

Compliments and Complaints Policy

Definition of a complaint

(Definition as per the Health Act 2004)

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

- (a) It is claimed, does not accord with fair or sound administrative practice, and
- (b) Adversely affects the person by whom or on whose behalf the complaint is made;

Policy

Westcare Homecare Ltd, provides a wide range of services, and we aim to deliver these services to the highest possible standards and are committed to ensuring that all our communications and dealings with our clients and stakeholders are of the highest possible standard.. We recognise that there will be times when things go wrong and that you may not always be satisfied with a service we have provided to you. If they do, we need to know so that we can put them right and learn from them. Listening and responding to your views helps us to continuously improve and we welcome both positive and negative feedback.

Clients are informed of the complaints procedure before care commences and this is outlined in our Client Service Guide located in your Care Plan folder. When compliments are received, it is an opportunity to pass on positive messages to the staff concerned.

Who can make a complaint?

Any person who is being or was provided with a health or personal social service by the Executive of Service Provider or who is seeking or has sought provision of such service may complain, in accordance with the procedures established under this Part, about any action of the Executive or Service Provider that-

- (a) It is claimed, does not accord with fair and sound administrative practice, and
- (b) Adversely affects or affected that person

How complaints are made?

If you wish to make a formal complaint about your service or to escalate a concern to a senior manager, please contact our Care Manager or in their absence, complaints must be made to the most senior person in charge. A complainant will need to provide the following details;

- The name and address and details of the client/employee concerned
- What is alleged to have happened, including when and where
- All people who were involved, including witnesses and as must details as possible

Complaints can be made by telephone or in writing to our care manager or the most senior person. We would be happy to visit you at home if this is preferred. You have the right to ask for a third party, i.e. an advocate to assist with the complaint procedure and consideration maybe given to an independent

advocate where circumstances may deem this more appropriate. If your care is funded by the HSE, you have the right to make a complaint to the HSE, and a copy of the complaint will be sent on to the HSE.

Acknowledging a complaint

Within 48 hours of your complaint being received, you will receive a letter confirming what action will be taken and the timescale in which you can expect a full response to your complaint. Complaints are usually fully investigated and responded to within 30 working days as per Health Act.

Advocacy

All complainants have the right to appoint an advocate who, if a person is unable to make a complaint themselves can assist them in making the complaint. The Citizen Information (Comhairle 2005) defines advocacy as a means of empowering people by supporting them to assert their views and claim their entitlements and where necessary, representing and negotiating on their behalf. (The role of the Advocate is outlined at the end of this document)

Reporting

Reporting to the HSE as per Service Level Agreement.

The Stages of the Complaints Management Process

Stage One Point of Contact Resolution

We will acknowledge your complaint in writing within 48 hours and tell you who will be dealing with it. We may need to follow up with you to get further information to help with our enquiries or we may offer to meet you to discuss your complaint. If for any reason, we cannot resolve your complaint within our timeframe, we will notify you of this and the reason for it. If you are unhappy with the outcome of this process, you can ask us to review the decision. This will bring us to Stage Two

Stage Two Formal Investigation Process

If you are unhappy with the decision at Stage One, you can contact the Complaints Manager (Ciara Leddy) and ask for a formal investigation of your complaint. You should state why you are unhappy with the result and how you would like to see the matter resolved. You must ask for this review within 20 working days of receipt of the Stage One resolution decision. We will acknowledge this request within five working days and an internal Complaints Officer (impartial care manager) will then examine the details of the complaint and the resolution suggested at the Stage One process. Again, the Complaints Officer may contact you to get a greater understanding of the issues and may ask to meet you to discuss further. The Complaints Officer will also examine documentation and talk to the other parties involved. This process can take up to 30 working days and you will be notified of the decision once the review is complete.

Stage Three Internal Review Process

At Stage Three, Senior Management will contact the complainant and a letter of acknowledgement will be issued to the complainant within 5 working days.

If the complainant is dissatisfied with the outcome of the investigation, they can either;

- Request an internal post investigation review within 10 working days of receiving investigation report or,
- Escalate complaint to Stage Four External Review by independent body e.g. Ombudsman.

If the complainant cannot be resolved at Stage Three – Internal Review and is dissatisfied with the outcome of the internal review, they can escalate complaint to Stage Four External Review

Stage Four External Review

if you are still unhappy with the outcome of your complaint, you may appeal in writing to the Office of the Ombudsman, 18 Lower Leeson Street, Dublin 2, Telephone 01 639 6500 or by email to

ombudsman@ombudsman.gov.ie

Managing Complaints

Timeframes involved once a complaint is received

Client/Service User Timeframe	
To make a complaint	12 months
Withdraw a complaint	At any stage
Refer complaint to Ombudsman	At any stage
Respond to request for information	10 working days
Point of Contact Resolution	Immediately or within 48 hours
Notify Complainant of decision to extend/not to extend timeframe	5 working days
Complaints Officer and Clinical Nurse Manager	Immediately or within 48 hours
Internal Review	Acknowledgement within 5 working days
Notification Letter	On receipt of complaint - (if appropriate)
If complaint does not meet criteria for investigation – inform complainant	5 working days
Acknowledgement Letter/email	48 hours on receipt of complaint
Seeking further information	10 working days
Update Complainant and relevant staff	Every 20 working days
Investigate and conclude (report)	30 days from date of Acknowledgement Letter
Conclude at latest	6 months

Time limits for making a complaint.

The Complaints Officer must determine if the complaint meets the time frames set out in Section 47, Part 9 of the Health Act 2004 which require 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.

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

Principles Governing the Investigation Process

The investigation will be conducted thoroughly and objectively with due respect for the rights of the complainant and the rights of the clients/staff members to be treated in accordance with the principles of natural justice

The Complaints Officer will have the necessary expertise to conduct an investigation impartially and expeditiously. Where appropriate, the Complaints Officer may request appropriately qualified persons to carry out clinical assessments, validation exercises etc.

Confidentiality will be maintained throughout the investigation to the greatest extent consistent with the requirements of fair investigation.

A written record will be kept of all meetings and treated in the strictest confidence.

The Complaints Officer may interview any person who they feel can assist with the investigation. Staff are obliged to co-operate fully with the investigation process and will be fully supported throughout the process.

Staff who participate in the investigation process will be required to respect the privacy of the parties involved by refraining from discussing the matter with other work colleagues or persons outside of Westcare Homecare.

It will be considered a disciplinary offence to intimidate or exert pressure on any person who may be required to attend as a witness or to obstruct the investigation process in any way.

Matters excluded (As per Part 9 of the Health Act)

<https://www.hse.ie/eng/about/qavd/complaints/ncglt/excel/complaints-excluded-from-process.html>

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

- a) a matter that is or has been the subject of legal proceedings before a court or tribunal;
 - b) a matter relating solely to the exercise of clinical judgment by a person acting on behalf of either the Executive or a service provider;
 - c) an action taken by the Executive or a service provider solely on the advice of a person exercising clinical judgment in the circumstances described in paragraph (b)
 - d) a matter relating to the recruitment or appointment of an employee by the Executive or a service provider;
 - e) a matter relating to or affecting the terms or conditions of a contract of employment that the Executive or a service provider proposes to enter into or of a contract with an adviser that the Executive proposes to enter into under section 24;
 - f) a matter relating to the Social Welfare Acts;
 - g) a matter that could be the subject of an appeal under section 60 of the Civil Registration Act 2004;
 - h) a matter that could prejudice an investigation being undertaken by the Garda Síochána;
 - i) a matter that has been brought before any other complaints procedure established under an enactment.
- 2) Subsection (1)(i) does not prevent a complaints officer from dealing with a complaint that was made to the Ombudsman or the Ombudsman for Children and that is referred by him or her to a complaints officer.

Refusal to investigate or further investigate complaints

A complaints officer shall not investigate a complaint if-

- A. The person who made the complaint is not entitled under section 46 to do so either on the person's own behalf or on behalf of another
- B. 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)

A complaints officer may decide not to investigate or further investigate an action to which a complaint relates if, after carrying out a preliminary investigation into the action or after proceeding to investigate such action, that officer is of the opinion that

- A. The complaint does not disclose a ground of complaint provided for in section 46
- B. The subject matter of the complaint is excluded by section 48
- C. The subject matter of the complaint is trivial, or

- D. The complaint is vexatious or not made in good faith
- E. Is satisfied that the complaint has been resolved

A complaints officer shall, as soon as practicable after determining that he or she is prohibited by subsection (1) from investigating a complaint or after deciding under subsection (2) not to investigate or further investigate a complaint, inform the complainant in writing of the determination or decision and the reasons for it. Clients whose care is funded by the HSE, have a right to complain to the HSE also and a copy of the complaint will be included in our quarterly Compliments and Complaints that are sent centrally to the National Complaints Governance and Learning Team.

If your care is funded by the HSE, you have the right to make a complaint to the HSE, and a copy of the complaint will be sent on to the HSE.

Unreasonable Complainant Behaviour

Westcare Homecare endeavour to take all reasonable measures to try to resolve a complaint through our complaints procedures, however, the complainant does not have to accept these efforts. If this is such the case, the complainant may chose to go directly to the Office of the Ombudsman, Ombudsman for Children or to Westcare Homecare's Governing Body – HCCI (Home and Community Care Ireland).

Redress

Westcare Homecare will communicate in a timely and appropriate manner to ensure our quality of service is maintained. The forms of redress that we feel appropriate can include the following;

- An Apology
- An explanation
- Admission of fault
- Change of decision
- Change or replacement of Healthcare Assistant
- Correction of incorrect client records

Contact Details for submission of complaints

Complaints Officer for Westcare Homecare	Ciara Leddy	071 9146768
Home & Community Care Ireland	PO Box 13371, Swords, Co. Dublin	086 8969860
Office of the Ombudsman	6 Earlsfort Tce, Dublin 2	180 223 030

Roles and Responsibilities

Westcare Homecare Staff

It is the duty of all staff to:

- Comply with this policy

- Ensure that this policy is implemented and adhered to in their area and that the right and legitimate interests of clients and staff are protected
- Promote a culture and attitude that welcomes feedback and supports the effective and timely resolution of complaints received.
- Ensure that information on how to provide feedback and on how to make a complaint is accessible and made widely available
- Support clients and staff in the implementation of the policy

Complaints Officer

Each Westcare Homecare Office will have a designated local complaints officer who will take responsibility for the management of local complaints and will;

- Be the point of contact for the complainant
- Update the complainant on the progress of their complaint
- Ensure that complaints are dealt with in a timely and efficient manner.
- Inform the complainant of the outcome of their complaint
- Liaise with the national complaints officer
- Ensure all complaints received are logged in the complaints file, ensuring file is consistently up to date
- Record and identify trends

Advocate

- Support and empower the complainant to speak for themselves as much as possible
- Respect the person and their wishes
- Ensure that the complainant has access to all relevant information about the complaints process
- Act independently
- Maintain confidentiality
- Act with diligence and competence

Westcare Homecare Complaints Officer (Ciara Leddy)

- Be the point of contact for Management & Staff
- Provide information and support to the local complaints officer in the resolution of complaints
- Monitor that complaints are dealt with in a timely efficient manner
- Provide information and support in the escalation of complaints
- Informed of a complaint at stage two and engaged in state three
- Ensure all complaints received are logged in the complaints file, ensuring file is consistently up to date
- Present reports on a quarterly basis
- Ensure all reporting requirements are complied with

- Alternative contact for complainant

Westcare Homecare Senior Management (Directors)

- Comply with this policy
- Ensure that this policy is implemented and adhered to in their area and that the rights and legitimate interests of clients and staff are protected
- Promote a culture and attitude that welcomes feedback and supports the effective and time resolution of complaints received
- Ensure that information on how to provide feedback and how to make a complaint is accessible and made widely available throughout all locations
- Provide an efficient, effective, fair and accessible system for handling client feedback
- Support clients and staff in the implementation of the policy
- All clients to receive a copy of policy in client service pack when commencing a service. Members of the public and other relevant stakeholders may be supplied with a copy of the policy on request
- Review complaints in order to identify trends and additional training needs
- Log all complaints, appropriately manage and collate them

Evaluation and Audit

All compliments and complaints are monitored monthly to ensure that they are managed and resolved in line with procedure. Metrics and trends are analysed and presented Quality Assurance Team members and shared quarterly with the HSE as stated in our Service Agreement