

Annual Report 2023-24

This Annual Report is submitted to the Executive Office pursuant to paragraph 14(1) of Schedule 1 to the Victims' Payments Regulations 2020.

Contents

President's Foreword	3
Purpose and Principles	5
Board Membership and Responsibilities	6
Operation of the Board	7
Board Committees	8
Overview and Impact of the Board's Work in 2023/24	14
Communications and Engagement	16
Applications to the Scheme	17
Typical Case Scenarios	18
Statistics 2023-24	22
Complaints and Compliments	25
Future Plans	26



President's Foreword

On completion of a third reporting period, I am pleased to present the 2023 - 2024 Annual Report for the Victims' Payments Board (VPB).

Throughout this period, the Board has continued to engage extensively with victims, their representatives and other key partners. This Annual Report demonstrates the Board has made significant progress in delivering all aspects of the Troubles Permanent Disablement Payment Scheme (the Scheme) and, importantly, the amount of victims' payments awarded has increased substantially.

The core purpose of acknowledging the harm suffered by those injured in the Troubles whilst promoting reconciliation between people impacted by our troubled past lies at the heart of the Board's work.

The Scheme has been operational since 2021. We continue to embrace opportunities to enhance our service delivery, improve our business processes and procedures and ensure the Scheme remains victim-centred. To that end, the Board commissioned the Innovation and Consultancy Services (ICS), Department of Finance, to undertake a review of the Scheme's operational arrangements. This work will be taken forward with a view to improving our business procedures and realigning our administrative structures.

The work of the Board has increased significantly during this reporting period. We have undertaken more than 20,000 engagements with applicants, their representatives, valued partners and other key stakeholders.



Additionally, we increased our direct engagement with members of the public in order to further raise awareness of the scheme and to better inform prospective applicants. A widespread leaflet campaign to over 800,000 homes in Northern Ireland provided details of the Scheme and the application process.

In this reporting period, there have been more applications than the two previous years combined. Following the leaflet campaign, we have seen applications to the Scheme increase from just over 2100 to 7300. Applications were received from 19 countries across the world with applicants ranging in age from 18 to 90+.

We have listed 500 more hearings than the previous reporting period, and made payments of over £23 million to applicants taking total awards to more than £38 million.

A key priority for me and all those involved in the Scheme is to ensure fair and consistent outcomes for victims, and to remain attentive and responsive to the feedback and concerns of victims and their representatives.

I want to pay tribute to our dedicated Secretariat and administrative teams who have worked diligently and tirelessly throughout this busy reporting period.

The increased number of applications and contacts with applicants and their representatives is most welcome. It reflects the focused work undertaken by the Board in the last year to increase awareness of the Scheme not only in Northern Ireland but further afield. However, it remains a challenge to progress applications as quickly as we would like. The time taken to process applications and conclude our crucial evidence-gathering work can be adversely impacted by the evidential complexities inherent in a Scheme dealing with matters which often date back many decades.

I recognise sound governance arrangements are essential to serving victims with honesty, transparency and integrity. Board members continue to provide strategic leadership on matters regarding governance, risk management, policy development, service improvements and Scheme enhancements. Committees of the Board work assiduously on a wide range of important and strategic priorities which seek to improve the overall effectiveness of the Scheme. I am grateful for their support and assistance.

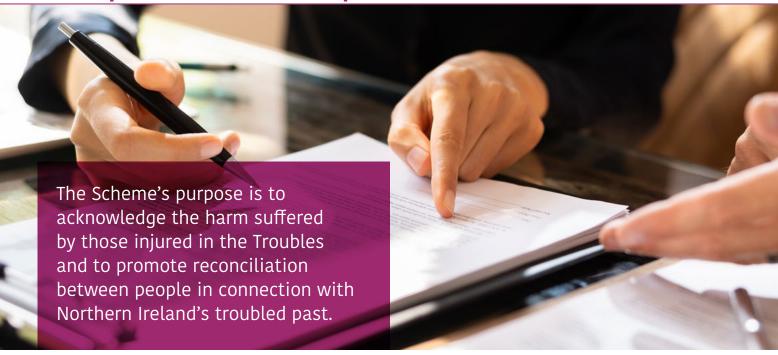
On behalf of the Board, I reaffirm our commitment to work collaboratively with victims, their representatives and our key partners to prioritise, and be responsive to, the needs of victims, to communicate effectively with applicants and to acknowledge the harm suffered by those injured in our troubled past.

Gorald Mc Almden

The Honourable Mr Justice McAlinden, Victims' Payments Board President



Purpose and Principles



The Scheme also provides recognition of the implications of living with disablement caused by a Troubles-related incident/s and the associated impact of such disablement on carers who are often family members; and acknowledges that in many cases coping with the disablement caused by the serious injury had an adverse financial impact on victims and their families.

The VPB is required to apply the eligibility criteria as set out in the Regulations, and it is important to emphasise this Scheme cannot meet the needs of all the victims of the Troubles in Northern Ireland.

Throughout the reporting year, the Scheme received an increasing volume of applications. With the support of our staff, and improvements to operational systems and governance structures, we have worked hard to provide high-quality services and administer applications fairly and efficiently.

The Board is committed to obtaining as much information as is reasonably practicable to ensure all relevant information is available to panels when making fully-informed and

fair decisions. Although time-consuming, the purpose of gathering such information is to enable applicants to present their case as fully as possible.

During this reporting period, new appointments have taken Board membership to 71. We have maintained a staffing complement of 125 in a challenging recruitment and retention environment.

The Regulations set out the Scheme's guiding principles which are:

- the need to prioritise, and be responsive to, the needs of victims of Troublesrelated incidents;
- the need to be transparent and to communicate effectively with the public and victims of Troubles-related incidents;
- the need for the Scheme to be straightforward and simple to navigate;
- the need for applications to be determined without delay;
- the need for personal data to be handled sensitively.

Board Membership and Responsibilities

As President of the VPB, the Honourable Mr Justice McAlinden has responsibility for the leadership and strategic direction of the Board, and for the efficient and effective implementation and delivery of the Scheme. At the end of this reporting year, the Board comprises 23 legal, 25 medical and 23 ordinary members.

Members are appointed as judicial office holders by the Northern Ireland Judicial Appointments Commission to determine applications under the Scheme. Board members also have responsibility for assisting the President with corporate governance requirements such as policy development, quality assurance, financial and risk management.

The Board's statutory functions, duties and powers can be summarised as follows:

- to receive and administer applications made to the Scheme;
- to determine entitlement to, and the amount of, payments in respect of injury caused by a Troubles-related incident:
- to develop guidance and make arrangements for the assessment of degree of permanent disablement;
- following determination, to notify applicants regarding eligibility to, and amount of, payments as soon as reasonably practicable;

- to constitute panels to assess and determine applications and appeals, conduct further assessments and undertake reviews of determinations:
- to facilitate the provision of independent advice and support to applicants;
- to develop operational policies and procedures;
- to appoint advisors to assist the VPB;
- to provide an annual report on the exercise of its functions.

The panels who make the determinations are comprised of one legal member who acts as chair, one ordinary member and one medical member with each having an equal say in the final decision. Appeals against panel decisions are determined by panel members who were not involved in the original determination.

Board Members undertake regular training on a range of professional development topics. In this reporting year, Board members completed training on topics including:

- VPB Regulations
- Reviewing Health Care Assessment Reports
- GDPR and handling sensitive data



Operation of the Board

The VPB is a body corporate and operates independently of, and at arm's length from TEO, under the provisions of a Partnership Agreement. That Agreement sets out the framework for the effective governance, financing and operation of the VPB and is available to read on the VPB's website.

The VPB has autonomy to operate as a separate legal entity with its own governance arrangements. A Financial Management Memorandum of Understanding (MoU) has also been agreed between TEO and DoJ in respect of the Scheme. The MoU sets out arrangements for funding the VPB's work and the reporting arrangements between TEO and DoJ in support of VPB work.

The VPB Secretary is responsible for the day-to-day operations and for providing effective leadership and management of the administration team and Board Secretariat. The Board's administration team supports the President and Board members when determining entitlement to payments under the Scheme.

A skilled and committed workforce is critical to the successful achievement of our corporate aims and objectives and to meet our challenging performance measures. Staff numbers continued to increase throughout this reporting year enabling the efficient progression of cases.

Following an open and competitive tender process, Capita was contracted by DoJ to assess the degree of permanent disablement suffered by victims. The Board monitors the operation of the contract to ensure it is fit for purpose and has the needs of victims at the front and centre of all assessment processes.

Board Committees

The work of the VPB is supported by the Business Assurance, Operational and Rework Committees. These Committees operate within agreed terms of reference and deal with governance and risk, supporting the effective delivery of the Board's operations and consideration of requests for the reworking of applicant medical assessments.

The Committees comprise members of the Board and are supported administratively by members of the Senior Management and Administrative Teams. The Committees meet regularly and provide a report of strategic work and projects at each sitting of the Board to assure members as to the adequacy and effectiveness of the Scheme. Additionally, the Board establishes sub-committees and multi-disciplinary working groups to consider specific matters arising from time to time.

In this reporting period, the VPB's three Committees undertook important work to assist the President and the Board to fulfil their statutory functions. A summary of the activities of each Committee is set out below:



Business Assurance Committee (BAC)

The Business Assurance Committee (BAC) plays a central role in the governance of the Board. It is tasked with providing assurance on a range of strategic matters. The work of the BAC provides essential support to the President and the Secretary in his role as Senior Accounting Officer (SAO) by:

- providing assurance in respect of strategic business planning, risk management, governance and internal controls;
- developing and overseeing business policies, governance documents and guidance notes;
- overseeing the Complaints Policy and Procedure with delegated responsibility for all Stage 3 complaints.

In this reporting period, the BAC welcomed two new members, bringing its membership to five legal, three medical and four lay members. The additional appointments were required to respond to the BAC's increasing workload.

The BAC met formally on six occasions throughout the reporting period. The work of the BAC is highlighted in the Chair's quarterly report to the Board.

Standing agenda items include the Risk Register, Business Plan, Operational Statistics, active Stage 3 complaints and engagement with victims' groups.

As part of its ongoing work in this reporting period, the BAC continued to exercise delegated authority for:

- · Members' Code of Conduct
- The Write-off of Overpayments Register and reporting all write-offs to the Board
- Members' Register of Interests and the Gifts and Hospitality Register annual review
- Direct Award Contracts scrutiny and approval







Business Assurance Committee (BAC) continued

In the course of 2023 – 2024, the BAC completed specific targeted work in the following areas of strategic importance to the Board:

- Regular reviews of the Risk Register to ensure the effective management and mitigation of risk. The Register was amended and updated in response to environmental, operational and sectoral factors with approvals provided by the Board.
- Drafted and edited key publications for Board approval, including the Business Plan and Annual Report. The BAC is responsible for identifying where improvements to governance can be implemented through the enhancement of internal procedures and controls. In that regard the BAC devised and obtained approval for: the Oral Hearing Protocol, Fraud Prevention Policy, Eligibility Checklist and Members' Code of Conduct.
- To enhance applicant/appellant understanding of the Scheme and its requirements, and to provide a more straightforward application/appeal process, the Committee developed an Eligibility Checklist, revised and restructured the Application to Appeal Form and its accompanying Guidance and commenced similar work on the Application Form.
- Compiled the Board's response to the Real Time Review.
- Established a statistics subgroup to provide data which enables the BAC and other Committees to identify areas where service improvements may be made and associated risks mitigated.

The BAC lead cross-Committee work on expediting priority cases and joined colleagues in considering the challenges presented by linked cases and revising guidance on Troubles-related incidents.

The BAC's strategic work priorities are agreed in consultation with the Board Secretary, taking into account the need to be agile and responsive to the emerging needs of victims, the political and business environment and the requirement to develop and update policies.

Looking forward, the Committee has commenced and will continue work on: Regulation 19 Guidance, Regulation 20 Guidance, Raising a Concern in the Public Interest Guidance, GDPR Guidance, Updated Application Form and Guidance.



Operational Committee

The purpose of the Committee is to provide oversight on behalf of the Victims' Payments Board (VPB) of the day-to-day activities of the panels. The Committee met six times during the reporting period with much of the work progressed by subgroups in between committee meetings.

In this reporting period, the Committee welcomed two new members, bringing its membership to six legal, two medical and four ordinary members.

Work completed during the reporting period included:

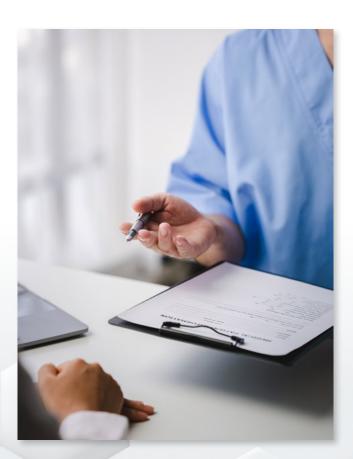
- Two 6 monthly analyses of all adjournments, identifying key trends and providing recommendations;
- Providing recommendations in relation to adding additional Troubles-related incidents (TRIs) after evidence gathering;
- Exploring and identifying the optimum process for the determination of eligibility to ensure the process is victim-centred;
- Drafting and presenting recommendations in relation to oral hearings;
- Providing input into revised application and appeal forms;
- Examining issues in respect of applicants with pending prosecutions and where a conviction later arises which may retrospectively impact upon the determination;
- Contributing to the Board response to the Real Time Review;
- Liaising with Senior Management Team and Secretariat to explore the number of applications listed in each panel sitting in order to ensure efficient and effective decision making.

Work progressed during the reporting period included:

- Undertaking full review of all template letters sent to applicants following feedback from support groups;
- Taking the lead in developing a database of determinations made by panels;
- Collaborating with a cross-committee subgroup to find solutions to expedite priority cases;
- An examination of the current Guidance Note on the principles of natural justice;
- Leading a cross-committee subgroup to examine issues regarding linked applications.

Standing items on the Committee's agenda:

 Review of the retained log of operational issues. Many of these were examined and concluded during the reporting period.



Rework Committee

The Rework Committee filters rework requests from panels which consider if the assessment of permanent disablement in an application contains errors so significant they either:

- jeopardise the accuracy of the degree of disablement; or
- risk significant harm to the Applicant (such as inclusion of harmful information).

In this reporting period, the Committee welcomed two new members, bringing its membership to five legal, four medical and four ordinary members.

The Committee met on seven occasions throughout the reporting period.

During the reporting period, the Rework Committee:

- received 22 rework requests: of these, 17 were forwarded to Capita, and 12 were accepted for rework;
- held eight clinical governance meetings with Capita;
- met in a six-weekly pattern in advance of the Capita meeting to ensure full preparation.

The meetings with Capita achieved the following positive outcomes:

- greater insight into Capita's approach and methodology;
- improved understanding of the training provided to assessors and of Capita's application of the Healthcare Guidance;
- regular feedback on rework requests and assessments.

Working collaboratively with Capita, the Rework Committee:

- updated the Guidance to Healthcare Professionals;
- developed a new process to amend reports, when rework is rejected for a report that contains errors;
- introduced a streamlined process for listing medical evidence considered in the Initial Review section of the Capita Report;
- amended the Terms of Reference for the clinical governance/rework process;
- trialled a new 'Acorns' process, giving a simplified, clearer report to panels where more than one assessor has been involved;
- introduced an oral feedback section in the clinical governance meeting to explore rework requests not accepted by the Committee and therefore not forwarded to Capita. This is in addition to the written feedback provided by Panels. Such feedback allows learning and action points to be considered collectively.

Other work completed included:

- addressing the need for a diagnosis in cases of impaired psychological function;
- provision of training about the rework process to newly appointed Board members.

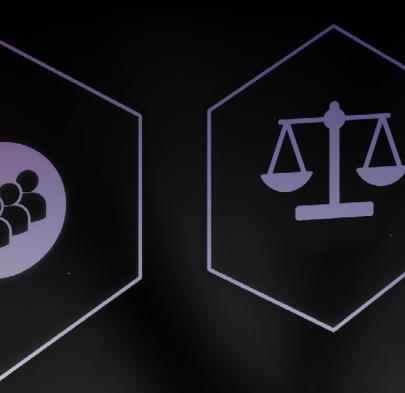
Work in progress:

- A pilot Scheme to expedite the Assessor Approval process;
- Working with Capita to improve the time taken to progress priority cases.

13



COMMITTEE





Overview and Impact of the Board's Work in 2023/24



over £23 million

Total amount paid to applicants



1,093

Number of hearings held



13,063

Number of emails handled



7,060

Number of phone calls handled



3,054

Total number of applications



2,949

Applications including a psychological element



We increased the level of engagement with our community and professional partners, with a view to identifying and connecting with under-represented and hard to reach groups. During this reporting period, we had 12 meetings with sectoral groups focusing on the work of the Board and receiving valuable feedback on the Scheme.

The Communications Plan ensures the Scheme's core purpose is widely communicated.

We improved and refined our operational processes and efficiencies.

We introduced single member panel hearings to streamline the assessment of multiple incident applications.

We developed and introduced an Oral Hearings Protocol to underpin the conduct and smooth running of oral hearings.

We improved governance arrangements to include the introduction of an Eligibility Checklist and development of New Application to Appeal Form and Guidance.

The newly established Legal Forum provides a vehicle for the Board to discuss best practice and promote consistency in decision-making.

We increased our staff numbers by 40% and secured additional office space to meet forecasted demand.

Crucially we maintained the VPB's autonomy and independence whilst building open, honest and collaborative working relationships with the Executive Office.

Board members and staff received training to promote consistency in decision-making and aid sensitivity in handling applications.

We continued to work with our information partners to improve the quality of information available to panels.

We met with Victims Groups throughout the year to receive feedback and identify service improvements.

We produced the Board's second Business Plan.

Communications and Engagement

Effective engagement remains a priority for the VPB to ensure victims and survivors can readily access the Scheme and receive the acknowledgement and recognition they deserve. Regular formal meetings continue between VPB, TEO and VSS.

The VPB meet regularly with a wide range of partners and interest groups working with and for victims including:

- · Ashton Centre
- · Commission for Victims and Survivors
- · Elv Centre
- PSNI Benevolent Fund
- Relatives for Justice (RFJ)
- South East Fermanagh Foundation (SEFF)
- · Victims and Survivors Service
- WAVE Trauma



These meetings provide a vitally important platform for providing victims' views and sharing feedback, as well as a forum for highlighting issues regarding the administration of the Scheme.

We adopt a "lessons learned" approach informed by the feedback we receive, and make continual improvements to the Scheme for the benefit of victims and their families.

The Board's Communication and Engagement Plan is regularly reviewed with our media partners. This plan assists the Board to engage directly with victims and their representatives. It also aims to increase awareness of, and accessibility to, the Scheme and encourages applicants to engage.

As part of the Communications and Engagement Plan, we have also developed an effective programme of outreach to include the hard to reach and under-represented victims and made a number of improvements to our advice, guidance and information for applicants. In this period, engagement has included meetings with the Veterans' Commissioner and Police Benevolent Fund.

During this reporting year, we undertook a leaflet mail drop campaign to all 839,000 Northern Ireland householders to raise awareness of the Scheme. Working with other partners, the leaflet was available through all NI Healthcare facilities, libraries, churches, and MP, MLA and local council offices.

We continue to focus on the VPB's external communications, with a view to making our website, guidance and all forms of engagement appropriate and easily understood.

Applications to the Scheme

Applications to the Scheme are made using the VPB application form either online or by post. It is important for applicants or their representatives to provide as much detail and supporting evidence as they can. The Victims' Payments Board website (victimspaymentsboard.org.uk) has guidance on how to do this and VPB staff can help answer any questions before an application is submitted.

We prioritise applications from those applicants over the age of 80 or with a terminal illness. The complexities of applications we receive are unlike many other Schemes and so we do not, and cannot, have a set timescale for applications to reach the determination stage.

All applications are unique, and each application is considered on its own merits. Although the burden of proof is on applicants, the VPB has committed to adopting a victim-centred approach by endeavouring to obtain evidential information and medical records on behalf of applicants.

As is well known, a large volume of the applications received by the Board relate to incidents from many years ago. Many applications include more than one incident requiring a lengthy evidence-gathering process to ensure all information is on file before going to a panel for determination.

We write to applicants to tell them when their application proceeds to the next stage or if we need more information from them. There may be lengthy periods of time between these stages while we gather essential information from our information partners. All our staff are trained to assist applicants appropriately and handle their personal information sensitively and securely.

Cases with complex eligibility issues or multiple incidents may go to an eligibility panel for consideration before being referred for an assessment of disablement by a Health Care Professional (HCP).

Following the medical assessment, applications are considered by a panel comprising usually one legal member, one medical member and one ordinary member. The panel will consider all the information gathered and make a determination about payments to the victim in line with the Regulations.

A panel may decide to adjourn its decision for a variety of reasons, including to obtain further information or clarification. Panels make determinations based only on the information provided to them.

If an applicant is dissatisfied with the decision of a panel, they can appeal the decision within 12 months of being notified of the determination.

We have developed and implemented processes and administrative arrangements to ensure appeal hearings proceed in a timely manner.

There were 130 appeal hearings throughout this reporting year, an increase of over 95% on the previous reporting period. Of these, 51 proved successful representing an increase of over 400% in successful appeals.

Appeals can be brought on a number of grounds as set out in the Regulations. Appeals provide applicants with an opportunity to provide further evidence and/or submissions, including the opportunity to give evidence in person.

Typical Case Scenarios

While each application is fact-specific, we have developed some typical case scenarios to assist and inform the public. This is in response to feedback regarding some misconceptions about the Scheme.

These scenarios are provided for illustrative purposes only and are not based on any individual or specific applications.



19

SCENARIO 1 Eligible **Application**

In this scenario, the applicant was badly injured in a well-documented bomb explosion. The evidence indicated this was a Troublesrelated incident (TRI) at which the applicant was present and suffered permanent physical and psychological injuries. The case was progressed for a Capita Health Care Professional assessment. The applicant was assessed to have a permanent disablement at more than 14%. The case was referred to a panel for a determination on eligibility and payment. The panel was satisfied (on the balance of probabilities) the applicant was eligible under the Scheme and was entitled to victims' payment. The applicant was notified in writing of the panel's decision and provided with a summary of reasons, along with payment information.

SCENARIO 2 "Immediate aftermath"

The applicant's father, who was the victim of a gun attack, was taken to hospital by ambulance but sadly died shortly afterwards. Police and newspaper reports from the time confirmed the incident took place as described by the applicant. She had been diagnosed with depression as a result of the incident. The applicant was not present at the incident. Although she attended hospital after the incident, she did not see her father at any point after the shooting. The case was listed before a panel who determined the applicant was not eligible for payments as she was not present at the incident or in the immediate aftermath of the incident. The case was determined without asking the applicant to undergo a medical assessment. The applicant was provided with the panel's decision and summary of reasons as to why she was not entitled to victims' payments.

20

SCENARIO 3

Establishing a Diagnosis

The applicant had been involved in several Troubles-related incidents (TRIs). Although a number of psychological symptoms were referenced in the documentation, the applicant's GP could not confirm a diagnosis or working diagnosis of a recognised psychological disorder.

The Scheme commissioned the services of a Clinical Psychologist and the applicant agreed to attend. The Psychologist prepared a report confirming a diagnosis of post-traumatic stress disorder. This report was provided to the Capita Health Care Practitioner who completed an assessment of disablement. While the initial adjournment meant a delay in the process, the applicant was determined as eligible for victims' payments.

SCENARIO 4 Multiple TRI's

The applicant referenced a large number of separate incidents occurring over a 25-year period. The dates and locations of incidents were not all known. The VPB obtained as much information as possible regarding the incidents from its information sharing partners. Panel eligibility hearings were adjourned on two occasions to obtain clarification from the applicant regarding certain aspects of some of the incidents and their significance for particular eligibility criteria. The panel then determined the applicant's eligibility for each incident based on the evidence gathered. The eligibility panel determined the applicant was not entitled to payments in respect of some of the incidents. The remaining incidents proceeded to a Health Care Professional for an assessment of the applicant's permanent disablement which was caused by those incidents. Following the assessment, a determination panel decided the applicant was entitled to victims' payments in respect of those incidents, and payments duly issued.

SCENARIO 5

Adjustment in Respect of Other Payments

The applicant was seriously injured in a bomb explosion and suffered permanent physical and psychological injuries. They were assessed to have a permanent disability of 100%.

A panel was satisfied on the evidence this was a Troubles-related incident and the applicant was present at the incident.

Under regulation 19, victims' payments must be reduced by the amount of all other relevant payments received by that person in respect of the same disablement.

In this case, the applicant was in receipt of war disablement pension payments from the Ministry of Defence for the same disablement.

As the panel has no discretion under the Regulations, the amount of victims' payments were significantly reduced by the amount of the war disablement pension received from the MOD.

Successful Appeal

An applicant claimed psychological injury after their car was forcibly taken from them at gunpoint. The applicant's car was used in an attempt to blow up an army base but the device failed to explode and the incident was not widely reported. It occurred a significant time ago and with deteriorating memory the applicant was unable to recall specific dates. In the absence of a date, the PSNI could not locate information relating to the incident. Despite the determination panel being sympathetic, the panel found the applicant was ineligible as there was insufficient evidence a Troublesrelated incident had occurred.

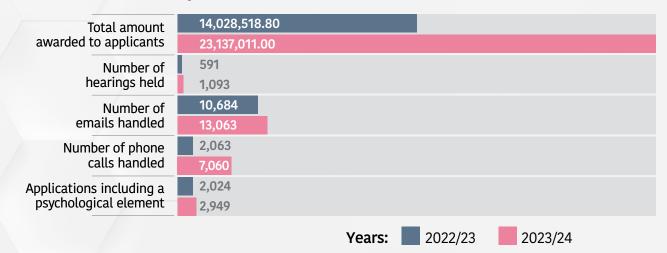
The applicant appealed the determination and presented new evidence. The appellant's nephew trawled newspaper archives from the local area and found a photograph of the car where it had been left outside the army base. The appellant had old holiday photos to prove he owned the car at the time. Using the newspaper date, a new PSNI information request was submitted, and details of the incident were found thus corroborating the applicant's account. The panel determined a Troubles-related incident had occurred and allowed the appeal.

Statistics 2023-24

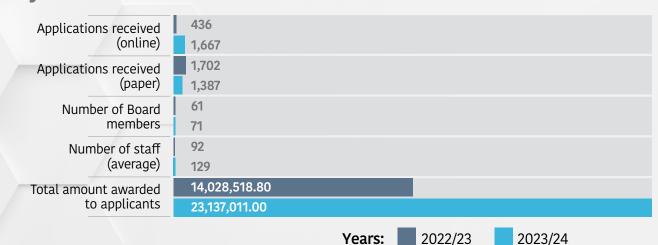
The VPB collates statistics and other data to monitor the quality of service delivery, identify themes arising from applications received and to assist in reviewing the effectiveness of the Scheme and the work completed during reporting periods. Whilst an assessment of statistics does not give a complete picture of the work of the VPB, the Secretariat and administrative teams, it can assist the Board to focus on areas of service improvement.

Key statistics for the reporting period of 2023/24 are illustrated here.

Overview and Impact



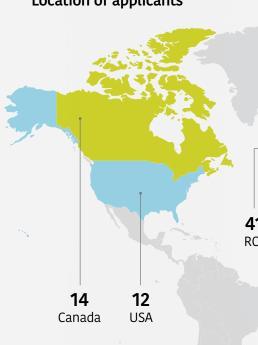
Key Outcomes





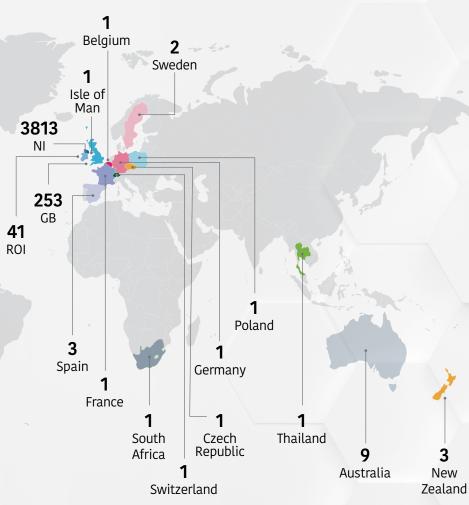
Demographics 2023/24

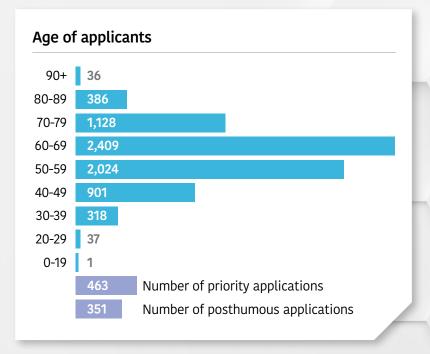
Location of applicants



Total applications so far

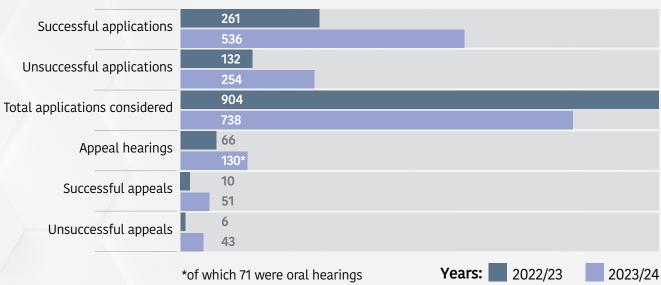
NI	6,760
ROI	63
GB	397
France	1
Belgium	1
Czech Republic	1
Isle of Man	1
New Zealand	6
Poland	1
Spain	5
Germany	1
Sweden	2
Canada	22
USA	21
South Africa	1
Australia	13
Thailand	1
Switzerland	1





Panel Work and Determinations







Complaints and Compliments

The VPB has a three-stage process for dealing effectively with complaints.

The Complaints Policy and Procedure provides for complaints to be raised formally or informally. Our focus is on achieving a resolution to concerns raised in a timely manner and in a way that properly addresses all elements of the complaint. The VPB views complaints as an opportunity to learn and improve our service delivery.

The Business Assurance Committee monitors the volume and nature of complaints, identifies emerging trends or themes and ensures high professional standards in the delivery of services are maintained. The BAC manages and investigates all complaints which have progressed to Stage 3. A sub-committee with the required expertise is established to review, investigate and adjudicate on all aspects of the complaint. The outcome of each Stage 3 complaint investigation is reported to the BAC with any recurring themes and key recommendations shared with all Board members. Lessons learned are used to improve services.

In this reporting year, the Board received a total of 56 complaints, with 54 of these resolved satisfactorily at Stage 1 or 2 of the process, and 2 progressing to consideration at Stage 3. Complaints in this period related mainly to delay in progressing applications, communications with applicants and health care assessments.

Recommendations to improve service delivery included the requirement to review the content and legalistic nature of letters sent to applicants. A focus was placed on the importance of using easy-to-understand language, and the provision of regular updates to applicants. These service recommendations were accepted by the Board and improvements made.

A record is also kept of compliments and notes of appreciation sent by victims, community partners and those who use our services. These primarily relate to the quality of customer service and positive staff attitudes.

The Board will continue to learn from complaints and compliments, make improvements to the administration of the Scheme and promote good practice.



26

Future Plans



This third Annual Report demonstrates the breadth and depth of the Board's strategic and operational work. Our work is complex, important and has significant impact on the lives and wellbeing of a wide range of people in Northern Ireland and beyond.

The Board and staff are acutely aware of widespread interest in their work and remain committed to making continuous improvements to the operation of the Scheme and, in particular, to enhancing the applicant experience.

Over the next 12 months the VPB will continue to examine ways to reduce delay in the application process. In that regard, the Innovation & Consultancy Services (ICS) of the Department of Finance was commissioned to undertake a Review of the Scheme's operational processes.

We will continue to work with ICS to identify measures to improve our service delivery, streamline our processes and enhance our governance output. The Business Transformation Project to deliver the envisaged improvements is a significant programme of organisational change which will run throughout, and extend beyond, 2025 – 2026.

In order to further raise awareness of the Scheme we intend to undertake an e-leaflet drop to partners across Great Britain and Republic of Ireland in the next reporting period. This follows our successful and well received information leaflet drop to all households in Northern Ireland.

We intend to introduce further improvements to VPB's governance systems and structures. These measures will include the delivery of additional standalone Guidance on our Regulations, and the launch of an online information video for applicants. Planned development of workshops and meetings between the Board, key partners and victim representative groups will provide greater opportunities for engagement, feedback and information sharing.

The Board Committees will progress the work on agreed strategic and corporate priorities, providing advice and assurance to the President and Board Secretary in respect of achievement against the key performance targets set out in the Business Plan; ensuring effective corporate governance and management of risk; and supporting the sound discharge of the Board's statutory duties and functions.

The Board will continue to carry out its roles and responsibilities with a sustained focus on placing victims at the centre of all our work and strategic plans, while delivering critical elements of the Business Transformation Project in the period 2025 – 2026.

Paul Bullick,

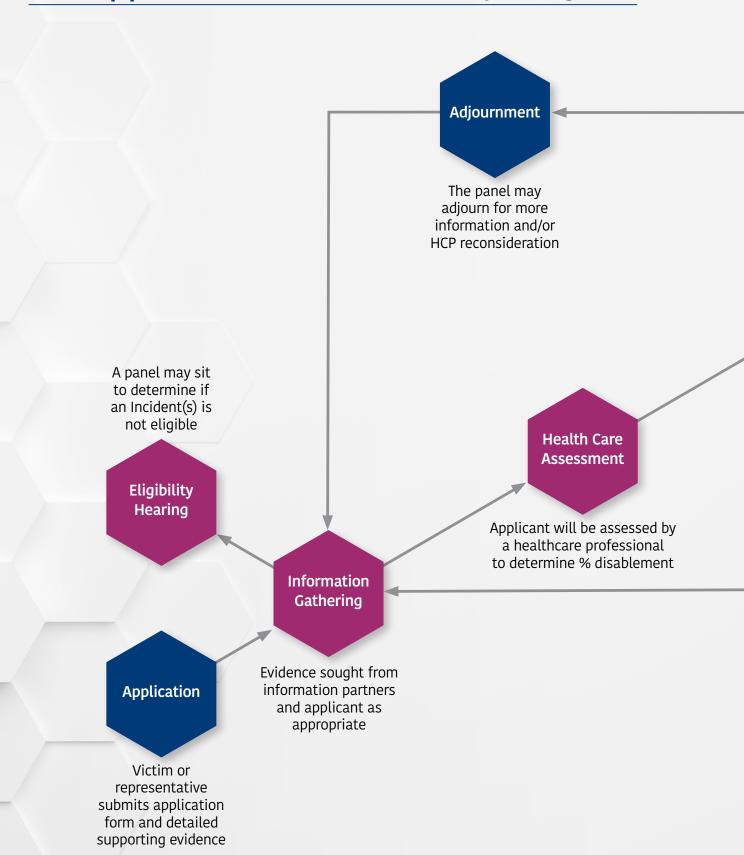
Secretary to the Victims' Payments Board

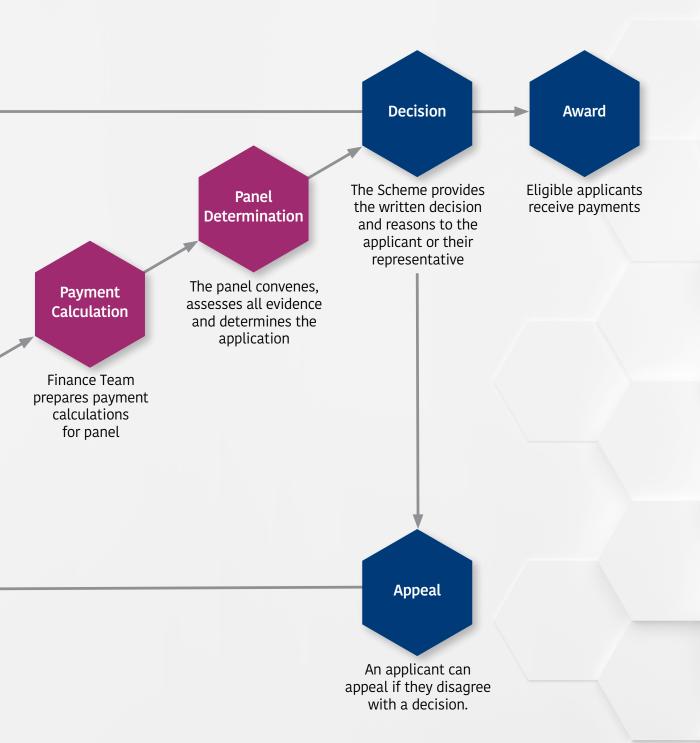


28

Appendix

The Application Process - step by step guide









Further information on all aspects of the Scheme and the support available can be found on our website at:

www.victimspaymentsboard.org.uk

If you need this report in a different format or a different language, please contact us.

By email: vpb@justice-ni.gov.uk

By post: PO Box 2305 Belfast BT1 9AX

Phone: 0300 200 7808