

<b>TITLE:</b> Management of Complaints Policy and Procedure	<b>REFERENCE NO:</b> PC-010
<b>OWNER:</b> Chief Executive	<b>REVISION NO:</b> 2
<b>AUTHOR:</b> Chief Executive	<b>EFFECTIVE FROM:</b> 04/06/2019
<b>REVIEWED DATE:</b> 06/01/2020, 24/07/2020, 26/08/2020 and 25/03/2021	<b>Page</b> 1 of 20
<b>NEXT REVIEW DATE:</b> 2 Years	

SCOPE: Organisational

REVIEWED BY: Breda O'Neill, Chief Executive, Amy Murphy, Director Person Support Services, Barbara Kellett, Quality Assurance Manager, Karen Devane, Complaints Officer

AUTHORISED FOR IMPLEMENTATION: Chief Executive

APPROVED BY/(LEAD): Chief Executive

SIGNATURE(S):

DATE:

## Policy

St Margaret's Network IRL-IASD (hereinafter referred to as St. Margaret's) welcomes suggestions and complaints from people using the service (hereinafter referred to the individual/individuals), family/representatives, external contractors, consultants and service providers e.g. day services and visitors. All comments or complaints shall be viewed as an opportunity to inform service provision and to continually improve the quality of support and services provided to the individual. Individuals and their family/representatives shall be confident that making a complaint shall not jeopardise their relationship with St. Margaret's nor shall it jeopardise the relationship or quality of support which the individual receives. External contractors, consultants, service providers and visitors shall be assured that making a complaint shall not jeopardise their relationship with St Margaret's.

## Definitions

*Complaint:* An expression of dissatisfaction with any aspect of a service

*Complainant:* Person(s) making the complaint

*Person using the Service* – individual

*St. Margaret's IRL-IASD* – St. Margaret's

## Responsibility

Staff: Local resolution of complaints where possible.

Complaints Officer: The designated person responsible for the management of the complaints process.

## Principles

St Margaret's has a culture of openness and transparency that welcomes feedback. All complaints, raising of concerns, criticisms or suggestions, whether oral or written shall be taken seriously, handled appropriately and sensitively. These shall be seen as valuable sources of information and used to make improvements in the service provided.

St Margaret's commits to safeguarding the rights and dignity of the complainant and all other parties in the application of the complaints process.

St Margaret's recognises the right of all service users to:

- Make an informal and/or formal complaint
- Have an advocate if requested
- Have the complaint acknowledged in writing and in a way that is understood
- Have the details of complaints kept confidential to the parties of the complaint
- Have their complaint dealt with in a fair, impartial, timely and resolution focused manner
- Be informed of the stages in the complaints process and updated on the progress of their complaint through each stage
- Have the outcome and reasons for the outcome explained to the complainant (and advocate) in an understandable manner
- Appeal the outcome internally and externally if dissatisfied with the outcome

All complainants have a right to appoint an advocate to assist them in making their complaint and to support them in any subsequent processes in the management of that complaint.

People using the service can ask a staff member to perform the role of advocate.

St Margaret's shall adhere to the following principles of best practice in complaint management:

- Organisational commitment to the effective management of complaints.
- Leadership and commitment to all aspects of the complaints management process.
- St Margaret's shall clearly nominate a staff member who is responsible for the management of complaints, known as the Complaints Officer.
- Where St Margaret's nominates support to the complainant (s), the nominee shall have no involvement in the subject of the complaint.
- People using the service shall be aware of their right to complain.
- The complaints process shall be well publicised, and be accessible to individuals, their family and representatives and general public.

- The complaints process shall be implemented impartially and without prejudice towards either the complainant or the subject of the complaint.
- A consistent and standardised approach will be adopted for the management of all complaints.
- The complainant(s) are assisted to understand the complaints procedure.
- The complaints process shall endeavor to resolve the complaint to the satisfaction of the complainant and the service.
- The emphasis shall be on resolving complaints effectively and in a timely manner without compromising other principles.
- Any individual who has made a complaint shall not be adversely affected by reason of the complaint having been made.
- All complaints shall be dealt with in an impartial manner.
- All complaints shall be acknowledged and addressed promptly and sensitively.
- All information obtained through the course of complaint management shall be treated in a confidential manner and meet the requirements of the Data Protection Acts 1988 and 2003, the Freedom of Information Act 1997 and 2003 and the General Data Protection Regulation (EU) 2016/679 (GDPR) 2018
- The complaints process shall be flexible to meet the changing environment of St Margaret's.
- Staff responsibility in the management of complaint procedures shall be clearly defined.

St Margaret's shall ensure that the Complaints Policy & Procedure are made available to all individuals. St. Margaret's shall further ensure that the complaints procedure/process is communicated appropriately and at an early stage of engagement with the services.

The Complaints Policy & Procedure shall be made available in a variety of formats to meet the needs of individuals/families/the public.

#### **Procedure for Receiving Complaints**

St Margaret's shall accept complaints in the following ways:

- Verbally
- Written
- Electronically by email ([complaints@irl-iasd.ie](mailto:complaints@irl-iasd.ie))

St Margaret's staff shall be sensitive to a complainant's needs and assistance required due to literacy and/or language barriers and shall provide support where required to enable the effective recording of their complaint.

This process addresses the management of complaints made by individuals, family/representatives, external agencies and the public about some aspect of St Margaret's Services. It does not address employee complaints and grievance related to their employment. Any such complaint or grievance shall be addressed by the HR-014 Grievance Management Policy and Procedure.

#### **Complaints shall be considered from any of the following:**

- The individual receiving the services
- Individuals who have sought services from St Margaret's
- Close family or support workers of the person using the service, or someone who has consent of that person to act on their behalf.
- Close family or support workers of deceased individuals
- External agencies (e.g. Day Services, HSE, HIQA, Ombudsman)
- A contractor with St. Margaret's
- A member of the public

#### **St Margaret's shall not accept complaints under any one of the following categories:**

- A matter that is or has been the subject of legal proceedings before a court or tribunal.
- A matter relating solely to the exercise of clinical judgement (a decision about diagnosis or treatment) by a person acting on behalf of St. Margaret's.
- An action taken by St. Margaret's solely on the advice of the individual exercising clinical judgement.
- A matter relating to the recruitment or appointment of an employee.
- A matter relating to a contract or employment that St. Margaret's proposes to enter into.

- 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 could prejudice an investigation by the Gardai.
- A matter that has been brought before any other complaints procedure established under legislation.

**St. Margaret's shall not investigate or further investigate complaints where:**

- The person who made the complaint is not entitled under Section 46 of the Health Act 2004 to do so either on the person's behalf or on behalf of another
- 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) of Part 9 of the Health Act 2004 as specified above.
- The complaint does not disclose a ground of complaint provided for in section 46 of the Health Act
- The subject-matter of the complaint is excluded by section 48 of the Health Act 2004
- The subject matter of the complaint is trivial
- The complaint is vexatious or not made in good faith.
- Where the complaint is anonymous
- The Complaints Officer is satisfied that the complaint has been resolved.

The Complaints Officer shall, as soon as practicable after determining that they are prohibited from investigating a complaint or after deciding under any of the above not to investigate or further investigate a complaint, inform the complainant in writing of the determination of the decision and the reasons for it.

Complaints relating to allegations or abuse shall be managed in accordance to SS-002 Reporting and Investigating Allegations of Abuse Policy and Procedure.

**Procedure for Responding to Complaints:**

Complaints may be made by any person using the service, family/representative, external agency, contractors, staff or the public about the operation of St Margaret's. A record is maintained of all complaints made about the operation of St Margaret's, and the actions taken by the Complaints Officer in respect of any complaints. Complaints may be made verbally or in writing. Complaints may be made to any member of St Margaret's staff.

The following are stages in the Complaints Process:  
(See Appendix I for Plain English and Appendix II for Easy Read)

**Stage 1:**

The staff member who receives the initial complaint from the complainant shall, where appropriate, attempt to resolve the complaint immediately and locally where possible, without recourse to the formal complaints procedure, unless the complainant wishes otherwise. Where complaints are resolved locally, details of the complaint are documented on the Complaints Form A (Appendix III) and submitted to the Complaints Officer, and a copy provided to the complainant.

Where complaints are not resolved locally or where it is not appropriate for such a resolution, they shall proceed to the next phase.

**Stage 2:**

1. Written Complaint: Where the complaint is received in writing it shall be forwarded to the Complaints Officer.
2. Verbal Complaint: Where the complaint is verbal, it shall be documented on the Complaints Form A (Appendix III), by the staff member receiving the complaint with the name of the complainant, the time, and a description of the complaint which shall be documented in a

factual, objective manner. The complaint shall then be forwarded without delay to the Complaints Officer.

3. The complaint shall be reviewed by the Complaints Officer and a letter of acknowledgement sent to the complainant within 5 working days of receipt of the complaint.
4. A copy of the complaint shall be furnished to the Departmental Manager.
5. The Departmental Manager shall undertake a screening process to gather evidence for the Complaints Officer to determine if an investigation is warranted. An investigation may take different forms depending on the nature of the complaint, with the Complaints Officer determining the level of investigation required.
6. Where it is determined that an investigation is not warranted, the Complaints Officer shall document and advise the complainant of the outcome and reason for the decision.
7. Where it is determined that an investigation is warranted, such an investigation shall be completed within 20 days of receipt of complaint. Where the investigation takes greater than 20 days, the Complaints Officer shall liaise with the complainant and indicate the expected completion date, ensuring to provide updates to the complainant every 20 days until the matter is resolved.
8. When the investigation is completed, the Complaints Officer shall determine if the complaint has been substantiated.
9. Where the complaint has not been substantiated the outcome shall be documented and communicated to the complainant.
10. All complaints, investigation outcomes and actions and timeframes shall be recorded in the Complaints File/Log.
11. Where the complaint has been substantiated, full details of the complaint, investigation process and any recommended corrective or preventive actions shall be reviewed by members of the Executive Management Team prior to final close out to ensure all complaints are appropriately responded to and records are maintained correctly including:
  - Details of any investigation into a complaint
  - Outcome of a complaint
  - Any actions taken on foot of a complaint
  - Whether or not the complainant was satisfied with the outcome

The complainant is informed promptly of the outcome and details of an appeals process or other alternatives as outlined below.

Where the complainant is satisfied or not satisfied, the outcome is documented.

### **Stage 3:**

Where the complainant is not satisfied with the handling or outcome of the complaint they will be advised to complete Form B (Appendix IV) for the attention of the Chief Executive. The Chief Executive will write to the complainant to advise receipt of correspondence from the complainant within five (5) working days outlining the review process.

The Chief Executive may appoint a suitable qualified independent person at Executive Management Team level to undertake the review.

The Chief Executive / Designate shall review the process and conclusions of Stage 2.

The Chief Executive / Designate shall advise the outcome of the review to the complainant and other relevant parties within an agreed timeframe. Where it is recognised that there may be an unavoidable delay/further time required for the review, the complainant and other relevant parties shall be advised of the position and the extended timeframe.

The Chief Executive/Designate shall respond to the complainant with their decision.

Where the complainant is dissatisfied with the outcome of the complaints management process they may seek a review of the complaint by the Office of the Ombudsman, Ombudsman for Children, or other professional bodies to whom the complainant could make an application for review.

### **Records, Confidentiality and Data Protection**

The confidentiality of the complainant shall be maintained throughout the investigation processes.

All parties to a complaint shall have access to all records pertaining to them as per IM-002 Access to Personal Records Policy and Procedure.

Records of complaints shall be retained for a period of not less than four years after the complaint has been investigated.

### **Stage 4: Independent Review**

If the complainant is not satisfied with the outcome of the complaints management process, they may seek a review of the complaint by the Ombudsman/Ombudsman for Children. The complainant will be informed of their right to seek an independent review from the Ombudsman/Ombudsman for Children at any stage of the complaints management process.

### **Time limits for making a complaint:**

The Complaints Officer will determine if the complaint meets the time frames as 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.

The Complaints Officer may extend the time limit for making a complaint if in the opinion of the Complaints Officer special circumstances make it appropriate to do so. These special circumstances include but are not exclusive to the following:

- If the complainant is ill or bereaved
- If the 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
- Diminished capacity of the service user at the time of the experience e.g. mental health, critical/long-term illness.
- Where extensive support was required to make the complaint and this took longer than 12 months

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

### **Communication with the Person Using the Service**

Individuals shall be aware of the complaints process and how to make a complaint. Information shall be provided in accordance with PC-007 Availability and Communication of Information Policy and Procedure.

The complaints policy shall be given to individuals as part of their Contract of Supports.

Details of the complaints process, and of how to make a complaint shall be available in a range of formats to support people who wish to make a complaint.

### **Advocacy**

*An advocate is a person who will act on behalf of the individual using the service when they need independent support when dealing with St. Margaret's. An advocate will represent and help them to make their complaint and support them through the complaints process.*

All individuals shall have the right and be supported to access advocacy services to facilitate their participation in the complaints process.

Advocacy services shall be available to all individuals as per PC-011 Provision of Advocacy Services Policy and Procedure.

The National Advocacy Service ([www.https://advocacy.ie/](https://advocacy.ie/)) can be contacted directly on 076 1073 000.

### **Support**

St. Margaret's shall provide support for people to exercise their right to make a complaint. St. Margaret's shall make every effort to ensure that the process is accessible and fully understood. Where a person wishing to make a complaint requires support in relation to documenting their complaint, St. Margaret's shall provide such support.

### **Communication & Actioning of Complaints Data & Data Reporting**

Details of all complaints, and any resulting actions, shall be communicated to staff via team meetings and to relevant staff who have responsibility for reviewing and updating processes and practices and implementing any required training. Reporting shall be done within the boundaries of confidentiality, and as deemed appropriate.

Where, resulting from a complaint, it is deemed necessary to have a review of processes and/or practices the Complaints Officer shall communicate the outcome of the complaint to the Quality Assurance Manager who shall meet with the designated Portfolio Manager/Senior Manager to review changes in processes practices and training requirements.

Complaints data shall be trended on by each Portfolio Manager in collaboration with the Complaints Officer who shall submit a monthly report to the Chief Executive.

Each Portfolio Manager shall present detailed analysis of complaints related to their area to the Executive Management Team.

Any Quality Improvement Plan identified from this review shall be reported to the Executive Management Team and shall include the issues arising from the complaint; improvement measures; planned changes/training; implementation timescale; review process.

Complaints data shall be reported by the Complaints Officer to the Chief Executive on a monthly basis, or as deemed necessary.

Complaints data shall be reported on by the Chief Executive to the Board of Directors at each Board Meeting.

The Complaints Officer shall submit complaints data reports to the HSE Consumer Affairs Area Officer four times a year using the templates provided.

### **Staff Education**

All staff shall receive education regarding the management of complaints and the local resolution of complaints.

All staff shall receive education on assisting the person using the service, family/representative, agency/contractor or member of the public to make a complaint should local resolution not be achieved.

Managers shall undertake training on monitoring, evaluation and reporting of complaints in relation to the following:

- Use of standardised letters and forms for complaints management and data collection



- Determination of the overall effectiveness of the complaints management procedures within the area of responsibility.
- Participation in the evaluation of the complaints management process.
- Co-ordination of the collection of complaints data and to disseminate this information as appropriate.
- Submission of reports to the HSE Consumer Affairs Area Officer for their respective area.

### **Supporting People Using the Service to Make a Complaint**

In order for St Margaret's to provide the best possible service they encourage all people using the service to voice any complaints they have regarding a service, a staff member, other person(s) using the service or any third party.

St Margaret's staff shall encourage and support individuals to express concerns safely and reassure them, there shall be no adverse consequences for raising an issue of concern, whether informally or formally as outlined in the sections above.

St Margaret's staff shall be trained to understand behaviours that indicate an issue of concern or complaint that the individual using the service cannot communicate by other means. These messages shall receive the same positive response

All complaints are dealt with fairly in a transparent manner and within reasonable time frames. A standard procedure exists to deal with complaints.

The complaint process is available to all people using the service, their representatives/advocates. The complaints procedure is available in a format suitable to the person making the complaint.

Complaints can be made in the format of your choice.

If requested/appropriate, St Margaret's can provide an internal advocate to assist the individual.

There are three stages to the complaint process; at the end of each stage the complainant can opt to continue to the next stage or can end the process. A successful outcome to a complaints process is one where the complainant and St. Margaret's are clear what was at issue and both parties are agreed and sign up to a resolution as to how in future that issue will be dealt with.

### **Who should I complain to?**

If you have a complaint, you can make it to any staff member; if they can't deal with it themselves, they will direct you to the person who can. Below is some guidance;

- If your complaint is about a staff member you can complain directly to that person or to their Manager if you prefer.
- If your complaint is about a service (or lack of service) bring the complaint to any staff member or Manager.
- You can also bring the complaint directly to the Complaints Officer. Ask a member of staff to inform the Complaints Officer/help you email the Complaints Officer to ask to meet them.

### **Anonymous Complaints**

Although some complainants may not wish to submit their details for legitimate reasons, St Margaret's cannot fully investigate and give redress under the Complaints Policy and Procedure to an anonymous complaint.

St Margaret's reserves the right to review an anonymous complaint to determine its legitimacy and/or address any issues therein.

### **Unreasonable Complainant Behaviour**

It is the policy of St. Margaret's that all complaints must be responded to appropriately.

It is noted that, in a case where St. Margaret's takes all reasonable measures to try to resolve a complaint through the complaints procedure, and the complainant does not accept these efforts, even



where it is recognized that there is nothing further which can be reasonably done to rectify a real or perceived problem, this may be regarded as an unreasonable response.

Where the complaint might be considered to be vexatious St. Margaret's has developed a Standard Operating Procedure (Appendix VII of this Policy & Procedure) to provide support for staff to find ways of responding to these situations appropriately.

In all circumstances where the complainant expresses dissatisfaction with the outcome of the complaints process, they shall be notified of their right of review to the HSE National Advocacy Unit.

### **Redress**

An effective complaints system which offers a range of timely and appropriate remedies will enhance the quality of the experience with the service. It will have a positive effect on morale and improve St. Margaret's relationship with the people using the service, families & natural circles of support, and the public. It will also provide useful feedback to St. Margaret's and enable it to review current procedures and systems which may be giving rise to complaints.

Redress should be consistent and fair for both the complainant and the service against which the complaint was made. St. Margaret's shall 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. 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

### **Any Individual who makes a Complaint is protected by the following assurances:**

#### **1. Your Confidentiality**

All information we receive during the course of a complaints process will be treated confidentially to the extent possible. If you provide us with personal or sensitive personal data, we will handle this in line with legal data protection obligations and with St Margaret's policies relating to confidentiality and data protection. If you ask us to protect your identity by keeping it confidential, we will not disclose it without your consent. The only exceptions to this are if we are legally required to reveal your identity or if your disclosure raises an issue which we cannot properly address without disclosing your identity. If a situation arises where we are required to reveal your identity or where we are unable to resolve a concern without doing so (for instance if a statement is needed from you), we will endeavour to discuss with you options on how we can proceed.

#### **2. Your Anonymity**

With reference to the above assurance, we hope you will feel comfortable to openly raise your concern with us. It is St Margaret's preference that complainants waive anonymity for the following reasons so that their complaint can be addressed under the policy including the following:

- We can revert to the individual with queries to help aid an investigation process.
- We can establish if the same complaint has been made by several individuals which will duly inform the investigation of the complaint.
- We can contact the complainant updating them of the investigation result and decisions/actions taken.

However, we realise that there may be situations when you would prefer to raise a concern anonymously, and in doing so, we are limited in using the policy under range and redress.

These assurances are not extended where a complaint is vexatious and/or malicious.

**Useful Information about the Complaints Process**

At any stage, you can make your complaint to an appropriate external agency. A list of external agencies is available at Appendix VI. However, we would encourage you to use all internal mechanisms and processes available to you first.

To ensure that complaints are dealt with in the most effective manner possible the Complaints Officer will review your complaint and determine the most appropriate stage in the complaints process for addressing it.

You may find it helpful to keep a record of your complaint. My Record of Complaint at Appendix V of this policy may be used for this purpose. If you require assistance or support completing this form, you are free to make an audio recording of your complaint and/or ask your advocate or someone else you choose to assist you in keeping a record that you are most comfortable with.

**Appendices:**

Appendix I: Plain English – Stages in the Complaints Process

Appendix II: Easy Read – Stages in the Complaints Process

Appendix III: Complaints Process Form A

Appendix IV: Complaints Process Form B

Appendix V: My Record of Complaint

Appendix VI: List of External Agencies to which Complaints can be made

Appendix VII: Standard Operating Procedure for dealing with Vexatious Complaints

## **APPENDIX I: PLAIN ENGLISH – STAGES IN THE COMPLAINTS PROCESS**

The following are stages in the Complaints Process:

### **Stage 1**

- Identify who you want to complain to
- Make the complaint in a manner you are comfortable with – verbal or written
- Make it clear that it is a complaint
- If you make a verbal complaint, the person/staff member will write it down on Complaint Form A and give you a copy
- If you are happy that your complaint is resolved the person/staff member will write this on Form A.
- You can bring someone with you for support if you wish
- Through talking about your complaint with the person/staff member involved you may feel that the problem is resolved.
- If, after talking with the person/staff member, you feel the complaint is still not resolved, and you are still unhappy you may bring it to Stage 2 of the process.

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### **Stage 2**

Write your complaint using FORM A (Appendix III of this Policy & Procedure) and what you would like to see happening and give it to the Manager of the service, the Complaints Officer or any member of staff.

If the complaint is about the Manager of your service, then forward it to the Complaints Officer. Complaints in different formats, such as audio recorded, can be submitted in the same manner. You can ask for someone of your choice to help you to provide this information.

The Complaints Officer will work closely with you in dealing with your complaint. The Complaints Officer may decide to refer the complaint to a more senior level if deemed necessary.

You will receive a written acknowledgement of your complaint from the Complaints Officer within 5 days. If you do not receive an acknowledgement within 5 days, please contact the Complaints Officer to find out why they did not contact you.

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### **Stage 3**

If after the stage 2 process you feel the problem still exists, write your complaint using FORM B (Appendix IV of this Policy & Procedure), state what you would like to see happening and send it to the Chief Executive.

- The Chief Executive will write to you within 5 working days to say that your complaint has been received and to tell you what is going to happen
- Stage 3 will be a review of the issues, process and conclusions of Stage 2.
- The Chief Executive may, where they determine the issue requires to be reviewed, nominate a reviewer
- An outcome of the review will be issued to you and other relevant parties within an agreed timeframe.
- In the event that you are not happy with the outcome of Stage 3, St Margaret's will provide you with information regarding an appropriate external body to further your complaint. This option is available at all stages on request.

APPENDIX II: EASY READ – COMPLAINTS PROCESS

# ARE YOU WORRIED, CONCERNED OR UNHAPPY ABOUT SOMETHING IN THE SERVICE?

**IF SO, PLEASE LET US KNOW.  
YOU CAN:**

**1**

Talk to  
**ANY MEMBER  
OF STAFF**

They will attempt to  
resolve it for you in a  
timely manner.



**2**

Write it down using  
**FORM A**

Give Form A to Complaints  
Officer by hand/post/email or give  
to a staff who will give it to the  
Complaints Officer



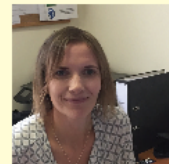
**3**

Talk to  
**KAREN DEVANE**  
in private

Karen is the  
**COMPLAINTS OFFICER** who  
will support you to deal with  
your complaint.

Or call her on: 01-2175400

Or email her on:  
[complaints@irf-iasd.ie](mailto:complaints@irf-iasd.ie)



**4**

Ask a member of staff to help you make contact with the  
**NATIONAL ADVOCACY SERVICE**

Telephone No: 076 1073 000

Email: [info@advocacy.ie](mailto:info@advocacy.ie)



**5**

Ask a member of staff to help you make contact with the  
**OFFICE OF THE OMBUDSMAN**

Telephone No: 1890 223 030

Email: [ombudsman@ombudsman.gov.ie](mailto:ombudsman@ombudsman.gov.ie)



**6**

Ask a member of staff to help you make contact with  
**LEIGH GATH, HSE CONFIDENTIAL  
RECIPIENT**

Telephone No: 087 6657269 / 1890 100 014

Email: [leigh.gath@crhealth.ie](mailto:leigh.gath@crhealth.ie)



**St. Margaret's**  
INDEPENDENCE AUTONOMY SELF-DIRECTION

Your Service, Your Say

**Appendix III**

**Complaints Process - Form A** (This form may be also used by staff to record verbal complaints)

Please give/send the completed form to the Complaints Officer. Keep a copy for yourself.

**Date:** \_\_\_\_\_

**To:** \_\_\_\_\_ (Complaints Officer or Other Staff Member)

**From/On behalf of:** \_\_\_\_\_

**I wish to complain about:**

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**I think the problem might be put right by:**

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**Appendix IV**

**Complaints Process - Form B**

Please give/send the completed form to the CEO Keep a copy for yourself.

**To:** \_\_\_\_\_ (CEO St Margaret's)

**From/On behalf of:** \_\_\_\_\_

**Date:** \_\_\_\_\_

I made a complaint in writing to the Complaints Office on \_\_\_\_\_ (date).

The complaint was about:

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We had meeting(s) but I am still unhappy with the outcome.

I should like to present my complaint to you.

I wish to bring my friend/advocate/representative, \_\_\_\_\_ (name) with me.

I look forward to hearing from you.

**Appendix V**

**My Record of Complaint**

Date: \_\_\_\_\_

Complaint given to: \_\_\_\_\_

**The complaint was about:**

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**What happened:**

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## Appendix VI: List of External Agencies to which Complaints can be made

### **Office of the Ombudsman**

**Address:** 6 Earlsfort Terrace, Dublin 2, D02 W773.

**Phone:** 01 639 5600

**Email:** [complaints@ombudsman.ie](mailto:complaints@ombudsman.ie)

The Office of the Ombudsman is open Monday to Friday between 9.15am and 5.00pm

### **Ombudsman for Children's Office**

**Address:** Millennium House, 52-56 Great Strand Street, Dublin 1, D01 F5P8

**Phone:** 01 865 6800

**Freephone:** 1800 20 20 40

**Email:** [ococomplaint@oco.ie](mailto:ococomplaint@oco.ie) / [ombudsmandoleanai@oco.ie](mailto:ombudsmandoleanai@oco.ie)

The Office of the Ombudsman is open Monday to Friday between 9.15am and 5.00pm

### **The Office of the Confidential Recipient for Vulnerable Adults**

**Address:** Training Services Centre, Dooradoyle, Limerick

**Phone:** 061 585603 / 087 665 7269

**Email:** [leigh.gath@crhealth.ie](mailto:leigh.gath@crhealth.ie)

The Office of the Ombudsman is open Monday to Friday between 9.00am and 5.00pm

### **HSE Consumer Affairs**

**Address:** Oak House, Millennium Park, Naas, Co. Kildare

**Phone:** 045 880 496

**Email:** [consumer.contact@hse.ie](mailto:consumer.contact@hse.ie)

## **APPENDIX VII:**

### **STANDARD OPERATING PROCEDURE FOR DEALING WITH VEXATIOUS COMPLAINTS**

#### **1.0 Purpose**

It is the policy of St. Margaret's that all complaints are responded to appropriately.

However, there are some instances when a complaint might be considered to be vexatious, and in such circumstances, this Standard Operating Procedure provides support for staff, gives clear guidelines on identifying where a complaint can be classed as vexatious and outlines options staff have for dealing with such complaints.

This procedure should only be used as a last resort and after all reasonable measures have been taken to try to resolve complaints through St. Margaret's Policy & Procedure for Managing Complaints. Judgement and discretion must be used in applying the criteria to identify potential vexatious complainants and in deciding on action to be taken in specific cases.

This procedure should only be implemented following careful consideration by the relevant Manager or deputy, and with consultation with the relevant Executive Management Team Member.

#### **2.0 Scope**

Whole Organisational – All Staff

#### **3.0 Definition of a Vexatious Complaint**

Complainants (and/or anyone acting on their behalf) may be deemed to be vexatious where previous or current contact with them shows that they meet two or more of the following criteria:

Where a complainant:

1. Persists in pursuing a complaint and St. Margaret's Complaints Management Procedure has been fully and properly implemented and exhausted;
2. Persistently changes the substance of a complaint or continually raises new issues or seeks to prolong contact by continually raising further concerns or questions upon receipt of a response whilst the complaint is being addressed. Care must be taken, however, not to disregard new issues which are significantly different from the original complaint as they need to be addressed as separate complaints;
3. Is repeatedly unwilling to accept documented evidence given as being factual or deny receipt of adequate response in spite of correspondence specifically answering their questions or do not accept that facts can sometimes be difficult to verify when a long period of time has elapsed;
4. Repeatedly does not clearly identify the precise issues which they wish to have investigated, despite reasonable efforts of St. Margaret's to help them specify their concerns, and/or where the concerns identified are not within the remit of St. Margaret's to investigate;
5. Regularly focuses on a trivial matter to an extent which is out of proportion to its significance and continue to focus on this point. Determining what a trivial matter is can be subjective therefore careful judgement must be used in applying this criterion;
6. Has threatened or used physical violence towards staff at any time – this will, in itself, cause personal contact with the complainant and/or their representatives to be discontinued and the complaint will, thereafter only be continued through written communication. All such incidents must be documented;
7. Has in the course of addressing a registered complaint, had an excessive number of contacts with St. Margaret's, placing unreasonable demands on staff. For the purposes of determining an excessive number, a contact may be in person, by telephone, letter, e-mail, text, facsimile or other modes of digital media. Discretion must be used in determining the precise number of "excessive contacts" applicable under this section, using judgement based on the specific circumstances of each individual case;
8. Has harassed or been personally abusive or verbally aggressive on more than one occasion towards staff dealing with the complaint. Staff must recognise that complainants may sometimes act out of character in times of stress, anxiety or distress and will make reasonable allowances for this. All instances of harassment, abusive or verbally aggressive behaviour must be documented.
9. Is known to have recorded meetings or face-to-face/telephone conversations without the prior knowledge and consent of other parties involved;

10. Displays unreasonable demands or expectations and fails to accept that these may be unreasonable (e.g. insist on responses to complaints or enquiries being provided more urgently than is reasonable or normal recognised practice).

#### 4.0 Process

In determining the options for dealing with vexatious complaints it is important to ensure that:

The complaints procedure has been correctly followed so far as possible and that no material element of a complaint has been overlooked or inadequately addressed.

Staff dealing with complaints appreciate that even habitual or vexatious complaints may have aspects which contain some substance.

Where complainants have been identified as vexatious in accordance with the criteria identified above, the Manager or Deputy or the Senior Manager shall determine what action needs to be taken.

The Manager or Deputy, or the Senior Manager shall implement such action and will notify the complainant(s) in writing of the reasons why they have been classified as vexatious and the action to be taken. This notification will be copied for the information to the Complaints Officer and other relevant parties involved.

A record must be kept for future reference of the reasons why a complainant has been classified as vexatious.

The Manager or Deputy, or the Senior Manager may decide to deal with complaints in one of more of the following ways:

1. Try to resolve the matters, before invoking this procedure, by drawing up a signed "agreement" with the complainant which sets out a code of behaviour for the parties involved.
2. If these terms are contravened, consideration would then be given to implementing other action as indicated in this section.
3. Decline contact with the complainant either in person, by telephone, by email, fax, or letter or any combination of these, provided that one form of contact is maintained.
4. Notify the complainant in writing that St. Margaret's has responded fully to the points raised and has tried to resolve the complaint but there is nothing more to add and continuing contact on the matter will serve no useful purpose. The complainant should also be notified that the correspondence is at an end and that further letters received will be acknowledged but not answered.
5. Inform the complainant that in extreme circumstances St. Margaret's reserves the right to pass unreasonable or vexatious complaints to its solicitors/report to Gardai.
6. Temporarily suspend all contact with the complainant or investigation of a complaint whilst seeking legal advice.

If found to be vexatious, St. Margaret's shall not pursue the complaint any further. However, this does not remove the complainant's right to submit their complaint to independent agencies, such as the Ombudsman or the Ombudsman for Children, and St. Margaret's shall so advise.

If a complaint is found to be vexatious, there will be no record of the complaint in the file of any third party referred to in the complaint / about whom the complaint was made.

#### 5.0 Withdrawing 'Vexatious' status

Once the complainant has been deemed vexatious there needs to be a mechanism for withdrawing this status at a later date if, for example, the complainant subsequently demonstrates a more reasonable approach or they submit a further complaint for which normal complaints procedures would appear appropriate.

Staff should previously have used their discretion in recommending 'vexatious' status at the outset and discretion should be similarly used in recommending that this status be withdrawn when appropriate. Where this appears to be the case discussion will be held with the relevant Local Health Manager, Hospital Network Manager or Deputy.

Subject to their approval normal contact with the complainant and application of St. Margaret's Complaints Management Policy & Procedure will then be resumed.

### **6.0 Method used to Review Standard Operating Procedure**

The Procedure shall be reviewed as an appendix to the Management of Complaints Policy & Procedure Audit recommendations for implementation of 'vexatious' status.

Audit recommendations for withdrawal of 'vexatious' status.

### **Guidance on Dealing with Problem Callers**

Definitions

Calls can be made:

- By telephone
- By e-mail
- By text
- In person

#### **Inappropriate words:**

Include all swear words, racist or sexist language, or words used to abuse individuals.

#### **Inappropriate behaviour:**

Includes making an unacceptable number of calls during any defined period, e.g. more than once a day without offering any new relevant information, calling repeatedly when already advised the person they are seeking is absent, calling or coming to the office when advised in writing that no further contact should be made, calling or coming to the office when advised in writing that no further comment will be made, coming to the office when specifically advised not to do so.

#### **Procedure**

After each call make a brief note of the date and time and the type of language/behaviour.

Retain a copy for your own records.

If a caller is persistent, i.e. more than 3 calls, bring this to the attention of your Team Leader / Manager.

#### **Abusive callers**

1. When a caller first uses language that is unacceptable inform them this is not acceptable and ask them to stop.
2. If the caller continues, remind them that you have asked them to stop and that you will disconnect the call if they continue.
3. If the caller continues advise that you intend to disconnect and that they must not call again unless they cease using unacceptable language.
4. If the caller continues – disconnect.
5. If the caller calls back repeat Step 2 and inform caller that their behaviour could be regarded as abusive and it is St. Margaret's policy not to prolong telephone calls that the staff member deems abusive.

Repeat Step 4.

#### **Persistent Callers**

1. Advise the caller that you are aware that they have made previous calls.
2. Advise the caller that the issue they are seeking to resolve is being addressed / has been answered to the best of our ability and that nothing further can be done.
3. Advise the caller that you are unable to spend any further time discussing the matter and that you therefore intend to disconnect the call.
4. Advise the caller that you are now disconnecting the call and that they should not call again unless there is a new matter they wish to discuss.
5. Disconnect the call.
6. If the caller calls back repeat Step 3 and advise the caller that their behaviour could be regarded as harassment and there is a policy in place in the St. Margaret's to protect staff against harassment. Repeat Steps 4 and 5.
7. If the caller calls back again repeat Step 4 and advise the caller that you intend to report the matter to an appropriate Manager. Repeat Step 5.

**Vexatious Callers**

1. Advise the caller that you are aware that they have been advised that the matter they are raising cannot be discussed with them.
2. Advise the caller that you intend to disconnect their call and that they must not call back unless there is a new matter they wish to discuss.
3. Disconnect the call.
4. If the caller calls back repeat Step 2 and inform the caller that their behaviour could be regarded as harassment St. Margaret's has a policy in place to protect staff against harassment. Repeat Step 3.
5. If the caller calls back again repeat Step 4 and advise the caller that you intend to report the matter to an appropriate Manager. Repeat Step 3.