

# **DRCC Complaints Policy and Procedures for Service-Users**

**August 2013**

*While every care is taken to ensure that this policy accurately reflects current legal obligations, please note that it does not and cannot guarantee to the DRCC, and/or any DRCC staff member or volunteer, immunity from suit and/or legal liability in civil courts, criminal courts or other tribunals.*

## **Introduction**

The DRCC is committed to providing the highest quality of service to all its service users and their supporters, who are in contact with the Centre. However, should a Helpline caller, counselling client or their advocate\*, or participant in training, be dissatisfied with the quality of service provided in relation to the Helpline, therapy, advocacy, support or education services, the DRCC recognises her/his entitlement to make a complaint. (\*with client consent)

## **1. Purpose of the DRCC's Complaints Policy and Procedures.**

The DRCC's Complaints Policy and Procedures exist to provide a process by which a complaint can be made by a service user regarding any action by a member of staff, volunteer or manager that :

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

In terms of this Policy, any survivor or supporter in contact with the DRCC, or participant in DRCC training, is designated as a service user. Complaints can be made verbally, in writing, by email, text or fax.

***N.B. It is the guiding principle of this Complaints Policy that, where possible or appropriate, an amicable solution will be sought.***

## **2. Definition of a complaint**

“A complaint made about any action of the Centre that, it is claimed, does not accord with fair or sound practice, and adversely affects the person by whom, or on whose behalf, the complaint is made” (adapted from the definition provided by the Health Act 2004).

## **3. DRCC Response**

The DRCC will respond to all complaints in a confidential, sensitive, fair and effective manner without undue delay, while also ensuring that the complexity of the issues involved is factored in. No service-user will in any way be disadvantaged as a result of making a complaint pursuant to this policy.

### 3.1 Designated Complaints Officers

The DRCC aims at all times to maintain good communication channels, to ensure that issues or misunderstandings can be resolved at an early stage. The DRCC will ensure that information about how to complain is readily available for anyone using our services. The **Information Leaflet for Clients** and **The Comments, Compliments and Complaints Lodgement Form** provide information about who to contact.

If a service user contacts a staff member or volunteer to make a complaint, the service user will be informed about the **Designated Complaints Officer (DCO)** at the informal stage i.e. the **relevant manager\*** to contact. When the manager is not immediately available, if the service-user gives their details, the manager will make contact with the service user, as soon as possible.

*(\*Please see Section 3.2.1 below for details as to the relevant manager)*

### 3.2 Complaints Procedures: Stages of the complaints management process

There are four stages to the DRCC Complaints Procedure, with every effort made to resolve the grievance at each stage: there are different **Designated Complaints Officers (DCOs)** at each stage.

- **Stage 1: The informal complaints procedure**: the DCO is the relevant manager
- **Stage 2(a): The Formal Verbal or Written Complaint Procedure**: the DCO is the CEO
- **Stage 2 (b) : The Formal Investigation**: the DCO is an independent investigator appointed by the Board of Directors
- **Stage 3: HSE Review**: Director of Advocacy, Quality, Risk and Clinical Care Directorate, HSE, Oak House, Millenium Park, Naas, Co. Kildare.  
Phone : 045 880400                      Fax: 1890200894
- **Stage 4. Independent Review**: The Ombudsman/Ombudsman for Children.

At each stage, the **Designated Complaints Officer** should ensure that the service-user is aware of the DRCC Complaints Policy and Procedures, and should set out clearly to the service user the steps that will be taken, at that particular stage, so that their rights and options are clear. If the complainant is a therapy client, the fact that confidentiality will be extended to the relevant DCO for the duration of the complaints procedure, will need to be explained. Any concerns about confidentiality should be addressed. An **Informed Consent Form** should be signed by the service user at the outset of the complaints process.

### 3.2.1 Stage 1: The Informal Complaint Procedure

While in no way diminishing the issue or the effects on individuals, an informal approach can often resolve matters. Where a service user has a complaint, she/he should in the first instance try to resolve the issue directly with the relevant member of staff. The objective of this approach is to resolve the difficulty with the minimum of conflict and stress for the individuals involved. It is well documented that complaints can be resolved at an early stage using informal approaches, so in most cases and where appropriate this method is utilised.

If this is not possible or appropriate, or if this does not resolve the matter, the service user should then consult the **Designated Complaints Officer** for the informal complaint procedure i.e. the relevant manager responsible for the service related to their complaint, as set out below.

*For Complaints related to:                      please refer to the relevant manager below:*

<b>1. Reception staff</b>	<b>The Head of Administration</b>
<b>2. Administration staff</b>	<b>ditto</b>
<b>3. Telephone Counselling staff</b>	<b>Head of Clinical Services</b>
<b>4. Therapists</b>	<b>ditto</b>
<b>5. Volunteer co-ordinators</b>	<b>ditto</b>
<b>6. Volunteers</b>	<b>ditto</b>
<b>7. Education staff</b>	<b>Head of Education and Training</b>
<b>8. Fundraising staff</b>	<b>The CEO.</b>
<b>9. Accounts Officer</b>	<b>The CEO</b>

*N.B. If the complaint concerns the manager responsible for the service and the service user has been unable to resolve it, then she/he should contact the Chief Executive Officer (CEO)*

All managers may be contacted by ringing **1800 778888** - if they are not immediately available the service user may leave their contact details, asking the manager to contact them.

The manager will ensure that every effort is made to resolve the complaint in an informal and amicable manner, at this stage. This may be by telephone contact, or a meeting may be arranged. The meeting will be between the manager and the complainant. The DRCC will endeavour to resolve such complaints within 14 days of their receipt.

Where it is not possible to resolve the matter at the informal level, the formal approach (Stage 2a) may be applied. If an informal approach is deemed *inappropriate*\* by the client or the manager or the issue *has not been resolved* to the client's satisfaction, the manager will inform the client about how to invoke the formal procedures, as at 3.2.2 below.

*\* This may be due to the complexity of the issues involved, or the degree of seriousness of the complaint.*

### 3.2.2 Stage 2 (a): Formal Verbal or Written Complaint Procedure

- In order to allow the DRCC to fully and fairly handle a complaint, the relevant manager will advise the client to make the **Designated Complaints Officer at Stage 2 (i.e. the CEO)** aware of the cause of the grievance within 3 months of the issue arising.
- A complaint must be lodged within 12 months of the grievance arising, unless special circumstances apply, for example if the client is ill or bereaved.
- If a time extension is granted, the CEO will notify the client **within 7 working days** of the decision being made. (2)
- **A written and signed complaint** should be submitted to the CEO, with receipt acknowledged within 5 working days. Where this is not possible due to, for example language, literacy levels or disabilities, **a verbal complaint** may be made. A written record will be taken by the CEO and the complaint will be acknowledged immediately, or within 24 hours. Anonymous complaints are not accepted as valid and will be destroyed.
- Once the complaint is verified as valid, written/verbal (with record made), authorisation from the service user will be sought in order to copy the complaint letter to the individual, who is alleged to have acted improperly.(3)
- Should the service-user request the letter not be shown to the individual involved, she/he will be notified in writing/verbally (with record made) by the CEO that there will not be any further investigation until the individual is made aware of the complaint against her/him verbally (with record made) or in writing.
- If the service-user does not respond within 2 months, the CEO will write by registered post/meet with the service-user (with record made) to ascertain if she/he wishes to pursue the complaint further. If there is no response after an additional 2 weeks, the service-user will be informed in writing/person (with record made) that the complaint will not be considered further.
- Once authorisation has been received in writing/person (with record made), the CEO will then meet with the service-user, ascertain the nature of the complaint and offer him or her a full hearing. Meeting minutes, dated and signed by both parties (the service user and CEO) and outlining the specific details of the complaint, dates and names of the people involved, will be drawn up.
- All people named in the complaint, the CEO, and the complainant will receive a copy of these minutes. The people named will be interviewed by the CEO, and a subsequent report will be drawn up, and signed by them and the CEO.
- The service-user will then be informed of the **response** in a second meeting with the CEO.
- At this stage, it may be possible to resolve the complaint informally by clarifying misunderstandings or by acknowledging the wrong and apologising verbally.

- **Mediation\*** may be used to attempt resolution of the complaint at Stage 2, if both parties agree.
- In the case of a serious therapeutic impasse or very complex therapy-related complaint, **an external independent clinical supervisor of recognised expertise, acceptable to both parties**, may be employed by the CEO to offer a number of sessions to each party to try to resolve the issues.
- If the service-user remains dissatisfied, the other involved parties will be informed by the CEO.
- The DRCC will complete these procedures **within 30 working days**. Should the process take longer, the CEO will update the service-user every 10 working days on the reasons for the delay.
- If the service-user is dissatisfied with the final result and fails to respond to the report in writing or in person (with record made) within 2 months, the CEO will write by registered post or meet with the service-user (with record made) to ascertain if she/he wishes to pursue the complaint further. If, after an additional 2 weeks, there is no response the service-user will be informed in writing or in person (with record made) that the complaint will not be considered further.

*\*Mediation can be seen as an **alternative dispute resolution** and it is where a third party assists the parties to negotiate a settlement. All parties have to agree to mediation before it can commence and terms of reference are agreed beforehand.*

### 3.2.3 Stage 2(b): Formal Investigation Procedure

- If a service user, or another person involved in the complaint, is dissatisfied with the outcome of Stage 2 (a), and authorisation is received in writing/person (with record made), a formal investigation of the complaint-Stage 2 (b)- will be necessary. This is done by making a request in writing to the CEO, who will refer the request to the Chair of the Board of Directors of DRCC, accompanied by a copy of the **complaint**. This request should preferably be received within a calendar month of the Completion of Stage 2(a).
- The Board of Directors will then initiate an objective investigation, which will involve **external expertise i.e. an external investigator/s** will be appointed by the Board. If further information is required from the service-user, she/he will be requested in writing/person (with record made) to respond within 10 working days. If necessary, this time limit will be extended by a further 10 working days.
- The investigation will involve interviews with the complainant, the staff member/volunteer/manager complained against, and other parties/witnesses deemed relevant. A staff member/volunteer may be accompanied at the interview by another person of their choosing (e.g. a union representative or colleague) and the service-user may be accompanied by an advocate of their choosing.

- When the complaint has been fully investigated, the investigator/s will write a report in which they will put forward their conclusions and recommendations to Board of Directors of DRCC. The Board will then make a final decision on how to proceed (4). A response will be given to the all the parties within a further calendar month.
- The investigator may find that the complaint has not been upheld and no action need be taken, in addition to assurance that the staff member's reputation or future prospects will not be adversely affected.
- In the event of the complaint being upheld, the employee/volunteer will be subject to Disciplinary procedures as outlined in the Employment Handbook or Volunteer Handbook.
- In relation to a complaint against a counsellor being upheld, the DRCC will inform the client of the complaint procedures for the counsellor's accrediting body.
- Where possible, a formal investigation of a complaint will be completed within **30 working days**. However, if this is not possible, the client will be informed of a delay and updated every 20 days, with the process taking **no longer than 6 months**.

*Note: A complaint may be withdrawn at any time, and on advice of such withdrawal, a review or investigation may cease, unless reasonable grounds exist for believing that the public interest would best be served by its continuation. Accordingly the matter will be referred to the CEO and Board of Directors of DRCC for a decision.*

### **3.2.4. Stage 3 : HSE Review**

If the service-user remains dissatisfied, the DRCC will advise her/him to seek a review of their complaint by the HSE Internal Process. All requests for a HSE review should be forwarded to: **Director of Advocacy, Quality, Risk and Clinical Care Directorate, Health Service Executive, Oak House, Millennium Park, Naas, Co. Kildare Ph: 045 880400 Fax: 1890 200 894**

The Director of Advocacy will examine the request for review and appoint a Review Officer if appropriate to carry out the review of the complaint. The Review Officer(s) will review the processes used to carry out the investigation of the complaint and the findings and recommendations made post-investigation.

The Review Officer(s) will either uphold, vary or make a new finding and recommendation. The Review Officer may carry out a new investigation of the complaint or recommend that a local re-investigation of the complaint be carried out by a Complaint Officer independent of the initial investigation team

### **3.2.5. Stage 4 : Independent Review**

If the complainant is not satisfied with the outcome of the complaints management process he/she may seek a review of the complaint by the Ombudsman/ Ombudsman for Children.

*The complainant must be informed of their right to seek an independent review from the Ombudsman/Ombudsman for Children at any stage of the complaint management process.*

### **3.2.6. Matters excluded (As per Part 9 of the Health Act) 48.(1)**

**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.

### **3.2.7. Redress**

Redress should be consistent and fair for both the complainant and the service against which the complaint was made. The DRCC will offer forms of redress or responses that are appropriate and reasonable, where it has been established that a measurable loss, detriment or disadvantage was suffered or sustained by the claimant personally. This redress could include:

- Apology
- An explanation
- Refund
- Admission of fault
- Change of decision

- Correction of misleading or incorrect records
- Technical or financial assistance
- Recommendation to make a change to a relevant policy or law

A complaints officer may not, following the investigation of a complaint, make a recommendation the implementation of which would require or cause :

- (a) the HSE to make a material amendment to its approved service plan, or
- (b) a service provider and the HSE to make a material amendment to an arrangement under section 38.

(2) If, in the opinion of the relevant person, such a recommendation is made, that person shall either—

- (a) amend the recommendation in such manner as makes the amendment to the applicable service plan or arrangement unnecessary, or
- (b) reject the recommendation and take such other measures to remedy, mitigate or alter the adverse effect of the matter to which the complaint relates as the relevant person considers appropriate

#### **4. Annual Report to the HSE**

The DRCC, having established a complaints procedure by agreement with the HSE, must provide the HSE with a general report on the complaints received by the service provider during the previous year indicating:

- The total number of complaint received
- The nature of the complaints
- The number of complaints resolved by informal means
- The outcome of any investigations into the complaints

#### **5. Review of the Complaints Policy**

The DRCC will monitor complaints with a view to evaluating this Complaints Policy and its effectiveness, on a yearly basis.

#### **Notes**

1. This policy has the equivalent with all of the components of the HSE **Your Service Your Say** complaints policy.
2. This is in accordance with Section 47, Part 9, of the Health Act 2004.
3. This is in accordance with Section 50 of the Health Act 2004.
4. The DRCC will provide non-identifying information related to client complaints to the HSE, as part of the Annual Report to the HSE.