
Complaints Policy

St Dominic's Community
Response Project

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1.Responsibility for approval of policy	<i>Board of Management</i>
2.Responsibility for implementation	<i>Project Co-Ordinator</i>
3.Responsibility for ensuring review	<i>Project Co-Ordinator</i>

Complaints Procedures: St. Dominic's Community Response Project		
Date:		
	Included	Comments
Definition of a complaint	Yes	
Purpose	Yes	
Who can make a complaint	Yes	
How complaints can be made	Yes	
Acknowledgements	Yes	
Advocacy	Yes	
List Stages of the complaints management process	Yes	
Stage 1 – Local Resolution – Verbal Complaint	Yes	
Stage 2 – Informal Resolution and/or Formal Investigation	Yes	
Stage 3 – Review	Yes	
Stage 4 – Independent Review	Yes	
Timeframes involved once a complaint is received	Yes	
Time limits for making a complaint	Yes	
Matters excluded	Yes	
Refusal to investigate or further investigate complaints	Yes	
Unreasonable complainant behaviour/vexatious complaints	Yes	
Redress	Yes	
Recorded	Yes	
Annual Report to the HSE	Yes	
Policy Statement	Yes	

1. Policy Statement

St Dominic's Community Response Project is committed to taking seriously any complaint that concerned individuals have about the service. St Dominic's CRP believes that anyone who wishes to complain or register a concern about the service should find it easy to do so.

2. Purpose

This policy is intended to ensure that all complaints are taken seriously and addressed in an appropriate and professional manner.

3. Scope

- 3.1. This policy covers all actions to be taken in respect to a complaint by a concerned individual. Complaints can be made against any aspect of St Dominic's Community Response Projects service delivery.
- 3.2. This policy applies to all staff members and representatives from other agencies conducting in-reach services.

4. Glossary

- 4.1. Complaint: In line with the part 9 of the Health Act 2004, "complaint" means a complaint about any action of the organisation that
 - 4.1.1. it is claimed, does not accord with fair or sound administrative practice, and
 - 4.1.2. adversely affects the person by whom or on whose behalf the complaint is madeFor the avoidance of doubt, complaints may only be made in respect of actions which have already been taken.
- 4.2. Concerned individuals: Includes anyone who is directly affected by the actions of the organisation, but excludes anyone who works for the organisation either in a paid or voluntary capacity, such as staff members or volunteers. These groups should use internal management structures and / or the organisation's grievance procedure in the event that they wish to complain about a decision affecting them.
- 4.3. Staff member: Should be construed broadly, and includes, for the purposes of this policy, staff members, volunteers, interns and locums
- 4.4. Executive: The Health Service Executive (HSE)

5. Roles and Responsibilities

- 5.1. Management is responsible for:
 - 5.1.1. Ensuring all staff members are aware of this policy and are able to advise concerned individuals on same.
 - 5.1.2. Ensuring that all complaints received are handled in line with this policy.
 - 5.1.3. Regularly monitoring the number, nature and outcome of complaints as part of the continuous quality improvement process.
- 5.2. Staff members are responsible for;
 - 5.2.1. Ensuring that all service users are informed of the complaints policy as part of their introduction to the service
 - 5.2.2. Ensuring that any other concerned individual is made aware of the complaints policy as appropriate
 - 5.2.3. Assisting concerned individuals to make a complaint as outlined in this policy when requested to do so.
 - 5.2.4. Following all other steps regarding complaints as outlined in this policy
 - 5.2.5. Ensuring they keep themselves informed in relation to this policy

6. Principles

- 6.1. All complaints should be dealt with promptly, and within the timescales outlined.
- 6.2. As far as possible all complaints should be resolved as quickly and efficiently as possible.
- 6.3. Complainants should be consulted about what they would like to happen about their complaint.

- 6.4. Complainants should be supported and given appropriate assistance throughout the procedure. They should be given the opportunity to be supported by an advocate. For the purposes of this policy an advocate is taken as being anyone who has the complainant's written permission to complain on their behalf, excluding staff members. A parent or guardian may complain on behalf of a child.
- 6.5. **The complaints procedure should be well publicised. A template is included in appendix I of this policy document and should be displayed prominently in the project.** All new service users will be given a brief explanation of the complaints procedure as part of their induction.
- 6.6. All complaints must be properly recorded. A Complaints Record Form template is included in appendix II of this policy document. The Manager is responsible for ensuring that complaints are properly recorded and signed by the complainant, the staff member recording the complaint and the manager. Alterations to the original complaint should also be recorded and signed and dated.
- 6.7. A complaints file should be maintained and regularly monitored by the Manager.

7. Basic Information

Who can make a complaint?

- 7.1. Anyone who is a concerned individual for the purposes of 4.2
- 7.2. An advocate may also complain on a concerned individual's behalf provided they have the concerned individual's written consent.
- 7.3. A parent / guardian may complain on behalf of a child.

What can they complain about?

- 7.4. Any action of the organisation that has directly affected them. This might include:
 - 7.4.1. The manner in which the organisation has treated them
 - 7.4.2. Being denied a service
 - 7.4.3. A change in service provision
 - 7.4.4. The actions of a specific member of staff

How can complaints be made?

- 7.5. Complaints may be made in any form. However, once a complaint moves to Stage 2 (see Section 8 below), it must be recorded in writing. The service can be contacted directly by telephone on 01 4620624, by post to St Dominic's Contact Centre, St Dominic's Road, Tallaght, Dublin 24, or by email to info@dominics.ie. The manager of St Dominic's Community Response Project receives the emails sent to this address and will manage any complaints received.

Acknowledgement of written complaints

- 7.6. St Dominic's Community Response Project will notify, the complainant in writing within 5 working days of a written complaint being received:
 - 7.6.1. That the complaint has been so received
 - 7.6.2. An outline of the steps that the organisation proposes to take in investigating the complaint
 - 7.6.3. A proposed time limit for the completion of the investigation
 - 7.6.4. A contact person for the complainant

Recording Complaints

- 7.7. Complaints will be recorded on the Complaints Record File and stored in the complaints file which will be in a secure locked cabinet. The manager will be the only person with access to this cabinet and will be the main contact to liaise with regarding files.

Complaints involving staff

- 7.8. If the complaint is about a member of staff, the complainant should immediately be referred to a more senior person than the person about whom they wish to complain. In the event that the complaint cannot be resolved locally, the complainant:

- 7.8.1. may be supported to put the complaint in writing
- 7.8.2. will be told that the staff member will be notified of the complaint against them
- 7.8.3. will be told that their complaint will be acknowledged as per section 7.6

What are the time limits for complaints?

7.9. Time limits for complaints are set out in Section 47, Part 9 of the Health Act 2004, which requires that:

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.

- 7.9.1. The manager may decide to extend the time limit for making a complaint if in the opinion of the manager special circumstances make it appropriate to do so. Special circumstances may include but are not limited to the following:
 - 7.9.1.1. If the complainant is ill or bereaved
 - 7.9.1.2. If new relevant, significant and verifiable information relating to the action becomes available to the complainant
 - 7.9.1.3. If it is considered in the public interest to investigate the complaint
 - 7.9.1.4. If the complaint concerns an issue of such seriousness that it cannot be ignored
 - 7.9.1.5. Diminished capacity of the service user at the time of the experience e.g. mental health, critical/long-term illness
 - 7.9.1.6. Where extensive support was required to make the complaint and this took longer than 12 months
- 7.9.2. The manager must notify the complainant of the decision to extend /not extend the time limits within 5 working days

Are there any matters excluded from the complaints process?

7.10. According to Section 48(1), Part 9 of the Health Act 2004

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

- 7.10.1. A matter that is or has been the subject of legal proceedings before a court or tribunal;
- 7.10.2. A matter relating solely to the exercise of clinical judgement by a person acting on behalf of either the Executive or a service provider;
- 7.10.3. An action taken by the Executive or a service provider solely on the advice of a person exercising clinical judgement in the circumstance described in 7.9.2;
- 7.10.4. A matter relating to the recruitment or appointment of an employee by the Executive or a service provider;
- 7.10.5. 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 advisor that the Executive proposes to enter into under Section 24 of the Health Act 2004
- 7.10.6. A matter relating to the Social Welfare Acts;
- 7.10.7. A matter that could be the subject of an appeal under Section 60 of the Civil Registration Act 2004;
- 7.10.8. A matter that could prejudice an investigation being undertaken by the Garda Síochána;
- 7.10.9. A matter that has been brought before any other complaints procedure established under an enactment

Redress

7.11. According to HSE guidelines on complaints,

- 7.11.1. Redress should be consistent and fair for both the complainant and the service against which the complaint was made.

- 7.11.2. The HSE or service provider should 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.
- 7.11.3. This redress could include:
- Apology
 - An explanation
 - Refund
 - Admission of fault
 - Change of decision
 - Replacement
 - Repair/rework
 - Correction of misleading or incorrect records
 - Technical or financial assistance
 - Recommendation to make a change to a relevant policy or law
 - A waiver of debt
- 7.11.4. A Manager/complaints officer may not, following the investigation of a complaint, make a recommendation the implementation of which would require or cause-
- 7.11.4.1. (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 of the Health Act 2004.
- 7.10.5 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

8. Complaints Management

There are four stages to the complaints procedure:

Stage 1 Local resolution at the point of contact

Stage 2 Managing a written complaint

Stage 3 St Dominic's CRP Board of Management Review

Stage 4 Independent review

8.8. Stage 1 Local resolution at the point of contact

- 8.8.1. If a complainant has a problem with an aspect of the service, they should inform a staff member. The staff member will make every effort to resolve the problem locally at first point of contact. The staff member may seek assistance from management at this stage in resolving the problem.
- 8.8.2. In the event that the problem cannot be resolved locally it must be recorded as a formal complaint to be progressed further.(see 8.9.2.)

8.9. Stage 2 Managing a written complaint

8.9.1. Informal resolution of a complaint

- 8.9.1.1. The manager taking into account the nature and circumstance of the complaint, may seek the consent of the complainant and any third party to whom the complaint applies to finding an informal resolution of the complaint by the parties concerned.

- 8.9.1.2. Where an informal resolution is not applicable or not successful, the manager will initiate a formal investigation.

8.9.2. Formal resolution of a complaint

- 8.9.2.1. The complaint should be reviewed by manager, to confirm that they are in possession of a written record of the complaint, which is signed and dated by the

- complainant and clearly sets out the nature of the complaint, why the initial response was unsatisfactory and what the complainant's desired outcome is.
- 8.9.2.2. The manager will write to the complainant in line with 7.6.
 - 8.9.2.3. The manager will investigate the complaint and may draw on appropriate expertise, skills etc. as required.
 - 8.9.2.4. The complainant and any third parties involved will be given the opportunity to discuss the complaint with the manager individually in private.
 - 8.9.2.5. The manager will complete investigation of the complaint within 30 working days of acknowledging the complaint. If this is not possible, within 30 working days of acknowledging the complaint, the complainant must be informed of the delay and given an indication of the time it will take to complete the investigation. The complainant and relevant third parties must be updated every 20 working days.
 - 8.9.2.6. Where the investigation passes the 30 working days timeframe, the complainant must be informed of the delay and the manager must endeavour to complete the investigation within 6 months.
 - 8.9.2.7. Where deadlines are not met, the complainant must be informed that they can choose to move to stage 3 (if relevant) / stage 4 of the complaints management process
 - 8.9.2.8. The manager will inform the complainant and any relevant third parties of the outcome of the investigation in writing. The letter must state whether the complaint has been upheld, and whether any further action will be taken.
 - 8.9.2.9. If the complainant is not satisfied with the outcome of the investigation, they should be informed of Stage 3 and 4 reviews.
- 8.10. **Stage 3 Review.**
- 8.10.1. Where the complainant is dissatisfied with the outcome of the complaint investigation at stage 2, a request for review must be made within 30 days of the investigation report being sent.
 - 8.10.2. The Board of Management of St Dominic's CRP will undertake their own reviews and appoint a review officer (The Chairperson). The review officer's function is to:
 - 1: To determine the appropriateness of a recommendation made by the manager, having regard to the following two elements:
 - All aspects of the complaint
 - The investigation of the complaint
 - 2: Determine the appropriateness of the recommendation to uphold it, vary it, or make a new recommendation if he/she considers it appropriate to do so.
 - 8.10.3. Where a complainant is not satisfied with the outcome of an investigation in St Dominic's Community Response Project, an independent review may be suggested.
- 8.11. **Stage 4 Independent review**
- 8.11.1. If the complainant is not satisfied with the outcome of the complaints management process in stage 2 or stage 3, the complainant may seek a review of the complaint by the Executive or the Ombudsman/ Ombudsman for Children. The complainant must be informed of their right to seek an independent review at any stage of the complaint management process.
 - 8.11.2. The contact details for the Ombudsman are: Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2. Tel: +353-1-639 5600. Ombudsman for Children's Office, Millennium House, 52-56 Strand Street Great, Dublin 1. Tel: 01-8656800.

9. Anonymous Complaints

In the event that an anonymous complaint is received St Dominic's Community Response Project will note the issues raised and, where necessary try and resolve them appropriately. An anonymous complaint may be referred for investigation:

- 9.1. If there was good reason why the complaint was being made on an anonymous basis, for example, if there was a concern by the complainant that if their identity was revealed it could lead to negative consequence on their health or well-being. This may depend on the seriousness of the allegation being made, and should be at the discretion of the manager. If the allegation involves the manager, it should be referred to the chair of the management committee.
- 9.2. If the allegation can be properly investigated either by talking to a third party witness, or with evidence provided with the complaint, and where there is no need for further contact with the anonymous complainant.
- 9.3. Any complaint involving a minor will be investigated and handled in a confidential manner according to the Child Protection Policy.
- 9.4. In the case that an anonymous complaint cannot be fully investigated, the complaint will not be referred to in the staff file or will not in any other way impact upon working process or roles etc., except where this has been agreed by all involved including the person named in the complaint.
- 9.5. If the complaint relates to the general service delivery this will be referred to the **Director/CEO** and remedial action will be implemented if appropriate.
- 9.6. A record of all complaints will be retained on file.
- 9.7. The organisation will continue to promote the complaints procedure and ensure appropriate supports are in place to facilitate complaints.

10. Refusal to investigate or further investigate complaints.

In accordance with Section 50 of the Health Act 2004 and the following sections also referred to in the Act

- 10.1. The Manager shall not investigate a complaint if:
 - 10.1.1. 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,
 - 10.1.2. 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)*.
- 10.2. The Manager 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, the manager is of the opinion that:
 - 10.2.1. the complaint does not disclose a ground of complaint provided for in *section 46*, the subject-matter of the complaint is excluded by *section 48*, the subject-matter of the complaint is trivial, or
 - 10.2.2. the complaint is vexatious or not made in good faith,
 - 10.2.3. is satisfied that the complaint has been resolved.
- 10.3. The Manager 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.

11. Unreasonable complainant behaviour

- 11.1. The service provider should set out how they will deal with vexatious complainant behaviour either in the complaints policy or a separate policy if they so wish.
- 11.2. It is noted that in a minority of cases where the organisation will take all reasonable measures to try to resolve a complaint through the complaints procedure, the complainant does not accept these efforts.
- 11.3. Where a complainant's behaviour could be considered abusive, unreasonable or vexatious, the organisation may consider invoking their equivalent of the HSE Policy for Dealing with Vexatious Complaints.
- 11.4. The complainant must be notified of their right of review to the National Advocacy Unit if they are not happy with the outcome of the complaint.

- 11.5. The National Complaints Governance and Learning Team are currently developing a policy to manage behaviours that could be classed as unreasonable within the Your Service your Say process.

12. Reporting to the HSE¹ (if applicable)

Service providers who have entered into a Service Level Agreement (SLA) with the HSE under Section 38 or Section 39 of the Health Act 2004 are obliged to report to the HSE on complaints as requested and, on the templates/format provided by the HSE. St Dominic's Community Response Project reports to the HSE on an annual basis. The report should include

- The total number of complaints
- The nature of complaints
- The number of complaints resolved by informal means
- The outcome of any investigations into the complaints

Signed: _____
(Chairperson of the Board of Management)

Date: _____

Signed: _____
(Manager of St Dominic's Community Response Project)

Date: _____

¹ Guidelines for Voluntary Organisations and Hospitals in Drafting Complaints Procedures. 2015. HSE

Appendix 1

Complaints Process – Information for Service Users

Who can complain?

- 1) Anyone who is a user of the service.
- 2) An advocate may complain on the service user's behalf provided they have the service user's written consent.
- 3) A parent / guardian may complain on behalf of a child.

What can you complain about?

- 1) Any part of the service that you have received
- 2) A decision made about you that affects you
- 3) Being denied a service
- 4) A change in service provision
- 5) A member of staff

Important things to note:

- 1) You have the right to complain when you are unhappy with the service.
- 2) If staff cannot address your issue, then they will help you write down your complaint so it can go to the manager.
- 3) If you make a complaint, then you will not be treated differently following the complaint. The service sees complaints as a way to improve what we do.
- 4) Your complaint will be recorded on the Complaints Record Form template and secured in the complaints file in a locked cabinet, which only the manager of the organisation will have access to.

Complaints involving staff:

If you wish to make a complaint about a staff member

- Tell one of the team and you will be referred to a manager, who will help you follow the process.
- Note that the staff member will be informed that a complaint has been made against them.
- If you want to complain about the manager then the complaint can go to someone more senior, again let a member of staff know.

Complaint Process

- All complaints will be taken seriously.
- If you tell a staff member about a complaint, the staff member will try to resolve the issue with you. If this does not happen and you are still unhappy then the staff member will help you complete a Complaints Record Form or write a complaint letter, which will be given to the manager.
- Once you have written down the complaint the manager will investigate the problem and get back to you in 30 working days with a response.
- If you are unhappy with the response, let the manager know and a meeting can be set up with someone more senior in the organisation within four weeks.
- You can bring a family member or other advocate to this meeting. Following this meeting you will be informed of an outcome after three days.

