

Saint John of God Community Services Limited

Policy on The
Management of
Consumer Feedback to
include Comments,
Compliments and
Complaints

17

This policy remains in force until such time as it is reviewed and approved by the Board of Community Services CLG.

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1. Purpose of Policy

Saint John of God Community Services Limited is committed to providing a quality service for service-users, relatives and visitors. Compliments and complaints are regarded as an important source of information for improving services.

This policy enables complaints to be brought to the attention of the Service and enables an investigation of these complaints with the aim of finding a satisfactory resolution and overall improvement of services.

It is the policy of Saint John of God Community Services Limited to deal with all complaints in line with the procedures set out in this document.

Saint John of God Community Services Limited categorises complaints as:

- 1. Complaints that can be resolved locally.
- It is the policy of Saint John of God Community Services Limited to resolve complaints at a local level where possible.
- This local resolution process is coordinated by the Person in Charge (PIC)/Local Manager.
- 2. Formal Complaints that cannot be resolved locally.
- When local resolution is not possible the complaint is escalated to the Complaint
 Officer (CO) i.e. Operations Managers/Administrative Manager, Director of
 Nursing/Programme Manager, where actions are agreed to address the complaint.
- An appeals process is available if the person who makes the complaint is unhappy with the outcome. (Refer to Stage 3 or 4 of Procedure P14).

Saint John of God Community Services Limited aims to:

- Ensure complaints are taken seriously and are addressed in a fair, timely, confidential and transparent manner.
- Inform complainants of the outcome of their complaint as quickly as possible.
- Learn from complaints by reviewing them regularly.
- Assure the person making the complaint that they will not be adversely affected because they have made a compliant.

Additionally this policy is developed to ensure that Saint John of God Community Services Limited is in line with:

- Health Service Executive (HSE) best practice as outlined in "Your Service Your Say"
- HSE National Service Plan 2016
- National Standards for Residential Services for Children and Adults with Disabilities (Health Information & Quality Standards (HIQA) 2013).
- Mental Health Act 2001 (Approved Centres) Regulations 2006
- Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) With Disabilities) Regulations 2013.

2. Scope

This policy is applicable to all compliments and complaints received from service-user / patient perspective across Saint John of God Community Services Limited.

This policy should be read in conjunction with the following policy documents as appropriate:

- Safeguarding Vulnerable Persons at Risk of Abuse National Policy, National Policy & Procedures, HSE, December 2014.
 http://www.hse.ie/eng/services/publications/corporate/personsatriskofabuse.pdf
- Policy & Procedures for Safeguarding Vulnerable People Adult Mental Health Services, May 2010 - Saint John of God Hospital Limited; Saint John of God Community
- Policy & Procedures for Safeguarding Vulnerable People Child and Adolescent Mental Health Services, May 2010 - Saint John of God Hospital Limited and Saint John of God Community Services Limited.
- Children First: National Guidance for the Protection and Welfare of Children (2011)

This policy is guided by the following statutory requirements:

- Health Act 2004, Part 9
- Health Act 2004 (Complaints) Regulations 2006
- Health Act 2007 (Care and Support of Residents in Designated Centres for Persons (Children and Adults) With Disabilities) Regulations 2013.
- 'Your Service Your Say' 2015 The Policy for the Management of Consumer Feedback to include Comments, Compliments and Complaints, HSE Advocacy Services.

- Children First Act 2015
- Mental Health Act 2001.

3. Definitions

3.1 Complaint

The Health Act (2004) defines a 'complaint' as any complaint about an action of a service provider, that it is claimed;-

- (A) Does not accord with fair or sound administrative practice, and/or
- (B) Adversely affects the person by whom or on whose behalf the complaint is made.

In other words a complaint is when someone tells Saint John of God Community Services Limited that something is wrong with the service or someone says that they are not happy with the service.

There are a number of exclusions to this policy listed under the Health Act (see Section 10 of this document).

3.2 Complainant

Complainant means any person who is or was provided with a health or personal social service by the Service, or who is seeking, or has sought, provision of such service, who has complained, in accordance with the procedures established under Section 46 of the Health Act 2004 about any action of the Service 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.

3.3 Compliment

A compliment is when someone tells Saint John of God Community Services Limited that something is good about the service or that they are really happy with the service.

3.4 The Complaints Officer

Within Saint John of God Community Services Limited, the Operations Manager /Administrative Manager or Programme Manager /Director of Nursing of each centre /location will be deemed the Complaints Officer (CO) for the relevant centre or location.

3.5 Person in Charge (PIC)

In relation to Designated Centres, provided within Intellectual Disability Services, the PIC is the person appointed as the Person in Charge of the Designated Centre pursuant to Regulation 14 of the *Health Act 2007 (Care and support of residents in designated centres for persons (children and adults) with disabilities) Regulations, 2013*, and named in the certificate of registration issued in respect of the designated centre (residential service).

3.6 Designated Lead Complaints Officer

In accordance with the Health Act 2004 the Designated Lead Complaints Officer (DLCO) within each Service is the Regional Director /General Manager of Services.

3.7 National Incident Management System (NIMS) Complaints Form

The National Incident Management System (NIMS) is a core enabling system to improve patient and service user safety. **The complaint form is one of four forms now in use to record incidents and complaints** (See Appendix I).

3.8 Service-user Complaint Form

This complaint form is contained in Appendix III.

3.9 The Complaints Register

A Complaints Register (Log) is maintained by the PIC/Local Manager and Complaints Officer in each location which demonstrates:

- Date complaint was made;
- Name of complainant & name of advocate if applicable
- Brief overview of complaint and any investigation into a complaint;
- Date complaint was resolved;
- Outcome of the complaint;
- Whether or not the service-user or other were satisfied with the outcome of the complaint.
- Was complainant advised of the appeals processes available?

4. Timeframes

4.1 Local resolution by PIC/Local Manager

- Local complaint resolution by the PIC/Local Manager should be prompt and in line with complainant's request.
- The Complaints Register clearly records the timeframes of complaint(s) resolution and a record is sent to the Complaints Officer.

4.2 Timeframes once formal investigation of a complaint has begun

When a complaint cannot be resolved locally the complaint is escalated to the Complaints Officer for review.

Following review, if the complaint is not going to be investigated then the Complaints Officer will inform the complainant in writing, within 5 working days of making the decision/determination, that the complaint will not be investigated and the reasons for it.

Where the complaint is going to be investigated the Complaints Officer will acknowledge receipt of the complaint within 5 working days and must endeavour to investigate within 30 working days of the complaint being acknowledged.

If the investigation cannot be concluded within 30 working days then the Complaints Officer must communicate this to the complainant and the relevant service/staff member within 30 working days of acknowledging the complaint and give an indication of the time it will take to complete the investigation.

The Complaints Officer must update the complainant and the relevant staff member every 20 working days.

The Complaints Officer must endeavour to investigate complaints within 30 working days. However, where the 30 working days timeframe cannot be met despite every best effort, the Complaints Officer must endeavour to conclude the investigation of the complaint within 6 months of the receipt of the complaint.

If this timeframe cannot be met, the Complaints Officer must inform the complainant that the investigation is taking longer than 6 months, give an explanation why and outline the options open to the complainant. She/he should inform the complainant that they may seek a review of their complaint through the HSE Review Process or from the Ombudsman/ Ombudsman for Children.

4.3 Time limit extensions for making a complaint

- 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
- 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.
- If the complainant was living abroad and unable to make the complaint within the 12 month timeframe.

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

5. Roles and Responsibilities

5.1 Person in Charge/Local Manager

The Person in Charge /Local Manager is responsible for receiving complaints at local level and trying to resolve them.

The PIC /Local Manager is responsible for maintaining a Complaints Register of all locally resolved complaints and sends a record of these to the Complaints Officer each month.

Where complaints are not resolved at local level the Person in Charge/ Local Manager escalates these to the Complaints Officer.

The Person in Charge/Local Manager will ensure that:

- All staff members in the location are aware of the Policy on The Management of Consumer Feedback to include Comments, Compliments and Complaints
- Service-users have access to advocacy services for the purposes of making a complaint.

- An accessible copy, which is in a format meaningful to the service users in that location, of the Policy on The Management of Consumer Feedback to include Comments, Compliments and Complaints is displayed in a prominent position in the centre.
- Each service-user and their family are aware of the Policy on The Management of Consumer Feedback to include Comments, Compliments and Complaints.

5.2 Frontline Staff

All staff must be familiar with the contents of this policy. If a frontline staff receives a complaint/compliment they must follow the steps outlined in this policy. Staff must do the following:

- Listen to the complaint/compliment carefully.
- Record details of the complaint on the NIMS Form (Appendix I).
- Record details of the complaint on the Service-user Complaint Form (Appendix III).
 Completed Service-user Complaint Form to be retained in the location's
 Compliments & Complaints Folder forward copy to Complaints Officer.
- Tell the person making the complaint/compliment who they are going to report the complaint/compliment to.
- Report the complaint/compliment to the Person in Charge /Local Manager.

5.3 The Complaints Officer

Within Saint John of God Community Services Limited, the Operations Manager /Administrative Manager or Programme Manager /Director of Nursing of each centre /location will be deemed the Complaints Officer for the relevant centre or location.

The Complaints Officer is responsible for maintaining the necessary documents relating to complaints. The NIMS Complaint Form must be completed for each complaint received (Appendix I). The Service-user Complaint Form must also be completed for each complaint received (Appendix III); however, this is retained at a local level.

The Complaints Officer will ensure that:

- All complaints are investigated promptly.
- Complainants are assisted to understand the complaints procedure.
- Complainants are informed promptly of the outcome.
- Records are maintained of all complaints including:

- > Details of any investigation(s).
- Outcome of the investigation(s)
- Recommendations following outcome of any investigation(s) and actions taken to implement recommendations
- The complainant's level of satisfaction following the outcome of the complaint.

5.4 Regional Director

The Regional Director is responsible for ensuring all complaints not resolved locally are managed in line with this policy.

The Regional Director will ensure that any person who has made a complaint is not adversely affected by reason of the complaint having been made.

If a complaint is made against a Complaints Officer the complaint is escalated to the Designated Lead Complaints Officer (DLCO) for review.

The DLCO (Regional Director) acts as the appeals officer.

5.5 Complaints Co-ordinator

The Complaints Co-ordinator will be appointed and will be available to service-users to ensure that:

- All complaints are appropriately responded to in line with timeframes outlined in section 4.
- Records of complaints are maintained in line with responsibilities outlined in section
 3.9 (Complaints Register contents) and section 5.3.
- The Complaints Co-ordinator shall conduct an evaluation and audit of the Complaints process at regular intervals or on an annual basis.

6. Advocacy

All complainants have the right to appoint an advocate. If a person is unable to make a complaint themselves then an advocate can assist them in making the complaint.

The National Advocacy Service established in March 2011 provides representative advocacy for people with disabilities between the ages of 18 and 65. It provides an independent, confidential and free representative advocacy service that works exclusively

for the person using the service.

The national contact number for the National Advocacy Service (NAS) is: 075 103000 and can be used between the hours of 1000h to 1600h, Monday to Friday.

7. How complaints can be made

A complaint can be made using whatever means the person communicates best in e.g. verbal, written, using gesture and sign, through an aided device etc.

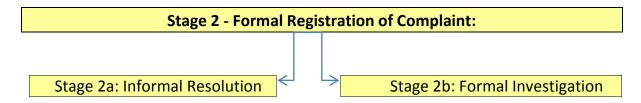
If the person cannot write, a staff member will write the complaint with the person using the **NIMS Complaint Form** (Appendix I) and by completing the **Service User Complaint Form** (Appendix III), which is retained in the location's Compliments & Complaints Folder. The Staff member will ensure that information being used is accessible to the person and the person understands what is being recorded.

8. Stages of the complaints procedure

Stage 1 - Local Resolution at point of contact: by Complainant and staff member / PIC / Local Manager

Management of a Complaint at the Point of Contact

- Staff members have clear delegation to resolve verbal complaints at first point of contact, wherever possible. A NIMS complaint Form (Appendix 1) should be completed by the person who receives the complaint at first point of contact.
- Where a complaint is resolved at the point of contact, the PIC/Local Manager documents the complaint in the local Complaints Register and sends a copy to the local Complaints Officer.
- Where complaints cannot be resolved at the first point of contact due to persons involved, their seriousness or complexity, these complaints must be referred to the Complaints Officer for investigation at Stage 2. A NIMS Complaints Form (Appendix 1) is written by or on behalf of the person.
- Where Complainants do not accept the outcome of the management of the complaint at the point of contact they may seek a review of their complaint at Stage 2 of the procedure.



Stage 2a: Informal Resolution

- Complaints that could not be resolved at Stage 1 or should not be resolved at the
 first point of contact due to their seriousness or complexity are then escalated to
 the Complaints Officer for resolution by informal means or through a formal
 investigation.
- The Complaints Officer will carry out a pre-investigation to check the validity of the complaint and the appropriate processes to be used to manage the complaint. Some complaints will not be suitable for investigation by the Complaints Officer and must either be referred to the appropriate Department/Manager or body for investigation or returned to the complainant with an explanation as to why the complaint cannot be investigated or with details of the correct process for the management of their complaint.
- The Complaints Officer may consider whether it would be practicable, having regard to the nature and the circumstances of the complaint, to seek the consent of the complainant and any other person to whom the complaint relates, to find an informal resolution of the complaint. Mediation may be used to attempt resolution of the complaint at Stage 2 if both parties agree.

Stage 2b: Formal Investigation of a written complaint

Where informal resolution was not attempted or was not successful:

- The Complaints Officer will initiate a formal investigation of the complaint.
- The Complaints Officer is responsible for carrying out the formal investigation of the complaint at Stage 2 but may draw on appropriate expertise, skills etc. as required.
 Staff have an obligation to participate and support the investigation of any complaint where requested.
- Where the investigation at Stage 2 fails to resolve the complaint, the complainant may seek a review of their complaint by the HSE Internal Review Process at Stage 3 or make a complaint directly to the Office of the Ombudsman.

9. Report

At the end of the investigation, the Complaints Officer must write a report of their investigation and give a copy of the report to the complainant and the Regional Director and the CEO. The final report will include any recommendations needed to resolve the matter.

Stage 3 - H.S.E. Review

Complainants have 30 working days from the date of the final report sent by Saint John of God Community Services Limited to request a review by the HSE. The Director of Advocacy will examine the request for review and appoint a Review Officer to carry out the review of the complaint if appropriate.

Stage 4 - Ombudsman

At all stages of the process, complainants must always be made aware by Saint John of God Community Services Limited of their right to an independent review of their complaint by the Ombudsman or the Ombudsman for Children.

Office of the Ombudsman Ombudsman for Children's Office

18 Lr. Leeson Street, Dublin 2. Millennium House

Tel: +353-1-639 5600 52-56 Great Strand Street

Lo-call: 1890 223030 Dublin 1

Fax: (01) 639 5674 Tel: 01-8656800

Additional information on both the Ombudsman and the Ombudsman for Children can be found on the following website www.ombudsman.ie or www.oco.ie.

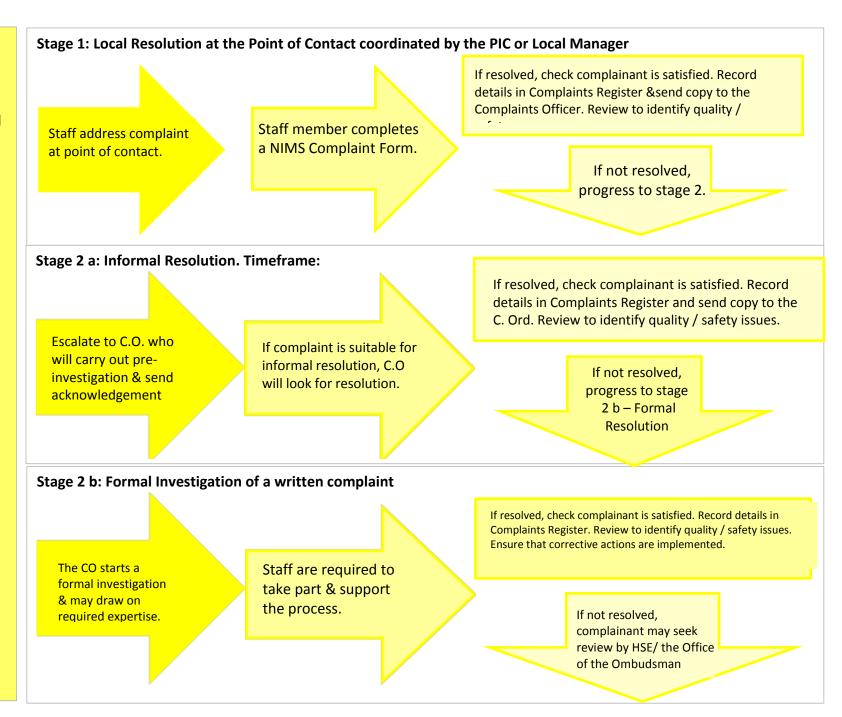
Staff member receives complaint.

All complaints whether written or verbal where possible should be resolved locally and recorded on a National Incident Management System (NIMS) complaint Form

- All Complaints must be handled with respect and discretion.
- Listen to the complainant
- **Identify** the issues
- **Summarise** the issues
- Thank the complainant
- Explain what will happen next
- Act now determine the appropriate action

C.O. = Complaints Officer C. Ord = Complaints Coordinator.

Complaints Coordinator is to be available to residents / service users to ensure records are completed and maintained as required.



10. Matters excluded from right to complain

Section 48 of the Health Act 2004 (1) outlines that 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 of tribunal.
- (b) A matter relating solely to the exercise of clinical judgement by a person acting on behalf of either the Executive (HSE) or a service provider.
- (c) An action taken by the Executive (HSE) or a service provider solely on the advice of a person exercising clinical judgement in the circumstances outlined in (b) above.
- (d) A matter relating to the recruitment or appointment of an employee by the Executive (HSE) or a service provider.
- (e) A matter relating to or affecting the terms or conditions of a contract of employment that the Executive (HSE) or a service provider proposes to enter into or of a contract with an adviser that the Executive (HSE) proposes to enter into (includes terms or conditions relating to superannuation benefits, disciplinary procedures or grievance procedures).
- (f) A matter relating to the Social Welfare Act.
- (g) A matter that could be 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 Siochána.
- (i) A matter that has been brought before any other complaints procedure established under an enactment (e.g. complaints made under Part 2 of the Disability Act, 2005).

11. Children or Young People wishing to make a Complaint

Children of sufficient, age, reason and understanding may also make a complaint about any aspect of the service they have received by the HSE or relevant Service Providers. Their complaints must always be taken seriously and responded to appropriately.

The process for dealing with complaints from children will follow the same procedures as outlined in this policy. However, a formal procedure may not always be the most appealing way for children to air grievances. Therefore local complaints procedures must place adequate emphasis on informal ways of dealing with complaints from children where required.

12. Confidentiality

Complainants must be assured that their complaint and their personal details will be treated in confidence to the greatest extent possible consistent with public interest and the right to privacy. Complainant's information required for reporting and statistical purposes will be anonymised and all identifiable data will be removed.

13. Vexatious Complaints

Vexatious complaints are complaints that are intentionally troublesome. Vexatious complaints are excluded under Part 9 of the Health Act 2004. However, this does not remove the complainant's right to submit their complaint to independent agencies such as the Health Information & Quality Authority (HIQA), HSE under the HSE Review Process or the Ombudsman/Ombudsman for Children.

If a complaint is found to be vexatious or malicious, no record of the complaint is to be retained in the file of the staff member / service user about which the complaint was made.

Before the complaint is deemed vexatious the Complaints Officer must bring it to the attention of the Designated Lead Complaints Officer.

14. Anonymous Complaints

All anonymous complaints, both written and verbal, should be documented on the appropriate complaint reporting forms and brought to the attention of the relevant PIC / Local Manager for a decision as to whether an investigation and/or quality improvements are required on the basis of the complaint.

It is the policy of Saint John of God Community Services Limited that complainants must provide contact details when making a complaint against the Service to enable appropriate validation, follow up and investigation of that complaint unless there is a good and sufficient reason for withholding this information.

Anonymous complaints will not normally be investigated as there is always a possibility that they are vexatious or malicious and the anonymity of the complainant does not enable the principles of natural justice and procedural fairness to be upheld. Notwithstanding the fact the anonymous complaints cannot be the subject of a formal investigation unless there is supporting evidence, management should assure themselves that the systems in place are robust and the welfare of service-users is not at risk.

If the complaint is made by phone, or by person, the member of staff taking the complaint should encourage the caller to provide a name and telephone number at which they may be contacted. The caller should be advised that unless they provide their name and contact

details, it may not be possible to investigate the complaint if the disclosure of identity is regarded as essential to facilitate a full and proper investigation of the complaint.

If an anonymous complainant provides details that enable the identification of individual staff members, these details must be anonymised and there must be no record of an anonymous complaint on the file of any individual staff members.

16. Withdrawal of Complaint

A complainant may, at any time, withdraw a complaint made and, on being advised of such withdrawal, the Complaints Officer may cease to investigate or review the complaint. However, where the Complaints Officer has reasonable grounds for believing that public interest would best be served by the continuation of the investigation or review, he or she must refer the matter to the Regional Director/General Manager for a decision on the matter.

17. Monthly Report to HSE

The number of complaints received each month together with the type of complaints must be tracked on a monthly basis through **Appendix 2** of this document by the Complaints Officer for each centre / service and forwarded to the DLCO on a monthly basis. This data is then forwarded to the Chief Executive and to the Director of Programme, Quality & Safety on a monthly basis.

18. Annual Report to HSE

A service provider who has 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

As well as providing an Annual report it is envisaged that the Health Service Executive will collect statistics / details of complaints on a biannual basis.

Where a serious complaint is made the CEO and the Local Health Manager will be made aware of this by the Designated Lead Complaints Officer.

To achieve this, the number of complaints received each month together with the type of complaints must be tracked on a monthly basis through Appendix IV of this document by the Complaints Officer for each centre / service and forwarded to the Designated Lead Complaints Officer, on a monthly basis. This data is then forwarded to the Chief Executive and to the Director of Programme Quality & Safety on a monthly basis.



NATIONAL INCIDENT REPORT FORM (NIRF) NIRF - 04 COMPLAINT/ DANGEROUS OCCURRENCE

NIMS record no.:

The purpose of the incident form is to capture and report the incident with the initial available information. This will be followed up by the relevant department / individual within the organisation **SECTION A: GENERAL INCIDENT DETAILS SECTION B: COMPLAINANT DETAILS** Date of incident Time of incident Use 24 hour clock Surname Location Date of Birth Offsite (Onsite Description of Incident: **SECTION C: INCIDENT CLASSIFICATION INSTRUCTIONS** ose the hazard type that related to the incident below, go to correct table as indicated. Please describe the cause of the incident using the incident Classification tables below. tick the appropriate sub hazard type within that table then choose the appropriate Please Specify, Process and Problem/Cause in that row only. Be sure to only choose one option in For example, the below extract relates to a complaint received from a member of the public stating there was not enough parking spaces, the user should choose the Complaint/Service User Experience hazard, this will direct them to table 2, choose the appropriate sub hazard type (1) and then choose the relevant Please Specify (2) and Problem/Cause (3) within the access procedure row. Access Step 1 Medication/Equipment Inadequate/Insufficient > Step 3 Personnel/|Services/Treatment Failure Admission/ Appointment Compromised Referral letter Breached Facilities ≥ Step 2 Car parks/Transfer/Transport Did this incident relate to a... (tick one only) Dangerous Occurrence - Go to table 1 Complaint/Service User Experience - Go to table 2 Table 1 - Dangerous Occurrence **Sub Hazard Type** Staff Factors Staff Resources **Equipment Resources** Inadequate/Insufficient Competence Knowledge and Skills Other, Please Specify Organisational & Management Factors Smoking Policy Breached/Non-Compliant Security Inadequate/Insufficient Fire Regulations Infection Control Policy Medication Safety Policy Other Protocols/Policies/Regulations Other, Please Specify **Environment Factors** Food Safety Breached/Non-Compliant Water Supply Inadequate/Insufficient

VNIMS

Pest Control General Hygiene Noise Level Work Environment Overcrowding Disposal of Clinical Waste Other, Please Specify

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SECTION C: INCIDENT CLASSIFICATION CONTINUED...

Table 1 - Dangerous Occurrence Con	ntinued	
Systems/Installations	Power Fire System Electrical Installation CCTV Systems IT Systems Telephone/Bleeper Systems	Failure Breached Inadequate/Insufficient
Occupational Disease	Other, Please Specify Anthrax Malaria Measles Other, Please Specify	Notifiable Unnotifiable
HSA Dangerous Occurrences	Load Bearing Part Closed Vessel Plant/Place Flammable Chemical Scaffolding Building under Construction/Demolition Walls/Floors of Building Dangerous Substance/Pathogen Explosives Pipeline Vehicle/Tank Carrying Dangerous Substance Breathing Apparatus Vehicle/Train/Locomotive Revolving Mechanical Component Other, Please Specify	Collapse Overturning Failure Explosion Fire Ignition Uncontrolled/Accidental Release Accidental Collision Contact with Overhead Lines Burst
Other	Other, Please Specify	Failure Breached Inadequate/Insufficient

Table 2 - Complaints/Service User Experience

✓ Sub Hazard Type	✓ Please Specify	✓ Problem/Cause
Access	Medication/Equipment	Inadequate/Insufficient
	Personnel/Services/Treatment	Failure
	Admission/Appointment	Compromised
	Referral Letter	Breached
	Facilities	
	Car Parks/Transfer/Transport	
	Visiting	
	Other, Please Specify	
Accountability	Finance/ Bill	Inadequate/Insufficient
	Cost of Products	Failure
	Insurance Cover	Compromised
	Invoice Error	Breached
	Patient Feedback	
	Other, Please Specify	
Communication and Information	Communication Skills	Inadequate/Insufficient
	Comments	Failure
	Delivery of Information	Compromised
	Communication Between Staff or Areas	Breached
	Communicating	
	Information	
	Telephone Availability	
	Other, Please Specify	
Dignity and Respect	Behaviour	Inadequate/Insufficient
	End-of-Life Care Treatment	Failure
	Respect for Requests	Compromised
	Other, Please Specify	Breached
Improving Health	Catering	Inadequate/Insufficient
	Food quality	Failure
	Support	Compromised
	Information/Understanding of Patient	Breached
	Compliance	breached
	Other, Please Specify	
Participation	Consent	Inadequate/Insufficient
retucipation	Decision Making Process	Failure
	Other, Please Specify	Compromised
	Other, Flease specify	Breached
Privacy	Patients confidentiality	
FIIVACY		Inadequate/Insufficient Failure
	Security of Files and Records	Compromised
	Hospital Facilities (Privacy)	
Safe and Effective Care	Other, Please Specify	Breached
Safe and Effective Care	Support Services Post Discharge	Inadequate/Insufficient
	Clinical Handover	Failure
	Diagnosis	Compromised
	Adherence to Discharge Policy	Breached
	Discharge Letter	
	Discharge	
	Other, Please Specify	

SECTION C: INCIDENT CLASSIFICATION CONTINUED... Table 2 - Complaints/Service User Experience Continued... **Sub Hazard Type Please Specify** Problem/Cause Health and Safety Issues Building Central Heating Inadequate/Insufficient Failure Equipment Compromised Fixtures and Fittings Noise Levels Breached Pest Control Overcrowding Temperature Regulation Waste Management Other, Please Specify Documentation/Records Health Care Records Inadequate/Insufficient Admission/Registration Process Failure Information on Healthcare Record/Hospital Systems Compromised Chart/Films/Scans Availability Breached Control of Chart Recording of Information Other, Please Specify Cleanliness of Area Hygiene Inadequate/Insufficient Hand Hygiene/Gel Dispensers Linen (Beds and Curtains) Compromised Breached Floor Condition Waste Management Infection and Control Policies And Protocols Other, Please Specify SECTION D: REPORTED BY: Person who discovers the incident and unless otherwise **SECTION E: IMMEDIATE ACTION TAKEN** First name Surname Date notified Category of person Local system reference no. **SECTION F: OPEN DISCLOSURE DETAILS** Was open disclosure required? Date of open disclosure Time of open disclosure Any additional open disclosure details: SECTION G: WITNESS DETAILS (Name, contact no. etc.)

Section H: SIGNATURES	
Reporter Signature	Date D D M M Y Y Y
Line Manager Signature (where required)	Date D D M M Y Y Y Y
Title	

NIMS

HC NIRF 04 - V01: Complaint/Dangerous Occurrence Date Issued: April 2015

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Appendix II — Summary of NIMS Report Sheet

Section D: Record of Complaint Outcome – Summary of NIMS Report Sheet Complaint was taken by: Was the outcome of the complaint discussed with the complainant? No: Yes: If no, give reason: Date discussed with complainant: Is the complainant satisfied with the outcome? Yes: Is further action required, and if so, please give details: Signed by area supervisor / PIC / Local Manager: Please print name: Date: _____ Signed by Administrative Manager / Operations Manager / Director: Please print name:

Appendix III Service-user Complaint Form



COMPLAINT FORM

(Completed forms to be retained in the location's Compliments & Complaints Folder)

Name of P	erson:		Date:		
Name of A	dvocate:		Location:		
	nunicated Complaint appropriate)	Service User	Staff member	Advocate	
Details	of complaint:				
		Commis	int Decelution Ducces	_	
			int Resolution Proces	is	
Action(Date	s) taken by the Key Wo Action and Outcome		to resolve complaint:		Signed
			If com	plaint is unresolved, ref	er to Supervisor
A at: a .a /			service user/advocate of	the outcome from this sta	
Date	s) taken by Supervisor Action and outcome	-	10:		Signed

If complaint is unresolved, refer to Co-ordinator

Supervisor will advise the staff member of the outcome from this stage of the process who in turn will advise the service user/advocate

Date	Action and outcome (if any)			Signed
	Co-ordinator will advise the Supervisor of the outcome from th	is stage of the proce	ess, to commu	a Complaints Officer nicate same to staff rvice user/advocate
Action Pate	Action and outcome (if any)			Signed
ate	Action and outcome (ii any)			Signed
	completed with the service users/advocate by person whis complaint been resolved to the person's satisfaction?		ppropriate	
Has th		Yes / No *circle as a	•	
Has th	is complaint been resolved to the person's satisfaction?	Yes / No *circle as a	ppropriate	
Has the	is complaint been resolved to the person's satisfaction?	Yes / No *circle as a	ppropriate	
Has thi	is complaint been resolved to the person's satisfaction? complete the complaint resolution sign off below. ature of person who resolved issue	Yes / No *circle as a	ppropriate	
If Yes of Signates	is complaint been resolved to the person's satisfaction? complete the complaint resolution sign off below. ature of person who resolved issue ature of Complainant	Yes / No *circle as a	ppropriate	
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f Yes of Signar Signar Signar If No	is complaint been resolved to the person's satisfaction? complete the complaint resolution sign off below. ature of person who resolved issue ature of Complainant ature of Advocate , what is the next step? (Note; one or more of these step	Yes / No *circle as a D ps may be taken a Tick as	ate t any time)	
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Appendix IV Analysis of Complaints 2013

Modername of complaints of the	## Company Com	Service Provider Complaint Stats 2013					Analys	is of Complaint	s 2013				FE STATE	Comments &	Compliments		Notes for the month
		Insert service name	received pending at	(ii) Complaints received this month	(Si) Yolal Complaints on hand current recent	complaints excluded under Part 9 of the Health Act	(c) Anonymous Complaints	dealf with	(vii) Complaints Withdrawn	complaints dealt with within 30 working days at	complaints that took longer than 30	Pending at end of	resolved through	(sil) Commental Suggestions	(xiii) Positive Feedback		
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March Marc		February															
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