

COMPLAINTS POLICY AND PROCEDURE



HUDDERSFIELD TOWN FOUNDATION

The Club's Official Charity

At Huddersfield Town Foundation, our values are at the heart of everything we do. They guide our decisions, shape our culture, and define how we work together to make a meaningful impact in our community. All our policies are grounded in the principles that unite us and drive us forward:

*We Stand Together;
We Go the Extra Mile;
We Lead with Purpose;
We Keep Learning;
We Show the Terrier Spirit.*

Our policies reflect our shared commitment to these values and set out the standards and expectations that support our collective goals. Together we contribute to an environment that is impactful, inclusive, and driven by purpose.

Version Control

Approved by	Sam Dainty
Position	Chief Executive Officer
Version	1.0
Approving Body	People and Culture Committee
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Mandatory Review	August 2029, or earlier should legislation require it.

COMPLAINTS POLICY

1.0 Introduction

- 1.1 At Huddersfield Town Foundation, we are committed to delivering high-quality services and creating positive experiences for all participants, beneficiaries, partners, volunteers, employees and stakeholders.
- 1.2 We recognise that, despite our best efforts, there may be occasions where individuals are dissatisfied with an aspect of our services, decisions, communications or conduct.
- 1.3 We view complaints as an opportunity to learn, improve and strengthen our services. We are committed to handling complaints fairly, consistently, confidentially and in a timely manner.
- 1.4 This policy and procedure document outlines the Foundation's approach to receiving, investigating and responding to complaints.

2.0 Who is responsible for this policy?

- 2.1 The Chief Executive Officer has overall responsibility for this policy and for ensuring that complaints management arrangements are implemented, monitored and reviewed effectively.
- 2.2 Managers are responsible for addressing complaints within their area of responsibility, maintaining appropriate records and escalating serious or recurring concerns.
- 2.3 Employees and volunteers are expected to cooperate with complaint investigations, treat complainants respectfully and support any learning or improvement actions identified.
- 2.4 Trustees provide oversight of significant complaints, emerging themes and the effectiveness of the complaints process.

3.0 What is covered by the policy?

- 3.1 This policy applies to complaints received from participants and beneficiaries, parents, carers and family members, members of the public, partner organisations, funders and stakeholders, volunteers, employees and Trustees, where the matter is not covered by another internal procedure.

- 3.2 Complaints may relate to the quality or delivery of services, the behaviour of employees, volunteers or representatives of the Foundation, communication or customer service standards, decisions taken by the Foundation, accessibility or equality issues, or a failure to meet expected standards.

4.0 What is NOT covered by the policy?

- 4.1 This policy does not apply to safeguarding concerns, which must be reported immediately in accordance with the Foundation's Safeguarding Policy and procedures.
- 4.2 Individuals should use the Foundation's Whistleblowing Policy, rather than this Complaints Policy, where they wish to raise concerns in the public interest about suspected wrongdoing within the organisation. Individuals raising genuine concerns under the Whistleblowing Policy will not suffer detriment or victimisation for making a protected disclosure in good faith. Whistleblowing concerns may relate to:
- Fraud.
 - Financial irregularities.
 - Criminal activity.
 - Breaches of legal obligations.
 - Corruption.
 - Serious misconduct.
 - Safeguarding failures.
 - Risks to Health and Safety.
 - The deliberate concealment of any such matters.
- 4.3 This policy does not apply to internal employee grievances and disciplinary matters, both of which should be addressed through the Grievance or Disciplinary Policies.

5.0 Purpose of this policy

- 5.1 The purpose of this policy is to provide a clear process for raising complaints, ensure complaints are handled fairly and consistently, resolve concerns as quickly as possible, learn from feedback and improve services, promote openness, accountability and continuous improvement, and ensure complainants are treated with dignity and respect throughout the process.

6.0 Complaints principles

- 6.1 The Foundation will listen to concerns openly and fairly, acknowledge complaints promptly, investigate complaints proportionately, maintain confidentiality where appropriate, communicate outcomes clearly, identify learning and improvement opportunities, and keep records in accordance with data protection requirements.
- 6.2 Information will be treated confidentially wherever possible, although information may need to be shared where necessary to investigate the complaint, safeguard individuals, or comply with legal obligations.

7.0 Confidentiality

- 7.1 The Foundation will make every reasonable effort to maintain the confidentiality of complainants, witnesses and those involved in the investigation of a complaint.
- 7.2 Information will only be shared where necessary to properly investigate the complaint, safeguard individuals, comply with legal obligations, or support a fair outcome.
- 7.3 In exceptional circumstances, it may not be possible to maintain complete confidentiality. Where this is the case, the Foundation will explain the reasons to the complainant and discuss how information will be managed wherever practicable.

COMPLAINTS PROCEDURE AND HANDLING PROCESS

8.0 How to make a complaint

- 8.1 Complaints are to be made through our Complaints Form: [HTF Complaints Form](#).
- 8.2 Reasonable adjustments and alternative formats will be made available to support individuals who require assistance in making a complaint. Please email complaints@htaafcfoundation.com to request this assistance.
- 8.3 Complainants should provide:
- Their name and contact details.
 - Details of their complaint.
 - Relevant dates or evidence.
 - The outcome they are seeking.
- 8.4 Anonymous complaints will be considered where sufficient information is available, although investigation may be limited.

9.0 Summary of Who Handles Complaints

Stage(s)/ Level of Seniority:	Complaint Handler:
Stages One and Two	Relevant Manager, without Senior Leadership Team (SLT) involvement, where appropriate.
Complaint about an SLT member	Manager with sufficient seniority and independence, usually another SLT member, who has no prior involvement.
Stage Three	CEO can review, provided they have not already been involved.
Trustees	A Trustee with no prior involvement will conduct or commission the review where the complaint is about the CEO, the CEO cannot act impartially, or the complaint is about a Trustee. The Chair will normally lead; where the Chair is involved, another independent Trustee will be appointed.

10.0 Complaints Handling

- 10.1 The stage used will reflect the nature and seriousness of the complaint. A complaint may start at Stage One where informal resolution is appropriate, or proceed directly to Stage Two where a formal investigation is required.
- 10.2 Stage Three is an impartial review available where the complainant remains dissatisfied with the Stage Two outcome; exceptionally, the Foundation may commission an independent senior review at the outset where the seriousness, sensitivity or seniority of those involved makes this necessary.
- 10.3 Stages One and Two will normally be managed without involvement from the SLT, preserving scope for an impartial Stage Three review.
- 10.4 The Foundation aims to resolve complaints as quickly as possible. However, some complaints may be more complex and require additional investigation. The timescales set out in this procedure are therefore indicative rather than absolute. Where an investigation is likely to take longer than anticipated, the complainant will be informed of the reason for the delay, the progress made, and the expected timescale for a response.
- 10.5 **Stage One: Informal Resolution.**
- Where appropriate, concerns should begin at Stage One and be resolved quickly and informally by the relevant programme or function manager. If the complainant remains dissatisfied, or the manager determines that a formal investigation is required, the complaint will move to Stage Two.
 - This investigator will acknowledge the complaint within 3 working days, seek clarification where necessary and discuss possible resolutions with the complainant.
 - The Foundation aims to conclude Stage One within 10 working days of receipt.
 - A written record of the matter and outcome will be maintained.
- 10.6 **Stage Two: Formal Investigation.**
- Stage Two applies where informal resolution has been unsuccessful, the complainant remains dissatisfied with the Stage One outcome, or the complaint is sufficiently serious to require a formal investigation from the outset. A complaint may be sufficiently serious where it involves repeated service failure, alleged inappropriate conduct, discrimination or accessibility concerns, significant impact on a participant or stakeholder, reputational risk, or issues requiring an impartial investigation. The

investigation will be undertaken by a member of the Management team, or another suitably senior and independent person.

- The investigating manager will gather relevant information, speak with those involved, review documentation and consider relevant policies and procedures.
- A written response will be issued outlining the complaint investigated, findings, decision reached and any actions to be taken.
- Outcomes may include no further action, an apology, service improvements, staff training, changes to procedures, or other appropriate remedial action.
- The Foundation aims to complete this stage within 20 working days of receipt and will update the complainant where this is not possible.

10.7 **Stage Three: Review.**

- Stage Three is an impartial review of the Stage Two process and outcome. It is available where the complainant remains dissatisfied and believes the complaint was not handled fairly, relevant evidence was not properly considered, the findings were unreasonable, or the procedure was not followed. It is not a routine quality-assurance check or a full reinvestigation, although the reviewer may seek further information where necessary.
- A request for review should explain the grounds for dissatisfaction and normally be submitted within 10 working days of the Stage Two response. The review will be conducted by a member of the SLT who has not previously been involved, or by another suitably senior and independent person where required.
- The reviewer may uphold the Stage Two outcome, require specified matters to be reconsidered, recommend further investigation, or direct appropriate corrective action. The complainant will receive a written decision explaining the outcome. This will normally conclude the Foundation's internal complaints process.

10.8 **Complaints About SLT and CEO**

- Where a complaint concerns a member of SLT, the Chief Executive Officer will appoint an appropriate person with sufficient seniority and independence. This may be another SLT member only where any actual or perceived conflict has been considered and the appointed person is demonstrably independent; an external investigator may be used where appropriate.

- The CEO will not normally be involved before Stage Three, to preserve their ability to consider any later escalation or review.
- Where the complaint concerns the CEO, the Chair or another independent Trustee will appoint the investigator and reviewer. Where a complaint concerns a Trustee, the Chair will appoint an independent Trustee or external investigator; where the Chair is the subject, another independent Trustee will do so. A Trustee who makes a complaint may use this procedure but must take no part in oversight, investigation, review or decisions relating to that complaint.

10.9 Escalation

- Complaints will not routinely be escalated to SLT before Stage Three. However, where a complaint raises a safeguarding concern, alleged criminal activity, fraud or financial misconduct, serious misconduct, significant health and safety risk, or an issue requiring regulatory reporting, it must be referred immediately through the relevant Foundation procedure.

10.10 Recording, monitoring and learning

- Complaint records will be retained and processed in accordance with the Foundation's Data Protection Policy and applicable UK data protection legislation.
- Access to the register will be limited to those who require it for the management, monitoring or review of complaints.
- Complaint trends, outcomes and improvement actions will be reported periodically to SLT in anonymised or summary form. Trustees will receive regular summary reporting on significant complaints, recurring themes, timeliness, outcomes and progress against agreed actions. A significant complaint will be reported to the Chair promptly where it involves the CEO or a Trustee, creates material safeguarding, legal, regulatory, financial or reputational risk, indicates a serious or systemic service failure, or may require Trustee oversight. Personal information will be shared only where necessary and lawful.