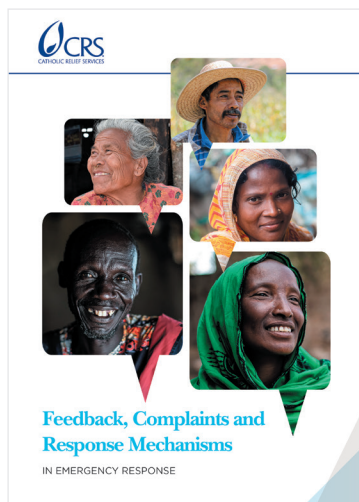




Feedback, Complaints and Response Mechanisms

IN EMERGENCY RESPONSE



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About Catholic Relief Services

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Acronyms


4Ws	who, what, where, when
AAP	accountability to affected populations
AAR	after action review
BHA	Bureau for Humanitarian Assistance
CP	country program
CR	country representative
CRS	Catholic Relief Services
EFOM	Emergency Field Operations Manual
FAQ	frequently asked question
FCRM	feedback, complaints and response mechanism
HoP	head of programming
HRD	humanitarian response department
IASC	Inter-Agency Standing Committee
ICT4D	information and communications technologies for development
IEC	information, education and communication
IFRC	International Federation of Red Cross and Red Crescent Societies
MEAL	monitoring, evaluation, accountability and learning
PMF	Protection Mainstreaming Framework
SDPSS	Safe and Dignified Programming & Psychosocial Support Team
SEA	sexual exploitation and abuse
SMILER+	Simple Measurement of Indicators for Learning and Evidence-based Reporting
SMS	short message service
SOPs	standard operating procedures
SPSEA	strengthening partners in protection against sexual exploitation and abuse

FCRM IN EMERGENCY RESPONSE

This guidance supports the implementation of quality feedback, complaints and response mechanisms, or FCRMs, during rapid-onset emergency responses, the early stages of emergency responses, and early recovery phases. It is relevant to programming and MEAL teams working in these settings, as well as country program operations teams supporting these responses. This guidance is a companion to the broader *FCRM guide*, which is aimed at development settings, longer-term recovery programs and protracted crises.

FCRM in emergencies

Emergency situations are characterized by urgency and competing priorities, immediacy of need, rapid changes in context and limited contextual information, and are exacerbated by risks and vulnerabilities. For these reasons, FCRMs in emergencies:

- Must be established more rapidly and with an initially simpler design. FCRMs in emergencies will evolve as the context changes, as programming cycles become longer and as early recovery begins.
- Require a strong commitment to timely and confidential response, given the prominence of protection and safeguarding concerns.
- Are essential as trusted channels in times of crisis to inform real-time adaptation of the emergency response and adapt interventions to changing needs, capacities and context.
- Support CRS Safeguarding and MEAL Policies, the [Protection Mainstreaming Framework](#) and the  [Core Humanitarian Standard](#) to enhance the safety, dignity and meaningful access of all program participants to essential support and services.



“People who gave feedback were 3.5 times more likely to say that they had been treated with dignity and respect than people who had not.” (ALNAP 2018)

“People who gave feedback were 3.5 times more likely to say that they had been treated with dignity and respect than people who had not. People who were consulted were 3.1 times more likely to say they had been treated with dignity and respect than those who had not.”—2018 State of Humanitarian System, ALNAP

Figure 2. FCRM steps and quality standards

FCRM STEPS	QUALITY STANDARDS
FCRM design	
Step 1. Determine the scope of the FCRM	<ul style="list-style-type: none"> ■ Ensure efficiency, collaboration, participation, local leadership and sustainability in FCRM design.
Step 2. Conduct context analysis	<ul style="list-style-type: none"> ■ Design FCRMs to be responsive to community communication needs, barriers, perceived risks and preferences by reviewing existing data and conducting staff interviews and inclusive community consultations.
Step 3. Select feedback channels	<ul style="list-style-type: none"> ■ Select feedback, complaints and response channels that provide meaningful, dignified and safe access for community members. ■ Include static and active FCRM channels that support face-to-face and anonymous communication.
Step 4. Allocate sufficient resources	<ul style="list-style-type: none"> ■ Equip the FCRM with robust staffing structures. ■ Integrate FCRM costs into country program and project budgets.
FCRM start-up	
Step 5. Establish FCRM channels and procedures	<ul style="list-style-type: none"> ■ Embed FCRMs in MEAL and project management processes. ■ Map external service providers and establish a referral process for protection concerns and out-of-scope issues. ■ Develop FCRM data management systems and protocols to protect the dignity and confidentiality of people who provide feedback and complaints.
Step 6. Create an enabling environment	<ul style="list-style-type: none"> ■ Clarify roles and responsibilities for FCRM implementation among program and MEAL staff. ■ Communicate and demonstrate to all staff the purpose of the FCRM and CRS commitments to accountability, program quality and safeguarding. ■ Cultivate listening and facilitation skills among staff to support effective FCRMs.
Step 7. Inform communities about the FCRM	<ul style="list-style-type: none"> ■ Communicate to diverse community members the role of the FCRM in upholding accountability and safeguarding principles in practice. ■ Inform community members of the code of conduct, their rights and entitlements, and how to report concerns about misconduct or harm.
FCRM implementation	
Step 8. Request and acknowledge feedback and complaints	<ul style="list-style-type: none"> ■ Demonstrate the value of feedback and complaints in communication with community members. ■ Actively request feedback and complaints during project implementation to complement passive FCRM channel communication.
Step 9. Respond to feedback and complaints	<ul style="list-style-type: none"> ■ Respond promptly to programmatic feedback and complaints using appropriate channels. ■ Escalate complaints relating to safeguarding confidentially and safely to support response and action. ■ Use referral pathways to support program participants and communities in accessing available protection services. ■ Monitor levels of satisfaction with the FCRM to enhance accountability to the communities we serve.
Step 10. Document and manage data	<ul style="list-style-type: none"> ■ Apply good practices for data management and data protection to FCRM data.
Step 11. Use data in decision-making	<ul style="list-style-type: none"> ■ Regularly analyze FCRM data to provide timely and user-friendly feedback and complaints trend reports for review, decision-making and action. ■ Triangulate feedback and complaints with MEAL data to inform ongoing decision-making and adaptive management.
Step 12. Assess FCRM effectiveness	<ul style="list-style-type: none"> ■ Conduct FCRM effectiveness checks to ensure channels are safe, accessible and trusted by community members for programmatic and sensitive feedback and complaints. ■ Use evaluations to contribute to project and agency learning about effective FCRMs.
FCRM close-out	
Step 13. Update and communicate close-out plan	<ul style="list-style-type: none"> ■ Integrate FCRM close-out into wider project close-out decisions and activities. Communicate the close-out plan to communities and other stakeholders.
Step 14. Archive data and document learning	<ul style="list-style-type: none"> ■ Apply responsible data values and principles when archiving FCRM datasets. ■ Communicate the learning from FCRM design, implementation and close-out with programming and MEAL communities and other stakeholders.

DESIGN



By the end of the design phase, teams should have:

- ☒ Analyzed the local communication landscape through existing knowledge, secondary sources and previous project data.
- ☒ Consulted diverse community members on their preferred channels for feedback, complaints and response.
- ☒ Selected safe and accessible channels, and ensured that at least one is suitable for sensitive complaints.
- ☒ Developed a budget and staffing plan for the FCRM.

Step 1. Determine the scope of the FCRM

In emergency responses, FCRMs need to be set up swiftly and decisions quickly made about their scope. Limited or no time to test the FCRM means teams may need to rely on previous experience in this or similar contexts when making early design decisions.

When making FCRM design decisions, take into consideration:

- The country program's operational context, project-specific needs, the effectiveness of existing mechanisms, and relevant donor and agency requirements (see *Tool 2: Context analysis checklist* for further guidance).
- Partners may be new to working in an emergency, and may need programmatic, operations, protection mainstreaming and safeguarding support to ensure FCRMs are effective.
- The type and duration of emergency response. For example, relief distributions and cash-related interventions that need to be completed within weeks will require a different kind of mechanism compared to a one-year shelter project.
- The communication barriers that may be faced by specific groups (for example, women may have limited access to mobile phones, or minority groups may have lower literacy rates).
- What existing traditional or community-level mechanisms and partner-led mechanisms can be built upon.
- Opportunities for complementary and joint mechanisms¹ across the response or within a consortium. Consider time investment and potential risks to reputation; joint referral systems and data-sharing protocols; and assurances of confidentiality when treating sensitive complaints related to misconduct of specific agency staff.
- FCRM sustainability planning, which may require plans for eventual transition to an FCRM appropriate for long-term recovery or development programming.



Partners may be new to working in an emergency, and may need programmatic, operations, protection mainstreaming and safeguarding support.

1. See [IASC Best Practice Guide Inter-Agency Community-Based Complaints Mechanisms, 2016](#) for examples and guidance on shared feedback and complaints mechanisms.

Increasingly, CRS is investing in FCRMs at the country program level that are applicable across all projects and responses in the CP and that are sustained after the close of individual projects and activities. In an emergency, it can be useful to start the response using a CP-level channel if the context and available telecommunications allow. However, CP channels *must* be complemented by project-level channels as soon as possible, and be based on community consultations with diverse groups, to ensure that the most vulnerable members of the target community can access them.



Quality standard: Ensure efficiency, collaboration, participation, local leadership and sustainability in FCRM design.



Key actions in emergency settings

- Assess any existing community structures managed by a local leader, community, or advisory group that has been trained to collect, document and respond to feedback and complaints.
- Assess the feasibility of using any existing joint platforms, such as inter-agency feedback systems.
- Determine whether using an existing CP-level FCRM is feasible for the initial weeks of the response before the project- or response-specific FCRM is in place.

Step 2. Conduct context analysis

Context analysis should focus on understanding communication preferences and barriers² to accessing the FCRM across different individuals and groups within communities, with a particular emphasis on the most marginalized and at risk.

Depending on the context (e.g., presence of armed groups, aid that involves high-value commodities), the analysis should include potential risks, along with options to have FCRM channels managed remotely or outsourced to external service providers (e.g., a local call center). In some conflict-affected contexts there may be risks to both feedback providers and receivers that need to be identified and mitigated. **Asking affected people is the best way to identify safe and accessible channels.**



Asking affected people is the best way to identify safe and accessible channels.

2. Common barriers include language, literacy level, limited or no digital literacy, and perceived lack of trust in and safety of the selected communication channels.



Quality standard: Design FCRMs to be responsive to community communication needs, barriers, perceived risks and preferences by reviewing existing data and conducting staff interviews and inclusive community consultations.



Key actions in emergency settings

- Analyze the communication landscape using existing data and, when possible, conduct interviews with staff who have local experience.
- Review any existing FCRM data from the same area of operation, to assess trust and satisfaction, and accessibility to all community members. Give more weight to the opinions and perspectives of more marginalized and vulnerable groups, based on gender, age and other diversity factors.
- Integrate communication-related questions into rapid needs assessment tools. At a minimum, ask diverse groups how they would prefer to share programmatic feedback and sensitive complaints. Refer to [IASC's Menu of Accountability to Affected Populations \(AAP\) Related Questions for Multi-Sector Needs Assessments \(MSNAs\)](#) for a selection of questions on preferences for giving and receiving information, and potential communication barriers. Disaggregate findings by sex, age, disability and any other diversity factors relevant to the context.
- When teams are operating in an unfamiliar context or region within a country, programming may have to expand rapidly into areas where knowledge of local community preferences and context analysis is limited. To triangulate primary data from needs assessments:
 - Consult other organizations or community representatives on how they receive feedback, to enhance understanding of communication preferences.
 - Consult CRS' pool of local volunteers or contractual workers with experience of prior communication and feedback processes, to inform decisions about FCRM set-up and initial channel selection.

Step 3. Select feedback channels

FCRM channels are one means by which local people can raise issues important to them, and communicate suggestions, questions, concerns and grievances. It is critical to select channels that are accessible to different groups, are safe to use, and are capable of providing a timely and confidential response. In most emergency contexts, multiple channels will be required to effectively request and respond to the range of potential feedback and complaints.

It can make sense to start with one channel in the initial weeks of a response to ensure a means of communication; however, it is important to introduce at least three channels as soon as possible, to ensure access for groups who may face different communication barriers.



Tool 2: Context analysis checklist

Use Tool 2 to structure data review, staff interviews and community consultations, and to document communication preferences and risks for key groups within the community.



Disaggregate findings by sex, age, disability and any other diversity factors relevant to the context.



Tool 1: Feedback and complaints categories

See Tool 1 for a description of key feedback and complaints categories and associated actions to manage and respond to each type.



Tool 3: FCRM channels pros and cons



Use Tool 3 to understand the advantages and disadvantages of common FCRM channels and inform the initial selection of the channels.



Quality standard: Select feedback, complaints and response channels that provide meaningful, dignified and safe access for community members.



Key actions in emergency settings

- Using the findings from *Tool 2: Context analysis checklist*, select channels that are safe and accessible for all program participants, with particular emphasis on the safety and access of women, girls, people with disabilities, and any other marginalized group, particularly in reporting sensitive complaints and safeguarding allegations. Different channels will work for different people.
- Start with one channel. When time and resources allow, add further channels using the findings of the context analysis, with an emphasis on the preferences of marginalized and excluded groups. Consider whether a face-to-face channel or an anonymous channel is more urgent in your context.³
- Once channels have been selected, document the selection in the  [SMILER+ FCRM planning worksheet template](#) .



Select channels that are safe and accessible for all program participants.



Quality standard: Include static and active FCRM channels that support face-to-face and anonymous communication.



Key actions in emergency settings

- As the emergency response evolves, grow the number of FCRM channels available to a minimum of three: at least one static, one active, and one face-to-face channel.
- Build active channels into regularly scheduled monitoring by including questions on satisfaction, access, safety and the utility of feedback channels in post-distribution monitoring (PDM).
- Plan for brief listening and feedback sessions at the end of structured data collection visits.

3. A face-to-face channel is often faster to set up and can be very effective; however, a channel that allows anonymous feedback may be perceived as safer for reporting safeguarding issues.

4. The CRS SMILER+ approach to MEAL system development includes a session on operationalizing initial FCRM design decisions during project start-up. The *SMILER+ workshop planning tool* documents these initial design decisions. See the [SMILER+ Guide](#) and [SMILER+ Process Map](#) for more information.

To be safe and accessible for all community members, it is recommended that FCRMs have these three types of feedback and complaints channels in place: Face-to-face, static and active channels.



A face-to-face channel

Uses planned project activities and interactions to support regular, intentional and meaningful communication between program staff and diverse community members. These channels may be help desks, community meetings or simply additional time dedicated to communication during field visits.



A static channel

(such as a hotline or suggestion box) Enables anonymous submission of feedback and complaints.



An active channel

Seeks feedback and complaints from community members during MEAL activities, such as post-distribution monitoring, focus groups or household surveys.

FCRMs should include multiple response channels to respond to a range of feedback and complaints, and meet commitments to confidentiality and anonymity when needed. It is recommended that FCRMs also incorporate:



- ◆ **An individual response channel** to respond to both programmatic and sensitive complaints. Individual responses may be made using the same feedback or complaint channel, e.g. hotlines, based on the individual's preferred contact preferences and availability of contact information.
- ◆ **A community response channel** to respond to programmatic feedback and complaints, particularly when speaking to larger trends in feedback or planned actions to address the feedback received. These are usually community meetings, radio announcements and signboards.

Step 4. Allocate sufficient resources

Effective FCRMs require adequate staff time and resources. To ensure sufficient allocation of resources and staff for FCRM, emergency teams should integrate FCRM costs into emergency project proposals. It is essential to allocate key FCRM responsibilities in emergency settings, when staffing structures are still basic and staff turnover can be high.

It is also important to document key roles for FCRM tasks and determine what position/s will take key FCRM tasks, such as consulting with communities; receiving, acknowledging and responding to feedback; analyzing data; and overseeing the FCRM.

FCRM staffing tips

1. Where possible, hire one staff member to oversee the FCRM and manage coordination between the program, MEAL and operations teams. Should hiring a staff member not be possible due to limited resources, appoint an FCRM focal point to take on this role, ensuring at least a 50% level of effort in their job description.
2. Consider the diversity of staff collecting and receiving feedback and complaints. Ideally, they should mirror the target community across gender, age, ethnicity, religious and language groups, etc.
3. Consider the complexity and number of the selected FCRM channels and the overall scope of the project (e.g., geographic coverage and population size) when determining the number of staff needed to receive, acknowledge, document and respond to feedback and complaints. Where technology is not suitable or accessible, increase staffing numbers to facilitate sufficient face-to-face channels.
4. Consider where a staff member may be able to hold several responsibilities across channels, for example, recording and analyzing feedback may be managed by one MEAL officer across all channels for a project or several projects, depending on their scope and scale.
5. When selecting staff and positions, consider the skills, attitudes, competencies and behaviors required for all stages of FCRM implementation.
6. Consider assigning FCRM-handling responsibilities to staff outside of the project teams to increase transparency and trust in the system. This is important in high-risk contexts where community members may be more willing to report incidences of fraud or safeguarding to staff who are not directly associated with project implementation.
7. Document key roles for MEAL and program staff for each FCRM channel in the  [SMILER+ FCRM planning worksheet template](#) .

The cost of implementing an effective FCRM includes hardware and software for the chosen channels, transportation for community engagement visits, and communication materials. Overall, FCRM costs will depend on the channels selected, the scope and scale of the FCRM, and the level of collaboration with other organizations and stakeholders in FCRM processes.

Effective FCRMs require investment, including in staffing. Some additional costs for FCRMs are direct line items related to the selected channels, data management processes, and costs of communication on FCRM. Consult the [Feedback Starter Kit \(IFRC 2019\)](#), [Tool 15](#) for useful guidance on costs associated with feedback, complaints and response.













Where possible, hire one staff member to oversee the FCRM and manage coordination



Tool 5: FCRM skills and competencies list

Use Tool 5 to reflect on key competencies and skills for effective FCRM implementation, and to identify any gaps in the current CP staffing structure.

Common costs to consider include:⁵


				
Software for FCRM data management	Staff training on FCRM	Printing and paper for feedback and other forms	Electronic tablets or mobile phones for data collection, SIM cards, data plans	Refreshments for community meetings
				
Venues for meetings to review FCRM data and effectiveness	Stationery	Driver, car and fuel for field visits	Posters, noticeboards, stickers and flyers for community communications	Suggestion box materials



Quality standard: Equip the FCRM with robust staffing structures.



Key actions in emergency settings

- Among emergency responders, appoint/hire one staff member to oversee the FCRM design and start-up phases. If resources are limited, appoint an FCRM focal point, ensuring at least a 50% level of effort in their job description.
- Determine what staffing is required to implement the FCRM, and consider any budgetary implications. Consider how staffing roles may evolve as the response grows and what positions may be required over time. See the *FCRM guide* pages 41 and 42, for further information on FCRM roles and responsibilities to inform staffing plans.
- Document key roles for MEAL and program staff for each FCRM channel in the [SMILER+ FCRM planning worksheet template](#) .
- Use available project/response budget resources and fold FCRM-related processes into other funded project activities.



Determine what staffing is required to implement the FCRM, and consider any budgetary implications.

5. [Feedback Starter Kit](#) (IFRC 2019).



Quality standard: Integrate FCRM costs into country program and project budgets.



Key actions in emergency settings

- Integrate FCRM costs (design, start-up and implementation) into emergency project budgets and proposals.
- When feasible and appropriate, integrate costs across projects or pool costs for response-level systems. If donor restrictions or funding shortages persist, request the use of unrestricted or discretionary and pooled funds, especially to cover ineligible costs.⁶
- Plan for sufficient resources for staff to appropriately follow up on programmatic feedback and complaints (e.g., facilitating group and individual interactions to better understand the nature and potential implications of issues raised through the FCRM).
- Include capacity development and technical assistance for the FCRM into MEAL and program budgets, including partner capacity strengthening requirements as needed.
- Where possible, reserve resources for maintaining and adjusting the FCRM according to evolving needs and changes in the context and overall response.



Tool 4: Boilerplate language for FCRM in program proposals



Click here to use Tool 4 to inform your FCRM proposal narrative/annexes. This tool is framed around [BHA guidance](#) (April 2021) so is particularly useful for BHA applications. It should be adapted to specific project contexts and aligned with other donor requirements as needed.

6. Given the increased focus on protection from sexual exploitation and abuse (PSEA) and safeguarding, some donors are more likely to allow expanded FCRM practices that clearly meet these new requirements.

START-UP



By the end of the start-up phase, teams should have:

- ☒ Completed a  [SMILER+ FCRM flowchart](#)  to map the flow of data and communication through the system.
- ☒ Developed standard operating procedures (SOPs) for FCRM protocols and processes.
- ☒ Clarified roles and responsibilities for the FCRM among MEAL and program staff and senior leadership.
- ☒ Mapped external service providers and developed a referral pathway.
- ☒ Communicated to communities the scope and purpose of the FCRM and how to access FCRM channels.
- ☒ Trained staff and volunteers on their roles and responsibilities in FCRM implementation.

Step 5. Establish FCRM channels and procedures

Standard operating procedures (SOPs) are required to document the protocols and processes associated with the FCRM, such as collection, acknowledgement, data management, response and referrals. It is important that the SOPs capture specific FCRM roles and responsibilities and data management decisions. SOPs in emergencies can be simplified and telescoped to the size and stage of the emergency. As the emergency progresses, the response expands, and the FCRM evolves, accordingly the SOPs should be updated and further detailed over time.

Sensitive complaints such as those related to sexual exploitation and abuse (SEA) can occur in any development and humanitarian context. SEA and all forms of abuse and exploitation, however, are a particular risk in emergency responses when violence, power imbalances, displacement and restriction of movement is increased. Follow the CRS [Safeguarding Policy](#) and Procedures to escalate and handle sensitive complaints.



Standard operating procedures are required to document the protocols and processes associated with the FCRM.



During the emergency response, the FCRM may receive feedback and complaints that relate to other actors or organizations or, importantly, deal with sensitive protection concerns.⁷ These complaints may require protection services, such as support to survivors of gender-based violence or unaccompanied children. In programs where CRS is not a specialist protection actor, our role should be limited to providing information on how to access appropriate services to anyone disclosing a protection need. See below for key actions in emergencies to prepare to receive protection disclosures from affected communities.



Quality standard: Embed FCRMs in MEAL and project management processes.



Key actions in emergency settings

- Document design decisions, map the flow of data and communication (see [SMILER+ FCRM flowchart](#) ) and develop a stakeholder communication plan (see [SMILER+ stakeholder communication plan](#) ).
- Identify any support and resources needed to fulfill FCRM roles and responsibilities.
- Refer to *Tool 3: FCRM channels pros and cons* for key recommendations on implementing your selected channels.
- Develop standard operating procedures to detail simple step-by-step protocols for documenting and processing feedback and complaints, and keep these up to date as the FCRM evolves and improves. SOPs in emergencies can be simplified to include contact information for each channel, a roles and responsibilities table, response timeframes and referral steps.
- Develop an initial list of FAQs about program and FCRM details and update these based on frequently submitted questions and suggestions.
- Provide the name and contact information for the focal point for sensitive complaints—this should either be the CR or a designate. Ensure that the staff handling the complaints understand the procedure to ensure access to necessary support for complainants, particularly for survivors of sexual exploitation and abuse.
- Develop a tool to document feedback and complaints received.



Tool 1: Feedback and complaints categories

Refer to Tool 1 for a full description, including response actions for each category.

In programs where CRS is not a specialist protection actor, our role should be limited to providing information on how to access appropriate services to anyone disclosing a protection need.



Tool 6: FCRM standard operating procedures template

Use Tool 6 to help develop SOPs for FCRM implementation in your operating context.

7. For example, situations of intimate partner violence, child separation and human trafficking issues.



Quality standard: Map external service providers and establish a referral process for protection concerns and out-of-scope issues.



Key actions in emergency settings

Protection services mapping and referral pathway

(FCRM Category 7: Other protection issues)

- Check whether the Protection Cluster has been activated in your context. If so, contact it first for guidance on how to proceed.⁸ If the Protection Cluster is producing a referral pathway, ask when it will be published and how to proceed with any protection issues encountered while awaiting the formal referral pathway.
- If there is no referral process or Protection Cluster, follow the process in [Developing a referral path for essential protection services](#).
- Provide staff with a referral card; guidance on available services and how to contact them; and how to share information with community members. Train staff in psychological first aid to gain skills on how to safely respond to a protection disclosure.
- If an individual discloses a protection need or the FRCM receives a complaint related to a protection concern (see *FCRM Category 7: Other protection issues* for a full description):
 - Where possible, using the referral pathway, provide immediate information on available protection services relevant to the protection concern raised.
 - If immediate referral is not possible, request individual contact information if not yet provided and if the person wants to be contacted.
 - Immediately forward the complaint to the program manager with a copy to the HoP/emergency coordinator.
 - To maintain confidentiality, no information about this issue should be shared with other staff.
 - Ensure confidentiality by limiting access to or removing personally identifiable information and details of the alleged incident from the FCRM data management system.



Tool 8: Feedback and complaints collection form

See Tool 8 for key information to be documented through a face-to-face FCRM channel. This tool can be adapted to the project context as needed.

The *Developing a referral path for essential protection services* toolkit provides simple steps and supporting tools to develop a referral path to support people to meet essential protection needs, by referring them to other actors with the necessary expertise and capacity to act.

Seek guidance from HRD's Safe and Dignified Programming & Psychosocial Support (SDPSS) team for support with any of these steps.

8. The Protection Cluster and Gender-based Violence Sub-Cluster are responsible for developing referral pathways. CRS and our partners can then build on or use what is already in place instead of duplicating service mapping.

Out-of-scope referrals

(FCRM Category 9: Out-of-scope feedback)


- Include a mapping of other humanitarian and development actors, their services and contact details in the SOPs. The 4Ws⁹ will provide useful information to draw from.
- When receiving a complaint related to other actors (see *FCRM Category 9: Out-of-scope feedback* for a full description):
- Record and acknowledge the request.
- Refer to other actors if feasible.
- State that the request falls outside of the project scope if no referral possible.
- Remind provider of the purpose and value of the FCRM for future use.



Quality standard: Develop FCRM data management systems and protocols to protect the dignity and confidentiality of people who provide feedback and complaints.



Key actions in emergency settings

- Establish a consolidated data management system (paper and/or digital) to track the status of responses (open or closed) and support appropriate referral, escalation, and use of feedback, complaints and subsequent responses.
- At a minimum, all systems should start with: 1) a unique ID; 2) date of feedback; 3) a description of the feedback; 4) whether the feedback is sensitive; and 5) whether it is open or closed. Including these minimum fields will allow a later consolidation if not possible at the start.
- Build the CRS FCRM Categories 1 to 9 into the structure of the FCRM data management system (see *Tool 1: Feedback and complaints categories*).
- Align with data protection requirements and the [CRS Responsible Data Values and Principles](#)  as well as local, national and regional regulations on data protection.
- Contact the project's ICT4D focal point to determine the most appropriate technologies to support FCRM data management systems.¹⁰ Software options include Microsoft Excel, CommCare and YouTrack.
- Ensure the system (and associated protocols) appropriately escalate sensitive complaints to the CR or designate in line with the CRS [Safeguarding Policy](#).



Tool 7: Establishing a feedback and complaints registry

See Tool 7 to help identify the data fields needed in an FCRM registry.

9. The 4Ws is a document managed by Cluster Coordinators to map Who does What, Where and When in an emergency response.

10. If the ICT4D focal point is not available, submit a support ticket to GKIM for assistance [here](#).

Step 6. Create an enabling environment

Emergency interventions are often characterized by a high turnover and increased number of staff. It is important to clarify FCRM roles and responsibilities across project and teams. Staff working in an emergency are often under huge pressure, working long hours, and in many cases affected by the crisis themselves. This can result in negative perceptions of feedback and complaints. Senior leadership can support staff through clear messaging on the purpose of FCRMs and provide strong oversight on work-life balance (see box below on how to address or mitigate negative staff perceptions of FCRM).



It is also important to ensure that emergency teams are informed and prepared to clearly communicate key messages about the FCRM with affected communities receiving CRS services and assistance. Ensure data-sharing methods and languages are informed by groups' preferred ways of receiving information established during needs assessments. Place particular emphasis on marginalized groups according to gender, age and other relevant diversity factors, including disability.



Quality standard. Clarify roles and responsibilities for FCRM implementation among program and MEAL staff.



Key actions in emergency settings

- Clarify FCRM roles and responsibilities across project and MEAL teams by determining how feedback, complaints and response will be requested, acknowledged, documented, referred, escalated, used in decision-making and responded to. Refer to the:
 - [Safeguarding Policy](#) to determine steps for handling sensitive feedback and adhering to CRS confidentiality commitments.
 - Roles and responsibilities in the  [SMILER+ FCRM planning worksheet template](#)  developed during design, and the FCRM flowchart developed during SMILER+.
 - *Tool 10: FCRM roles and responsibilities table* and include this as an annex in the SOPs.
- As noted above, consider assigning certain FCRM-handling responsibilities to staff not directly involved with implementation, to increase transparency and trust in the system. In high-risk contexts, community members may be more willing to report incidences of fraud or safeguarding to staff not directly associated with project implementation.
- The emergency coordinator and program managers should ensure roles and responsibilities are included in the job descriptions and performance plans of relevant staff.
- The FCRM manager or FCRM focal point should train staff and volunteers on their roles and responsibilities related to FCRM, and share any major concerns on capacity with senior leadership to address as the FCRM evolves.



Tool 10: FCRM roles and responsibilities table

Tool 10 documents the key tasks (and sub-tasks) for MEAL and program staff associated with FCRM implementation.

Reach out to HRD's Safe and Dignified Programming & PSS team for training resources and/or support.

In high-risk contexts, community members may be more willing to report incidences of fraud or safeguarding to staff not directly associated with project implementation.



Quality standard: Communicate and demonstrate to all staff the purpose of the FCRM and CRS commitments to accountability, program quality and safeguarding.



Key actions in emergency settings

- Develop key messages about the FCRM and how it supports accountability, and make these available to staff. Integrate these messages and activities with larger project launch approaches as feasible. Refer to the FCRM information needs for program staff in the [SMILER+ stakeholder communication plan](#) (→).
- Senior leadership can:
 - Remind staff about the value and purpose of FCRM and communicate highlights of programmatic feedback trends.
 - Communicate to all staff, affiliates and partners the process for safely and confidentially escalating sensitive complaints involving alleged staff misconduct.
 - Request and respond to staff feedback through periodic staff surveys, office suggestion boxes, open reflection with staff, and leadership engagement.



Communicate to all staff, affiliates and partners the process for safely and confidentially escalating sensitive complaints involving alleged staff misconduct.

To address or mitigate negative staff perceptions of FCRM, senior leadership can:


- ◆ Communicate clearly that feedback and complaints are welcomed and are a key tool in doing our jobs well. Receiving reports of multiple issues means that the FCRM system is functioning and effective, and assists us in identifying and addressing the weaker aspects of our program, to improve its outcomes for participants.
- ◆ Ensure that staff know that negative feedback does not necessarily reflect badly on them individually; it is usually related to a broader issue. Acknowledge that it can nevertheless be difficult not to take negative feedback personally. Reassure staff that this is a normal reaction and give them time to process and reflect on the issue.
- ◆ Defensiveness to feedback may indicate issues around work-life balance or well-being. Ensure staff managing and receiving feedback have sufficient support. Ensure breaks and leave are being taken, and rotate roles across the team, as needed.



Quality Standard: Cultivate listening and facilitation skills among staff to support effective FCRMs



Key actions in emergency settings

- Seek and hire staff with strong listening and facilitation skills.
- Offer short trainings or refreshers on safeguarding, protection mainstreaming and [CRS Responsible Data Values and Principles](#) , to MEAL and program teams, as well as senior leadership.

Step 7. Inform communities and stakeholders about the FCRM

For an FCRM to be successful, community members and other stakeholders must understand its purpose and processes as well as trust staff to listen and appropriately respond to their feedback and complaints. A list of key topics to communicate on FCRMs, alongside the Code of Conduct and project information, is included in *Tool 9: Checklist of information to share with communities*.

Emergency teams should develop appropriate communication materials, and integrate key messages into scheduled project activities. They should communicate using a range of information, education and communication (IEC) materials and methods based on communication preferences gathered in your needs assessments, with consideration to gender, age and other diversity factors. It is important for community members to be aware of their rights and entitlements to give feedback or complain, and to receive a response; to understand the expected and prohibited conduct of CRS staff, affiliates and partners; as well as how to report any concerns about misconduct or harm.



Quality standard: Communicate to diverse community members the role of the FCRM in upholding accountability and safeguarding principles in practice.



Key actions in emergency settings

- Integrate FCRM messaging into the communication plans of emergency programs and the emergency as a whole.
- During project start-up, develop consistent key FCRM messages, highlighting:
 - The purpose of FCRMs.
 - The process for accessing all FCRM channels.
 - The distinctions between types of feedback and complaints.
 - The response timeline and process for feedback and complaints.
- Translate into locally preferred languages and test the messages and material with a selection of program participants. Prioritize testing with those experiencing communication barriers according to gender, age and other diversity factors.
- Adapt materials based on the feedback from these groups and check comprehension again over time.



Tool 11: Interview questions for FCRM positions

Use Tool 11 during the hiring process for scenario-based and technical interview questions that can be used when recruiting FCRM-related positions.



Refer to the [SMILER+ stakeholder communication plan](#) to develop FCRM communication messages and materials, and plan to include the FCRM communication materials as annexes in the SOPs.



Quality standard: Inform community members of the code of conduct, their rights and entitlements, and how to report concerns about misconduct or harm.



Key actions in emergency settings

- Integrate key messages from *Tool 9: Checklist of information to share with communities*, including:
 - Expected and prohibited conduct of CRS staff, affiliates and partners.
 - Their right and entitlement to complain about staff behavior and to receive a satisfactory response.
 - How to report any concerns about misconduct or harm in project activities and monitoring visits.
 - Refer to communication methods for sharing PSEA information (pages 196-199) of [Communicating with communities on PSEA](#) to consider methods for sharing information.
- During implementation, plan for frequent reminders to the community on FCRM messages as part of larger project communication activities. This is particularly important when affected communities are mobile or one-off support is provided.

IMPLEMENTATION



By the end of the implementation phase, teams should have:

- ☒ Requested and acknowledged all feedback and complaints.
- ☒ Referred protection issues and out-of-scope feedback and complaints.
- ☒ Escalated sensitive complaints.
- ☒ Responded to all feedback and complaints.
- ☒ Used programmatic feedback and complaints as part of adaptive management practices.
- ☒ Monitored levels of community satisfaction with the FCRM process.
- ☒ Conducted an FCRM effectiveness check and made all necessary improvements.
- ☒ Determined the quality and appropriateness of the FCRM as part of evaluations.

Step 8. Request and acknowledge feedback and complaints

Complaints and feedback should always be acknowledged in a timely, respectful and consistent manner to build transparency and trust with affected communities.

For some FCRM channels, feedback and complaints will be automatically acknowledged, e.g., when using a hotline, but for other channels staff will need to acknowledge feedback and complaints in a separate step. In these cases, staff will contact individuals to let them know their feedback or complaint has been received and documented, and to clarify the timeline for the response.



Quality standard: Demonstrate the value of feedback and complaints in communication with community members.



Key actions in emergency settings

- Acknowledge feedback and complaints at the time of receipt, whenever possible, and thank people for providing them. This can be done verbally during face-to-face conversations, electronically and automatically (SMS, phone call, interactive voice response, email or social media).
- Seek and document consent from individuals providing feedback and complaints. Use individual contact information to acknowledge feedback, and communicate the response.
- Develop and use a scripted message that acknowledges receipt and states the designated timeline and process for response.
- Practice active listening and good communication skills in all interactions related to FCRM and ensure that all communication is appropriate and respectful in the local context. The [Feedback Starter Kit](#) (IFRC 2019, Tool 15, p14) has some useful dos and don'ts for feedback collection and can be adapted by program teams to the local culture and context.

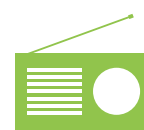


Quality standard: Actively request feedback and complaints during project implementation to complement passive FCRM channel communication.



Key actions in emergency settings

- Integrate face-to-face feedback collection into all regularly scheduled project activities.
- During regular project site visits, reserve time to respond to previously collected feedback and to share information about changes that have been made to projects.
- Use community meetings, noticeboards or radio messages to acknowledge (and respond to) anonymous programmatic feedback and complaints, if individual-level follow-up is not feasible.
- Add questions to existing data collection tool visits (e.g., post-distribution monitoring tools) or during community visits. Examples of questions to include are:
 - Is there anything else you would like to share about the project or service received?
 - What has been your experience of program staff and volunteers?
 - Do you have suggestions for improving the project?
 - If you have a question or want to provide feedback or file a complaint with CRS, are you familiar with any ways in which to contact us? Please name the channels you are aware of.
 - Are these ways of contacting us easy and safe for you to use?
 - If you provided feedback, were you satisfied with the response?
 - Are you facing any staff-related problems or issues that you would like to share with us?
- Manage expectations during these feedback sessions by stating that all feedback and complaints will be heard but not all can be acted upon.
- Prepare an updated FAQs sheet to respond to common information requests, and plan to add new questions as they arise.



Use community meetings, noticeboards or radio messages to acknowledge and respond to anonymous programmatic feedback and complaints.

Step 9. Respond to feedback and complaints

Emergency teams should respond to all feedback and complaints in a way that is respectful and will encourage further communication. When staff fail to respond appropriately, community members will lose trust and interest in the FCRM, and even the best-prepared FCRMs may go unused.

Responses to programmatic feedback and complaints should be communicated to community members using methods appropriate to the type of feedback or complaint, the channel used and local communication preferences. Even when an issue cannot be resolved as requested, a response and explanation should always be provided. It may also be useful to communicate through collective channels—such as noticeboards or community meeting announcements—if this information may be relevant to others.



Quality standard: Respond promptly to programmatic feedback and complaints using appropriate channels.



Key actions in emergency settings

- Provide response to all feedback and complaints using appropriate channels and within the timeframes agreed in the SOPs.
- Use daily debriefs or other frequent team meetings to review and decide on response to feedback and complaints, and required corrective actions. Response can take many forms depending on the type of feedback or complaint category.



Tool 1: Feedback and complaints categories

Refer to Tool 1 for a full description of feedback and complaints categories, including response actions for each category.



Quality standard: Complaints related to safeguarding are confidentially and safely escalated to support response and action.



Key actions in emergency settings

- To allow for follow-up, request individual contact information if not yet provided and if the person wants to be contacted. Clarify timelines to be followed.
- Escalate to the country representative or their designate within 24 hours.
- Focal points designated by the CR must contact the survivor to confirm receipt of the case within three working days or sooner, depending on the gravity of the situation.
- Remove all personally identifiable information and details of the alleged incident from the FCRM data management system.
- For allegations that concern other aid workers, escalate to the CR and notify the relevant organization(s) to direct complaints through their FCRM.



Tool 1: Feedback and complaints categories

Refer to escalation steps for FCRM Category 6 in Tool 1, and steps described in SOPs and the CRS Safeguarding policy.

Consider safety

For safeguarding complaints, particularly those related to sexual abuse and exploitation, an essential first step is to consider the safety of the survivor or person disclosing the incident. Let the survivor tell you how they feel about their personal safety and security. Take care to not make assumptions based on what you are seeing. Where possible, address basic needs in the moment. Each person will have different basic needs, which may include urgent medical care, water, finding a loved one, or a blanket or clothing.

After ensuring the survivor's basic needs are met, and that they are not in immediate danger, listen to their concerns and complaint. The survivor may be very upset and confused, and it is important to stay as calm as possible. Allow the individual to share as much or as little information as they would like. Avoid questions that begin with 'why' as these can appear to place blame on the survivor. Instead, listen actively and with empathy, and share information on the complaints-handling process.

It is essential to maintain confidentiality at this point and escalate the complaint to the CR or designate within 24 hours. The sooner this can be reported, the better CRS can mitigate some of the negative consequences of incidents of abuse and exploitation. For example, sexual assault survivors often need to receive critical medical care within 72 hours of an assault, and early access to psychological support can reduce negative long-term mental health effects.¹¹

11. Adapted from [GBV pocket guide](#) (IASC 2015). See survivor-centered communication under Look-Listen-Link framework.



Quality standard: Use referral pathways to support program participants and communities in accessing available protection services.



Key actions in emergency settings

- When encountering a protection issue, where possible, provide immediate information on available protection services using the referral pathway and mapping of service providers created during start-up.
- If immediate referral is not possible, get the person's contact information with their consent, and follow up and provide information on any available services within three days.
- Immediately share the protection issue with the head of programming and program manager so they can consider any actions needed at the program level to reduce or mitigate this risk. Only share personally identifiable information when necessary. The HoP, in consultation with the CR, can decide on any additional action required, e.g., reporting to the Protection Cluster or government.
- Where possible, the HoP can maintain a log of protection incidents to track trends that can inform future programming decisions and actions that will enhance the safety and dignity of program participants.
- Regularly update maps of external service providers and how to contact them.
- Train staff on whether, when and how to refer cases safely, using a survivor-centered approach. When referring protection concerns, remember to:¹²
 - Let the survivor choose whether they wish to access these services or not.
 - Provide a listening ear, free of judgment.
 - Treat any information shared with confidentiality.
 - If you need to seek advice and guidance on how best to support a survivor, ask for their permission to talk to a specialist or colleague. Then do so without revealing the personal identifiers of the survivor.



Provide a listening ear, free of judgment.



Quality standard: Monitor levels of satisfaction with the FCRM to enhance accountability to the communities we serve.



Key actions in emergency settings

- Use existing MEAL processes to ask community members about their level of satisfaction with the FCRM after their issue has been responded to and/or during other MEAL data collection activities.
- Disaggregate satisfaction levels by sex, age, disability and other relevant diversity factors.

¹² See the [GBV pocket guide](#) (IASC 2015) for useful guidance on a survivor-centered approach, available in multiple languages [here](#).

Step 10. Document and manage data

FCRMs are designed to ensure confidentiality, a timely response and attention to urgent matters. This is especially important in emergency settings, where support can be life-saving/altering. To achieve these goals, the data management, documentation and information-sharing processes need to be regularly assessed to identify and resolve challenges in responsible data management, gaps in internal information-sharing between teams, and delays in response caused by inefficiencies in FCRM data storage and reporting.



Quality standard: Apply good practices for data management and data protection to FCRM data.



Key actions in emergency settings

- Outline the roles and responsibilities for active management of FCRM data in *Tool 10: FCRM roles and responsibilities table* in the SOP and update them as needed.
- Document the names, contact information (email), and role of CRS and partner staff who will have access to feedback and sensitive complaints.
- As part of regularly planned data quality assessments, review FCRM data management, documentation and information-sharing processes. Review the list of staff who have access to these systems and confirm it with the project or country management. Remove access for staff who have changed roles or are no longer involved in the project or CP FCRM.
- Keep FCRM data secure by password protecting or encrypting FCRM data management systems and all associated files. Avoid emailing FCRM data files to ensure that they remain protected. Store hard copies (logbooks, feedback forms) in locked filing cabinets with clear protocols for access and destruction. Destroy hard-copy files once digitally documented in the electronic data management system.



Keep FCRM data secure by password protecting or encrypting FCRM data management systems and all associated files.

Step 11. Use data in decision-making

Where the situation changes rapidly, feedback, when used alongside monitoring and evaluation data, offers additional voices and suggestions that can help teams interpret and understand program participants' experience with, and perception of, services and program staff. Regular analysis of disaggregated FCRM data and presentation of the trends in complaints and feedback across gender, age, disability and other diversity factors, allows us to improve our support for all people affected by crisis.



Quality standard: Regularly analyze FCRM data to provide timely and user-friendly feedback and complaints trend reports for review, decision-making and action.



Key actions in emergency settings

- Use debrief meetings and other reflection events to review feedback trends and make decisions on how to address and respond to pending feedback and complaints. Include FCRMs as a standing agenda item. As part of these meetings, seek to:
 - Analyze FCRM quantitative and qualitative data to identify larger trends and how those change by month or by quarter.
 - Analyze FCRM data by each channel (active and static), sex, age and other key diversity characteristics, FCRM category and geographic area.
 - Summarize the key points in feedback received, noting the key characteristics of individuals sharing feedback, such as sex, age, disability and geographic area.
 - Track the response rate to feedback and complaints, calculating the percentage of response that meets the project's commitment to response time, and the average response time for each category and channel.
 - Identify any errors in the completion of the FCRM registry or concerns of FCRM data quality and data protection.



Refer to [Compass Standard 11, Key Action 3](#) and [Compass Standard 11, Key Action 4](#) for more guidance on analysis of MEAL data to inform reflection meetings.



Quality standard: Triangulate feedback and complaints with MEAL data to inform ongoing decision-making and adaptive management.



Key actions in emergency settings

- Triangulate and compare different perspectives within feedback received, as part of FCRM data interpretation.
- Interpret FCRM data along with monitoring data. FCRM data may help contextualize or explain underperformance against monitoring indicators.
- Make FCRM data available to program managers and decision-makers in the same accessible formats as other monitoring data, such as in data summaries, visuals and dashboards.

Raise concerns

If FCRM data analysis reveals that some channels are not used—or not used by certain groups according to sex, age and other diversity factors—or that the response rate or time is inadequate for some feedback or complaints, raise these concerns directly with the relevant program team so that they can further investigate and address gaps in the FCRM as needed.

Step 12. Assess FCRM effectiveness

As the situation on the ground evolves, FCRM practices also need to adapt to the changes in communication preferences and new opportunities to engage with community members and seek their feedback. Regular FCRM effectiveness checks should be integrated into ongoing monitoring and into real-time evaluations to inform any improvements needed to the FCRM and its evolution as the response transitions into longer-term recovery or development programming.



Quality standard: Conduct FCRM effectiveness checks to ensure channels are safe, accessible and trusted by community members for programmatic and sensitive feedback and complaints.



Key actions in emergency settings

- Include effectiveness checks as part of planned evaluations. More frequent, lighter-touch checks on effectiveness can be included in PDM or on-site monitoring activities.
- Include questions in final surveys and focus group discussions to assess community members' level of satisfaction with the responsiveness of the FCRM and to what extent the FCRM met their information and communication needs.
- Reflect with MEAL, program and field staff on effectiveness check findings to generate an action plan to address any gaps and concerns. The emergency coordinator should oversee this action plan to ensure necessary changes are moving forward.



Quality standard: Use evaluations to contribute to project and agency learning about effective FCRMs.



Key actions in emergency settings

- As part of a real-time evaluation, include an FCRM effectiveness check in the terms of reference. Add PMF indicators and guiding questions on feedback and complaints into evaluation methodologies. Use the indicators and guiding questions to self-assess on current gaps and develop an action plan to address priority issues.
- Talk to staff to determine their clarity on FCRM roles and responsibilities, understand their experiences of FCRM, and identify opportunities to better support them in implementing an effective FCRM.
- Consider revisiting FCRM effectiveness during subsequent final evaluations or after action reviews.



Tool 12: FCRM effectiveness check

Presents key steps, guidance and reflection questions for use in interviews and focus groups associated with the annual FCRM effectiveness checks.

Use CRS Protection Mainstreaming Framework (PMF)* Feedback and Complaints Indicators and Guiding Questions in Annex 2 to assess effectiveness in relation to the FCRM's safety, access and dignity for diverse program participants.

* The full PMF and associated tools and resources can be found [here](#).

What makes an effective FCRM?

Key characteristics of an effective FCRM are summarized so that teams can reflect on these when seeing critical changes in use.

- ◆ Staff (MEAL and program) have clear roles related to FCRM implementation and have the necessary capacity to fulfill those roles.
- ◆ Feedback and complaints data are used in ongoing project decisions.
- ◆ Sensitive complaints are escalated immediately as per agency protocol.
- ◆ Community members are aware of the purpose of the FCRM, how to access individual channels and what to expect regarding response.
- ◆ Individuals from diverse community groups are using the FCRM and deem it safe, accessible and responsive.
- ◆ Satisfaction with the FCRM is high among individuals who have submitted feedback or complaints.
- ◆ All FCRM channels are in use.
- ◆ The response timeline meets or surpasses the commitment that teams have made.
- ◆ Community members trust the FCRM.

CLOSE-OUT

13

Update and
communicate
close-out plan

14

Archive data
and document
learning

By the end of the close-out phase, teams should have:

- ☒ Updated an FCRM close-out plan with clear responsibilities for all stakeholders, as applicable.
- ☒ Communicated the FCRM close-out plan to community members and stakeholders.
- ☒ Archived de-identified FCRM data according to requirements and data protection practices.
- ☒ Consolidated all FCRM documentation, including the SOPs, for future reference.

Step 13. Update and communicate close-out plan

As the emergency continues and transitions into longer-term recovery programming, communicate changes related to FCRM to support accountability and maintain trust. Close-out will depend on the scale of the emergency intervention, the scope of the FCRM and the channels used. Here are several common scenarios for FCRM close-out:

- As the response transitions into longer-term recovery programming, the FCRM evolves in scope to become more permanent and structured.
- While emergency project-level channels close at project completion, CP-level channels remain available, and communities are encouraged to continue using these to submit feedback and complaints.
- FCRMs are fully closed upon emergency project completion and the team communicates the timeline and process for closure well in advance so that community members are able to share feedback and complaints as needed.
- FCRMs are handed over to partner organizations upon project closure through the transition of staff roles and responsibilities and capacity support as needed.



Quality standard: Integrate FCRM close-out into wider project close-out decisions and activities.



Key actions in emergency settings

- Assess feasibility of sustaining an FCRM (in its full or partial scope) with senior leadership, emergency coordinator, partners and peer organizations when in consortium arrangements.
- Identify any capacity strengthening needs related to FCRM implementation and management.



Quality standard: Communicate the close-out plan to communities and other stakeholders.



Key actions in emergency settings

- Provide clear information about FCRM close-out or transition plans to partners, consortium members, community members and other stakeholders. Explain the timeline and steps that will be followed.
- Update existing materials or develop new ones with close-out messages. Translate these into local languages and test them with community members to ensure messages will be clearly received.



Archive FCRM data according to donor, government and agency requirements.

Step 14. Archive data and document learning

During close-out, teams should archive FCRM data according to donor, government and agency requirements as they apply to all MEAL data. Teams will, at minimum, de-identify all personal information in the FCRM dataset before it is archived, but additional data protection practices may be required within the operating context (refer to [CRS Guidelines for De-Identifying Data](#) for additional information). Additionally, teams have an opportunity during close-out to reflect on FCRM implementation through a light after action review and thus contribute to learning and FCRM quality.



Quality standard: Apply responsible data values and principles when archiving FCRM datasets.



Key actions in emergency settings

- Review donor requirements:
- If there are donor requirements or national regulations on sharing and archiving data sets, consult the data protection team and MEAL teams to finalize key steps related to FCRM data.
- In the absence of donor or national requirements or regulations, archive or retain de-identified FCRM data for two years before destruction or deletion.
- De-identify FCRM data by removing all personally identifiable information:
 - Remove name, phone number and date of birth (age can be kept).
 - If feedback or complaints include names or specific locations or activities, remove references within the documented narrative of the feedback or complaint.

See the [CRS Guidelines for De-Identifying Data](#) for additional information.



Quality standard: Communicate the learning from FCRM design, implementation and close-out with programming and MEAL communities and other stakeholders.



Key actions in emergency settings


- Integrate questions on FCRM into evaluations and reflection events such as after action reviews and final evaluation.
- Communicate these findings to relevant stakeholders, including through coordination meetings.

Emergency Annexes

Annex 1: FCRM tools for each stage of the project cycle

DESIGN STAGE

Tools

- Tool 1: Feedback and complaints categories
- Tool 2: Context analysis checklist
- Tool 3: FCRM channels pros and cons
- Tool 4: Boilerplate language for FCRM in program proposals (see the [BHA Agency Resources SharePoint folder](#)  to access this resource)
- Tool 5: FCRM skills and competencies list

Key resources






- [Feedback Starter Kit](#) (IFRC 2019), Tool 15
-  [SMILER+ FCRM planning worksheet template](#) 

START-UP STAGE

Tools

- Tool 1: Feedback and complaints categories
- Tool 6: FCRM standard operating procedures template
- Tool 7: Establishing a feedback and complaints registry
- Tool 9: Checklist of information to share with communities
- Tool 10: FCRM roles and responsibilities table
- Tool 11: Interview questions for FCRM positions

Key resources



- [CRS Responsible Data Values & Principles](#) 
- [Best Practices for Data Sharing](#) 
- [CRS Guidelines for De-identifying Data](#) 
- [Safeguarding](#) Sharepoint page 
- [Privacy Risk Mitigation Tool](#) 

IMPLEMENTATION STAGE

Tools


- Tool 6: FCRM standard operating procedures template

Key resources

-  [Compass Standard 11, Key Action 3](#)
-  [Compass Standard 11, Key Action 4](#)
- Community consultations on FCRM, [SPSEA Toolkit](#), Handout 5.2, page 92
- Community dialogue on PSEA, [SPSEA Toolkit](#), Tool 6, page 226

CLOSE-OUT STAGE

Key resources

- [CRS Guidelines for De-identifying Data](#) 
- [After Action Review Guidance](#) (Better Evaluation 2019)

Annex 2: CRS Protection Mainstreaming Framework (PMF) Feedback and Complaints Indicators

Guiding questions to further assess the below indicators can be found on [EFOM, in the PMF, Annex 2, pages 12-14](#). Each indicator can be rated in one of three ways (fully met/partially met/not met). It is up to teams to decide which method they use to rate (e.g. by numbers, colors, letters, etc.).

Example indicator scoring methods

Green	1	Gold	These indicators have been fully met/ all the actions are being implemented
Yellow	2	Silver	These indicators have been partially met/ some of the actions are being implemented
Red	3	Bronze	These indicators have not been met/ none of the actions are being implemented

	What this means		Indicators	Rating			Notes
Feedback and complaints mechanisms	Communities and people are able to provide feedback and make complaints in a safe, dignified and confidential manner, and receive an appropriate response when they do so	5.1	Diverse groups are consulted on appropriate and context-specific channels for feedback and complaints, particularly those of a sensitive nature, including allegations of sexual exploitation and abuse, fraud and corruption.				
		5.2	Diverse groups have access to and are fully aware of how to use complaints and feedback mechanisms, and understand how the complaint/feedback will be managed as well as when to expect a response.				
		5.3	Staff act on feedback and complaints in a timely, fair and appropriate manner that prioritizes the safety of the complainant and those affected at all stages.				
		5.4	Staff understand the management system in place to support sensitive complaints handling, including the procedure to ensure access to necessary support for complainants particularly survivors of sexual exploitation and abuse (SEA).				
		5.5	Staff refer complaints that do not fall within the scope of the organisation to a relevant party.				



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