

## AND FINDING OUT WHAT YOU THINK OF US

Help us to deliver the best possible service by completing and returning the comments form below – pre-paid envelope provided.

**DON'T FORGET THERE'S A FREE DRAW** for an item of Belleek China to be held at end of the year. Congratulations to last year's winner, Mrs Campbell, Kinross, Scotland.

Please tick the appropriate indicator to record you views

	EXCELLENT	GOOD	OK	POOR	VERY POOR
Waiting & Response Times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude of Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Value for Money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall impression of	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facility/Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Which aspect of using a T.I.C. is the most important to you? .....

.....

.....

Can we improve upon our service standards? .....

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.....

Did you find this leaflet clear and helpful?

Yes  No

If not, why not? .....

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Did you feel that you were treated fairly and sensively?

Yes  No

Are there any other comments you would like to make?

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Please tick the appropriate indicator if you have used our complaints procedure:

	EXCELLENT	GOOD	OK	POOR	VERY POOR
Ease of complaint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handling of complaint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Response to complaint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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If you would like us to reply to you, please give the following details:

Name .....

Address .....

.....

.....

Telephone ..... Date .....

## COMPLAINTS PROCEDURE

### STAGE 1

**I** Contact a member of staff at the centre who will try and resolve the problem immediately.

**II** If unresolved immediately, a staff member will assist you to complete the complaints form opposite and your complaint will be referred to Ms Charlotte Wilson, Executive Officer Visitor Services.

**III** An acknowledgement will be issued within 3 working days and a full reply will follow within 14 working days of receipt, or you will be advised regarding any delay.

### STAGE 2

**IV** If you are not happy with the responses which you receive, please write to the Director of Leisure, Tourism and Arts, Fermanagh District Council, within one month, giving details of your complaint.

**V** Your letter will be acknowledged within 3 working days of its receipt and an independent review of your complaint will be carried out by a senior officer. You will receive a full reply giving findings of the investigation within 14 working days of receipt, or you will be advised regarding any delay.

### STAGE 3

**VI** If still unsatisfied with the response, you may take your complaint to the NI Ombudsman and Commissioner for Complaints or the Citizens Advice Bureau.

*All complaints will be dealt with confidentially.*

BUSINESS REPLY SERVICE  
Licence No BEL 2164

Miss Charlotte Wilson  
Fermanagh Tourist Information Centre  
Wellington Road  
ENNISKILLEN  
BT74 7EF

FOLD AND AFFIX WITH TAPE AND POST IT OFF TO US

# Haven't got a clue where to take your next break???

**Fermanagh Tourist Information Centre**  
will help you solve the puzzle - and never a cross word!



Where to go for a day trip?  
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What to do?  
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How to relax?  
-----

Where to stay?  
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**Get in touch today and we'll fill in all the blanks for you!**

Fermanagh Tourist Information Centre, Wellington Road, Enniskillen.  
Tel: 028 6632 3110 • Email: tic@fermanagh.gov.uk • Web: www.fermanagh.gov.uk

OPEN THROUGHOUT THE YEAR - Monday - Friday 9am-5.30pm  
(July & August to 7pm) - In addition Easter to September  
Saturday 10am-6pm; Sunday 11am-5pm; Open most Bank Holidays 10am-5pm  
October - Saturdays and Sundays 10am-2pm



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**COMPLAINTS RELATING TO OTHER TOURIST PROVIDERS**  
If your complaint is not about services you received at the Tourist Information Centre, we will provide a confidential channel for complaining and assist you in contacting the appropriate organisation (eg. The Northern Ireland Tourist Board). We will do our best to ensure that your complaint is resolved to your satisfaction.

**Other useful contacts**

**MR R CONNOR,**  
Clerk & Chief Executive,  
Fermanagh District Council,  
Townhall, Enniskillen.  
Tel: 028 6632 5050 Fax: 028 6632 2024  
E-Mail: chiefexecutive@fermanagh.gov.uk

**MR ROBERT GIBSON,**  
Director of Leisure, Tourism and Arts,  
Fermanagh District Council,  
Townhall, Enniskillen.  
Tel: 028 6632 5050 Fax: 028 6632 2024  
E-Mail: robert.gibson@fermanagh.gov.uk

**MR T FRAWLEY,**  
Ombudsman,  
Progressive House, 4th Floor,  
33 Wellington Place, Belfast.  
Tel: 028 9023 3821 Fax: 028 9023 4912  
E-Mail: ombudsman@ni-ombudsman.org.uk

**THE MANAGER, Citizens Advice Bureau,**  
1 Belmore Mews,]  
2 New Street, Enniskillen.  
Tel: 028 6632 4334 Fax: 028 6632 8092

**NORTHERN IRELAND TOURIST BOARD,**  
St Anne's Court,  
59 North Street, Belfast  
Tel 028 9023 1221

## FORMAL COMPLAINT

Date .....

Name (Mr/Mrs/Miss) .....

Address .....

Postcode .....

Tel No. we can contact you at .....

Name and Address of facility/establishment you are making the complaint about:

Please give full details of your complaint including the date of its happening (continue on page 15 or on a separate sheet of paper if necessary)

Was the complaint referred to the service(s)/department at the time?

Yes  No

If yes, what was the result? .....

Who was the person in the T.I.C. you first contacted? .....

Did you receive a response to your complaint?

Yes  No

Would you like us to put matters right? .....

(In the case of acting as a complaints channel to other members of the tourist industry)

Do you wish us to withhold your name when contacting provider/ premises?

Yes  No

Signed .....

Date .....

*This document is post paid. When completed simply fold and affix the outer edge with self-adhesive tape and post it off to us.*