



Full policy statement can be supplied on application directly to an individual nursing home.

Complaints Policy Statement

Each nursing home in the Evergreen Care group recognises the value of the correct management of complaints. We agree that when we do not achieve our own standards of excellence, we must be informed so that adverse outcomes are reduced or removed, mistakes can be rectified, and learning achieved.

Complaints, comments, suggestions, and criticisms about services, whether oral or written will be taken seriously and handled in a sensitive, timely and effective manner that protects the rights, privacy, dignity and confidentiality of all those involved. Comments and / or complaints will be used to inform continuous quality improvement and risk management of care and services in the home.

Purpose

The purpose of this policy is to ensure complaints about us and our service from residents, their representatives and others are managed in accordance with the relevant legislation and best practice.

This policy also ensures that we are compliant with the Health Act 2007, (Care and Welfare of Residents in Designated Centres for Older People) (Amendment) Regulations 2022. PART 10 Complaints Procedures

Objectives

To ensure that all staff employed by the Nursing Home are aware of the underlying principles for effective management of complaints and comments about care and/or services.

To ensure that all staff employed by the Nursing Home are aware of the procedures to be followed for effective management of complaints and comments.

To ensure that complaints and comments are used to inform quality improvement and risk management processes in Castlebridge Manor Nursing Home.

Scope

This policy relates to:

- Complaints made directly to a staff member by a resident or a person acting on his/her behalf, about care given / services provided or omitted by the Nursing Home
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- Complaints received from any person, including a staff member about the quality of care and services provided to residents.
- Complaints made about the quality of care and services to residents in the Nursing Home to an external actor / organisation, which are referred to the Nursing Home for local resolution / management.

Definitions

Complaint

A complaint is an expression of dissatisfaction by one or more members of the public about an organisation's action or lack of action or about the standard of service provided by or on behalf of the organisation (Office of the Ombudsman, 2015).

NB: Staff of this Nursing Home may receive complaints pertaining to any matter, including the above, however, the appropriate response to and management of complaints will depend on the type of complaint received.

The protocol and procedures outlined in this policy outline the course of action to be taken for general complaints handling. Other policies and procedures may refer to specific types of complaints, such as elder abuse; grievance and bullying and harassment and protected disclosures.

Complainant

Complainant refers to the person making the complaint.

Concern

Some people may prefer to express a *concern*, feeling that a complaint reflects a more serious issue than that which they are reporting. They may also feel that by expressing a *concern* rather than a complaint- it will be managed in a less formal manner. The complainant has the option not to call their *concern* and complaint, however, as we are judged by HIQA in this regard and as HIQA requires that all complaints, no matter how they are presented are managed in line with the regulations, it is the policy of this nursing home to manage a *concern* as a complaint.

Verbal complaints

Complaints that are made verbally (including anonymous verbal complaints) would usually be managed as a stage 1 complaint. However, it is our policy to transfer ***all verbal***



complaints into writing by entering it on our electronic documentation system and managing it in accordance with our procedures.

Written complaints

Complaints may be received in writing in the first instance or in circumstances where it is not possible to resolve the complaint at stage 1 to the satisfaction of the complainant, the complainant is offered the opportunity to make a written complaint.

NB: Complaints received via electronic mail (e-mail) are treated as written complaints.

Written complaints that are unsigned / anonymous are not pursued except in exceptional circumstances and depending on the nature of the complaint.

Complaints officer / Nominated officer

A person designated by the facility for the purpose of dealing with complaints. In this nursing home, this role is filled by the Person in Charge. The complaint's officer is responsible for follow up, investigation and management of complaints that originate from residents, relatives or others, which are related to the quality of care and services provided to residents in the centre. The complaints Officer may delegate this work entirely or in part to another person in the Nursing Home – this will be informed to the complaint along with the reason for the delegation. If the complaints / Nominated Officer is the subject of the complaint, the complaint will be managed by another member of the management team who has the necessary training and competency to carry out the process.

Appeals Officer

The appeals officer is the person nominated to whom a complaint can appeal the outcome of an investigation. In the Nursing Home, the appeals officer is the Regional Operations Manager for the home, OR a named Person participating in the Management (PPIM) of the home.

Malicious complaint (Guy's and St. Thomas' NHS Foundation Trust, 2007).

A malicious complaint is defined as one which is spiteful, intentionally destructive, hateful, nasty and/or cruel. All complaints should be considered within the context of the right of each individual to be treated with dignity and fairness. However, where it is decided that there is no case to answer, the complaint should only be dealt with as a malicious complaint, when there are reasonable grounds for doing so. In order to define a complaint as malicious, the following criteria can be used as guidance:

- The investigation has shown the original complaint to be without foundation and that the intention of the complaint was to cause damage either reputational or actual to the person named in the complaint or to the Nursing Home.
 - The investigation can demonstrate that the complainant making his/her complaint, knowingly lied to the investigating team.
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- There is sufficient evidence to demonstrate the above on the basis of the balance of probabilities.

Independent Advocacy Services

The Independent Advocacy in Ireland Current Context and Future Challenge A Scoping Document 2018 states “There are multiple definitions and types of advocacy. Two definitions are quoted here which succinctly sum up what advocacy is about:

- (i) “...the process of pleading the cause and/or acting on behalf of another person (or persons) to secure services they require and/or rights to which they and their advocate believe them to be entitled. Advocates owe those they represent a duty of loyalty, confidentiality, and a commitment to be zealous in the promotion of their cause”.

- (ii) “Advocacy is 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. Advocacy can often be undertaken by people themselves, by their friends and relations, or by persons who have had similar experiences. Delivering a professional advocacy service means providing a trained person who, on the basis of an understanding of a client’s needs and wishes, will advise and support that client to make a decision or claim an entitlement and who will, if appropriate, go on to negotiate or make a case for him/her.

Advocacy has been described in terms of the approach used, such as casework advocacy and personal advocacy; instructed or non-instructed advocacy; condition (such as dementia) advocacy; and issue/complaints advocacy.

Within this broad range of ‘advocacies’, it is essential to be aware that people may need to draw on different types of advocacy for different needs and it may be necessary to integrate different types simultaneously to provide effective support”

Responsibilities

The PIC has a responsibility to:

- Circulate this policy to all staff
 - Keep a record of all training of this policy
 - Regularly review the policy and audit how well it is being achieved
 - Disseminate any changes made to the policy
 - Regularly audit the policy
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EVERGREEN CARE

Home from home



The members of the Nursing Home team have a responsibility to:

- Read and satisfy themselves that they understand the policy
- Follow that policy accurately & lead other staff by their example
- Provide support as needed to ensure compliance with the policy

This Policy is supported by the Policy Procedure

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