
Complaints & Concerns

**Skibbreen
Residential Care
Centre.**

September 2023

Approved By	Dennis Joseph	Commence	Jul 2023
Next Review Date:	July 2026	Review By:	Dennis Joseph

Policy Statement

Complaints, including anonymous complaints, comments, suggestions and criticisms about services, whether oral or written will be taken seriously and handled in a sensitive, timely and effective manner that protects the rights, privacy, dignity and confidentiality of all those involved. Comments and / or complaints will be used to inform continuous quality improvement and risk management of services provided.

Each resident is encouraged and supported to express any concerns safely and is reassured that there are no adverse consequences for raising an issue of concern, whether informally or through the formal complaint's procedure. (1.7.2) National Standards for Residential Care Settings for Older People in Ireland, 2016)

Purpose

The purpose of this policy is to ensure that complaints from residents and / or their representatives are managed in accordance with the relevant legislation and best practice.

Objectives

To ensure that Skibbereen Residential Care Centre staff are aware of the principles for effective management of complaints and concerns about care and / or services from residents and / or their representatives.

To ensure that Skibbereen Residential Care Centre staff are aware of the procedures to be followed for management of complaints and concerns.

To ensure that complaints and concerns are used to inform quality improvement and risk management processes in Skibbereen Residential Care Centre.

Scope

This policy should be read by all Skibbereen Residential Care Centre staff.

Definitions

Concern: A safety or quality issue regarding any aspect of service provision, raised by a service user, service provider, member of the workforce or general public. (HIQA 7.7.15).

Complaint: In general terms a complaint is defined as an expression or statement of dissatisfaction that requires a response (Department of Health, 2008). Complaints can be verbal or written. The Health Act, 2004 (Government of Ireland, 2004: p38) states that:

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

anything done or omitted to be done by the Executive, or by a Service Provider 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.”

Action: refers to anything done or omitted to be done by Skibbereen Residential Care Centre in the provision of the service and care for its client.

Complainant: Complainant refers to a person who is entitled under Health Act 2007 to make a complaint on the person’s own behalf or on behalf of another. **This includes:**

A resident

A spouse, civil partner, a cohabitant, a close relative, or a carer of the resident

Any person who, by law or by appointment of a court, has the care of the affairs of the resident.

Any legal representative of the resident

Any other person with the consent of the resident.

Open Disclosure: An open, consistent approach to communicating with service users when things go wrong in healthcare. This includes expressing regret for what has happened, keeping the service user informed, providing feedback on investigations and the steps taken to prevent a recurrence of the adverse effect.

Malicious complaint: A malicious complaint is one which is spiteful, intentionally destructive, hateful, nasty and / or cruel. All complaints should be considered within the context of the right of each individual to be treated with dignity and fairness. However, where it is decided that there is no case to answer, the complaint should only be dealt with as a malicious complaint, when there are reasonable grounds for doing so. In order to define a complaint as malicious, the following criteria can be used as guidance:

The investigation has shown the original complaint to be without foundation.

The investigation can demonstrate that the complainant in making his / her complaint knowingly lied to the investigating team.

There is enough evidence to demonstrate the above based on the balance of probabilities.

Independent Advocacy Service: This means advocacy support provided by an organisation that is free from conflict of interest and is independent of family and service providers.

General Principles of Complaints Management

New residents will be provided with a copy of the Residents' Guide, which contains details of the complaint's procedure. In the case of an emergency admission, this will be given to the individual within the first week of admission.

There is a procedure for making formal complaints. This procedure is consistent with relevant legislation and regulations, local and national policy and takes account of best practice guidelines. Each resident is given information about how to make a complaint in an accessible and appropriate format which includes the procedure for making a complaint outside the residential service when all other options have been exhausted. (1.7.1) *National Standards for Residential Care Settings for Older People in Ireland, 2016*)

The complaints procedure is displayed in Skibbereen Residential Care Centre in a prominent position opposite Reception. (**See Appendix 3**) A full copy of Skibbereen Residential Care Centre Complaints Policy is available on request from Reception and is available on the website.

If the complaint is being made by a vulnerable person, consider accessing support on their behalf through advocacy services such as SAGE or the Patient Advocacy Services.

Complaints Officer

The Complaints Officers are the people designated by Skibbereen Residential Care Centre for the purpose of dealing with complaints. The Complaints Officer for Skibbereen Residential Care Centre is Dennis Joseph, Director of Nursing.

Complaints that cannot be resolved by informal resolution may be referred to the Complaints Officer for further investigation. The complaints officer will normally discuss the complaint with the complainant either face to face or by telephone. They will either uphold the complaint or not and will outline recommended actions in the report.

Roles and Responsibilities of the Complaints Officer

- Establish and direct an investigation team, consisting of all relevant persons and staff with expertise and knowledge to carry out the investigation.
- Identify details of the complaint which are not within the remit of Skibbereen Residential Care Centre. **(As outlined in Appendix 2)**
- Investigate and conclude within 30 working days or inform the complainant if there is any delay. Update them every 20 days.
- Inform relevant parties of the decision to extend or not extend the timeframe.
- Use tools such as mediation if it will help to resolve the matter.
- Request documents and communicate with relevant people to help with investigation of the complaint. This could include files, notes of conversations, letters, emails or whatever may be relevant to the complaint.
- If the findings in the report have an adverse effect on any individual - allow them the opportunity to respond.
- Make recommendations for any areas where improvement is required in response to the complaint.
- Provide the Complainant with a written report of the complaint, if requested.
- Where the complaint is withdrawn, inform the Person in Charge to determine if the investigation should continue.
- Present the Complaints Report at the Clinical Governance Complaints Management meetings.
- Act as Liaison Officer for complaints which have been referred to the Ombudsman.

Management of Written Complaints

Written complaints can be the first point of contact, or they may result if a verbal complaint cannot be resolved satisfactorily.

Written complaints received by any member of staff must be brought immediately to the attention of the PIC/ CO.

When a written complaint is received, the PIC/CO will decide on what further steps to take. This will depend on the nature of the complaint, the need for consent from the complainant and / or other people to whom the complaint relates and the seriousness of the complaint. For example, the complaint was made by a person on behalf of a resident, but the resident may not agree with the complaint.

A risk assessment of the complaint should be carried out to help determine the appropriate course of action.

Consideration of a written complaint (Pre-Investigation): Consideration of a written complaint should include the possibility of an informal resolution to the complaint that would not require a formal investigation.

Prior to any formal investigation, a pre-investigation of the complaint should be made, to establish the following:

- That the complaint is within the responsibility of Skibbereen Residential Care Centre.
- That the person making the complaint is entitled to do so.
- That a complainant claiming to be acting on behalf of a resident is entitled to do so by virtue of having appropriate authority to make a complaint on behalf of a resident having regard to the requirements for informed consent.

In the case of a deceased resident, the complainant is entitled to make a complaint as a close relative or carer, defined by the Health Act, 2004

(Government of Ireland, 2004) if they are the following:

- A) A parent, guardian, son, daughter, or spouse of the other person, or
- B) Are cohabitating with the other person.

Where a resident is unable to make a complaint because of age, illness or disability, the registered provider may, where appropriate assist a person making or seeking to make a complaint, subject to his or her agreement, to identify another person or independent advocacy service who could assist with the making of the complaint.

Pre-investigation of the complaint should also determine that:

- The subject matter is not trivial.
- The complaint is not malicious.
- The complaint is made in good faith.
- The complaint has not already been resolved.
- The complaint should not be addressed by alternate processes or health authority.

The outcome of the pre-investigation should be reported to the Person in Charge (PIC) and the next action for managing the complaint should be agreed.

The written complaint should be **acknowledged within 5 working days** including the date of the complaint and the date it was received by Skibbereen Residential Care Centre.

The written acknowledgment should include an expression of regret for any inconvenience or difficulties experienced; appreciation of feedback; how and when the complaint will be investigated and an opportunity to discuss any of the matters that have arisen.

Where a complaint is made against a named member of staff and has not been resolved at the point of contact, the complainant must be asked to formally put the complaint in writing and sign the complaint.

Where it is determined that a complaint has not met enough criteria or grounds for complaint, the Complaints Officer / Person in Charge may choose not to proceed with investigation. This decision and the rationale should be given in writing to the complainant. Alternate options for proceeding with the complaint should be provided to the complainant.

The completion of the pre-investigation may result in the finding that the complaint requires an alternate process to manage the complaint, the PIC /CO

should either use the alternate process (as in the case of suspicions / allegations of abuse) or refer the complaint to the appropriate authority (as in the case of professional misconduct / fitness to practice issues. **(See Appendix 5)**)

Any complaint where there may be a Safeguarding concern or any allegation of misconduct by the registered provider or any person employed in Skibbereen Residential Care Centre must be reported to the Chief Inspector of the Social Services Inspectorate in the Health Information and Quality Authority within three working days. (Form NF06 and NF07).

Timeframe for investigation of complaint

- a. Acknowledgement of a written complaint **within 5 working days**.
- b. Where a formal investigation is being carried out, try to complete the investigation **within 30 working days** of the complaint being acknowledged.
- c. Where it is not possible to carry out the investigation within 30 working days, the complainant must be informed and given an indication of the timeframe required (aim for no longer than 6 months).
- d. The complainant should be **provided with an update every 20 working days**. Where further information is required to conduct the investigation, the complainant should be contacted and asked to respond within 10 working days if this is feasible.
- e. Where a staff member/ member is required to respond to issues raised by the complaint, they should be asked to do so within a reasonable timeframe such as 10 working days.
- f. Where the complaint involves a staff member no longer employed by Skibbereen Residential Care Centre, every reasonable effort should be made to contact this person and request a response. However, if after all reasonable efforts, the investigating person / team are unable to contact and / or receive a response from this person, the investigation person team should proceed to investigate the complaint to the best of their ability with the information available to them.
- g. The response letter should inform the complainant whether or not their complaint has been upheld, the reasons for that decision, any improvements recommended and details of the review process. The response letter will indicate that the complaint will automatically close after 30 days unless a reply is received from the complainant expressing dissatisfaction with the outcome.
- h. In the event that the complainant refuses to close a complaint, despite the best efforts

of Skibbereen Residential Care Centre, this will be discussed at the Provider/Management meetings. If following discussion, it is concluded that the complaint as presented by the complainant has been resolved, and the committee are satisfied that all reasonable efforts have been made to close the complaint as per procedure, the complaint will be closed. The reasons for closing the complaint in this fashion will be clearly outlined in the Complaint record in eNursing.

14.0 Procedure for Formal Investigation of a Complaint

- 14.1** The investigation procedure should begin by identifying all parties involved in the complaint i.e., the complainant and staff members about whom the complaint is being made.
- 14.2** All parties should be made aware of the decision to carry out a formal investigation of the complaint.
- 14.3** The PIC/CO should decide whether a team should be set up to carry out the investigation and ensure that the team members can conduct the investigation in an unbiased and unprejudiced manner.
- 14.4** Where other personnel are to be included as part of an investigation, the complainant's consent to share information should be documented.

The Complaints Procedure identifies the expectations of residents who make a complaint and ensures that these expectations are taken into account and addressed throughout the process. (1.7.6) *National Standards for Residential Care Settings for Older People in Ireland, 2016*

- 14.5** The scope/terms of reference for the investigation should be agreed with the team members. This should include identification of the key issues or questions raised by the complainant and their expectations.
- 14.6** All relevant information required to carry out the investigation should be established and gathered.
- 14.7** Both the complainant and staff members about whom the complaint is being made

should be provided with the opportunity to give their version of events and to provide the rationale / explanations for actions taken /omitted.

- 14.8** All parties should be informed of their right to be accompanied by a support person / resident advocate at any meetings surrounding the complaint.
- 14.9** All parties should be reassured that their rights to fairness, dignity and confidentiality will be maintained.
- 14.10** A written record of all communications during the management of a complaint should be kept.
- 14.11** All information obtained during complaint management should be treated in a confidential manner and meet the requirements of the records management policy. Personal information should only be used for the purpose for which it was collected.
- 14.12** No member of a team investigating a complaint may discuss, communicate, or disclose any information obtained except where necessary for the consideration or investigation of the complaint.
- 14.13** Where the investigation indicates the need to disclose some or all details of a complaint, as in a criminal investigation / investigation of allegation of abuse, all parties should be informed, and the information directed to the appropriate authorities.
- 14.14** Where the complainant is a resident of Skibbreen Residential Care Centre, all actions should comply with the requirements for consent and advocacy as outlined in the consent and advocacy policy. If the complaint is made against a staff member, the complainant is protected from any interaction with the staff member whom they are making the complaint about.
- 14.15** Where there is any doubt about the appropriateness of disclosing information, the PIC/CO should consult their legal representatives.
- 14.16** The investigating team should establish and communicate to the relevant parties, timeframes and sequence of events including how the complainant and other relevant parties will be updated on the progress of the investigation.

14.17 A completed dated report should be documented after the investigation to include:

- A description of the complaint.
- Reason(s) for actions resulting in the complaint.
- A description of the methods used in the investigation.
- Apology where this is appropriate.
- Findings.
- Recommendations.
- Actions to be taken to resolve the complaint and prevent recurrence.
- Rationale for all the above.

14.18 Where the investigation showed no legitimate grounds for investigation, the report should outline the reasons for this and provide the complainant with information about other bodies to whom the complaint could be referred.

14.19 Where the complaint was upheld, the report should outline any recommendations to be made as a result of the findings of the investigation including:

- Redress for the complainant was deemed appropriate by the investigation.
- Preventative action to be taken to remove the causes of the complaint or concern or its likelihood of re-occurrence as far as is reasonably possible.

14.20 All documentation related to managing and investigating a complaint should comply with the requirements for confidentiality and management of resident information as outlined in the appropriate policies.

14.21 Withdrawal of Complaints: A complainant may at any time decide to withdraw a complaint and in this case the DOC/CO may decide to cease any formal investigation, unless the complaint raises serious issues regarding risk, safety and quality of care.

15.0 Internal review

- 15.1** Appeals against the decision of the Complaints Officer can be made by the complainant to the Review Officer.
- 15.2** If such an appeal is brought, the Review Officer shall give both parties an opportunity to be heard and to present any evidence relevant to the appeal.
- 15.3** An appeal may be made by furnishing a notice in writing to the Review Officer specifying the grounds of appeal.
- 15.4** A review is conducted and concluded as soon as possible and no later than 20 working days after the receipt of the request for review. In the event that the timelines set out cannot be complied a written response should be given with and the reason for any delay in complying with the applicable timeline
- 15.5** The Review Officer shall decide in writing in relation to the appeal affirming, varying or setting aside the finding or recommendation concerned and shall communicate the determination (including the reasons) to the complainant and Registered Provider if appropriate.
- 15.6** The Review Officer may, for the purpose of his or her functions require a Complaints Officer to make such further inquiries and to furnish him or her with the result of such inquiries or further information as he or she considers necessary within such period as may be specified by him or her, and the officer shall comply with the requirement.
- 15.7** If at any time after an appeal has been initiated, the Review Officer is of opinion that the appeal could be resolved by mediation, he or she shall inform the person who initiates the appeal concerned of that opinion and, if the applicant agrees, refer the matter for mediation.
- 15.8** Where an appeal is resolved by mediation, the mediation officer concerned shall prepare a written record of the resolution arrived at, and the record will be signed by the relevant people involved in the mediation a copy will be retained and sent to the

complainant concerned and the Registered Provider.

- 15.9** If the Review Officer believes there is a conflict of interest, they may recommend that the appeal is dealt with by an external independent investigator chosen by the Review Officer. This person will be an external person who is not an employee of Skibbereen Residential Care Centre. In the case of this type of appeal, permission/consent will be sought from the complainant for the independent external investigator to access confidential documentation so that a full and proper appeal can be carried out.
- 15.10** The complainant can refer a complaint at any stage in the complaints process to the Chief Inspector/Health Services Executive or the Ombudsman if their place is provided under a contract with the HSE.
- 15.11** Complainants should be made aware that if they are not happy with the outcome of the complaints process, they can contact the Office of the Ombudsman.

16.0 Open Disclosure

There is a culture of openness and transparency that welcomes feedback, the raising of concerns and the making of suggestions and Complaints. These are seen as a valuable source of information and are used to make improvements in the service provided (1.7.4) *National Standards for Residential Care Settings for Older People in Ireland, 2016*)

- 16.1** We support a culture of openness where residents and/or advocates are encouraged to provide feedback at the Residents Representative Meeting.
- 16.2** A Suggestion Box is available at reception where residents or their representatives can anonymously leave suggestions or concerns.
- 16.3** An annual survey will provide information which will be used for analysis and for continuous improvement.
- 16.4** There is a culture of “open disclosure” whereby if an adverse event occurs, this will be acknowledged, and the complainant will be given factual information in a truthful manner. When it is clear, following a review of the adverse event, that

Skibbereen Residential Care Centre is responsible for the harm, there will be an acknowledgment of responsibility and an apology provided as soon as possible.

Staff are trained to understand behaviour that indicates an issue of concern or complaint that a resident may not be able to communicate by other means. Such messages are recorded and receive the same positive response as issues of concern and complaints raised by other means. *(1.7.8) National Standards for Residential Care Settings for Older People in Ireland, 2016)*

17.0 Staff Training

- 17.1** All staff are made aware of the complaint's procedure, including how to identify a complaint. All staff should receive training in Complaints management and communications as part of their Induction program.
- 17.2** The registered provider shall ensure that nominated complaints officers and review officers receive suitable training to deal with complaints in accordance with the designated Centre's complaints procedures.

18.0 Monitoring and Review of Complaints Management

- 18.1** Complaints should be recorded in the complaints section of eNursing and reviewed on a monthly basis. They should be discussed as part of Governance meetings.
- 18.2** Actions to address risk / quality improvement issues arising from complaints should be clearly documented, with timeframes and responsible person(s) identified.
- 18.3** Adherence to the procedures and processes outlined in this policy should be audited as part of the quality improvement ethos of Skibbereen Residential Care Centre.
- 18.4** Complaints management is reviewed at a quarterly governance meeting to ensure the correct handling of complaints. The nominated person to oversee the record keeping and the management of complaints is Ms Diana Rose, Director of Care.

- 18.5** An Annual Complaints Report is compiled of total complaints/ concerns raised for the year as well as details of the level of engagement of independent advocacy services with residents and this is published in the Annual Report which is made available to residents and staff.
- 18.6** An annual report is provided to the HSE on the complaints received during the previous year indication:
- The total number of complaints received.
 - The Nature of complaints
 - The number of complaints resolved informally.
 - The number of written complaints
 - The Outcome of investigations.
- 18.7** (See **Appendix 4** for Quick Guide to Management of Complaints)

References

1. Health act 2004 (Complaint or concerns) regulations 2006 S.I. no. 652 of 2006. Part 9A of the Health Act 2004, as inserted by Part 14 of the Health Act 2007.
2. Department of Health (2009) *Handling complaints in the NHS - good practice toolkit for local resolution*, DH, UK.
3. Health Information & Quality Authority (HIQA) (2016) *National Quality*

Standards for Residential Care Settings for Older People in Ireland, HIQA, Dublin.

4. Health Information & Quality Authority (2012) *Concerns*, accessed online March 2017 at <https://www.hiqa.ie/get-touch/report-concern>
5. Government of Ireland (2010) *S.I. No. 415/2013 Health Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) Regulations 2013*, Stationery Office, Dublin.
6. Health Complaints Ireland (2012) *How to use health complaints*, Accessed on line 8 May 2012 at www.healthcomplaints.ie
7. The Management of Consumer Feedback to include Comments, Compliments and Complaint in the Health Service Executive (HSE): HSE Advocacy Services 2015
8. S.I. 300 of 2015 Ombudsman Act 1980 (Section 1A) (No. 2) Order 2015.
9. Open Disclosure –National Policy (HSE) 2013
https://hse.ie/eng/about/Who/qualityandpatientsafety/nau/Open_Disclosure/opendiscFiles/opendiscpolicyoct13.pdf {Accessed 24th March 2017}
10. The Patient Advocacy Service website (accessed Dec 2022)
https://www.patientadvocacyservice.ie/?gclid=EAlaIQobChMIxoSs5qG_wlVgt_tCh0xYAtQEAAAYASAAEglUyPD_BwE
11. Model Complaints Systems for Nursing Homes – The Ombudsman
<https://www.ombudsman.ie/guidance-for-service-providers/model-complaints-system-f/> (accessed Dec 2022)
12. HSE “Comments, Compliments and Complaints”
<https://www.hse.ie/eng/about/who/complaints/> (accessed Dec 2022)
13. S.I. 628/2022 Health Care Act 2007 (Care and Welfare of Residents in Designated Centres for Older People) (Amendment) Regulations 2022.

Bibliography

1. ‘Your Service, Your Say’, HSE process to listen and respond to your feedback about services. Your feedback might be a comment, compliment or complaint. (Last reviewed Jan 2023)
2. Office of the Ombudsman, Ireland (2008). Complaints against the Public Health Service accessed at www.ombudsman.gov.ie on 11/06/08.

3. HIQA “We want to Hear from You”-

<https://www.hiqa.ie/sites/default/files/2019-06/Feedback-Older-peoples-services.pdf>

Appendix 1: Agencies who deal with complaints relating to residential and home care.

**All requests for a HSE review should be forwarded in writing to:
Complaints Manager, HSE Oak House, Millennium Park, Naas, Co Kildare.
Telephone (045) 880400**

Email yoursay@hse.ie or by completing an online “Your Service, your Say” feedback form.

The Complaints Manager will examine the request for a review and appoint a Review Officer if appropriate to carry out the review of the complaint.

The Review Officer will review the processes used to carry out the investigation of the complaint and the findings and recommendations made post –investigation.

The Review Officer will either uphold, vary or make a new finding and recommendation.

When to contact HIQA about your concern

This is what HIQA say on their website:

“We welcome information about designated centres for dependent persons, such as nursing homes, or any concerns people may have about the health or social care services they are receiving.

While HIQA is unable to investigate individual complaints about a health or social care service under the Health Act 2007, we will listen to what you have to say.

We can use your feedback in a number of ways to establish if a service is safe, effective, caring, and well managed.

If you wish to contact us regarding a concern about a service, you can:”

- phone **(021) 2409646**;
- email: concerns@hiqa.ie; or
- Post information to: **Concerns about Services, Health Information and Quality Authority, George’s Court, George’s Lane, Smithfield, Dublin 7**

A complaint concerning Skibbereen Residential Care Centre may relate to a professional, for example a doctor or nurse. In these cases, complaints can be made to the professional body responsible for the regulation of the profession, for example, the General Medical Council for doctors and NMBI for nursing.

Appendix 2: Matters excluded from the right to complain.

Standard 1.7: Complaints in the National Quality Standards for Residential Care Settings for Older people in Ireland states that 'each resident's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner'. Section 34 of SI 415 of 2013 (Government of Ireland, 2009) sets out the procedures that should be in place at designated care centers.

However, according to the Health Act, 2004 (Government of Ireland, 2004) a person is not entitled to make a complaint to the Health Service Executive about any of the following matters:

- A matter that is or has been the subject of legal proceedings before a court or tribunal.
- A complaint pertaining to a matter of a criminal nature.
- A complaint pertaining to the financial contract between a resident/representative and the proprietor of a Nursing Home.
- A matter relating to the appointment of an employee by the facility or affecting the terms or conditions of a contract of employment.
- A matter relating to the Social Welfare Act.
- A matter that could be the subject of an appeal under section 60 of the Civil Registration Act, 2004.
- A matter that has been brought before any other complaints procedure established under an enactment (legislation).
- A matter relating solely to the Professional Judgment of a person acting on behalf of the Health Service Executive or the facility.
- Where a complaint includes an element relating to the use of professional judgment the element will be excluded from the complaint investigation.

N.B: Nursing Home staff may receive complaints pertaining to any matter, including the above, however, the appropriate response to and management of complaints will

depend on the type of complaint. The protocol and procedures outlined in this policy describe the course of action to be taken for general complaints handling. Other policies and procedures may refer to specific types of complaints such as elder abuse; grievance and bullying and harassment.

Appendix 3: Skibbereen Residential Care Centre Complaints Procedure

Skibbereen Residential Care Centre Complaints Procedure

Skibbereen Residential Care Centre is committed to dealing effectively with any complaints you may have about the service. We also aim to learn from our mistakes and use the information we gain to improve our services. Our complaints policy is a vital cornerstone of our ethos. Any comments will be an opportunity to continuously enhance the quality of the services we provide and to improve on any aspect of our service that does not meet standards or expectations.

The Health Act 2007 as of March 2023 requires that the registered provider shall ensure that the complaints procedure provides for the following:

a) *the nomination of a complaints officer to investigate complaints.*

The nominated complaints officer for Skibbereen Residential Care Centre is Dennis Joseph, Director of Nursing.

b) *that complaints are investigated and concluded, as soon as possible and in any case no later than 30 working days after the receipt of the complaint.*

1. Where a formal investigation is being carried out, try to complete the investigation within 30 working days of the complaint being acknowledged.
2. Where it is not possible to carry out the investigation within 30 working days, the complainant must be informed and given an indication of the timeframe required (aim for no longer than 6 months).
3. The complainant should be provided with an update every 20 working days. Where further information is required to conduct the investigation, the complainant should be contacted and asked to respond within 10 working days if this is feasible.

c) *the provision of a written response informing the complainant whether or not their complaint has been upheld, the reasons for that decision, any improvements recommended and details of the review process.*

A response letter will inform the complainant whether or not their complaint has been upheld, the reasons for that decision, any improvements recommended and details of the review process. The response letter will indicate that the complaint will automatically close after 30 days unless a reply is received from the complainant expressing dissatisfaction with the outcome.

d) *the nomination of a review officer to review, at the request of a complainant, the decision referred to at paragraph (c);*

The nominated review officer for Skibbereen Residential Care Centre is Dhanya Ragin.

e) *that a review is conducted and concluded, as soon as possible and no later than 20 working days after the receipt of the request for review.*

The review will be conducted and concluded, as soon as possible and no later than 20 working days after the receipt of the request for review; In the event that the timelines set out cannot be complied a written response will be given with and the reason for any delay in complying with the applicable timeline.

f) *the provision of a written response informing the complainant of the outcome of the review.*

The Review Officer shall decide in writing in relation to the review affirming, varying or setting aside the finding or recommendation concerned and shall communicate the determination (including the reasons) to the complainant and the Registered Provider (if appropriate).

- g) the provision of a written response informing the complainant when the complainant will receive a written response in accordance with paragraph (b) or (e), as appropriate, in the event that the timelines set out in those paragraphs cannot be complied with and the reason for any delay in complying with the applicable timeline; and**

In the event that the timelines set out cannot be complied with a written response will be given with and the reason for any delay in complying with the applicable timeline.

- h) that the persons nominated under paragraph (a) and (d) should not be involved in the subject matter of the complaint, and as far as is practicable, shall not be involved in the direct care of the resident.**

The nominated complaints officer and the nominated review officer are not involved in the direct care of the residents. Should your complaint involve the complaints officer or complaints review officer we will refer your complaint to an external complaints review.

The Registered Provider may, where appropriate assist a person making or seeking to make a complaint, subject to his or her agreement, to identify another person or independent advocacy service who could assist with the making of the complaint.

Ombudsman

If you have complained to us and you are not satisfied with our decision on your complaint, it is open to you to contact the Office of the Ombudsman. The Ombudsman provides an impartial, independent and free service. The Ombudsman's cannot investigate a complaint if it is made more than 12 months after you initially complained of the action or you became aware of that action, unless there are very special circumstances. While the Office of the Ombudsman can examine complaints about private nursing homes it is unable to investigate claims relating to private health services.

Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773 Telephone (01) 6395600

Website: www.ombudsman.ie

Email info@ombudsman.ie to complete and submit an online complaint form

Other Agencies involved in Complaints Management

You can also notify the Health Information Quality Authority (HIQA) of a concern. While HIQA does not have the power to investigate individual complaints, they can evaluate whether the information indicates non-compliance with the HIQA Standards and Health Act Regulations.

www.healthcomplaints.ie provides information on how to make a complaint or give feedback about health and social care services in Ireland. It also includes information on how to raise concerns with HIQA or the Mental Health Commission and details of advocacy services that will help you make a complaint.

All requests for a HSE review should be forwarded to:

- Complaints Manager, HSE Oak House, Millennium Park, Naas, Co Kildare. Telephone (045) 880400. www.hse.ie
- HSE National Information Line 1850 24 1850 (8am to 8pm Monday-Saturday) Health Complaints, Office of the Ombudsman www.healthcomplaints.ie

Health Information Quality Authority (HIQA):

- Phone: (021) 2409646;
- email: concerns@hiqa.ie ; or
- Post information to: Concerns about Services, Health Information and Quality Authority, George's Court, George's Lane, Smithfield, Dublin 7, Ireland.

What if you need our help?

We will aim to help you make your complaint known to us. If you need extra assistance, we can

contact services such as the Patient Advocacy Service (PAS) or SAGE advocacy service who can support you through the complaints process. PAS are professional, experienced, and bound by code of practice. They offer free, independent, and confidential complaint advocacy service to the residents in Private Nursing Homes.

PAS can be contacted by email info@patientadvocayservice.ie or by calling the national line 0818 293003. You can also make your query online at www.patientadvocayservice.ie

Who to contact?

The following are the contact details should you require further information or assistance:

- **Person in Charge/ /Complaints Officer:** Dennis Joseph, 028 23617, dennisjoseph@skibbcare.com
- **Nominated Person to oversee Management of Complaints:** Dennis Joseph.
- **Review Officer:** Dhanya Ragin, Telephone: 026 41280, Email: cahereencc@gmail.com

(A full copy of Skibbereen Residential Care Centre's Complaints Management Policy is available on request from Reception and on the website).

(A full copy of Skibbereen Residential Care Centre's Complaints Management Policy is available on request from Reception and on the website).

Appendix 4: Quick Guide to the Management of Complaints

Stage 1: Local Resolution at Point of Contact

- Verbal complaint made to staff member.
- Report to the Nurse in Charge/CNM. Acknowledge immediately or within 24 hours.

Complaint resolved at the point of contact.

Yes -> Record outcome and close.

Complaint logged and forms part of risk management process.

Feedback to staff through staff briefings and meetings

No -> Proceed to Stage 2

- Report to Person in Charge (PIC) and/or designated Complaints Officer (CO)
- Complaint responded to and recorded by Complaints Officer/CNM
- Resolution with the Person in Charge / Complaints Officer.

Stage 2: a) Informal Investigation: b) Formal Investigation

- Request complainant to put verbal complaints formally into writing prior to undertaking an investigation.
- The complaint is immediately brought to the attention of the CNM/ PIC / CO/Provider.
- Complaint registered and logged on Care Monitor by the PIC/ CO.
- PIC/CO confirms the entitlement of the complainant to make the complaint.
- PIC/CO decides whether the complaint should be investigated locally or referred to the appropriate channel.
- Where a decision is made that the complaint should not be investigated locally, take appropriate action as outlined in the policy.
- Complaint acknowledged in writing within 5 working days and complainant informed of the decisions made and next course of action.
- Where the complaint has been deemed appropriate for local investigation, the complaint is risk assessed and investigated internally.
- Aim for resolution within 30 working days of receipt. Inform the complainant

if there is any delay. Update them every 20 days.

- Risk assesses the complaint- if sufficiently serious and/or likely to recur; the investigator must conduct a root cause analysis.
- Gather and document relevant clinical, factual and other information required to determine what happened and investigate the complaint.
- Clarify with the complainant what his/her expectations of management of the complaint are.
- Where a named person has been implicated, offer them an opportunity to respond to the complaint.
- Agree on an appropriate course of action / response to the complaint.
- Inform complainant in writing of the response to / outcome of the complaint.
- Monitor and review.

Stage 3 – Nominated Person

The nominated person reviews all complaints outcomes to ensure that the complaints policy has been followed correctly. This person will advise the complaints management team, if any deviation from the complaints policy has occurred.

Stage 4 - Review by Internal Review Officer

- Appeals against the decision, findings or recommendation of the Complaints Officer can be made to the Review Officer.
- The nominated Review Officer may appoint an external independent party to conduct the review. Permission/consent will be sought to access confidential documentation to enable a full and proper investigation to be carried out.
- The review is conducted and concluded, as soon as possible and no later than 20 working days after the receipt of the request for review; In the event that the timelines set out cannot be complied a written response should be given with and the reason for any delay in complying with the applicable timeline.
- The Review Officer shall decide in writing in relation to the review affirming, varying or setting aside the finding or recommendation concerned and shall communicate the determination (including the reasons) to the complainant and the Registered Provider (if appropriate).

Stage 5- Complaints Procedure and the Ombudsman

If the complainant is not satisfied with the decision on the complaint, they can contact the Office of the Ombudsman.

The complainant can refer a complaint at any stage in the complaints process to the Chief Inspector of the Social Services Inspectorate in the Health Information and Quality Authority/Health Services Executive or to Ombudsman if they are eligible to complain under “Your Service, Your Say”. (Residents whose place is provided under a contract with the HSE).

Appendix 5: Referral of Issues arising from pre-investigation.

Issue:	Referral:	Comments:	Responsible Person
Safeguarding Concern	Safeguarding policy and procedures	Notifiable to Chief Inspector of the Social Services Inspectorate in the Health Information and Quality Authority within 3 days of incident.	PIC
Any allegation of misconduct by the registered provider or any person who works in the designated center.	Skibbereen Residential Care Centre grievance and disciplinary procedures.	Notifiable to Chief Inspector of the Social Services Inspectorate in the Health Information and Quality Authority within 3 days of incident. (NF 07)	PIC
Matters of a suspected criminal nature Theft, Physical assault etc	An Garda Síochana.	Notifiable to Chief inspector of the Social Services Inspectorate in the Health Information and Quality Authority. Any recurring pattern of theft or reported burglary.	PIC

Bullying and Harassment	Skibbereen Residential Care Centre grievance and disciplinary procedures	Refer to Skibbereen Residential Care Centre Employee Handbook	PIC PPIM HR
Non- professional misconduct	Skibbereen Residential Care Centre and disciplinary procedures	Notifiable to Chief Inspector of the Social Services Inspectorate in the Health Information and Quality Authority within 3 days of incident	PIC PPIM HR
Professional misconduct / fitness to practice	Head of specific discipline within the employing organization or the relevant professional body e.g. NMBI	Refer to relevant Professional Bodies i.e. Medical Council, NMBI etc. Any occasion where RP becomes aware that a member of staff is subject of review by a professional body is notifiable to HIQA within 3 days (NF 08)	PIC
Complaints about HR/ recruitment process	Skibbereen Residential Care Centre grievance and disciplinary procedures	Refer to Skibbereen Residential Care Centre Employee Handbook	PIC PPIM RPR

Appendix 6: Advocacy Groups

Advocacy Group	Phone No:	Email address	Postal address
Age Action Ireland www.ageaction.ie	(01) 475 6989	info@ageaction.ie	30/31 Lower Camden Street, Dublin 2
Acquired Brain Injury Ireland www.abiireland.ie	(01) 2804164		2nd Floor Block A, Century House, 100 George's St Upper, Dún Laoghaire, Dublin A96 R2V343
Citizens Information Board	0818 079000	www.citizensinformation.ie	George's Quay House 43 Townsend St, Dublin D02 VK65
Equality Authority www.ihrec.ie/	(01) 8589601	info@ihrec.ie	16 – 22 Green Street Dublin D07 CR20
Headway www.headway.ie	(01) 6040800 Helpline:1800 400 478		Blackhall Green Dublin D07 RX67
Irish Cancer Society www.cancer.ie	Support Helpline 1800 200 700 Mon/Fri 9am- 5pm	supportline@irishcancer.ie	43/45 Northumberland Road, Dublin D04 VX65

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Irish Patients Association www.irishpatients.ie	Send text or Whatsapp only to 087 6594183	info@irishpatients.ie	Unit 2, 24 Church Road, Ballybrack, Co Dublin
Irish Senior Citizen's Parliament	085 2604955	office@seniors.ie	Willie Bermingham Place, 14 Kilmainham Ln, Saint James', Dublin 8
Mental Health Ireland	(01) 284 1166	info@mentalhealthireland.ie	Second Floor, Marina House, 11- 13 Clarence St, Dún Laoghaire, Dublin A96 E289
Senior Helpline Third Age	1800 80 45 91 046 955 7766	www.thirdageireland.ie	Third Age Ireland Summerhill, Co Meath
SAGE Rapid Response SAGE Support & Advocacy Services	0818 719 400 (01) 536 7330	info@sageadvocacy.ie	24-26 Upper Ormond Quay Dublin 7 D07 DAV9
Patient Advocacy service	0818 293003	www.patientadvocacyservice.ie info@patientadvocacyservice.ie	Patient Advocacy Service Level 3 Rear Unit Marshalsea Court Merchant's Quay Dublin 8, D08AEY8

Appendix 7: Letter of Acknowledgement of Complaint

Ms./Mr./Mrs.

By email:

Date:

Dear,

I would like to acknowledge receipt of your complaint by (verbal, email, letter) which was (written, received) on (enter date), and received by my colleague (name of person receiving complaint) at Skibbereen Residential Care Centre.

I have informed the Registered Provider of your complaint I would like to assure you that we deal with complaints in an open and honest way and in accordance with our complaints process.

Our aim is to resolve this matter to your satisfaction, if we get something wrong, we will apologize and where possible we will try to put things right. We also aim to learn from our mistakes and use the information we gain to improve our services. I would like to confirm that we will communicate with you by email.

We ask complainants what outcome they are hoping for, in order to ensure we are both working towards the same resolution, if you could think about that and please get back to us.

We will aim to resolve your concerns within 30 working days, but we will let you know if it will take longer and give you regular updates.

If we do not succeed in resolving your complaint to your satisfaction or you are not happy with the outcome following our investigation you may appeal the outcome to

our Review Officer, Dhanya Ragin or you may complain to the Ombudsman.

The Ombudsman provides an impartial, independent and free service, if you believe that you have been treated unfairly. The contact details for the Office of the Ombudsman: 6 Earlsfort Terrace, Dublin 2, D02 W773. Call 01-639 5600 or you can make a complaint online www.ombudsman.ie

If you have any queries, please do not hesitate to contact me at 028 23617 or email dennisjoseph@skibbcare.com

Yours sincerely,

Dennis Joseph
Complaints Officer

Appendix 8: Complaints Response Letter

Ms./Mr./Mrs.

By email:

Date:

Dear.....,

Further to your (verbal, written) complaint on the (enter date) concerning, (enter topic)

I have discussed this complaint with various members of management, the reasons for the decision, any improvements recommended and details of the review process; are outlined below.

(Investigation details and findings to be detailed)

We hope you are satisfied with the outcome of the investigation. If you wish to make an appeal, you should do so within 30 days from the date of this notification, the complaint will automatically close after this date.

If we have not resolved your complaint to your satisfaction or you are not happy with the outcome following our investigation you may appeal the outcome to our Internal Review Officer, Dhanya Ragin. If you do not wish to proceed with the Internal Review process, you may complain to the Ombudsman.

The Ombudsman provides an impartial, independent and free service, if you believe that you have been treated unfairly. The contact details for the Office of the Ombudsman 6 Earlsfort Terrace, D02 W773. Call 01-6395600 or you can make a complaint online <https://www.ombudsman.ie/>

If you have any queries, please do not hesitate to contact me at 01-4999000 Ext 5003 or email me at pa@orwellhealthcare.ie

Yours sincerely

Dennis Joseph - Complaints Officer

Key Points

After reading this SOP, you should know:

- ✚ What is defined as a complaint?
- ✚ What are your responsibilities regarding the reporting and management of complaints?
- ✚ What are the characteristics of good effective complaints management?
- ✚ What are the stages in the Complaints Procedure?
- ✚ Who is the Complaints Officer in Skibbereen Residential Care Centre?