



St. Michael's House

Complaints and Compliments Policy

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Complaints and Compliments Policy

This Policy is divided into 2 sections:

Section 1 - Complaints

Section 2 - Compliments

SECTION 1 - COMPLAINTS

'A complaint is an expression of dissatisfaction'

At St. Michael's House we want to hear from our service users, their families and advocates on a very regular basis. We want people to tell us when we get things wrong just as we want to know what we are getting right.

All complaints are viewed as an opportunity to continuously improve the quality of the services that we provide, and to learn lessons in order to prevent similar occurrences in the future. We take all complaints seriously whether verbal or written.

We commit to handle complaints appropriately and sensitively in accordance with this policy. We also commit to safe-guarding the rights and dignity of both the people we support and our staff in the implementation of this policy (and associated supporting documents). We know that it is difficult for people to make complaints and we assure people that they will not be in any way disadvantaged by making a complaint.

Most complaints can be resolved at the first point of contact when both parties genuinely engage in trying to resolve the issues which led to the complaint. At St. Michael's House we support our staff to be confident in their ability and we give them authority to deal with complaints in the best interest of our service users.

People who make a complaint want the following:-

- An acknowledgement that something happened (did not happen).
- An explanation as to why it happened.
- An apology.
- An assurance that everything will be done to ensure that in as far as we can possibly predict this will not happen again to another service user.

Health and Social Care can however be both complex and complicated and sometimes complaints cannot be dealt with as early and as effectively as we would like. Therefore it is appropriate that we have a policy and procedures which enable both our staff and the people who use our services to have complex and serious issues reviewed appropriately and effectively. Sometimes this can take a little longer, but service users and their families must always receive information and updates as the process continues. We will uphold the principles of natural justice and fair procedures in handling complaints about our services.

This policy sets out the attitudes and the processes which we believe will lead to best outcomes for all.

Remember- Complaints relating to both clinical and administrative / management matters are covered under this policy except the small proportion of issues which relate solely to clinical judgement, HR policy and process, matters relating to Social Welfare etc. (see Appendix 1 for details of exclusions)

Principles of good complaints handling

1. Open Disclosure
2. Commitment to resolution
3. Accessibility
4. Responsiveness
5. Transparency and Accountability
6. Privacy and Confidentiality
7. Quality Improvement

The purpose of this policy is:-

To ensure that the service users we support, and those acting on their behalf, are enabled to make a complaint when they are not satisfied with the service provided by St. Michael's House

And

To ensure that staff are empowered to act promptly and with the authority to resolve issues, manage complaints effectively and demonstrate to the people we support and their advocates that their complaint will receive the open, honest and effective response it deserves.

DEFINITION OF A COMPLAINT

A complaint is an expression of dissatisfaction which requires a prompt and appropriate response.

It is important to be aware that people have a **statutory right** to make a complaint and to have it dealt with in accordance with fair procedures. Complaints about Health and Social Care are deemed to be of such importance that there is a section of the Health Act 2004 (Part 9) devoted to complaints. (Appendix 2)

In the Health Act a *'complaint means ;'A complaint made about any action that, it is claimed, does not accord with fair or sound administrative practice, and adversely affects the person by whom, or on whose behalf, the complaint is made.'*

An 'Action' is defined as *'Anything done or omitted to be done in connection with the provision of a health or personal social service that is the subject of an arrangement under Section 38 of the Act, or a service in respect of which assistance is given under Section 39 of the Act.'*

A Complainant is defined as *'any person who is or was provided with a health or personal social service by the organisation or who is seeking or has sought provision of such service.'*

WHO CAN MAKE A COMPLAINT

Any person who is being or was provided with a health or personal social service by St. Michael's House or who is seeking or has sought provision of such service, may make a complaint.

ADVOCACY

Everyone who wishes to make a complaint has the right to appoint an advocate. If a person is entitled to make a complaint but is unable to do so because of age, illness or disability, the complaint may be made on that person's behalf by:-

- a) a spouse, a parent, a close relative or a carer.
- b) a guardian or a person acting *in loco parentis*.
- c) a legal representative.
- d) a personal advocate
- e) any person who, by law or by appointment of a court, has the care of the affairs of that person.
- f) any other person with the consent of the person.
- g) any other person who is appointed as prescribed in the regulations under Part 9 of the Health Act (2004)

The National Advocacy Service established in March 2011 provides representative advocacy for people with disabilities between the ages of 18 and 65. It provides an independent, confidential and free representative advocacy service that works exclusively for the person using the service.

The contact number for the National Advocacy Service (NAS) is Telephone No: 075 103000 (10:00 a.m. to 4:00 p.m. Monday to Friday).

The Service Manager will be available to service users to ensure all complaints are properly responded to and records are maintained. If the Service Manager is acting as the Complaints Officer or the complaint is about them the Registered Provider will nominate an alternative person to this role.

COMPLAINTS OFFICERS

Although all staff are required to deal with complaints the CEO formally delegates Complaints Officers to deal with those complaints that have not been resolved at the first point of contact (they may often be the first point of contact). Complaints Officers must receive appropriate training and support to carry out this duty in an independent manner as required by the Health Act (2004). Complaints Officers will normally be the Person in Charge (PIC) of the centre or the Head of Department in the case of Clinical Specialties and Administration Functions.

When the Complaints Officer is informed of a complaint by a member of staff he/she must proceed with the most appropriate course of action to resolve the complaint. This may involve assisting the staff member with resolution.

HOW CAN A COMPLAINT BE MADE?

A complaint can be made using whatever method is most appropriate and accessible for the service user or his/her family e.g. verbal, written, using gesture and sign or through an aided device.

If the person themselves cannot write, family members, staff or an advocate will write the complaint with them and where possible staff must make information accessible to the person so that the person, to the best of their ability, knows and understands what is being recorded.

N.B. If the issue involves possible abuse of a service user, it will be addressed through the St. Michael's House Safe Guarding Policies.

All staff working in St. Michael's House are responsible for complying with this policy i.e. the policy applies to frontline, clinical and administrative staff at all levels in the organisation.

There are four stages in the process for the management of complaints. It is the aim of St. Michael's House that most complaints will be resolved at Stage 1 and that only those complex complaints resulting in serious outcomes for service users will be required to be escalated for further review and resolution.

The stages of the St. Michael's House process are as follows;

Stage 1(a) - Local resolution of verbal or non-verbal* complaints at point of contact (informal).

Stage 1(b) - Local resolution of verbal or non-verbal complaints by Complaints Officer (i.e. PIC, Head of Department)

Stage 2(a) - Preliminary review of written complaints and/or unresolved verbal or non-verbal complaints by Complaints Officer

Stage 2(b) - Full review of written complaints and/or unresolved verbal or non-verbal complaints by Complaints Officer or Director of Services.

Stage 2(c) - Internal Review through CEO's Office.

Stage 3 - Review by the Health Service Executive (HSE).

Stage 4 - Independent Review (Ombudsman/Ombudsman for Children).

****Non-verbal individuals***

See Appendix 3 for roles and responsibilities of staff.

STAGE 1(a) Local resolution of verbal or non-verbal complaints at point of contact.

All staff have a responsibility to deal with complaints constructively and honestly. Staff have a duty, where possible, to do everything possible to resolve the issues which led to the complaint. Complaints which are approached with sensitivity, openness and honesty as close to the time when first made, are resolved more satisfactorily than those which are left for a prolonged period. It is essential that appropriate communication behaviours and processes are clearly understood by staff and adhered to at all stages of the process.

Actions required at Stage 1(a) of the Complaints Management Process

- The staff member who receives the complaint must listen carefully and with empathy to the person making the complaint.
- The staff member should not ask the caller to ring someone else with their concern.
- He /she should apologise for what has led to the complaint and assure the complainant that everything possible will be done to resolve the issues raised and if they cannot be resolved that an open and honest explanation will be given.
- He/she must record the details of the complaint on a Managing an Expression of Dissatisfaction/ Complaint Form (Appendix 4)
- He/she must resolve what can be resolved and explain to the complainant what will be required to be done to resolve outstanding issues e.g. escalation of the complaint to the Complaints Officer for preliminary review.
- He/she must inform and /or refer the complaint to the Complaints Officer. If there are outstanding issues the complaint must be referred and if the complaint is resolved the Complaints Officer must be informed and receive a report. (If the Complaints Officer is the subject of the complaint it must be referred to the Service Manager/Line Manager.)

Remember- All complaints - clinical and non-clinical, informal and formal - must be recorded to ensure organisational learning.

STAGE 1(b) Local resolution of verbal or non-verbal complaints by the Complaints Officer

The Complaints Officer either in assisting a staff member or taking over the complaint may often be able to resolve the complaint at the first stage in the process.

Stage 1 of the complaints management process is the local resolution of complaints at the point of contact or nearest point locally. The Complaints Officer must be made aware of all complaints (clinical and non-clinical) and must receive a report on each complaint. In addition the Complaints Officer is required to keep the Service Manager /Line Manager informed of all complaints pertaining to the Service for which he/she is responsible. Quarterly returns must be made to the Administration Manager.

STAGE 2(a) – Preliminary review of written complaints and unresolved verbal or non-verbal complaints by Complaints Officer

This stage requires the Complaints Officer to carry a preliminary review of the complaint. The Complaints Officer must act promptly and ensure that both the person who referred the complaint and the person who made the complaint are kept informed of any actions taken. The Complaints Officer will make a decision as to whether the complaint requires further review at this point.

At this point the Complaints Office will be required to decide if this issue should be dealt with under another Policy eg: The Policy and Procedures for the Protection of Children from Abuse and Neglect, Policy and Procedures for the Protection of Adults from Abuse and Neglect, Trust in Care or other HR Policies.

If a Service User has suffered harm the Complaints Officer should also pay attention to the St. Michael's House Incident Management Policy (in draft).

Actions to be taken by the Complaints Officer when a complaint is referred;
Respond to both the staff member and the person who made the complaint (as soon as possible and within 5 days) and notify Service Manager.

STAGE 2(b) –Full review of written complaints by Complaints Officer or Director of Services (or nominated person)

- Review the complaint and prepare a report to include decisions and recommendations. This report should also include next steps for the person making the complaint if he/she is not satisfied. The report of the Complaints Officer must be given to the person who made the complaint and to the Director of Services.
- Prepare an appropriate communications plan and set clear timelines in line with the legislation. (Reviews to be completed within 30 working days. When this is not possible keep the person who made the complaint informed of progress *at least* every 20 working days with reasons given for the delay).

Or

- Escalate the complaint to the Director of Services for review.

If the issue(s) cannot be resolved locally due to the complexity and/or seriousness of the complaint outcome it must be referred by the Service Manager to the relevant Director of Services. The Director of Services may delegate a named person(s) to review the complaint. The type of review used at this point will be decided based on the seriousness of the issue and the likelihood of a recurrence of such an issue in the service (e.g. a safety incident may require a systems analysis review). The person making the complaint must be informed of his/her right to an internal /external review as per this Policy.

Note: It is advisable that in the case of certain complex complaints a Complaints Officer from another part of the service is appointed to deal with a complaint. This may occur if there is a perceived conflict of interest when the PIC or Head of Department is required to make decisions which are the subject of the complaint.

Remember- A Complaints/Review Officer shall not make a finding or criticism in his or her proposed report, adverse to a person, without first having afforded the person concerned the opportunity to consider the finding or criticism and to make representations, which shall be considered, in relation to it.

The Complaints Officer /PIC/ Head of Department is also required to;

- Ensure that all staff are aware of this policy and have been provided with training and support to deal effectively with complaints including recording and escalation.
- Provide oversight of the local register of complaints and intervene when appropriate.
- Review local complaints if not resolved at the first point of contact.

- Record and report all complaints to the Service Manager who will report to the Administration Manager quarterly and Director of Services as necessary.
- Implement local recommendations

STAGE 2 (c) - Internal Review

The CEO has appointed a Review Officer in the office of the CEO.

This affords service users, families and advocates an opportunity to refer their complaint for review if not satisfied with the outcome of the review of the complaint by the Complaints Officer/ Director of Services.

The Review Officer will review the process, the decision and the recommendations in the review and has the authority to

1. Uphold the decisions and recommendations
or
2. Amend the decision and recommendations
or
3. Recommend another review

STAGE 3 - H.S.E Review

The person who made the complaint may seek a review of the outcome of the review by a HSE Review Officer when Stage 2 of the process has been completed. This request must be made within 30 working days of the date on which the internal review of the final report was signed and dated. When a request for a review is received beyond that period, the HSE Head Advocacy or Designated Officer may extend the time limit for requesting a review if he/she determines that special circumstances make it appropriate to do so. The HSE have designated authority to appoint Review Officers as per the Health Act 2004 (Complaints) Regulations 2006, and all requests for a HSE Complaints Review should be forwarded to:-

Head of Advocacy Services,
H.S.E.
Oak House,
Millennium Park,
Naas,
Co. Kildare.

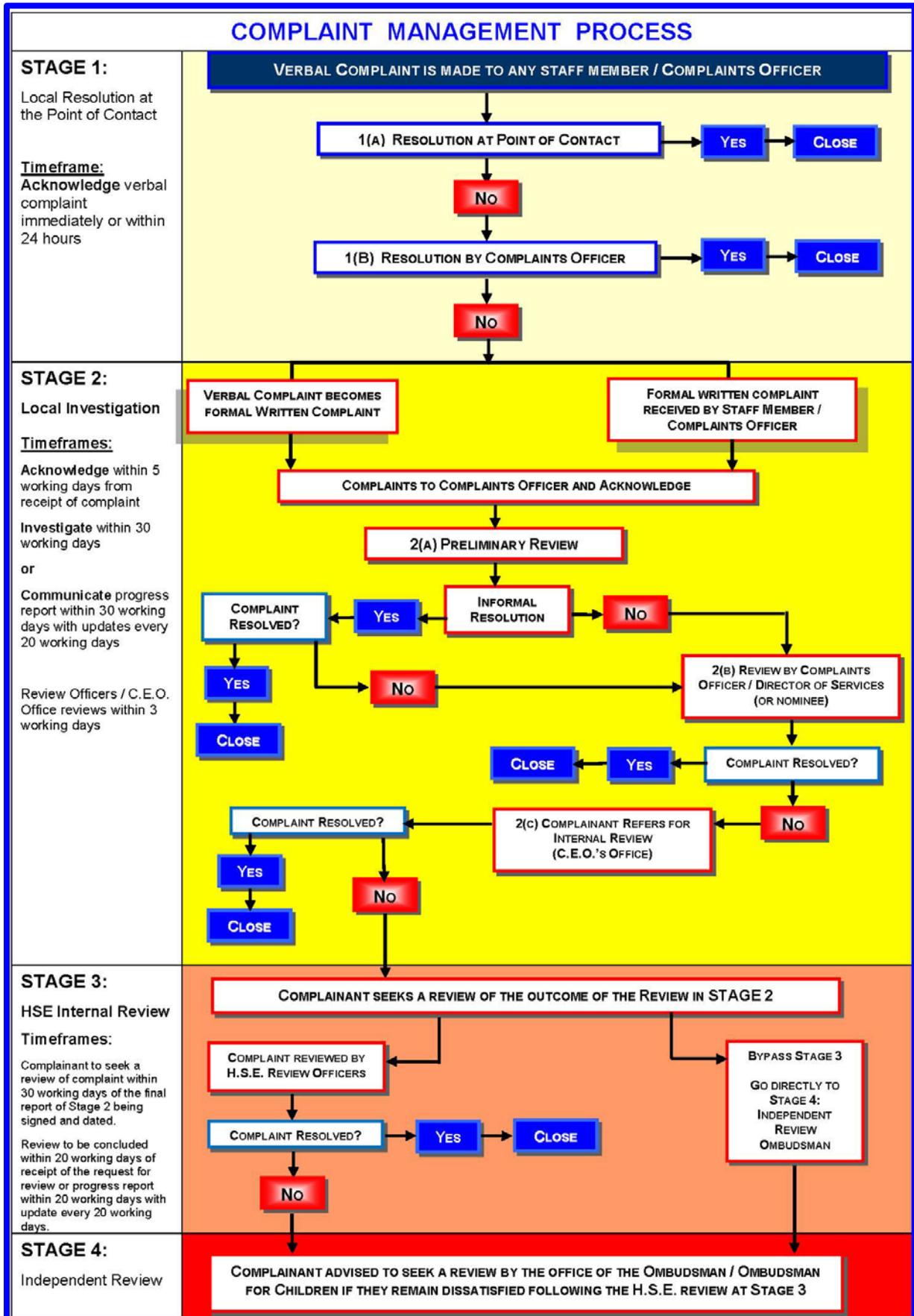
STAGE 4 - Ombudsman

The person who has made a complaint may refer the complaint to the Ombudsman or Ombudsman for Children if not satisfied with the outcome of the review by St. Michael's House and/or the HSE.

Nothing in the Health Act prohibits or prevents any person who is dissatisfied with a recommendation made or step taken in response to a complaint from referring the complaint to the Ombudsman or the Ombudsman for Children.

Office of the Ombudsman,
18, Lower Leeson Street,
Dublin 2.
Tel: 353-1-6395600
Lo Call: 1890223030
Fax: 01-6395674
Email: ombudsman@ombudsman.gov.ie

Ombudsman for Children's Office,
Millennium House,
52-56 Great Strand Street,
Dublin 1.
Tel: 353-1-8656800



WITHDRAWAL OF A COMPLAINT

The person who made the complaint may, at any time, withdraw a complaint made and, on advice of such withdrawal, the Complaints Officer may cease to review the complaint. However, where the Complaints Officer has reasonable grounds for believing that public interest would be best served by the continuation of the review, he/she must refer the matter to the Director of Services.

ANONYMOUS COMPLAINTS

All anonymous complaints should be documented and brought to the attention of the Complaints Officer. Anonymous complaints are not normally reviewed as there is always a chance that they are vexatious or malicious and the anonymity of the person making the complaint does not enable the principles of natural justice and procedural fairness to be upheld. However the Complaints Officer should assure themselves that the systems in place are robust and the welfare of service users is not at risk.

VEXATIOUS OR MALICIOUS COMPLAINTS

If found to be frivolous or vexatious, St. Michael's House will not pursue the complaint any further and there will be no record of the complaint in the file of the staff member/service about which the complaint was made.

Before the complaint is deemed vexatious the Complaints Officer must bring it to the attention of the Director of Services.

REDRESS

Sometimes redress is considered appropriate. St. Michael's House may offer forms of redress or responses that are appropriate and reasonable where it has been established that a measurable loss, detriment or disadvantage was suffered or sustained by the claimant personally. Redress should only be offered after consultation with the Director of Services.

A Complaints Officer following the review of a complaint may not make a recommendation of which the implementation would require or cause:-

- St. Michael's House to make a material amendment to its approved service plan, or
- St. Michael's House to make a material amendment to an arrangement under Section 38.

CONFIDENTIALITY

Complainants must be assured that their complaint and their personal details will be treated in confidence to the greatest extent possible consistent with public interest and the right to privacy. Complainant's information required for reporting and statistical purposes will be anonymised and all identifiable data will be removed.

ORGANISATIONAL IMPROVEMENT

We learn from complaints that are documented and reported. This organisational learning begins with evaluating the incident which caused the complaint through to embedding the necessary changes into practice.

St. Michael's House is committed to using information from complaints to make improvements to the organisation and will identify and communicate such improvements to Service Users, their families and staff.

Complaints must be linked to quality improvement by identifying complaints data as an integral part of business practice in understanding customer needs and improving quality overall.

Complaints Officers will collate complaints management information and data and will provide reports to the Administration Manager who will report quarterly to the CEO's office. This information is then shared with the Executive Management Team by the CEO's Office and reported to the St. Michael's House Board of Directors and the HSE. This information will be used by St. Michael's House for educational and improvement purposes.

Recommendations made in the review reports and approved by the Director of Services are tracked and monitored by the Executive Management Team.

Employing incident review strategies focuses on reducing systems failure and managing for its inevitability, whether caused by technology, human error or procedurally.

Complaints data can become part of the whole data system for quality and safety management. We can feed information about errors, mistakes, system failures and near misses into processes that can best act upon it.

The quality improvement approach promotes safety and quality improvement by recognising the systemic nature of most adverse events and by open communication with service users when things go wrong. Promoting a quality improvement approach requires information about complaints to be integrated into other adverse event reporting and claims analysis. It also requires the creation of an organisational culture and associated systems that ensure that adverse events and consumer feedback generate opportunities for learning.

We will actively encourage and promote service user feedback and will link with service users and their families to ensure that the complaint handling processes are effective, are being communicated and are achieving outcomes that are satisfactory to the service users and their families.

SECTION 2 - COMPLIMENTS

At St. Michael's House we believe that we deliver high quality services to our service users. In Part 1 we have outlined the importance of dealing with complaints about our services. It is also important to recognise when we do things well and to acknowledge the high quality services delivered by our staff.

Many people acknowledge verbally and in writing the good services received by them or a member of their family. These expressions of satisfaction must also be recorded, collated and analysed.

ORGANISATIONAL IMPROVEMENT

We learn from compliments that are documented and reported. This organisational learning begins with evaluating the care which initiated the compliment through to embedding good practice into services. See Appendix 5 – **Compliments & Comments Form**.

St. Michael's House is committed to using information from complaints and compliments to make improvements to the organisation and will identify and communicate such improvements to service users, their families and staff.

Complaints Officers will collate compliments management information and data, will provide quarterly reports to the Executive Management Team for their respective area and will feed positive information back in to the organisation for educational and improvement purposes and to ensure that staff know that they are valued by the people they serve.

The quality improvement approach promotes safety and quality improvement by recognising the systemic nature of most adverse events and by open communication with service users when things go wrong. Promoting a quality improvement approach also requires information about good practice to be integrated into quality information systems. It also requires the creation of an organisational culture and associated systems that ensure that consumer feedback generate opportunities for learning.

We will actively encourage and promote service user feedback and will link with service users and their families on a regular basis to ensure that our feedback handling processes are effective, are being communicated and are achieving outcomes that are satisfactory to the service users and their families.

APPENDIX 1

Exclusions under the Act:

Matters exclude (as per Part 9 of the Health Act)

48. – (1) person is not entitled to make a complaint about any of the following matters;

- a) a matter that is or has been the subject of legal proceedings before a court or tribunal;
- b) a matter relating solely to the exercise of clinical judgment by a person acting on behalf of either the Executive or a service provider;
- c) an action taken by the Executive or a service provider solely on the advice of a person exercising clinical judgment in the circumstances described in paragraph (b);
- d) a matter relating to the recruitment or appointment of an employee by the Executive or a service provider;
- e) a matter relating to or affecting the terms or conditions of a contract of employment that the Executive or a service provider proposes to enter into or of a contract with an adviser that the Executive proposes to enter into under section 24 ;
- f) a matter relating to the Social Welfare Acts;
- g) a matter that could be the subject of an appeal under section 60 of the Civil Registration Act 2004 ;
- h) a matter that could prejudice an investigation being undertaken by the Garda Síochána;
- i) (i) a matter that has been brought before any other complaints procedure established under an enactment.

(2) Subsection (1)(i) does not prevent a complaints officer from dealing with a complaint that was made to the Ombudsman or the Ombudsman for Children and that is referred by him or her to a complaints officer.

(3) In relation to a contract referred to in subsection (1)(e) “terms or conditions” includes terms or conditions relating to superannuation benefits, disciplinary procedures or grievance procedures.

APPENDIX 2**Health Act 2004 (Part 9)****Complaints**

45.—In this Part—

“action” means anything done or omitted to be done—

- (a) by the Executive, or
- (b) by a service provider in connection with the provision of—
 - (i) a health or personal social service that is the subject of an arrangement under [section 38](#), or
 - (ii) a service in respect of which assistance is given under [section 39](#);

“close relative”, in relation to another person, means a person who—

- (a) is a parent, guardian, son, daughter or spouse of the other person, or
- (b) is cohabiting with the other person;

“complaints officer” means a person designated—

- (a) by the Executive for the purpose of dealing with complaints made to it in accordance with procedures established under [section 49 \(1\)\(a\)](#), or
- (b) by a service provider for the purpose of dealing with complaints made to the service provider in accordance with procedures established under [section 49 \(1\)\(a\)](#) or (2);

“complaint” means a complaint made under this Part about any action of the Executive or a service provider that—

- (a) it is claimed, does not accord with fair or sound administrative practice, and
- (b) adversely affects the person by whom or on whose behalf the complaint is made;

“complainant” means a person who is entitled under [section 46](#) to make a complaint under this Part on the person's own behalf or on behalf of another.

46.—

(1) Any person who is being or was provided with a health or personal social service by the Executive or by a service provider or who is seeking or has sought provision of such service may complain, in accordance with the procedures established under this Part, about any action of the Executive or a service provider that—

- (a) it is claimed, does not accord with fair and sound administrative practice, and
- (b) adversely affects or affected that person.

(2) For the purposes of this Part, an action does not accord with fair and sound administrative practice if it is—

- (a) taken without proper authority,
- (b) taken on irrelevant grounds,
- (c) the result of negligence or carelessness,
- (d) based on erroneous or incomplete information,
- (e) improperly discriminatory,
- (f) based on undesirable administrative practice, or
- (g) in any other respect contrary to fair or sound administration.

(3) If a person entitled under this section to make a complaint is unable to do so because of age, illness or disability, the complaint may be made on that person's behalf by—

- (a) a close relative or carer of the person,
- (b) any person who, by law or by appointment of a court, has the care of the affairs of that person,
- (c) any legal representative of the person,
- (d) any other person with the consent of the person, or
- (e) any other person who is appointed as prescribed in the regulations.

(4) If a person who would otherwise have been entitled under this section to make a complaint is deceased, a complaint may be made by a person who, at the time of the action in relation to which the complaint is made, was a close relative or carer of that person.

47.—

(1) A complaint must be made within the specified period or Time limit for any extension of that period allowed under *subsection (3)*. making complaints.

(2) The specified period is 12 months beginning before or after the commencement of this section, but not later than—

- (a) the date of the action giving rise to the complaint, or
- (b) if the person by whom or on whose behalf the complaint is to be made did not become aware of that action until after that date, the date on which he or she becomes aware of it.

(3) A complaints officer may extend the time limit for making a complaint if in the opinion of the complaints officer special circumstances make it appropriate to do so.

48.—

(1) A person is not entitled to make a complaint about any of the following matters:

- (a) a matter that is or has been the subject of legal proceedings before a court or tribunal;
- (b) a matter relating solely to the exercise of clinical judgment by a person acting on behalf of either the Executive or a service provider;
- (c) an action taken by the Executive or a service provider solely on the advice of a person exercising clinical judgment in the circumstances described in *paragraph (b)*;
- (d) a matter relating to the recruitment or appointment of an employee by the Executive or a service provider;
- (e) a matter relating to or affecting the terms or conditions of a contract of employment that the Executive or a service provider proposes to enter into or of a contract with an adviser that the Executive proposes to enter into under [section 24](#) ;
- (f) a matter relating to the Social Welfare Acts;
- (g) a matter that could be the subject of an appeal under [section 60](#) of the [Civil Registration Act 2004](#) ;
- (h) a matter that could prejudice an investigation being undertaken by the Garda Síochána;
- (i) a matter that has been brought before any other complaints procedure established under an enactment.

(2) *Subsection (1)(i)* does not prevent a complaints officer from dealing with a complaint that was made to the Ombudsman or the Ombudsman for Children and that is referred by him or her to a complaints officer.

(3) In relation to a contract referred to in *subsection (1)(e)* “terms or conditions” includes terms or conditions relating to superannuation benefits, disciplinary procedures or grievance procedures.

49.—

(1) Subject to *subsection (2)* and any regulations under [section 53](#), the Executive shall establish procedures for—

- (a) dealing with complaints against the Executive or a service provider, and
- (b) reviewing, at the request of a complainant, any recommendation made by a complaints officer following the investigation of a complaint.

(2) Any service provider may, with the agreement of the Executive, establish procedures, in place of the procedures established under *subsection (1)(a)*, for dealing with complaints against the service provider.

(3) The Executive may agree to a service provider establishing such procedures if satisfied that they will be of a comparable standard to the procedures established by the Executive under *subsection (1)(a)*.

(4) Subject to any regulations under [section 53](#), the Executive may assign to another body the Executive's functions in relation to reviewing, and establishing procedures for reviewing, any recommendation made by a complaints officer.

50.—

(1) A complaints officer shall not investigate a complaint if—

- (a) the person who made the complaint is not entitled under [section 46](#) to do so either on the person's own behalf or on behalf of another,
- (b) the complaint is made after the expiry of the period specified in [section 47 \(2\)](#) or any extension of that period allowed under [section 47 \(3\)](#).

(2) A complaints officer may decide not to investigate or further investigate an action to which a complaint relates if, after carrying out a preliminary investigation into the action or after proceeding to investigate such action, that officer—

- (a) is of the opinion that—
 - (i) the complaint does not disclose a ground of complaint provided for in [section 46](#),
 - (ii) the subject-matter of the complaint is excluded by [section 48](#),
 - (iii) the subject-matter of the complaint is trivial, or
 - (iv) the complaint is vexatious or not made in good faith,
- or
- (b) is satisfied that the complaint has been resolved.

(3) A complaints officer shall, as soon as practicable after determining that he or she is prohibited by *subsection (1)* from investigating a complaint or after deciding under *subsection (2)* not to investigate or further investigate a complaint, inform the complainant in writing of the determination or decision and the reasons for it.

51.—

(1) A complaints officer may not, following the investigation of a complaint, make a recommendation the implementation of which would require or cause—

- (a) the Executive to make a material amendment to its approved service plan, or
- (b) a service provider and the Executive to make a material amendment to an arrangement under [section 38](#).

(2) If, in the opinion of the relevant person, such a recommendation is made, that person shall either—

- (a) amend the recommendation in such manner as makes the amendment to the applicable service plan or arrangement unnecessary, or
 - (b) reject the recommendation and take such other measures to remedy, mitigate or alter the adverse effect of the matter to which the complaint relates as the relevant person considers appropriate.
- (3) Pending the outcome of a review, the relevant person may suspend the implementation of a recommendation made by a complaints officer if satisfied that, in the interests of fair and sound administration, it is appropriate to do so.
- (4) In this section “relevant person” means—
- (a) in relation to a complaint dealt with by the Executive in accordance with the procedures established under [section 49 \(1\)](#), the chief executive officer, and
 - (b) in relation to a complaint dealt with in accordance with the procedures established by a service provider under [section 49 \(2\)](#), the service provider.

52.—

- (1) It is a condition of any arrangement under [section 38](#) with a service provider that the service provider will—
- (a) adhere to the complaints procedures established by the Executive in accordance with [section 49 \(1\)](#) and any regulations under [section 53](#) , or
 - (b) establish the procedures agreed under [section 49 \(2\)](#) and adhere to those procedures.
- (2) In addition, it is a condition of such arrangement that the service provider will co-operate with the Executive, or with any body to which the Executive assigns its functions under [section 49 \(4\)](#), in any review of a recommendation made by a complaints officer following the investigation of a complaint against the service provider.
- (3) The Executive shall exercise any rights or remedies available to it under such arrangement if the service provider concerned does not fulfil any of the applicable conditions specified in *subsections (1) and (2)*.

53.—

- (1) The Minister may make regulations for the purposes of this Part.
- (2) Regulations under this section may, among other things, make provision for the following matters:
- (a) requirements to be complied with by complainants;
 - (b) the appointment of persons as complaints officers and the functions of complaints officers;
 - (c) the procedure to be followed in investigating complaints;
 - (d) the making of recommendations by complaints officers following the investigation of complaints and the nature of the recommendations that, subject to [section 51](#) , they are authorised to make;
 - (e) the implementation of recommendations made by complaints officers;
 - (f) the appointment of persons as review officers and the functions of those officers;
 - (g) the procedure to be followed in undertaking reviews;
 - (h) the making of recommendations by review officers following the review of a complaint and the nature of the recommendations that they are authorised to make;
 - (i) the implementation of recommendations made by review officers;
 - (j) the assignment by the Executive of the review functions referred to in [section 49 \(4\)](#) to any other body or person.

54.—

- (1) Nothing in this Part prohibits or prevents any person who is dissatisfied with a recommendation made or step taken in response to a complaint under this Part or with a review under this Part from referring the complaint to the Ombudsman or the Ombudsman for Children.

(2) For the purposes of the Ombudsman Acts 1980 to 1984 and the [Ombudsman for Children Act 2002](#), any action taken by a service provider in relation to a health or personal social service in respect of which the service provider has entered into an arrangement under [section 38](#) or received assistance under [section 39](#) is deemed to have been taken by the Executive.

55.—

(1) The Executive shall submit to the Minister, as part of the Executive's annual report, a general report on the performance of its functions under this Part during the previous year containing such information as the Executive considers appropriate or as the Minister may specify.

(2) A service provider who has established a complaints procedure by agreement with the Executive shall in each year, at such time and in such manner as the Executive may determine, provide the Executive with a general report on the complaints received by the service provider during the previous year indicating—

- (a) the total number of complaints received,
- (b) the nature of the complaints,
- (c) the number of complaints resolved by informal means, and
- (d) the outcome of any investigations into the complaints.

(3) If the Executive assigns its functions under [section 49 \(4\)](#) to another body, that body shall in each year, at such time and in such manner as the Executive may determine, provide the Executive with a general report on the reviews conducted by it during the previous year indicating—

- (a) the total number of reviews,
- (b) the nature of the reviews, and
- (c) the outcome of the reviews.

APPENDIX 3

Summary of Staff Roles and Responsibilities in Managing Complaints and Compliments in St. Michael's House

This list should be read in conjunction with the Policy.

Staff Role	Responsibilities
Frontline Staff	<ul style="list-style-type: none"> • Listen to the complaint carefully. • Where possible manage the complaint at the point of contact. • Apologise for what has led to the complaint and assure the complainant that everything possible will be done to resolve the issue(s) raised. • Complete a <i>Managing an Expression of Dissatisfaction/ Complaint Form</i>. (Appendix 4) • Inform and/or refer complaint (if it cannot be managed by you) to the Person In Charge (PIC) • Acknowledge compliments and report to PIC.
Person in Charge (PIC)/ Head of Dept.	<ul style="list-style-type: none"> • Ensure all staff are familiar with the Complaints and Compliments Policy. • Where possible manage complaints locally. • Support frontline staff to manage complaints at point of contact. • Ensure relevant information is recorded on the <i>Managing an Expression of Dissatisfaction/ Complaint Form</i>. (Appendix 4) • Communicate with staff member and complainant. • Conduct Preliminary reviews. • When unable to resolve a complaint escalate to Service Manager. • Report all complaints to Service Manager. • Conduct full reviews only in consultation with Service Manager and/or Director of Services. • Implement local recommendations made. • Manage local register of complaints. • Celebrate compliments and report to Service Manager. • Include as a standard agenda item at staff meetings.
Service Manager	<ul style="list-style-type: none"> • Support PIC's and frontline staff to manage complaints at point of contact. • Ensure complaints are discussed regularly. • Oversee the implementation of recommendations. • Inform the Director of Services of complex complaints. • Acknowledge complaints & compliments and report quarterly to Administration Managers. • Complete reviews as requested by Director of Services.
Director of Services	<ul style="list-style-type: none"> • Oversee all complaints within area of responsibility. • Nominate staff to complete reviews. • Correspond with complainant where appropriate. • Oversee the implementation of recommendations. • Assume responsibility for the implementation of policy within area. • Provide updates to the Executive Management Team as requested.

APPENDIX 4



St. Michael's House

Managing an Expression of Dissatisfaction / Complaint Form

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[PRINT](#) [CLEAR FORM](#)

COMPLETE PAGES 1 & 2 WHEN YOU RECEIVE A COMPLAINT OR AN EXPRESSION OF DISSATISFACTION
 Complaints Officer is the Person in Charge unless the complaint relates to them.

Category of Complaint: Formal: Local Resolution:

SECTION 1: DETAILS OF COMPLAINT

Centre Name:

Service Area:

Date of Complaint:

Who made the Complaint?

Who the complaint was made to:

Name of Complaints Officer:

Brief description of the complaint:

SECTION 2: TYPE OF COMPLAINT

Access <input type="checkbox"/>	Communication & Information <input type="checkbox"/>	Improving Health <input type="checkbox"/>
Dignity and Respect <input type="checkbox"/>	Participation <input type="checkbox"/>	Accountability <input type="checkbox"/>
Safe & Effective Care <input type="checkbox"/>	Privacy <input type="checkbox"/>	

Please note 1 complaint could cover a number of different areas and should therefore be included in different categories.



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PRINT

CLEAR FORM

SECTION 3: ACTION TAKEN / OUTCOME DETAILS

	YES	NO
Complaints dealt with formally	<input type="checkbox"/>	<input type="checkbox"/>
Review carried out	<input type="checkbox"/>	<input type="checkbox"/>
Complaint closed within 30 days	<input type="checkbox"/>	<input type="checkbox"/>
Mediation Required	<input type="checkbox"/>	<input type="checkbox"/>
External Advocacy Required	<input type="checkbox"/>	<input type="checkbox"/>

CURRENT STATUS AS OF: (Date)

Resolved Ongoing Withdrawn

SECTION 4: SIGN OFF DETAILS

TO BE COMPLETED BY COMPLAINTS OFFICER

Name:

Centre:

Signature:

Date:

TO BE COMPLETED BY SERVICE MANAGER / ADMIN MANAGER / CLINIC MANAGER

Name:

Signature:

Date:

PLEASE FORWARD TO ADMINISTRATION MANAGER

PRINT

CLEAR FORM

St. Michael's House

Managing an Expression of Dissatisfaction / Complaint Form

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TO BE COMPLETED WHEN COMPLAINT IS RESOLVED

Centre Name:

Date of Complaint:

Who made the Complaint?

Brief description of the Complaint:

Date Resolved:

Date of communication with complainant:

Steps taken to resolve:

Outcome:

Was the Complainant satisfied with the outcome?

Completely:

Somewhat Satisfied:

Not Satisfied:

Signature:

Date:

PLEASE FORWARD TO ADMINISTRATION MANAGER

APPENDIX 5



St. Michael's House

SAVE

PRINT

CLEAR FORM

Compliments & Comments Form

PLEASE COMPLETE THIS FORM AND FORWARD TO THE ADMINISTRATION MANAGER

Category:

Comment / Suggestion:

Compliment:

DETAILS

Centre Name:

Service Area:

Date of Comment / Compliment:

Comment / Compliment made by:

Comment / Suggestion made to:

Brief description of the Comment / Compliment:

SIGN OFF DETAILS

Name:

Signature:

Date: