

QAP 10.2 Complaints Procedure

REVISION HISTORY		
Revision	Date Issued	Summary of Changes
00	29.08.01	Initial Release
01	20.09.01	Changes due to internal audit ref: Customer Complaints/Defect Report No.6.
02	25.10.01	Change to internal audit N.C.C.F.9
03	01.04.03	External Audit Requirement 19/03/03.
04	29.10.03	Internal Audit Requirement
04	01.05.03	Internal Audit – No changes required
05	22.03.06	Internal Audit – Merged 6.4.9 Contract Employee Query/Complaints Procedure to 8.4 Customer Complaints
05	14.02.11	Internal Audit – Revised Procedure
05	08.05.12	Internal Audit – Revised Procedure
05	03.10.12	Galway Internal Audit
05	02.10.13	Internal Audit
05	24.01.14	Updated Procedure – pamg
05	19.06.14	Revised Procedure – PM
05	29.10.14	Revised Procedure – pamg
05	19.05.14	Revised – No changes
05	11.09.15	Revised Procedure – pamg
05	24.02.16	Internal Audit – Jmcg
06	17.05.16	Revised Procedure as per HSE requirements – P. Mackin
07	09.05.18	Revised for ISO 90012015 Samantha Myles
08	28.01.19	New revision to be released – QPULSE implemented
09	26.01.20	Internal Audit – No changes required CB
09	08.09.20	External Audit – SGS – ISO9001 – no changes required
10	06.04.21	Revised Procedure – MS & ED

11	02.09.21	Internal Audit JOR
11	13.08.22	Internal Audit JOR
12	22.12.22	Internal Review JOR
13	24.07.23	Internal Review and update JORourke
14	14.05.24	Internal Review and Update JORourke
15	12.12.24	Internal Review and Update JORourke
16	23.09.25	Internal Review and Update JORourke

Complaints Contacts

Role	Name	Title	Email
Complaints Officer	Jane O'Rourke	Quality and Compliance Manager	JORourke@servisource.ie
Complaints Officer (Deputy)	Eimear Delaney	HR Manager	EDelaney@servisource.ie
Review Officer (Internal Review)	Deirdre Doyle	Associate Director	DDoyle@myhomecare.ie

Definition

(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;

1. Purpose/ Scope

At Servisource, our clients, service users and employees are encouraged to provide positive or negative feedback about the service provided, regardless of the type or location of the establishment. Feedback, including complaints, helps us identify areas for improvement and ensures accountability in service delivery.

We will ensure that concerns will:

- Be dealt with in an open and transparent manner.
- Be acknowledged and responded to promptly and sensitively.
- All complaints are dealt with in a manner that is effective, complete, fair to all and provides a just outcome.
- Complaints Procedure is regularly evaluated, and the information included is used to improve services.

Roles and Responsibilities: All Staff:

- Encourage an environment where complaints are handled seriously and thoroughly.
- Ensure an effective complaint management system is in place.
- Ensure appropriate resources are available and utilised for effective complaint management.
- Ensure appropriate actions are implemented to eliminate risk or minimise similar complaints reoccurring, for example additional training or amendments to procedures.

Complaints that are outside the scope of the Complaints Officer:

- A matter that is or has been the subject of legal proceedings before a court or tribunal.
- A matter relating solely to the clinical judgement by a person acting on behalf of the HSE or service provider.
- An action taken by the service provider solely on the advice of someone exercising their clinical judgement.
- A matter relating to the recruitment, appointment or terms and conditions of an employee or advisor of the service provider.
- A matter that might prejudice an investigation being undertaken by An Garda Siochana.
- A matter that has been brought before any other statutory complaints' procedure; the Complaints Officer can deal with complaints that were made to the Ombudsman or the Ombudsman for children.

Investigations may be stopped where the Complaints Officer deems that the matter is vexatious and/or trivial.

Complaints that fall outside the Health Act

Complaints in relation to breaches of Data Protection Rights must be dealt with in line with the Data Protection Acts 1988, 2003, 2018 as well as GDPR regulation.

Complaints that do not fall under section 9 of the Health Act must be addressed using appropriate policy, procedure, guidelines or legislation:

- Trust in Care
- Children's First
- Pre-school services and regulations
- Grievance and Disciplinary
- Dignity at Work

2. References

- Health Act 2004
- ISO 9001: 2015
- Your Service, Your Say
- The Health Service Executive (HSE)

3. Records

- Complaints log: stored on Qpulse under the 'Complaints and Incidents' module
- Master Forms: stored on Qpulse under the 'Documents' module (search for Complaints and Incidents – Master Forms)

4. Procedure

How can a complaint be made?

- Verbally to any member of staff
- In writing, including emails to the relevant Line Manager
- Via social media (messages are logged and forwarded to the Complaints Officer)
- Emailed to designated complaints email inbox: complaints@servisource.ie

Who may make a complaint

- Employees
- Service users
- Client facilities
- Close relative or carer of the Service User
- Any legal representative of the Service User
- Any other person with the consent of the Service User
- Where the service user is unable to make a complaint on their own behalf due to their age, illness or disability, someone else can make a complaint on their behalf as mentioned above
- All complainants have the right to appoint and advocate if the person is unable to make the complaint themselves
- A complaint can be made on behalf of a deceased by a close relative or carer. A close relative includes a parent, guardian, son, daughter, spouse or co-habiting partner.

We aim to ensure that all individuals, regardless of circumstances, can access the complaints process.

Timeframes Involved Once a Complaint is Made

- The complaint will be acknowledged in writing within 5 working days of receipt of the written complaint.
- The complaint will then be investigated within and not exceeding 25 working days.
- Where the investigation takes longer than 25 days, Servisource will keep all parties updated on the progress of the complaint at regular intervals.
- Where the 25 days' timeframe cannot be met despite every effort, the investigation must be concluded within 6 months of the receipt of the complaint.

All complaints which relate to alleged physical, emotional or sexual abuse must be responded to immediately.

Time Limit to make a Complaint

A complaint must be made within 12 months of the date of the action giving rise to the complaint or of the person becoming aware of the action. The Complaints Officer may extend the time limit if they are of the view that there are special circumstances.

Stages of the complaint Process

Stage	Actions	Timeframe
Verbal / Informal Resolution	Line Manager attempts to resolve at point of contact	Immediate / as soon as possible
Formal Procedure	Complaints Officer investigates written complaint	Acknowledge within 5 working days, complete within 25 working days (updates every 20 days if delayed)
Internal Review	Review Officer re-examines case if complainant appeals decision.	Request within 25 working days of response; review completed within 30 days.
External Review	Complainant may contact the Office of the Ombudsman or Ombudsman for Children.	Timeframes set by Ombudsman.

Verbal / Informal Complaints Procedure:

Complaints may vary in severity and complexity. Not every complaint should be addressed in the same way, and individuals should be provided both informal and formal ways to raise a complaint to best suit the circumstances of the issue. Informal procedures are for quick problem-solving rather than investigating and substantiating claims. They seek agreement and shared understanding of how to avoid problems in the future. Informal complaints are most appropriate in cases where the allegations are less serious, or the problem is based on miscommunication or a misunderstanding. An employee has the right to pursue a formal complaint at any time.

Anything that can be resolved without escalating to the formal complaints procedure can be considered a verbal/ informal complaint.

The point of contact for all complaints received is the Line Manager for that specific area (i.e. Client Care/Relationship Manager)

- Where a complaint is received verbally, the Line Manager should be alerted in order to become involved at the point of initial contact. Clear delegations are put in place to resolve a verbal complaint at the point of contact:
 - Respond positively and appropriately to the complaint, establishing what outcome the individual wants to achieve by logging this complaint.
 - Provide reassurance that the complaint has been understood and how it will be handled beyond this point.
 - Decision to be made by the Line Manager in relation to whether the complaint has been dealt with to the satisfaction of the complainant.

All verbal complaints must be recorded on the relevant internal systems detailing the complaint solution or actions taken etc.

- If an informal resolution is unsuccessful, the complaint will escalate to the formal procedure outlined below.

Written / Formal Complaints Procedure:

- Complaints must be made in writing and addressed to the designated Line Manager either by letter, addressed to the relevant office location, or by email, to complaints@servisource.ie. At this point the Line Manager must consult with HR either written or verbally.
- If the complaint is received verbally, you must advise the complainant that the complaint must be made in writing. Record the conversation by noting the points made and email the relevant Line Manager with all relevant information.
- As soon as the information is received, a complaints occurrence must be opening on Q-Pulse in the “Complaints and Incidents” module (see Q-Pulse work instruction or consult with Jane O’Rourke).
- The complaint will be acknowledged by the Line Manager in writing within 5 working days of receipt of the written complaint.
- The complaint will then be investigated within 25 working days.
- The Line Manager must contact the employee against which the complaint has been made to inform them that a complaint has been received from another employee or client facility and to outline the details of the complaint (phone call followed by email). The Line Manager should request that the employee provide a written statement outlining their account of the events surrounding the accusation.
- The Line Manager should schedule an Investigatory Hearing and invite the employee to same, using the email template provided by HR (located on Q-Pulse). This should be scheduled to take place as exponentially as possible.
- A representative from the HR Department must be present at the Investigatory Hearing, in addition to the Line Manager.
- The employee should be offered the right to have a witness attend and the “Role of the Witness” document should be attached to the email invitation and communicated clearly to the employee prior to the meeting.
- All parties will receive a written update to the investigation as soon as possible not exceeding 25 days.
- Where the investigation takes longer than 25 days, Servisource will keep all parties updated on the progress of the complaint every 20 working days (Line Manager to set reminder in Outlook calendar to this effect).

The Investigatory Hearing:

- The Employee Statement Form (located on Q-Pulse) should be used when conducting the Investigatory Hearing. The first section of the form should be completed prior to the meeting, listing the reference number of the complaint (automatically assigned by the system and located on Q-Pulse), the name of the employee against which the complaint has been made, the date and a brief overview/synopsis of the complaint received.
- The meeting Chair (usually the Line Manager) should begin the hearing by announcing/welcoming all present and if a witness for the employee is in attendance, the Chair should reiterate the role of the witness.
- The Chair should reiterate the reason for the hearing, outlining the complaint received. Relevant information such as the date the complaint was received, from whom etc. should be discussed. If a complaint was received in writing from the complainant, this should be communicated to the employee.
- The Chair should then invite the employee to detail their account of events pertaining to the complaint. The Minute Taker (usually the HR staff member) should record clearly on the Employee

Statement Form the employee's version of events. When the employee has completed this step, the Minute Taker should then re-read the notes that they have taken to ensure that it is an accurate reflection of the employees account of events, making any requested amendments.

- If the meeting takes place in person, the employee should be asked to sign and date the Employee Statement Form. If the meeting is conducted virtually or over the phone, the employee should be informed that a written copy of the Employee Statement Form will be sent to them (preferably by email) and that they are required to sign and date the form before returning it to the Line Manager/HR, without delay.
- The employee should be advised that they will be sent a signed copy of the Employee Statement Form for their records. If requested, the employee may be furnished with other documentation pertaining to the complaint (such as written witness statements, written copies of the complaint etc.) where appropriate. **This additional documentation should only be sent to the employee following consultation with HR.**
- Prior to concluding the meeting, the Chair should advise the employee that a decision will be made and communicated to them in writing regarding next steps in relation to the proceedings no later than 7 days from the date of the Investigatory Hearing.
- Following the Investigatory Hearing, the Line Manager should save all associated documentation to Q-Pulse and provide an overview of the meeting events in the relevant field on the system.
- Time should be scheduled for the Line Manager and member of HR to discuss the outcome of the meeting and decide on the appropriate action to be taken i.e. the employee is to be advised that the complaint has been resolved and they were not found to be at fault/ further investigations are required/ disciplinary proceedings are to commence etc.
- The employee should be contacted in writing (email is sufficient) no later than 7 days from the date of the Investigatory Hearing to inform them of the outcome of the meeting using the relevant template.
- Q-Pulse should be updated outlining the decision made following the meeting, next steps detailed (if applicable) and a copy of the written correspondence sent to the employee.

Disciplinary Action

- Following the Investigatory Hearing, if it is established that the correct course of action is to instigate disciplinary action, the Line Manager, in collaboration with HR, should determine whether informal or formal disciplinary action is appropriate.

Informal Disciplinary Action:

- In the event that an employee's Manager considers that an individual's behaviour, performance or attendance is unsatisfactory an informal discussion will be held with the employee. This discussion will focus on the areas that are causing concern. Servisource will take explanations given into account and the employee will be encouraged to agree a course of action to achieve improvements.
- Following this discussion, the individual's behaviour, performance or attendance, as appropriate, will be monitored and the employee will be required to co-operate in this process. If this informal process fails to produce an acceptable level of improvement, Servisource will commence the formal disciplinary procedure.
- Formal Disciplinary Action:
- There are 4 stages in the Disciplinary Procedure as follows:
 - Verbal Warning
 - First Written Warning
 - Final Written Warning
 - Dismissal

- In most instances, the stages in this process are implemented sequentially. However, there may be instances where more serious action, including dismissal, is warranted at an earlier stage.
- Please refer to our Disciplinary Procedure Policy for more detailed information and steps to be taken to initiate the appropriate course of action.
- Q-Pulse must be updated continuously throughout the above process including and attaching all relevant information and documentation.

Appeals

- If the complainant remains dissatisfied with the recommendation, they have the right to request an internal review of this recommendation. (Appeal the decision).
- If the complainant is dissatisfied with the recommendation or the steps taken by Servisource in response to the complaint, the service user has the right to refer the matter to the Ombudsman or the Ombudsman for Children.
- Where the complaint is made in relation to a service provided by the service provider on behalf of the HSE and the complainant is dissatisfied with the recommendations of the complaint officer, the complainant is entitled to seek a review of the recommendations by writing to the HSE Director of Advocacy and setting out in writing the grounds for their dissatisfaction with the recommendations. The Director of Advocacy will examine the request for a review and if appropriate will assign a Review Officer to review the complaint.
- The complainant should request a review within 25 working days of the date of receipt of the complaint response from the complaints officer.
 - The contact details are:
 - Director of Advocacy, 'Request for Review', National Advocacy Unit, Quality & Patient Safety Directorate, HSE, Oak House, Limetree Avenue, Millennium Park, Naas, Co. Kildare Tel (045) 880495 Fax 1890 200 894.

Independent Review Panel

The Health Service Executive (HSE) may convene an independent review panel to investigate a complaint if deemed necessary. The panel will have access to all relevant documentation, in compliance with data protection laws, to ensure a thorough review. The panel will aim to complete its review and respond to the complainant within 25 working days of receiving the complaint. If the investigation cannot be completed within this timeframe, the complainant will be informed of the delay and provided with an updated timeline for resolution.

Independent Advice / Advocacy

Service users may appoint an advocate to assist with making a complaint or a review. Information on independent advocacy services is available from:

- National Advocacy Service for People with Disabilities: 0761 07 3000 | info@advocacy.ie
- Citizens Information: 0818 07 4000 | citizensinformation.ie

External Appeal

If a complainant is unhappy or dissatisfied with how your complaint has been dealt with, please feel free to contact the Ombudsman or the Ombudsman for Children as follows (The Office of the Ombudsman is open between 9.15 and 5.30 Monday to Thursday and 9.15 to 5.15 on Friday):

Ombudsman

18 Lr. Leeson Street, Dublin 2.
 Tel: +353-1-639 5600
 Lo-call: 1890 223030
 Fax: +353-1-639 5674
 Email: ombudsman@ombudsman.gov.ie

Ombudsman for Children

52 Strand Street Great, Dublin
 Tel: +353 (1) 865 6800
 Fax: +353 (1) 874 7333
 Email: oco@oco.ie

Logging the Complaint

If you are the recipient of a complaint but are not the person responsible for the handling of that complaint you should email the details outlined in the section below to either Jane O'Rourke, Quality and Compliance Officer (jorourke@servisource.ie) or in the absence of the Officer, Eimear Delaney, HR Generalist (edelaney@servisource.ie) or the shared inbox complaints@servisource.ie, accessed by both Quality and Compliance, and HR.

If you are the person responsible for handling of the complaint, please follow the below steps (if you have not received Qpulse training, please forward the below information to Jane O'Rourke (JORourke@servisource.ie))

Log the details below as a "non-conformance" on Q-Pulse:

- Date of Complaint raised (set relevant target date per step)
- Source of Complaint
- Fault Category
- Root Cause
- Document (for complaints set to QAP 10.2 Complaints Procedure)
- Employee Involved
- Service User/Facility
- Documented By (Person looking after complaint)
- Details: Fill in initials of anyone involved, what area this occurred in (CHO8 ect), and 2-3 sentences of summary
- Status (depending on severity)
- Attach any relevant documents

Note: An automatic Reference Number will be generated once you save this Non-Conformance on Q-

Pulse which should be used in all further communication with the complainant to aid continuity of information provision. Please do NOT create your own.

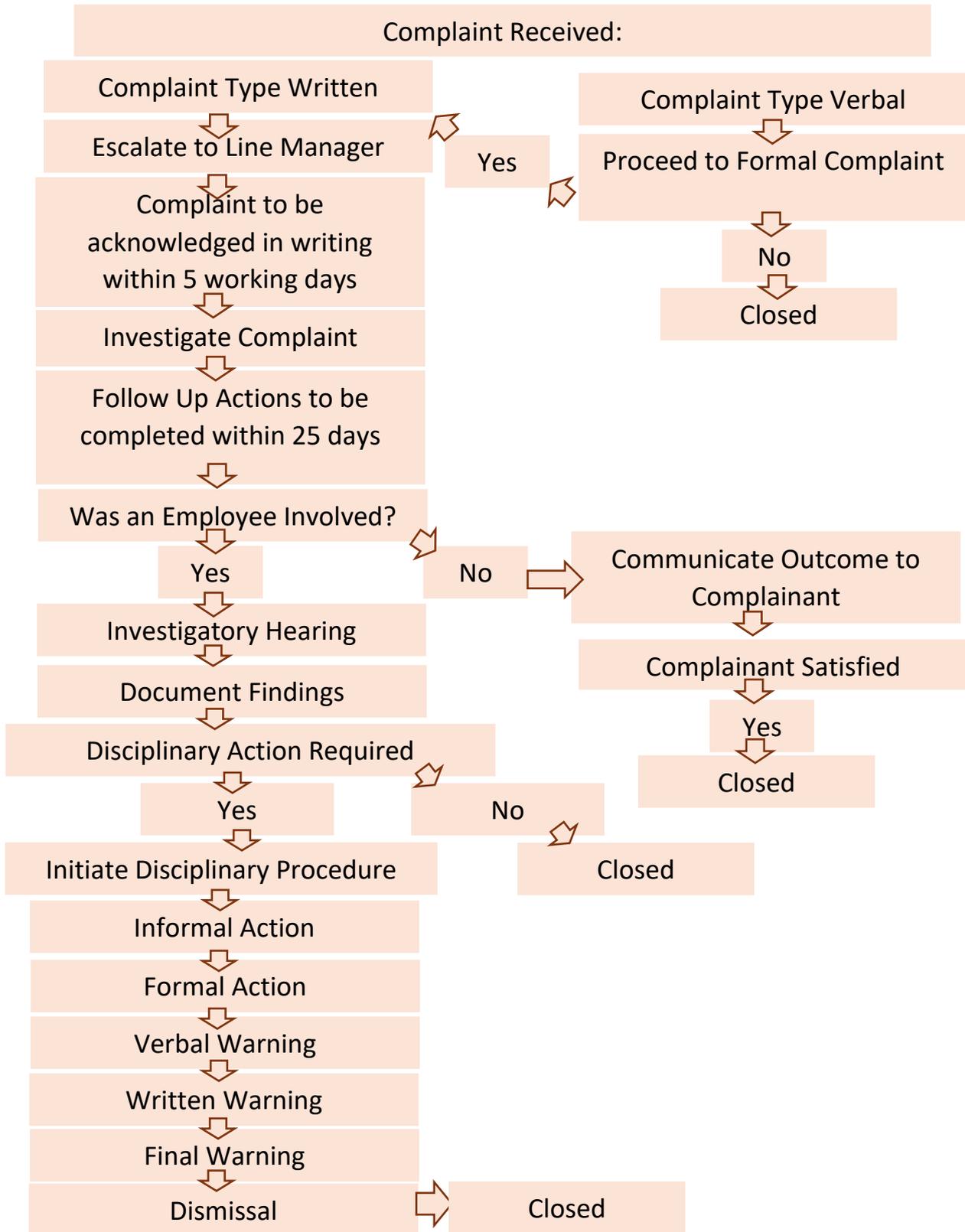
The person documenting the complaint must make sure all steps are adhered too.

The various stages of the complaint i.e. the receipt, request for comments and response will be recorded on Q-Pulse and, if applicable, on the employees' profile on the system that the department access their contact details i.e. OneTouchHealth. Zapp, ect

Evaluating the Complaints Log

- Each Complaint will Assigned a Fault Category.
- Each Complaint will also be Assigned a Root Cause.
- Both Fault Category and Root Cause will be reviewed per team on a quarterly basis to identify any trends or red flags that need to be addressed. This will be discussed in a formal team meeting and actions to be identified and addressed within 2 weeks. This review will be logged under the 'Internal Audits' module on Qpulse.

COMPLAINT FLOW CHART



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5. Responsibility

All Employees

Approved:



CEO