Foundation would like to hear any positive comments. Sharing these will enable the Foundation to benefit and develop from any ideas or processes that have been particularly helpful or successful.

5 Roles and Responsibilities

- The CFOO is responsible for ensuring that training on customer care is made available to all employees and that the complaints software functionality is sufficient and that reports of complaints made are available to the Board.
- Employees are responsible to adhering to the Policy and fully co-operating with any complaints investigation process.

6 Training

• For our employees there are a range of materials on our LMS on customer care.

7 References

• There are no additional external references related to this Policy.

8 Review

8.1 This policy is reviewed, approved, and endorsed by the Board of trustees. It is updated when required to ensure that it reflects best practice for the Foundation, or every 24 months whichever is the soonest.