



Brothers of Charity Services Limerick

Local Operational Complaints Procedure for Adults who use the Services, Families and Advocates.

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1.0 Policy Statement

In keeping with the ethos of the Congregation of the Brothers of Charity the activities of the Brothers of Charity Services Limerick are guided by a strong commitment to values that recognise all people first as individuals. We endorse full inclusion for individuals with disabilities in all aspects of community life. In partnership with individuals, families, professionals, organisations and state agencies, we seek to shape policy decisions and to increase the opportunities for inclusion, independence, productivity and personal life satisfaction for individuals with intellectual difficulties.

It is the policy of the Brothers of Charity Services Limerick to comply with best practice governance and accountability obligations, as appropriate to health and social care agencies, state bodies and publicly funded organisations.

2.0 Purpose

The Brothers of Charity Services Limerick aims to provide a responsive service that is informed by feedback from individuals who use the services, families and advocates. Complaints are viewed as an opportunity to learn and to improve service delivery.

The purpose of this procedure is to set out the process for making a complaint, the roles and responsibilities of staff in handling complaints and the structures in place to ensure that all complaints are acknowledged and responded to in a timely fashion.

In order to ensure that individuals who use the services are supported to make a complaint in the way that is most convenient to them, an easy to read companion document to this procedure explaining the pieces of the policy that are most relevant to people who use the services has been developed. Where appropriate, this easy read information will be reviewed with individuals who use the services on an annual basis. Where the keyworker, in discussion with the line manager, feels that reviewing this information would not be of benefit to the individual based on their ability to comprehend same, this will be noted. A Plain English version of the procedure is also available. Appendix 1 sets out an overview of the complaints procedure.

3.0 Scope

This procedure relates to complaints made by adult individuals who use the services, their families and advocates, about services provided or omitted by the Brothers of Charity Services Limerick.

Matters not covered by this complaints policy:

- Abuse Complaints: Where an allegation or concern about abuse is raised this complaints procedure is superseded by The Governance Statement and National Procedures: Safeguarding of Vulnerable Adults at Risk from Abuse (Brothers of Charity Services, 2015).
- Complaints relating to non Brothers of Charity Services Limerick services. These complaints should be directed at the agency concerned.
- Complaints arising from matters relating solely to the exercise of clinical judgement by a practitioner (e.g. therapist, doctor, nurse) acting on behalf of the Brothers of Charity Services Limerick. On these occasions it is acknowledged that the Director of Services may have to make a judgement on what is or is not a matter relating solely to clinical judgement. The role of professional bodies (e.g. Medical Council, Psychological Society of Ireland) should be taken into consideration when making this judgement.
- Any action taken by the organisation solely on the advice of a person exercising clinical judgement.
- Matters relating to the recruitment, appointment or terms and conditions of staff:

In this situation this complaints procedure is superseded by the Grievance and Disciplinary Procedure for the Brothers of Charity Services Limerick.

- Any matter that is or has been the subject of legal proceedings before a court or tribunal.
- Any matter relating to the Social Welfare Acts.
- Any matter that could be subject to an appeal under section 60 of the Civil Registration Act, 2004.
- Any matter that could prejudice an investigation being undertaken by the Garda Síochána
- Any matter that has been brought before any other complaints procedure established under an enactment.

If a complaint falls under one of these categories, the complainant will be referred to the appropriate channel.

4.0 Legislation and Related Policies and Documents

- This procedure is complementary to other organisational policies and procedures including the The Governance Statement and National Procedures: Safeguarding of Vulnerable Adults at Risk from Abuse (Brothers of Charity Services, 2015); The Grievance and Disciplinary Procedure (2008) and the Advocacy Policy (2011).
- Matters appropriate for other procedures will be treated in accordance with the agreed procedures.
- All individuals who use the services will be represented through the Brothers of Charity Services Limerick Regional Advocacy Structure and also have the right to access independent advocacy through the Disability Advocacy Service.

This procedure is informed by a number of sources including:

- Health Act 2004
- Health Information and Quality Authority (HIQA) National Standards for Residential Services for People with Disabilities (HIQA, 2013)
- Health Act 2007, (Care and Support of Residents in Designated Centres for Persons (Children and Adults)with Disabilities) Regulations 2013.
- 'Your Service, Your Say' the policy and procedures for the management of consumer feedback to include comments, compliments and complaints in the HSE (HSE, 2009).
- Service Arrangement Part 2, Schedule 8 (complaints)

5.0 Glossary of Terms and Definitions

Complaint: Any action of the organisation that does not accord with fair or sound administrative practice, and adversely affects the person by whom, or on whose behalf, the complaint is made (Health Act, 2004)

Complainant: Person(s) making the complaint.

Complaints Officer: A person designated for the purpose of dealing with formal complaints. For the purpose of this policy this refers to the Head of Integrated Services or the Head of Community Services as relevant.

Line Manager: For the purpose of this policy the line manager is the Person in Charge of a Designated Centre or the Senior Supervisor of a Day Service.

6.0 Roles and Responsibilities

- All staff of the Brothers of Charity Services Limerick must adhere to this procedure and respond to issues raised and complaints in line with the procedure.
- Managers must ensure that all service users, families and advocates are provided with a copy of this procedure and supported, where required, to review same.

7.0 Procedure

Who can make a complaint?

Any current or past service user of the Brothers of Charity Services Limerick or their family or advocate can make a complaint about any aspect of the service provided by the organisation. Staff, acting as advocates, can support individuals to make a complaint where such support is required. Those applying for services may also make a complaint if they have a concern.

Time limits for making a complaint:

- A complaint must be made within 12 months of the date of the action giving rise to the complaint or within 12 months of the complainant becoming aware of the action giving rise to the complaint.
- The Complaints Officer may extend the time limit for making a complaint if special circumstances make it appropriate to do so. These special circumstances include the following:
 - If the complainant is ill or bereaved.
 - If new relevant, significant and verifiable information relating to the action becomes available to the complainant.
 - If it is considered in the public interest to investigate the complaint.
 - If the complaint concerns an issue of such seriousness that it cannot be ignored.
 - If the service user has diminished capacity at the time of the experience.
 - If extensive support was required to make the complaint and this took longer than 12 months.

The Complaints officer must notify the complainant of the decision to extend / not extend time limits within 5 working days.

Capacity to Respond:

The manner in which the service responds to complaints is important in maintaining and restoring the confidence of individuals who use the services and their families who may feel aggrieved because of a particular complaint. The Brothers of Charity Services Limerick expect that a large proportion of complaints can and will be resolved at local level.

The Brothers of Charity Services Limerick is aware of the importance of responding to complaints as quickly and sensitively as possible.

In some instances the Organisation will be constrained by resources in its ability to act in response to a complaint. The Organisation will work with the statutory authorities to obtain the necessary resources to resolve such issues and will identify and include these issues in the organisation's service plans.

Confidentiality:

Complainants and their personal details will be treated in confidence to the greatest extent possible. Information will only be shared where required to progress the

investigation / resolution of the complaint. Complaints information required for reporting and statistical purposes will be anonymised.

Where the screening and / or investigation of a complaint indicates that there is a requirement to disclose some or all of the details of the complaint (e.g. Safeguarding concerns) the complainant will be informed and the information will be directed to the appropriate channel.

Anonymous Complaints:

All complainants will be encouraged to give their name and details so that the organisation can investigate the complaint and inform the complainant of the outcome.

It is the policy of the Brothers of Charity Services Limerick that complainants must provide contact details when making a complaint against the organisation to enable appropriate validation, follow up and investigation of that complaint unless there is a good and sufficient reason for withholding this information.

In general, the organisation cannot investigate anonymous complaints. However, all anonymous complaints will be passed on to the complaints officer who will record the complaint in the formal complaints log and will decide if any further action is indicated.

Management of Complaints:

The procedure for managing a complaint depends on the nature of the complaint that is made.

There are 3 stages to the management of complaints within the Brothers of Charity Services Limerick. Appendix 2 provides an overview of this process.

Stage 1: Issues Raised:

Issues identifying dissatisfaction with the service that are minor but still of significance to the person need to be responded to and recorded locally. Issues may be raised verbally to a member of staff by a person who uses the services, a family member or an advocate. Where an alternate means of communication is preferred by an individual who uses the services (e.g. lamh, pecs, written) an issue may be raised in this format.

Issues should be addressed locally where possible.

The staff member to whom an issue is raised should:

- Listen to the issue raised.
- Remain Positive.
- Not attempt to lay blame, be defensive or argue.
- Agree with the individual who raises the issue how it will be resolved if it can be dealt with at local level.
- Take any steps agreed to resolve the issue.
- Keep a record of the issue in the 'Local Issues book' (Appendix 2) indicating how the issue was resolved or if it has been forwarded to the line manager as an informal complaint.
- Notify the line manager of any issues that cannot be resolved without the line manager's input (this becomes an Informal Complaint).

The 'Local Issues Book' is a way of evidencing that staff are listening and responding at local level.

Stage 2: Informal Complaints:

Informal complaints include:

- Any 'issues raised' which are not resolved without the involvement of the line manager.
- Any verbal complaint made directly to the line manager or area manager.
- Where the preferred means of communication of an individual who uses the services is written, an informal complaint may be raised in this format to the line manager. While these complaints may be in writing they can be dealt with at the informal level if appropriate and will be recorded and tracked as such as they are directed at local level and are being accepted in written format to facilitate the preferred method of communication of some individuals who use the services.
- Any verbal complaints made to members of the Multidisciplinary Team, Quality Department or other support services should be channelled through the informal complaints process.

On receipt of an informal complaint the line manager should:

- Arrange to meet the complainant.
- Find out from the complainant what they want to happen as a result of their complaint.
- Empathise and acknowledge the feelings of the complainant.
- Thank the complainant for taking the time to make the complaint.
- Explain to the complainant that there will be no negative repercussions.
- Determine if the complaint can be resolved at this point or if the complainant needs to be advised to submit a written complaint to the Complaints Officer.
- Record the complaint and the outcome in the informal complaints log (Appendix 3). As part of this record the type of complaint must be identified - see Appendix 4 for explanations of complaint types.

Within community services, the line manager (Person in Charge or Senior Supervisor) can seek support from the area manager in the management of complaints. This may involve consulting with the area manager regarding resources, funding etc. Where an area manager is the first point of contact for an informal complaint they should discuss the complaint with the complainant and explain that they will work with the line manager to resolve the complaint. Each area manager should also maintain an informal complaints log exclusively for the purpose of handling informal complaints about the line manager (Person in Charge or Senior Supervisor).

The resolution of an informal complaint may be that

- A solution can be agreed between the complainant and the line manager.
Or
- A solution cannot be agreed at local level. In this case the complainant should be advised to make a formal complaint in writing, to the Complaints Officer. Any support required to make a complaint in writing should be offered to the complainant.

Once the informal complaints process is completed the line manager should send the yellow copy of the informal complaint to their Complaints Officer. The white copy should remain in the line manager's complaints log.

Each month the line manager (and area manager in the community) should prepare and submit a summary of informal complaints using the template provided (Appendix 5) and submit this to the Complaints Officer for their area.

Stage 3: Formal Complaints:

Receipt of a written complaint by a staff member / manager:

Where a staff member or manager other than the Complaints Officer receives a written complaint (except as noted above where the complaint is from an individual who uses the services whose preferred method of communication is in writing and who wishes to make an informal complaint) they should inform the complainant that it will be forwarded to the Complaints Officer and the staff member/manager should ensure that the complaint is forwarded before the end of their shift.

Making a formal complaint:

All formal complaints must be made, in writing, directly to the Complaints Officer (Head of Community Services or Head of Integrated Services as applicable). Assistance will be provided, where necessary, to put the complaint in writing.

An individual who uses the services, family or advocate may decide to make a formal rather than an informal complaint.

Where an informal complaint cannot be resolved at local level the complainant will also be advised to make a formal complaint.

Someone who cannot write and who doesn't wish to have assistance in putting the complaint in writing may, nevertheless, put a formal complaint "on the record" by recording the formal complaint on a cassette tape recorder, or on a video tape, or by indicating that they wish to make a formal complaint to a member of staff who will then have an obligation to put that complaint in writing and support the individual to forward the complaint to the Complaints Officer.

A formal complaint will be treated in a confidential manner.

Initial review of written complaint:

On receipt of a written complaint the Complaints Officer will review the complaint. They may decide that the complaint should be handled through the formal complaints process or they may feel that the complaint would be appropriately handled through the informal complaints process.

If the Complaints Officer feels the complaint should be handled through the informal complaints process they will contact the complainant and seek their consent to forward the complaint to the relevant line manager to be handled through the informal complaints process. This should be done within 2 working days of the Complaints Officer receiving the written complaint.

If the complainant agrees to this the complaint, along with a letter (Appendix 6) from the Complaints Officer outlining the date the Complaints Officer and the complainant agreed that handling the complaint through the informal process was acceptable, will be forwarded to the line manager who will handle the complaint in line with the informal complaints process.

If the complainant wants the complaint handled through the formal process then the procedure outlined below will be followed.

Formal complaints process:

Once it is determined that a complaint will be handled through the formal complaints process the Complaints Officer will begin to complete the Formal Complaints log, (Appendix 7).

The Complaints Officer will follow the timeline outlined below in handling formal complaints.

Action	Timeline
The Complaints Officer will send the complainant written acknowledgement of receipt of complaint including steps the Complaints Officer proposes to take in investigating the complaint and the time limits for the completion of the investigation.	Within 5 working days of receiving the formal complaint.
The Complaints Officer will meet with the complainant as soon as possible to address the complaint and discuss how the issue may be resolved. Minutes of this meeting will be maintained and filed with the complaint. Where an investigation is required the Complaints Officer may appoint an individual or team with terms of reference to examine the matter and report directly back to the Complaints Officer. The Complaints Officer will only inform those in the services who need to know of the issue and the outcome.	As soon as possible after receiving the formal complaint.
A written response will be provided by the Complaints Officer to the complainant regarding the resolution of the complaint. As part of this response the Complaints Officer will provide the complainant with information on the internal and independent review process.	Within 30 working days.
Where the complaint cannot be resolved within the initial 30 days the Complaints Officer will endeavour to conclude the investigation within 6 months of receipt of the complaint. The Complaints Officer will update the complainant and the relevant staff in writing every 20 working days after the initial 30 working days timeframe.	Every 20 working days after the initial 30 day period until the complaint is resolved.

Once the formal complaints process is completed the Complaints Officer should send the yellow copy of the formal complaint to the Director of Services. The white copy should remain in the Complaints Officer's formal complaints log. Any written communication regarding the formal complaint should be attached to the formal complaint log and to the copy forwarded to the Director of Services.

Each January and July the Complaints Officer should prepare and submit a summary of all formal and informal complaints using the template provided (Appendix 8) and submit this to the Director of Services. This summary will be an aggregate report of the information received by line managers in their area as well as the information the Complaints Officer maintains on formal complaints made. This report must be submitted by the 10th of the month in order to ensure that the report to the HSE can be completed and submitted as required by the 20th of January and July each year.

Resolution:

Where it has been established that a measurable loss, detriment or disadvantage was suffered the Complaints Officer will ensure that redress is consistent, fair, appropriate

and reasonable. The resolution may include an apology, an explanation, an admission of fault, a change of decision, the correction of misleading or incorrect records or a recommendation to make a change to a relevant policy or law

The complaints officer may not make a recommendation the implementation of which would require or cause—

- (a) the organisation to make a material amendment to its approved service plan, or
- (b) the organisation to make a material amendment to an arrangement under section 38 (Service Level Agreement).

Internal Review:

Health act 2007, Regulations 2013 require that the registered provider nominate a person, other than the Complaints Officer to be available to residents to ensure that complaints are appropriately responded to. In accordance with this requirement, if the complainant is not satisfied with the outcome of the complaints management process he / she may seek an internal review that will be handled through the Office of the Director of Services.

The Director of Services will appoint a reviewer as appropriate to carry out the review of the complaint. The reviewer will review the processes used to carry out the investigation of the complaint and the findings and recommendations made post-investigation. The reviewer will make a recommendation to the Director of Services to uphold, vary or make a new finding and recommendation. The reviewer may carry out a new investigation of the complaint. The final decision to uphold, vary or make a new finding and recommendation lies with the Director of Services.

External Complaints Mechanism / Independent Review:

If the complainant is not satisfied with the outcome of the complaints management process he/she may seek an independent review through the Office of the Ombudsman, the HSE, the Confidential Recipient or the National Disability Authority (See Appendix 10 for contact details).

This procedure does not preclude you from the choice of taking your complaint through the Civil Courts on a point of law, up to and including the European Courts.

Monitoring Complaints:

Complaints will be a standing order agenda item for the following meetings:

- Meetings between the Head of Community and the Community Services management team.
- Meetings between the Head of Integrated Services and the Integrated Services management team.
- Meetings between the Director of Services and the Heads of Community and Integrated Services.

It is the responsibility of the manager who is in receipt of a complaint to keep their next in line manager informed as required of any issues that may arise.

The Complaints Officer will retain the yellow copy of all of the resolved informal complaints from their area. These records can be used by the Complaints Officer for learning purposes as well as to identify trends and manage risks.

The Director of Services will retain the yellow copy of all of the resolved formal complaints. These records can be used by the Director of Services and Senior Management Team for learning purposes as well as to identify trends and manage risks.

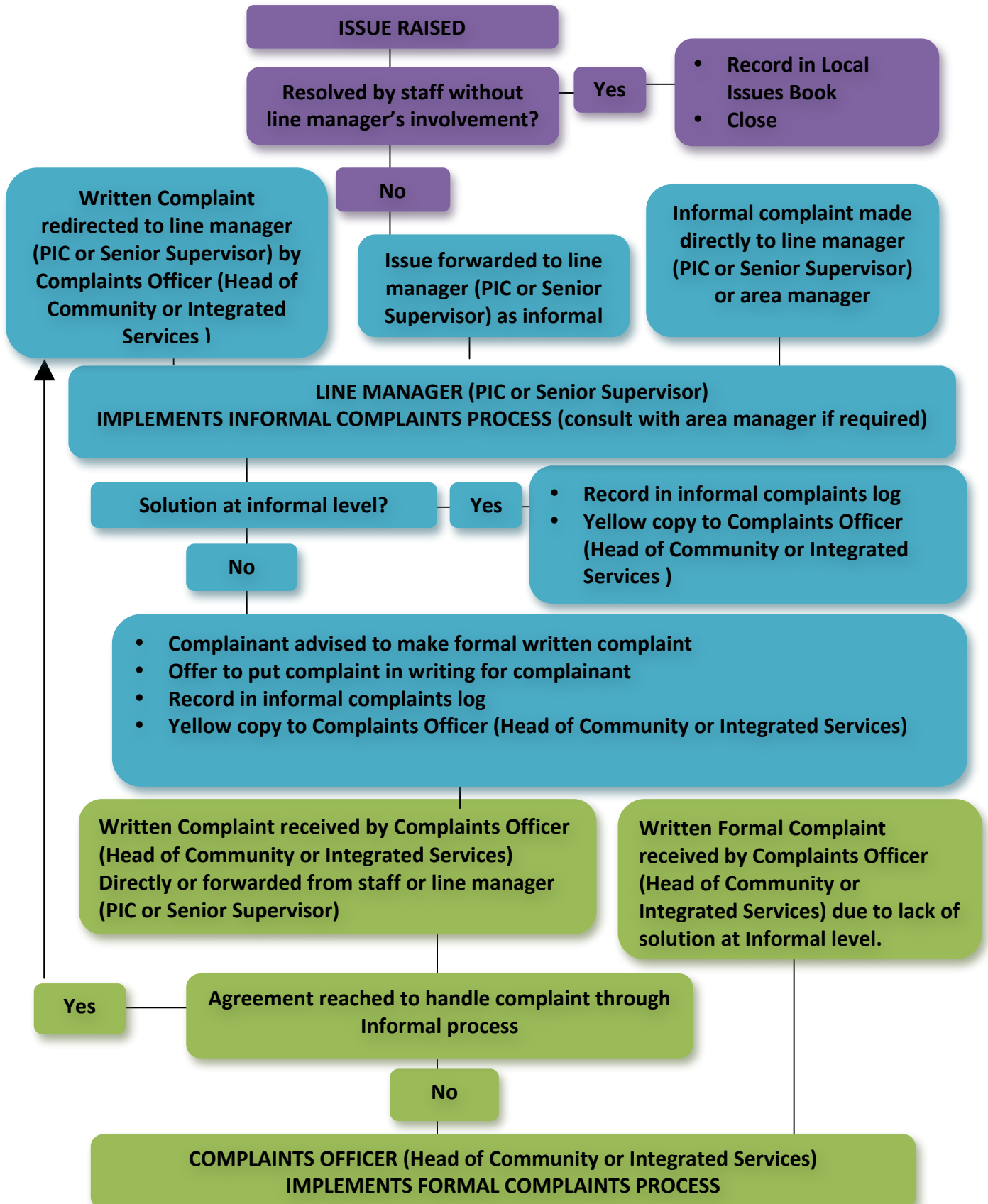
The Heads of Integrated and Community services or their delegate will monitor the implementation of the complaints procedure on a semi annual basis in June and December to ensure that it is operating effectively within their area.

Health act 2007 regulations 2013 require that the registered provider nominate a person, other than the Complaints Officer, to ensure that the complaints officer maintains records of the complaint, investigation, actions taken and whether or not the resident was satisfied. In accordance with this regulation, complaints will be reviewed on an ongoing basis as part of the organisation's internal 6 month unannounced visit process.

Reporting to the HSE:

The HSE collects statistics and details of complaints on a semi annual basis. This report is required by the HSE by the 20th of January and the 20th of July each year. The report will be compiled and submitted to the HSE by the Office of the Director of Services based on the information provided by the Complaints Officers in their semi annual summary of complaints in their area (Appendix 9).

Appendix 1: Overview of Complaints Process



Appeals can be made internally to the Director of Services or externally to the office of the ombudsman, the HSE, Confidential Recipient or the national disability authority.

Appendix 2: Local Issue Book

Date: _____

Name of individual who raised issue: _____

Summary of Issue: _____

If the issue is resolved **to the satisfaction of the individual** without the involvement of the line manager complete this section.

How was issue resolved:

Signature of staff who helped to resolve issue:

Date:

Where the issue is not resolved to the satisfaction of the individual and needs to be brought to the attention of the line manager (Senior Supervisor or Person in Charge) as an informal complaint complete this section.

What steps (if any) have been taken to try to resolve the issue? _____

Date issue brought to the attention of line manager as an informal complaint: _____

Signature of staff bringing issue to the attention of the line manager: _____

Signature of line manager receiving the informal complaint: _____

Where an issue is brought to the attention of the line manager as an informal complaint the line manager should implement the informal complaints process and keep a record in the informal complaints log.

Appendix 3: Informal Complaints Log

Name of centre where complaint was received: _____

Date complaint made: _____ **Name of Complainant:** _____

Source of informal complaint (tick one)

Issues raised which was not resolved without the involvement of the line manager (Senior Supervisor or Person in Charge)	
Verbal complaint made to the line manager (Senior Supervisor or Person in Charge)	
Informal complaint made in writing to the line manager (Senior Supervisor or Person in Charge) by an individual who uses the services whose preferred means of communication is written (attach written complaint to the log)	
Written complaint redirected as informal by Complaints Officer (attach written complaint to the log)	

Complaint Description:

Complaint type (tick one)

Access	Dignity & Respect	Safe & Effective Care	Communication & Information	Participation	Privacy	Improving Health	Accountability	Other

If the complaint is addressed by line manager (Senior Supervisor or Person in Charge) **to the satisfaction of the complainant** as an informal complaint complete this section:

Outline complaint resolution:

Date informal complaint resolved: _____ **Signature of line manager:** _____

If the complaint cannot be addressed at this level to the satisfaction of the complainant then the resolution of the informal complaint is to inform the complainant that they should make a formal complaint to the Complaints Officer. The line manager (Senior Supervisor or Person in Charge) should offer the complainant any support they require to put such a complaint in writing. In this situation complete this section:

Outline any interaction with the complainant / efforts made to address the complaint locally:

Date complainant informed that complaint cannot be resolved locally and advised to make a formal complaint to Complaints Officer: _____

Support offered to put complaint in writing? Yes No

Outline complaint's response (e.g. took number of complaints officer, agreed to put complaint in writing, accepted support to put complaint in writing etc):

Date: _____

Signature of Line Manager (Senior Supervisor or Person in Charge): _____

Appendix 4: Explanation of Complaint types

<p>1. Access: Our services are organised to ensure equity of access to public health and social care service</p> <ul style="list-style-type: none"> ▪ Accessibility / resources ▪ Appointment - delays ▪ Appointment - other ▪ Admission - delays ▪ Admission - other ▪ Hospital facilities ▪ Hospital room facilities (access to) ▪ Parking ▪ Transfer issues ▪ Transport ▪ Visiting times ▪ Other access 	<p>2. Dignity and respect: We treat people with dignity respect and compassion.</p> <ul style="list-style-type: none"> ▪ Alleged inappropriate behaviour ▪ Delivery of care ▪ Discrimination ▪ End-of-Life Care ▪ Ethnicity ▪ Other dignity and respect 	<p>3. Safe and effective care: We provide services in a safe environment, delivered by competent, skilled and trusted professionals.</p> <ul style="list-style-type: none"> ▪ Adequate Human Resources ▪ Diagnosis ▪ Test ▪ Continuity of care (internal) ▪ Continuity of care (external) ▪ Discharge ▪ Health and Safety issues ▪ Health care records ▪ Hygiene ▪ Infection prevention and control ▪ Patient property ▪ Medication ▪ Tissue Bank ▪ Treatment and Care ▪ Other safe and effective care
<p>4. Communication and information: We listen carefully and provide clear and comprehensive health information and advice.</p> <ul style="list-style-type: none"> ▪ Communication skills ▪ Delay and failure to communicate ▪ Diverse Needs ▪ Information ▪ Telephone calls ▪ Other communication and information 	<p>5. Participation: We involve people and their families and carers in shared decision making about their health care.</p> <ul style="list-style-type: none"> ▪ Consent ▪ Parental Access and Consent ▪ Patients/ Family/ Relatives ▪ Other participation 	<p>6. Privacy: We ensure adequate personal space to ensure privacy in providing care and personal social services. We maintain strict confidentiality of personal information.</p> <ul style="list-style-type: none"> ▪ Confidentiality ▪ Hospital Facilities (Privacy) ▪ Other privacy
<p>7. Improving health: Our services promote health, prevent disease and support and empower those with chronic disease to self care.</p> <ul style="list-style-type: none"> ▪ Empowerment ▪ Holistic Care ▪ Catering ▪ Smoking Policy ▪ Other improving health 	<p>8. Accountability: We welcome your complaints and feedback about care and services and work to address your concerns.</p> <ul style="list-style-type: none"> ▪ Patient feedback ▪ Finance ▪ Other accountability 	<p>9. Other Complaints that do not fall within any of the above categories should be included here.</p>

Appendix 5: Summary of informal complaints by area

Each month the line manager (Senior Supervisor or Person in Charge) should complete this template and submit it to the Complaints Officer for their area. Area managers in the community must also complete this in respect to informal complaints about the line manager.

Month: _____

Name of Centre: _____

a	Number of informal complaints received pending at the end of the last month	
b	Informal complaints received this month	
c	Total complaints on hand current month (a+b)	
d	Number of complaints resolved this month (either by local solution or by advising complainant that complaint should be made through formal process)	
e	Complaints withdrawn	
f	Complaints pending at the end of the month (C - (d+e))	

Number of complaints by type (total should equal c above)

Access	Dignity & Respect	Safe & Effective Care	Communication & Information	Participation	Privacy	Improving Health	Accountability	Other

Signature: _____

Appendix 6: Template for letter from Complaints Officer to line manager where an agreement is reached that a written complaint can be dealt with through the informal complaints procedure.

Add date

Dear add name of line manager

I have discussed the attached written complaint from add date with the complainant, add name of complainant, on add date and have secured their consent for the complaint to be dealt with through the informal complaints process.

As the complaint relates to your service area I am forwarding it to you for resolution through the informal complaints process and I have informed the complainant that you will be in touch with them to discuss this complain in the coming days.

Regards,

Add signature

Complaints Officer, Add area (Community or Integrated Services)

Appendix 7: Formal Complaints Log

Date complaint made: _____ **Name of Complainant:** _____

Complaint Description (provide brief overview and attach written complaint):

--

Complaint type (tick one)

Access	Dignity & Respect	Safe & Effective Care	Communication & Information	Participation	Privacy	Improving Health	Accountability	Other

Complaints Officer responsible for handling this complaint: _____

Date written acknowledgement sent to complainant (within 5 working days): _____

Attach a copy of the written acknowledgement.

Date of meeting with complainant to discuss issue and resolution: _____

Attach a copy of minutes of this meeting.

Date written response sent to complainant regarding resolution (within 30 working day): _____

Attach a copy of the written response.

Where the complaint cannot be resolved within the initial 30 working days the complaints officer should attach a copy of the written update sent to the complainant every 20 working days after the initial 30 working day timeframe until the complaint is resolve. A copy of these updates should be attached to the formal complaints log.

Appendix 8: Summary of informal and formal complaints from Complaints Officers to Director of Services.

Each January and July the Complaints Officer should prepare and submit the following summary of all formal and informal complaints and submit this to the Director of Services by the 10th of the month.

This summary will be an aggregate report of the information received from line managers (appendix 6) as well as the information the Complaints Officer maintains on formal complaints made.

This report must be submitted by the 10th of the month in order to ensure that the report to the HSE can be completed and submitted as required by the 20th of January and July each year.

Year: _____ Complaints Officer: _____

Area Community Services Or Integrated Services

Report Dates January – June Or July – December

Month	(a) Number of complaints received pending at end of last month (formal + informal)	(b) Complaints received this month (formal + informal)	(c) Total complaints on hand current month a+b=c	(d) Complaints dealt with informally this month	(e) Complaints withdrawn this month (formal + informal)	(f) Formal complaints dealt with within 30 days closed this month	(g) Formal complaints that took longer than 30 days to deal with closed this month	(h) Complaints pending at end of month c-(d+e+f+g)=h
1								
2								
3								
4								
5								
6								

Month	Access	Dignity & Respect	Safe & Effective Care	Communication & Information	Participation	Privacy	Improving Health	Accountability	Other
1									
2									
3									
4									
5									
6									

Appendix 9: Contact details for Independent Review

Local HSE

Ms. Carmel McLoughlin,
A/Area Manager,
Disability Services Executive,
Health Service Executive,
South West Wing,
St Joseph's Hospital,
Mulgrave Street,
Limerick.

National HSE

Head of Consumer Affairs,
Health Service Executive,
Oak House,
Limetree Avenue
Millennium Park,
Naas,
Co. Kildare.

HSE Director of Advocacy

National Advocacy Unit,
Quality & Patient Safety
Directorate,
HSE, Oak House,
Limetree Avenue,
Millennium Park,
Naas, Co. Kildare.

Office of the Ombudsman

18 Lower Leeson Street,
Dublin 2.
Tel: (01) 6395600
Lo-call: 1890 223030

National Disability Authority

25 Clyde Road,
Dublin 4.
Tel: (01) 6080400

Confidential Recipient for Vulnerable Persons

Leigh Gath
Training Services Centre
Doodadoyle
Limerick
LoCall 1890 100 014
Mobile 087 6657269
Email leigh.gath@crhealth.ie