

# A Ghrá Care Services Ltd

<b>Policy Title</b>	<b>Complaints Policy</b>	<b>Date Implemented</b>	<b>27/10/2020</b>
<b>Policy Reference</b>	<b>PY QU 002</b>	<b>Date of Next Review</b>	<b>27/10/2022</b>

## **POLICY STATEMENT:**

We are committed to providing high quality services to all our stakeholders which includes our employees, customers and service users, rural and regional communities, and the general public who access and utilize our services. The purpose of this document is to outline the complaints procedure and necessary actions to be taken upon receipt of a complaint.

### **Definition of a Complaint:**

*“A complaint is an expression of dissatisfaction by a person or persons about an action or lack of action or about the standard of service provided by or on behalf of AGHRÁ”*

### **Respectful Treatment:**

All complaints will always be treated with courtesy and respect and confidentiality will be maintained. This policy and the principles evinced below apply to all complaints, including but not limited to clients against staff, staff against clients and staff against staff.

AGHRÁ is committed to dealing effectively with all complaints received. If we get something wrong, we will apologise and where possible we will try to put things right. We also aim to learn from our mistakes and use the information and learning gained from investigation of complaints to improve our services.

When you complain we will usually respond as set out below, however sometimes you may be concerned about matters that may require mandatory involvement and investigation by external bodies such as the HSE, HIQA or An Gardá Síochána. In such cases you will be advised of same. For example complaints which pose a risk to the wellbeing of the service user or the contracting authority **must** be reported to the ‘authorised officer’.

### **Matters Excluded as per Part 9 of the Health Act 2004**

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 A Ghrá;
- (c) an action taken by A Ghrá 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 A Ghrá;
- (e) a matter relating to or affecting the terms or conditions of a contract of employment that A Ghrá proposes to enter into or of a contract with an adviser that A Ghrá proposes to enter into;
- (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;

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- (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.

The Client Liaison Officer or Review Officer shall not investigate a complaint if—

- (a) the person who made the complaint is not entitled 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 below or any extension of that period allowed by the Client Liaison Officer or Review Officer

## Time Limits

A complaint must be made within the specified period

The specified period is 12 months beginning not later than— (a) the date of the action giving rise to the complaint, or (b) if the person by whom or on whose behalf the complaint is to be made did not become aware of that action until after that date, the date on which he or she becomes aware of it.

The Client Liaison Officer or Review Officer may extend the time limit for making a complaint if in their opinion special circumstances make it appropriate to do so.

## Declined Investigations

The Client Liaison Officer or Review 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—

- (a) is of the opinion that—
  - (i) the complaint does not disclose a ground of complaint as defined below ('**Who Can make a complaint?**' part a and b),
  - (ii) the subject-matter of the complaint is excluded as outlined above (Matters Excluded' sub- paras a - i),
  - (iii) the subject-matter of the complaint is trivial, or
  - (iv) the complaint is vexatious or not made in good faith,or

- (b) is satisfied that the complaint has been resolved.

The Client Liaison Officer and or Review Officer shall, as soon as practicable after determining that he or she is prohibited from investigating a complaint or after deciding not to investigate or further investigate a complaint, inform the complainant in writing of the determination or decision and the reasons for it.

## Who Can make a complaint?

Any Stakeholder of A Ghrá who is being or was provided with a service 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 A Ghrá that-

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

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## **Informal Resolution**

If possible, we believe it best to deal with things as soon as possible and in the easiest and most direct way. If you have a complaint raise it with the person you are dealing with. He or she will try to resolve it for you there and then. However, they may need time to investigate it, we would hope that all informal complaints would be dealt with within five working days. The member of staff involved will bring any lessons learned from addressing your complaint to our attention. If the member of staff cannot help with your complaint, they will explain why, and you can then ask that your complaint to be formally investigated.

Where informal resolution was not successful or was deemed inappropriate, the Client Liaison Officer will initiate a formal investigation of the complaint.

## **How to complain formally**

Ideally, we would ask that you use our complaints form as it is designed to ensure we get sufficient information to assist in investigating your complaint. You can ask for a copy of our complaints form from the person whom you are already in contact with; a copy of the complaints form is also included in your Care Plan file; you can email a request for one to be emailed or posted to you using the following address [info@aghra.ie](mailto:info@aghra.ie) ; you can ring the office on Telephone: 09360716 or 094967022 to make your complaint over the phone; you can write a letter to us at the following address: The Client Liaison Officer, A *GHRÁ* Homecare, The Mall, Tuam, Co Galway. Our accepted complaints pathways include e-mail, in person, in writing and by telephone.

## **What you should include in your complaint**

- You should include your name, address, telephone number, email address, (if applicable) and whether you are acting on behalf of someone else, and whom that is.
- Briefly describe what your complaint is about stating relevant times and dates.
- List your specific concerns starting with the most important.
- Be clear about what you are hoping to achieve (for example an apology, explanation, etc)
- State your preferred method of communication.

Note It will assist our investigating officer if any extra information or relevant documentation is included with your complaint.

## **Dealing with your complaint.**

We will formally acknowledge receipt of your complaint within five working days from receipt of your complaint, and let you know how we intend to deal with it.

We will ask how you would like us to communicate with you and if you have any requirements for example language difficulties.

We will deal with your complaint in an open and honest way ensuring confidentiality is maintained.

If you are making a complaint on behalf of somebody else as their ‘advocate’, we will need their agreement to you acting on their behalf.

## **Investigation**

We will inform you of who we have asked to investigate your formal complaint. If your complaint is straightforward, it will be investigated internally within A Ghrá and you will be informed accordingly. In some cases, if complaints are more serious or current legislation compliance requires that we pass on your complaint for subsequent external investigation, you will also be informed of this.

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We will set out to you our understanding of your complaint and ask that you confirm we have got it right.

The investigating officer handling your complaint will usually need to see all files we hold relevant to your complaint.

We will aim to resolve concerns as quickly as possible and expect to deal with the vast majority within 15- 30 working days.

If your complaint is more complex, we will:

- Let you know within this time why we think it will take longer to investigate
- Tell you how long we expect it to take
- Give you regular updates every 20 working days on any progress made.

The person or persons investigating your concerns will aim first to establish the facts. The extent of the investigation will depend on how complex and how serious the issues you have raised are. In complex cases we will draw up an investigation plan.

In some instances, we may ask to meet with you to discuss your complaint. Occasionally, we might suggest mediation or another method to try resolve disputes.

When investigating your complaint, we look at relevant evidence. This could include files, notes of conversations, letters, emails or whatever may be relevant to your complaint. We will talk to all staff and seek to speak with all others involved.

## **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 service/staff members to be treated in accordance with the principles of natural justice.

The investigating officer will investigate impartially and expeditiously. Where necessary, the investigating officer may request appropriately qualified persons to assist with the investigation.

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

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

The Client Liaison 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. 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 attempt to obstruct the investigation process in any way.

## **Investigation Outcome**

- On completion of a formal investigation the Investigating Officer will produce a report which will include where appropriate a **Recommendations Action Plan** detailing the necessary steps and timelines required to enact such recommendations.
- A copy of the report and the **Recommendations Action Plan** will be forwarded to the CEO and Board of Directors to receive their necessary approval, prior to distribution and implementation.

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- It will be the responsibility of the CEO in conjunction with the Board of Directors to reconcile such recommendations with the interests of all stakeholders and the needs of the complainant and to ensure the goals of the action plan are achieved in the timelines set.
- If the Complainant following receipt of the report exercises the option to request an internal review the CEO will suspend such recommendations and inform the complainant and the Board of Directors of same pending outcome of the review.
- Redress (Putting things right) will be consistent and fair to all parties involved. If we didn't do something well, we will aim to put it right, If you have lost out as a result of a mistake on our part we will try to put you back in the position you would have been in if we had got it right..

## Internal Review

1. If you are unhappy with the outcome of the investigation you can have the complaint independently internally reviewed. The CEO or a person or persons nominated by him who have not been involved in the investigation and are not in any part the subject of the complaint will conduct this review as the 'Reviewing Officer' and complete their investigation within 15-30 working days of receipt of your request for an internal review. All requests for review must be made within 30 days of the initial investigation officer's report being sent.

## Reviewing Officer

The Review Officer's function is to:

(a) To determine the appropriateness of a recommendation made by the Client liaison Officer, having regard to the two elements:

- (i) All aspects of the complaint
- (ii) The investigation of the complaint

(b) Having determined the appropriateness of the recommendation to uphold it, vary it, or make a new recommendation if he/she considers it appropriate to do so.

## Reviewing Officer Recommendations

- Will be included in the reviewing officers report in the form of a **Recommendations Action Plan**, the report and plan following approval from the CEO and Board of Directors will be sent to the complainant and distributed as appropriate.
- It will be the responsibility of the CEO in conjunction with the Board of Directors to reconcile such recommendations with the interests of all stakeholders and the needs of the complainant and to ensure the goals of the action plan are achieved in the timelines set.

## Ombudsman Independent Review

If we fail in resolving your complaint, you may complain to the Ombudsman. The ombudsman is independent and can investigate your complaint if you believe that you personally, or the person on whose behalf you are complaining.

- Have been treated unfairly or received a bad service through some failure on our part
- Have been disadvantaged personally by a service failure.

The ombudsman expects that you bring your complaint to our attention first and give us a chance to put things right. You can contact the ombudsman by:

- Telephone: 016395600
- Lo-Call: 1890223030

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- Email: [ombudsman@ombudsman.ie](mailto:ombudsman@ombudsman.ie)
- Writing to: The Office of the Ombudsman, 6 Earlsfort Terrace, St. Peter's, Dublin 2 DO2W773.

## Learning Lessons

We take your complaints seriously and try to learn from any mistakes we have made. Our board of directors considers all complaints on a regular basis as well as details of any serious complaints.

Where there is a need for change, we will develop an action plan setting out what we will do, who will do it and when we plan to do it by and monitor the effect of the changes to ensure we have achieved our desired outcome. We will let you when the changes we have promised, have been made.

## If you need help

Our staff will aim to help make your complaint known, if you need extra help, we will try to put you in touch with someone best suited to help you.

## 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.

## What we expect from you

In times of trouble or distress, some people may act out of character. There may have been upsetting or distressing circumstances leading to a complaint. We do not view behaviour as unacceptable just because someone is forceful or determined.

We believe that all complainants have the right to be heard, understood and respected. However, we also consider that all our staff have the same rights. We, therefore, expect you to be polite courteous in your dealings with us. We will not tolerate aggressive or abusive behaviour, unreasonable demands, or unreasonable persistence.

All complaints form part of our Quality Management System, which ensures that they are tracked, internally reviewed and that lessons learned are disseminated across the organisation in the goal of improving performance.

## Privacy:

Personal information that identifies individuals will only be disclosed or used in the complaints process as permitted under the current General Data Protection legislation (GDPR), security provisions and any relevant confidentiality obligations.

## Time Frame Guidelines involved upon receipt of a Complaint.

Service User / Complainant Timeframes	
To make a complaint	12 months
Withdraw complaint	At any stage
Request a review of a complaint	30 working days
Refer complaint to Ombudsman	At any stage
All staff	

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Respond to request for information	<b>10 working days</b>
<b>All staff at Point of Contact</b>	
Point of Contact Informal Resolution	<b>Immediately / &lt;5 Days</b> – where possible
Point of Contact Informal Resolution – Line Manager	<b>&lt; 5 Days</b> – where possible
<b>Client Liaison Officer Timeframes</b>	
Notify Complainant of decision to extend/not extend 12 months timeframe	<b>5 working days</b>
If complaint does not meet criteria for investigation – inform Complainant	<b>5 working days</b>
Acknowledgment Letter	<b>5 working days</b> from receipt of complaint
Seeking further information	<b>10 working days</b>
Update Complainant and relevant staff	<b>Every 20 working days</b> after initial 30 day due date
Investigate and conclude (Report)	<b>30 working days</b> from date of Acknowledgement Letter
<b>Review Officer Timeframes</b>	
Notify Complainant of decision to extend/not extend 30 days timeframe	<b>5 working days</b>
Review Officer should contact Complainant & explain process	<b>&lt; 5 Days</b> – if appropriate
Acknowledgement Letter	<b>5 working days</b> from receipt of review request
If complaint does not meet criteria for review – inform Complainant	<b>5 working days</b>
Seeking further information	<b>10 working days</b>
Update Complainant and relevant staff	<b>Every 20 working days</b> after initial 20 day due date
Investigate and conclude (Report)	<b>15-30 working days</b> from date of Acknowledgement Letter