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| TITLE: Management of Complaints Policy and Procedure | REFERENCE NO: PC-010 |
| OWNER: Chief Executive | REVISION NO: 4 |
| AUTHOR: Chief Executive | EFFECTIVE FROM: 04/06/2019 |
| REVIEWED DATE: 06/01/2020, 24/07/2020, 26/08/2020, 25/03/2021, 14/11/2022, 12/12/2024 NEXT REVIEW DATE: 2 Years | Page 1 of 16 |

SCOPE: Organisational

REVIEWED BY: Breda O'Neill, Chief Executive, Karen Devane, Complaints Officer, Sarah-Jane O'Halloran, Complaints Investigator, Kate Byrne, Director of Person Support Services

APPROVED BY/(LEAD): Chief Executive

RATIFIED BY: Executive Management Committee

Policy Statement

St Margaret's Network (hereinafter called 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.

We have developed this policy to meet our responsibility to ensure that each individual we support (hereinafter referred to as the individual/s), their family/representatives, external agencies, service providers and members of the public are aware of their right to make a complaint and our process of dealing with complaints. The aim is also to ensure that any complaint received is dealt with in a fair, transparent and appropriate way and resolved to the satisfaction of the Complainant where possible.

All complaints shall be viewed as an opportunity for continuous improvement to assure quality outcomes.

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

This policy is developed in line with 'Your Service, Your Say' HSE Policy for the Management of Complaints to meet the requirements of relevant national policies, legislation and regulations as outlined below.

Health Act 2004 Part 9

Health Act 2004 (Complaints) Regulations 2006

Health Act 2007 Part 13

Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) with Disabilities) Regulations 2013

National Standards for Residential Services for Adults and Children with Disabilities

Freedom of Information Acts 2014

Data Protection Acts 1988/2003/General Data Protection Regulation (GDPR enacted May 2018)

Ombudsman's Act 1980-1984

Ombudsman for Children's Act, 2002

Definitions

Complaint: The Health Act 2004 states that a Complaint means a complaint made about any action of the Executive (HSE) 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.

Complainant: Person(s) making the complaint

Complaints Team:

- **Complaints Officer:** The person designated by St Margaret's to manage the complaints process (Administration Manager).
- **Complaints Investigator:** The person designated by St Margaret's to investigate a complaint (Quality Assurance & Practice Development Lead).

Individual: Person using the Service

Advocate: An advocate is a person who will act on behalf of an individual when they need independent support when making a complaint. An advocate will represent and help them to make their complaint and support them through the complaints process.

Principles

St Margaret's is committed to the effective management of complaints.

- St Margaret's shall ensure that the Complaints Policy & Procedure is 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 process shall be implemented impartially and without prejudice towards either the complainant or the subject of the complaint, and complaints shall be dealt with promptly and sensitively.

- Any individual who has made a complaint shall not be adversely affected by reason of the complaint having been made.
- 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 Policy & Procedure shall be made available in a variety of formats to meet the needs of individuals/families/the public.

Advocacy

St Margaret's supports the absolute right of the individual to access, and be supported by, independent advocacy services, outlined in PC-011 Provision of Advocacy Services Policy and Procedure.

Each individual shall be supported to access independent advocacy services and appoint an advocate to facilitate their participation in the complaints process where they so wish.

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

The Irish Deaf Society (IDS) Advocacy Service (<https://www.irishdeafociety.ie/advocacy-information>) is a unique deaf-led confidential service which provides support and information for deaf people through their first and preferred language of Irish Sign Language (ISL). They can be contacted via advocacy@irishdeafociety.ie or 01 860 1878 / 086 440 1443 (facetime).

Individuals can ask a staff member to perform the role of advocate. Where St Margaret's nominates support to a complainant, the nominee shall have no involvement in the subject of the complaint.

Interpretation Services

Bridge Interpreting

Phone: +353 (0) 87 904 6594

Email: bookings@bridgeinterpreting.ie

Sign Language Interpreting Services

Phone: +353 (0) 818 078440 / +353 (0) 87 980 6996

Email: reception@slis.ie

List of External Agencies to which Complaints can be made

The Office of the Confidential Recipient for Vulnerable Adults

This person is appointed by the HSE but is independent of the HSE.

Name: Gráinne Cunningham-O'Brien

Address: Training Services Centre, Dooradoyle, Limerick

Phone: 087 665 7269; Email: grainne.cunningham@crhealth.ie

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

Office of the Ombudsman

Name: Mr Ger Deering

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

Phone: 01 639 5600; Email: 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 / ombudsmandoleanai@oco.ie

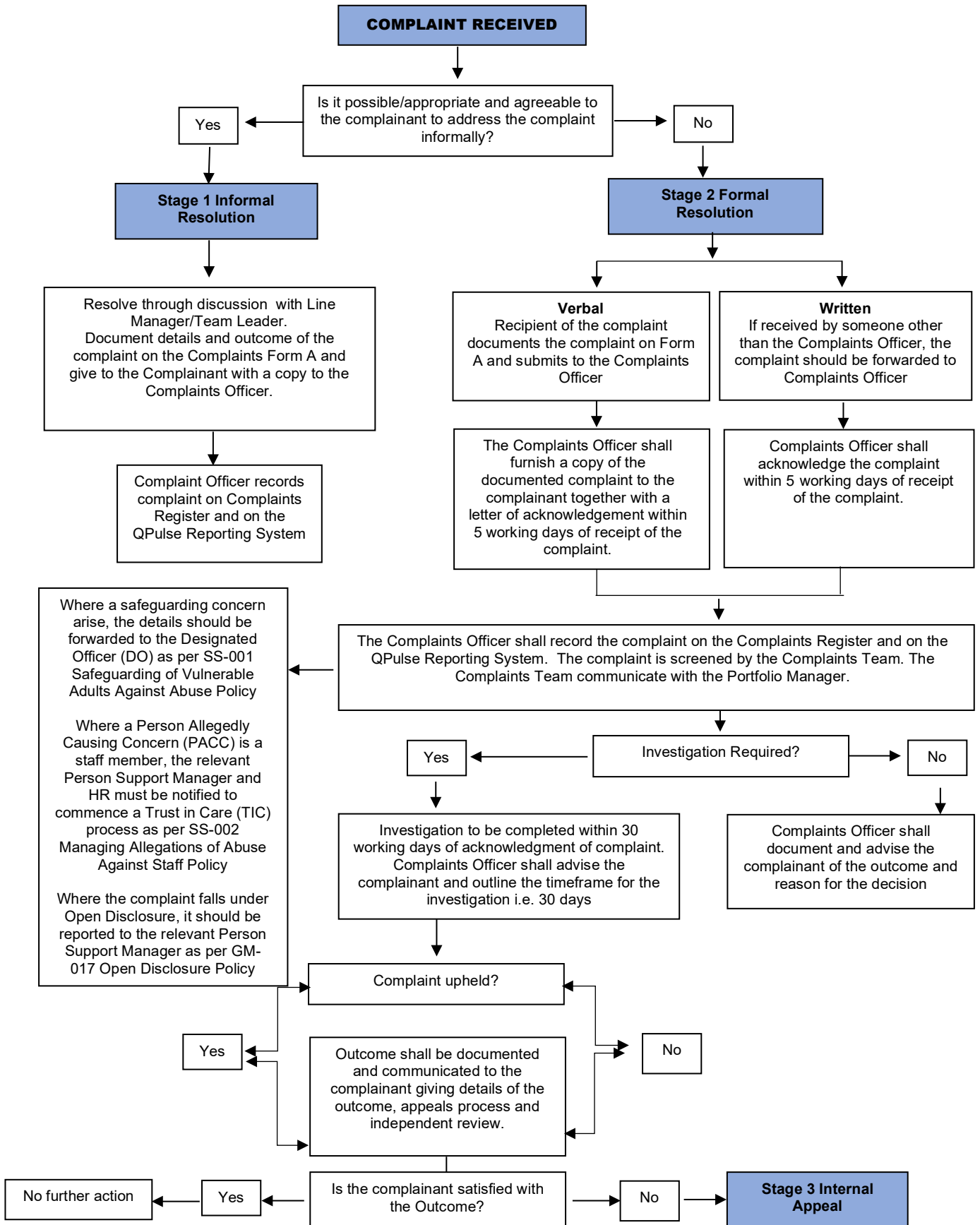
The Office of the Ombudsman is open Monday to Friday between 9.15am and 5.00pm

HSE Consumer Affairs

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

Phone: 045 880 496; Email: consumer.contact@hse.ie

COMPLAINTS PROCESS



The HSE Listen Approach

Use the **LISTEN** approach to assist you when receiving a verbal complaint.

Listen:

Listen carefully to the issues being raised by the complainant.

Identify:

Identify if there are multiple issues relevant to the complaint and separate each issue. Attempt to identify any hidden or underlying issues that may exist.

Summarise the issues to clarify and check that you understand what the person is telling you.

Ask the complainant to confirm that they agree with your interpretation of their complaint.

Find out from the complainant what they want to happen as a result of their complaint.

Summarise:

Summarise the issues to clarify and check that you understand what the person is telling you.

Ask the patient / service user to confirm that they agree with your interpretation of their complaint

Thank the person:

Thank the person for taking the time to make the complaint

Empathise and Explain:

Empathise and acknowledge the feelings of the complainant.

Explain to the complainant that there will be no negative repercussions

Explain what will happen next e.g., you may need to contact your manager.

Expression of regret or apology:

An early expression of regret or apology can minimise the possibility of a verbal complaint becoming a formal written complaint

Training for staff must deal with the area of expression of regret and apology. Staff must also be given the skills to recognise when a complaint can or cannot be resolved at first point of contact and when the complaint needs to be referred to Complaints Officer for appropriate management.

Now Act:

Assess the verbal complaint

Once a verbal complaint is received, the person receiving the complaint must ensure that they get as much information as possible about the complaint to assist them in assessing the seriousness and/or the complexity of the complaint. This in turn assists staff in determining if the complaint should be resolved at the point of contact or if the complaint should be referred to the Complaints Officer for management at Stage 2 of the complaint management process.

Note: Staff should only attempt to deal with issues that can be addressed appropriately at the point of contact, which means staff are required to contact their Line Manager/Team Leader.

Responsibility

Staff: It is the responsibility of all staff to take all complaints seriously and refer them directly to their Line Manager/Team Leader.

All staff have an obligation to participate and support the investigation of any complaint where requested.

Line Manager/Team Leader

- Ensure complaints are reported in line with the complaints process.
- Where appropriate, support early resolution with the individual, complete Form A and send it to the complaints officer.
- Where an early resolution of a complaint is not possible or appropriate, refer the complaint to the Complaints Officer.
- Support the complainant and reassure them that the complaint is being addressed through the policy and processes.
- Submit all documentation to the Complaints Officer.
- Advise the complainant that, where appropriate, the Complaints Officer will communicate with them.
- Be the ongoing point of support for the complainant.

Complaints Officer:

- Screen the complaint with the Complaint's Investigator
- Where the screening determines that an issue does not fall under the remit of the Complaints policy the Complaints Officer shall forward it to the appropriate Portfolio Manager.
- Where there is a safeguarding element, the Complaints Officer shall refer it to the Designated Officer.
- Acknowledge the complaint to the complainant and advise on the process and time frame.
- Where an investigation is taking place, the Complaints Officer shall update the complainant on the progress.
- Forward the action plan to the Portfolio Manager and ensure completion within the agreed time frame.
- Advise the complainant on the outcome and recommendation/s, and of their right of appeal.
- Document all complaints on the Complaints Register and Q-pulse, and update the Executive Management Team quarterly.
- Submit the HSE quarterly complaints stats report.

Name: Karen Devane

Phone: 01-2175400

Email: complaints@irl-iasd.ie

In writing: Block B, Nutgrove Office Park, Dublin 14, D14 YK10.

Where the Complaints Officer is subject to a complaint or is unable to review a complaint, the CEO will appoint a temporary Complaints Officer to address the complaint.

Complaints Investigator:

- Screen the complaint with the Complaints Officer.
- Where applicable, investigate the complaint.
- Meet with the complainant
- Meet with others relevant to the complaint
- Review relevant documentation and policies
- Completes investigation findings chronology throughout the process
- Complete investigation report
- Submit the report to the complaints officer.

Name: Sarah-Jane O'Halloran

Phone: 01 2175400

Email: sarahjane.ohalloran@irl-iasd.ie

Procedure for Receiving Complaints

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

- In person
- By phone
- In writing
- By email (complaints@irl-iasd.ie)

Complaints may be made to any member of St Margaret's staff.

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.

Complainant Timelines:

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:

- Making a Complaint: A complaint must be made within 12 months of the date of the action giving rise to the complaint or within 12 months of the complainant becoming aware of the action giving rise to the complaint.
 - The Complaints Officer may extend the time limit for making a complaint where, 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 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.
 - Where a complaint of historical nature is raised, the Complaints Officer shall screen this complaint.
 - If the complaint concerns an issue of such seriousness that it cannot be ignored.
 - Diminished capacity of the individual 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.

- To withdraw a complaint: Notification in writing from the complainant at any stage of the process.
- To request a review of the outcome or how the complaint was handled: Request in writing within 30 working days from the date that the complaint outcome was issued.
- To refer a complaint to the Ombudsman: The complainant may refer the complaint to the Ombudsman at any stage of the process.

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

- Staff complaints relating to any aspect of their employment. Any such complaint shall be addressed by the HR-014 Grievance Management Policy and Procedure.
- Staff complaints relating to other staff members. Any such complaint shall be addressed by the appropriate Policies and Procedures.
- 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 judgment.
- 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 Gardaí.
- 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 and as outlined in this policy.
- 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 and 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.
- The complaint is anonymous.
- The Complaints Team are satisfied that the complaint has been resolved.

The Complaints Officer shall, as soon as practicable after determining that St. Margaret's is 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 of abuse shall be managed in accordance with SS-001 Safeguarding of Vulnerable Adults from Abuse Policy and SS-002 Managing Allegations of Abuse against Staff Policy and Procedure.

Procedure for Responding to Complaints:

The following are stages in the Complaints Process:

| | | |
|----------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Stage 1 | Informal Resolution | Verbal or written; Documented and resolved through discussion with Line Manager/Team Leader; submitted to Complaints Officer. |
| Stage 2 | Formal investigation | Verbal or written; Document, investigate and findings documented in a written report stating the outcome i.e. Complaint Upheld/Partially upheld/Not Upheld |
| Stage 3 | Internal Appeal | The complainant is not satisfied with the outcome. Appeal to Chief Executive/Designate. |
| Stage 4 | External Appeal | The complainant appeals to the Office for the Ombudsman/Ombudsman. |

Stage 1 Informal:

We encourage feedback in the form of a comment that raises issues of concern without necessitating a formal complaint.

A Stage 1 Complaint can be verbal or written.

A verbal or written Complaint may be made to:

- Any member of staff, who shall forward the complaint to the Line Manager/Team Leader
- Any Line Manager/Team Leader/Manager on call
- The Complaints Officer, directly

The staff member who receives the initial complaint from the complainant shall, where appropriate, attempt to resolve the complaint informally through discussion with their Line Manager/Team Leader, without recourse to the formal complaints procedure, unless the complainant wishes otherwise. Where complaints are resolved informally, the details and outcome of the complaint are documented on the Complaints Form A (Appendix II) and submitted to the Complaints Officer, and a copy is provided to the complainant.

Where complaints are not resolved informally or where it is not appropriate for such a resolution, they shall proceed to Stage 2 Formal.

Stage 2 Formal:

A Stage 2 Complaint can be verbal or in writing.

A verbal or written Complaint may be made to:

- Any member of staff, who shall forward the complaint to the Line Manager/Team Leader
- Any Line Manager/Team Leader/Manager on call
- The Complaints Officer, directly

A verbal complaint shall be documented on Complaints Form A (Appendix II), by the recipient of the complaint with the name of the complainant, the time and date, 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.

Where a written complaint is received it is submitted directly to the Complaints Officer.

1. The timeframe for dealing with all formal complaints:
 - Acknowledgement of complaint – within 5 working days of receipt of the complaint.
 - Investigation of complaint – within 30 working days of acknowledgment of complaint.
 - Where the investigation takes greater than 30 days, the Complaints Officer shall liaise with the complainant and indicate the expected completion date, ensuring to provide updates to the complainant every 20 working days until the matter is resolved.
2. The complaint will be communicated by the Complaints Team to the Portfolio Manager where appropriate and required.
3. The Complaints Team undertake a screening process to determine if an investigation is warranted under the policy.
4. Where an investigation is not warranted, the Complaints Officer shall document and advise the complainant of the outcome and reason for the decision.
5. Where an investigation is warranted, the Complaints Officer shall advise the complainant and outline the timeframe for the investigation process.
6. The investigation process may determine recommendations relating to current practices or safe and effective services. Please see Appendix IV for this process.
7. When the investigation is completed, the Complaints Officer shall communicate the outcome of the investigation to the complainant, giving details of the appeals processes as per stage 3.

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

All complaints, investigation outcomes and actions and timeframes shall be recorded in the Complaints Register and the QPulse System.

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 III) and submit it to the Chief Executive, B3, Nutgrove Office Park, Dublin 14, D14 YK10. The Chief Executive shall write to the complainant to advise receipt of their correspondence within 5 working days outlining the process.

The Chief Executive / Designate shall advise the outcome of the appeal 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.

Stage 4: Independent Review

Where the complainant is not satisfied with the outcome of the complaints/process, they may appeal to the Office of the Ombudsman.

The complainant shall be informed of their right of appeal to the office of the Ombudsman/Ombudsman man for Children.

Records, Confidentiality and Data Protection

Confidentiality shall be maintained throughout the investigation process.

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 seven years after the complaint has been investigated.

Communication with Individuals 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 Support.

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.

Communication & Actioning of Complaints

Where the complaint outcome/recommendations include a review of processes and/or practice changes, the Complaints Team shall communicate the outcome of the complaint and proposed recommendations to the relevant Portfolio Manager who shall report to the Executive Management Team.

Regarding Person Support Service, a Quality Improvement Plan may be implemented as a result of a complaint outcome/recommendations. This shall be reported to the Executive Management Team and shall include improvement measures, planned changes/training, implementation timescale, and review process.

Executive Management Team

The Complaints Officer provides quarterly complaints report to the Chief Executive/Executive Management team.

Complaints data shall be reported on by the Chief Executive to the Board of Directors quarterly.

The Complaints Officer shall submit complaints data reports to the HSE Consumer Affairs Area Officer quarterly using the templates provided.

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 may reasonably be considered to be vexatious the Line Manager/Team Leader shall submit the complaint to the Complaints Officer outlining the reason they may consider this to be

a vexatious complaint. The complaint shall be screened and reviewed in conjunction with feedback from the Line Manager/Team Leader.

Follow up supports/actions:

An effective complaints system offers a range of timely and appropriate remedies to enhance the quality of the experience with the service. It is hoped that such follow up support/actions would have a positive effect on the relationship with the complainant. and support quality improvement of the service.

Follow-up support may include a range of actions, including:

- Acknowledgement and Admission of fault
- apology and explanation
- A commitment to implementing changes to enhance a quality service.
- Supportive intervention e.g. counseling.
- Correction of records
- Replacement of damaged goods

Raising a concern

Where you have a concern regarding any issue relating St. Margarets' duty of care, the welfare or wellbeing of an individual or any aspect of the service you should highlight your concern to any line manager/team leader.

The line manager/team leader will review the concerns raised and identify if it should be addressed through the complaints process.

By your action of raising an issue, you have given vital information about the quality of the service/service issue to the line manager/team leader to be able to address it and take appropriate action.

Your Confidentiality

All information St. Margaret's receives during the course of a complaints process shall be treated confidentially to the extent possible. Where you provide us with personal or sensitive information, it will be handled in line with data protection regulation obligations and with St Margaret's policies and procedures.

Where you request your identity to be confidential, we will only disclose it (and advise you) where:

- a. we are legally required to do so; or
- b. where an issue cannot be properly addressed without disclosing your identity.

Useful Information about the Complaints Process

At any stage, you can make your complaint to an appropriate external agency (listed at the beginning of our policy – page 3). However, we would encourage you to use all internal mechanisms and processes available to you first.

Appendices:

- Appendix I: Easy Read – Stages in the Complaints Process
- Appendix II: Complaints Process Form A
- Appendix III: Complaints Process Form B
- Appendix IV: Recommendation Action Plan
- Appendix V: Guidance on dealing with Inappropriate Communication

APPENDIX I: EASY READ – COMPLAINTS PROCESS

COMPLAINTS

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 forward your complaint to the Team Leader who may be able to help resolve it with you or support you to put it in writing.

- 2**
Talk to
ANY TEAM LEADER/ MANAGER / PERSON IN CHARGE

They may be able to help you resolve the matter. If not, they will support you to write your complaint and send to the Complaints Officer.
Call them on:
01-2175400;
or
**the transition phone
087 335 4857**
- 3**
Talk to
THE COMPLAINTS OFFICER

Karen Devane is the Complaints Officer who will ensure your complaint is addressed.
Call her on: **01-2175400**
Email her at:
complaints@irl-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**

- 5**
Ask a member of staff to help you make contact with the
OFFICE OF THE OMBUDSMAN
Telephone No: **01 639 5600**
Email: **complaints@ombudsman.ie**

- 6**
Ask a member of staff to help you make contact with
GRÁINNE CUNNINGHAM-O'BRIEN
Telephone No: **087 665 7269**
Email: **grainne.cunningham@crhealth.ie**


St. Margaret's Network
Independence, Autonomy, Self-direction

YOUR SERVICE, YOUR SAY

Appendix II: Complaints Process Form A – Making a Complaint

This form may be used to submit a written complaint or used by staff to record verbal complaints. Please send/give the completed form to the Complaints Officer. You should retain a copy for your own information. Where you are making a verbal complaint to staff who are documenting it on this form, you will receive a copy of the form.

Date: _____

Complaint sent / given to: _____
(i.e. Complaints Officer / Staff Members Name)

From/On behalf of: _____

I wish to complain about:

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|-------|
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |

I think the problem might be put right by:

| |
|-------|
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |

Outcome (if resolved /informally): Note below if the complaint could not be addressed informally and specify date sent to the Complaints Officer:

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|-------|
| _____ |
| _____ |
| _____ |
| _____ |

Signatures (where applicable):

Complainant: Name: _____ Signature: _____ Date: _____

Staff: Name: _____ Signature: _____ Date: _____

Appendix III: Complaints Process Form B – Appealing a Complaint

This form may be used to submit a written appeal or used by staff to record verbal appeals. Please send/give the completed form to the Chief Executive of St Margaret's. You should retain a copy for your own information. Where you are making a verbal appeal to staff who are documenting it on this form, you will receive a copy of the form.

Date: _____

Appeal sent / given to: _____
(i.e. CEO St Margaret's / other staff member)

From/On behalf of: _____

I made a complaint verbally / in writing to the Complaints Officer on _____ (date).
The complaint was about:

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I would like to appeal the outcome/handling of the complaint because:

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Signatures (where applicable)

| | | | |
|---------------------|--------------------|-------------------------|-------------|
| Complainant: | Name: _____ | Signature: _____ | Date |
| Staff: | Name: _____ | Signature: _____ | Date |

Appendix IV: Recommendation Action Plan

The Complaints Officer issues the Recommendation Action Plan to the Portfolio Manager on the date the outcome is communicated to the complainant.
 The Portfolio Manager initially completes the 'Approved/Rejected' column and returns it to the Complaints Officer.
 The Portfolio Manager liaises with the Manager Responsible to ensure the recommendations are implemented.
 The Portfolio Manager must return a completed Recommendation Action Plan to the Complaints Manager within 30 days of initial receipt.
 The Complaints Officer reviews the completed Recommendation Action Plan and sends it to the Portfolio Manager for signing on DocuSign.

| Recommendation Action Plan | | | | | | |
|----------------------------|------------------------|--------------------------------------------------------|----------------------|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| Recommendation Reference | Recommendation Details | Manager Responsible | Approved / Rejected | Implemented / In Progress | Implementation Date / Ongoing | Reason(s) for Rejection, and any alternative measures being implemented |
| COM_ No_REC_ No: | | | | | | |
| Recommendation Heading | | Example: Name, Role Person Support Manager | Example: Approved | Example: Implemented – the process is ongoing with all new staff | Example: Date ongoing from (date TL is advised that this is the process/other relevant date) | Example: N/A |
| COM_ No_REC_ No: | | | | | | |
| Recommendation Heading | | | | | | |

Signature: _____
Portfolio Manager Name
Portfolio Manager Role

Date: _____

Appendix V: Guidance on dealing with Inappropriate Communication

Inappropriate communication can take place via:

- telephone
- e-mail
- 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 phone calls/emails/texts during any defined period, e.g. more than once a day without offering any new relevant information,
- calling/emailing/texting repeatedly when already advised the person they are seeking is absent
- calling/emailing/texting or turning up in-person when advised verbally/in writing that no further contact should be made
- calling/emailing/texting or turning up in-person when advised verbally/in writing that no further comment will be made
- turning up in-person when specifically advised not to do so.

Procedure

- After each communication document the date, time and the type of language/behaviour.
- Retain a copy for your own records.
- Where communication is persistent, i.e. more than 3 episodes, bring this to the attention of your Team Leader /Line 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.
6. Document all calls and bring to the attention of your Line Manager.

Persistent/vexatious Callers

1. Advise the caller that you are aware that they have made previous calls/that they have been advised that the matter they are raising cannot be discussed with them.
2. Advise the caller that the issue they are seeking to resolve is being addressed / has been answered to the best of our ability, where appropriate 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.
8. Document all calls and bring to the attention of your Line Manager.