



Feedback and Complaints Policy

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1.0 Policy statement:

WALK welcomes all feedback from all stakeholders and seeks to receive this feedback in many different ways. WALK uses this information to plan for good quality services.

It is the policy of WALK to provide a transparent process for complaints made against the organisation and to record all complaints made in line with legislative provision provided in the Health Act 2004. The organisation encourages staff to aim to resolve and effectively deal with feedback and complaints at the first point of contact with the individual making the complaint.

This policy provides information for all parties in relation to how feedback and complaints are received and handled in WALK. It provides information to staff on the procedure for dealing with complaints including guidelines for staff to deal with a verbal complaint that is made to them.

An 'easy to read' version of this policy, is available throughout the organisation.

2.0 Definitions:

Advocacy: Advocacy is defined as including services in which the interests of a person seeking a social service are represented in order to assist the person in getting entitlements to such service but does not include legal representation. Speaking on behalf of a person or empowering that person to speak for him or herself are the more popularly understood interpretations of advocacy. (Definition extracted from citizens information services website.)

A **complaint** under the Health Act 2004 is defined as:

"...any action of the Executive or a service provider that - (a) it is claimed, does not accord with fair or sound administrative practice, and adversely affects the person by whom or on whose behalf the complaint is made".

For the purposes of this Part, an action does not accord with fair and sound administrative practice if it is—

- (a) Taken without proper authority,
- (b) Taken on irrelevant grounds,
- (c) The result of negligence or carelessness,
- (d) Based on erroneous or incomplete information,
- (e) Improperly discriminatory,
- (f) Based on undesirable administrative practice, or
- (g) In any other respect contrary to fair or sound administration.

An act of mistreatment reported as a complaint must be treated in line with WALK's Safeguarding Vulnerable Adults Policy or WALK's Child Protection Policy.

The **Feedback and Complaints Officer**, as defined by the HSE, "is a person designated by the HSE for the purpose of dealing with complaints made to it in accordance with procedures established under section 49 (1) of the Health Act 2004 or a person designated by a Service Provider with whom the HSE has an arrangement under section 38 of the Health Act 2004 or given assistance under section 39 of the Health Act 2004". (You're Service, Your Say, HSE 2017).
For the purposes of this policy, the executive/service provider here is WALK.

Complainant: The Health Act 2004 defines a complaint as; "A complaint means a complaint made about any action of the Executive, or a Service Provider (see definition below) that, it is

claimed does not accord with fair or sound administration practice, and adversely affects the person by whom, or on whose behalf, the complaint is made". **For the purposes of this policy, the executive/service provider here is WALK.**

Clinical Judgment is defined as a 'decision made or an opinion formed in connection with the diagnosis, care or treatment of a patient'. (Health Act 2004)

Feedback: Feedback consists of the views and opinions on the support that a person has experienced. This may include a comment or a compliment. A **comment** means a verbal or written remark expressing an opinion or reaction (extracted from YSYS, 2017) and a **compliment** means an expression of praise, commendation or admiration (extracted from YSYS, 2017).

Review Officer(s) Is a person appointed to carry out a review, under Section 49 of the Health Act 2004, to determine the appropriateness of a recommendation made by a Feedback and Complaints Officer, having regard to all aspects of the complaint and its investigation (extracted from YSYS).

3.0 Roles and Responsibilities

This policy affects **any person**, excluding staff members, who wishes to make a complaint about WALK.

The **CEO** has overall responsibility for ensuring this policy is implemented across all facets of WALK.

Managers have a responsibility to support a culture whereby all comments, complaints, compliments are easily received, taken seriously and dealt with effectively and efficiently at local level in the first instance while giving full consideration to all aspects of WALK's policy on positive behaviour support and their knowledge of the person making the complaint. Managers ensure that the staff in their area are aware of this policy and the steps to be taken hereunder.

In the case of emergency or urgent actions taken to ensure the safety of individuals, the action is reported and dealt with immediately in line with WALK's safeguarding policies.

Staff have a responsibility to ensure they follow guidance set out below to deal effectively with a complaint raised to them at stage one and to be aware and to follow the procedure to deal with a complaint that needs to be progressed to stage 2 and to ensure the person is supported to escalate the complaint through the proper channels effectively.

This policy does not cover staff members who have a complaint to make on their own behalf about WALK. Staff wishing to make a complaint on their own behalf about WALK should consult the Grievance Procedure for Staff.

The **Feedback and Complaints Officer** deals with complaints that reach stage two (outlined below) and is also responsible for monitoring and evaluating all complaints made to the organisation. The Complaint's Officer is nominated by the CEO of WALK. The Feedback and Complaints Officer(s) for WALK is a specifically nominated Assistant Psychologist(s). 1 Longmile Road, Walkinstown, Dublin 12. Telephone (01) 465 0388
Email: complaints@walk.ie

Designated internal reviewer: This is a staff member, more senior than the complaints officer, who is nominated by the Senior Management Team to be available to the people we support to

ensure that all complaints are appropriately responded to and to ensure that the Feedback and Complaints Officer maintains appropriate records as per WALK's legal requirements. This person is usually the Quality Manager.

4.0 Procedures for dealing with feedback

4.1 Procedure for handling compliments and comments:

When any person, excluding staff members, verbally gives a compliment or passes on a comment to a staff member, the staff member thanks the person for the feedback. The staff member tells the person that they will pass the compliment or comment on to any person specifically named in the compliment/comment, to the team leader and to the Feedback and Complaints Officer.

If the compliment/comment has a suggestion that requires additional work/continuation of a specific service etc, this information is acknowledged and given to the team leader in the service location. It is documented in a person's file in their contact sheet.

The organisation, generally through the Quality Department, also seeks feedback from various stakeholders through surveys.

The Feedback and Complaints Officer keeps a log of all compliments/comments made. The organisation uses this feedback for reporting and public relations purposes.

4.2 Procedure for dealing with complaints:

4.2.1 Who can make a complaint?

Any person who is being or was provided with a service by WALK or any person who is seeking or has sought provision of a service of WALK may make a complaint under the complaints procedure.

4.2.2 How complaints can be made:

A complaint under this policy can be made through whatever means the person wishes to communicate, this may be verbally, through use of any assisted language programme, sign language or through written means including email, fax or letter.

The complaints form is freely available throughout WALK locations and on the website www.WALK.ie. The person entitled to make a complaint under this procedure, can do so by themselves or with the support of another person.

4.2.2.1 Advocacy:

Any person who wishes to make a complaint is entitled to appoint an advocate. All persons we support of WALK may avail of an independent advocacy service in line with WALK's Policy on External Advocacy.

Any person entitled to make a complaint under this procedure, does not have to appoint an advocate.

4.2.2.2 Making a complaint on behalf of another person:

Any person (for example, a friend, family member, staff member, advocate etc.) can make a complaint on behalf of a person who is entitled to make a complaint under this procedure, provided they have, where possible, that person's consent to make that complaint.

It is preferable that a person makes a complaint on their own behalf; however, WALK recognises that a person making a complaint may feel uncomfortable and accepts that it may be better for the person's mental health to have the complaint made on their behalf. When investigating a complaint made on behalf of a person, WALK endeavors to ensure that there is consent of the person on whose behalf the complaint is made.

If requested by the complainant, a staff member/ Feedback and Complaints Officer may provide assistance to the complainant to make a written complaint. The staff member should encourage the person to stick to the facts of the issue in as far as they believe them to be true.

4.3 Stages of the complaints management process:

This complaints procedure provides an overview of the procedure for dealing with complaints however further detail on the process is available in "Your Service, Your Say" or by contacting the Feedback and Complaints Officer.

Please see the HSE's Your Services Your Say (2017) for a process flow chart of their complaints management process.

<https://www.hse.ie/eng/about/qavd/complaints/ysysguidance/ysys2017.pdf>

There are different stages for managing complaints received by WALK. The stages are:

- Stage 1 – Local resolution of verbal complaints at point of contact (Informal)
- Stage 2a – Local level resolution with Feedback and Complaints Officer (Informal)
- Stage 2b – Local investigation of written and serious complaints (Formal)
- Stage 3** – Review by the Designated Internal Reviewer.
- Stage 4 – Independent Review (Ombudsman)

4.3.1 Timeframes for making complaints:

The Health Act 2004, Section 47 outlines the timeframes that determine if a complaint can be made using this process.

The Feedback and Complaints Officer determines if the complaint meets the time frames set out in Section 47, Part 9 of the Health Act 2004 which requires that:

A complaint must be made within 12 months of the date of the action giving rise to the complaint or within 12 months of the complainant becoming aware of the action giving rise to the complaint.

The Feedback and Complaints Officer may extend the time limit for making a complaint if in the opinion of the Feedback and Complaints Officer special circumstances make it appropriate to do so. These special circumstances include but are not exclusive to the following:

- 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 complainant at the time of the experience e.g. mental health, critical/ long-term illness. The Feedback and Complaints Officer may seek appropriate clinical judgment in relation to this.
- Where extensive support was required to make the complaint and this took longer than 12 months

The Feedback and Complaints Officer must notify the complainant of decision to extend / not extend time limits within 5 working days of the complaint being received.

4.3.2 Items that cannot be resolved through the Complaints Policy and Procedure (as per Part 9 of the Health Act 2004):

- Something that is or has been subject to legal proceedings of a court or a tribunal;
- A matter solely related to the exercise of clinical judgment by a person acting on behalf of WALK.
- An action taken by WALK solely on the advice of a person exercising clinical judgment acting on behalf of WALK.
- A matter relating to the recruitment or appointment of an employee by WALK.
- A matter relating to the terms or conditions of a contract of employment that WALK intends to enter into.
- A matter relating to Social Welfare Acts.
- A matter that could be the subject of an appeal under section 60 of the Civil Registration Act 2004;
- A matter that could prejudice an investigation being undertaken by an Garda Síochána;
- A matter that has been brought before any other complaints procedure established under the law.

WALK will endeavor to deal effectively and satisfactorily to all parties concerned when a complaint is made. This may be done through the complaints procedure or through an alternative process or by referring the matter to the appropriate personnel, for example, Human Resources.

4.3.3 Refusal to investigate or further investigate complaints:

The Feedback and Complaints Officer shall not investigate a complaint if the person who made the complaint is not entitled under section 46 of the Health Act 2004 to do so either on the person's own behalf or on behalf of another. The Officer shall not investigate a complaint if the complaint is made after the expiry of the period specified in section 47(2) or any extension of that period allowed under section 47(3) of the Health Act 2004.

The Feedback and Complaints 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, the Officer is of the opinion that the complaint does not disclose a ground of complaint provided for in section 46 or that the subject-matter of the complaint is excluded by section 48 of the Health Act 2004.

The Feedback and Complaints 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, the Officer is of the opinion that the complaint that the subject-matter of the complaint is trivial, or that the complaint is vexatious or was not made in good faith.

The Feedback and Complaints Officer may decide not to investigate or further investigate an action to which a complaint relates if or that the Complaints and Feedback Officer is satisfied that the complaint has been resolved.

(3) A complaints officer shall, as soon as practicable after determining that he or she is prohibited by subsection (1) from investigating a complaint or after deciding under subsection (2) not to investigate or further investigate a complaint, inform the complainant in writing of the determination or decision and the reasons for it.

4.3.4 Anonymous Complaints:

Anonymous complaints on their own cannot lead to a formal investigation, as there is always the possibility that they are vexatious. However, details of anonymous complaints are forwarded to the Feedback and Complaints Officer and Service Managers to ensure appropriate consideration.

4.4 Managing Complaints

4.4.1 Stage one: Local resolution of verbal complaints at point of contact (informal). For the most part complaints are made verbally. In cases where complaints are made verbally to staff, the staff member should deal with it as promptly as possible and in line with low arousal non aversive techniques outlined by WALK's Policy on Positive Behavior Support to help ensure that a complaint does not escalate and/or cause distress to the individual concerned.

4.4.1.1 How to receive a Complaint

All verbal complaints should be dealt with by the recipient of the complaint in a respectful manner and the complainant should be given the individual attention of the recipient.

It is important to note that in most cases the complaint being made is not aimed directly at the person who is receiving the complaint but rather about the organisation in general, therefore, it is important that the recipient of the complaint does not get angry, argumentative or take a complaint personally.

The recipient of the complaint should employ good communication skills and be helpful towards the complainant. The recipient of a complaint does not accept personal abuse or aggressive behavior by a person making the complaint.

Guidance provided by the HSE on dealing with aggressive callers is available in appendix 1 – "Fast Fact Sheet 2017 – How to deal with aggressive callers".

4.4.1.2 The Listen Approach

The HSE recommends the use of the LISTEN approach for persons receiving verbal complaints:

Listen:

Listen carefully to the issues being raised by the complainant

Identify:

Identify if there are multiple issues relevant to the complaint and separate each issue. Attempt to identify any hidden or underlying issues that may exist.

Summarise the issues to clarify and check that you understand what the person is telling you.

Ask the complainant to confirm that they agree with your interpretation of their complaint.

Find out from the complainant what they want to happen as a result of their complaint.

Sympathise:

Empathise and acknowledge the feelings of the complainant.

Expression of regret or apology:

Research indicates that an early expression of regret or apology can minimise the possibility of a verbal complaint becoming a formal written complaint.

However, in some circumstances it is important that a staff member does not apologise, or as such, accept blame, for a situation that has not been caused by the organisation. Awareness for staff must deal with the area of expression of regret and apology. Staff must also be given the skills to recognise when a complaint can or cannot be resolved at first point of contact and when the complaint needs to be referred to the Feedback and Complaints Officers for appropriate [investigation and] management.

Thank the person

Thank the person for taking the time to make the complaint.

Explain:

Explain to the complainant that there will be no negative repercussions because they have made the complaint in good faith.

Now Act: Assess the verbal complaint:

Once a verbal complaint is received by a staff member in WALK, the person receiving the complaint must ensure that they get as much information as possible about the complaint to assist them in assessing the seriousness of the complaint. The staff member can then use this information to assist them in determining if the complaint should be resolved at the point of contact or if the complaint should be referred to the Feedback and Complaints Officer for management at Stage 2 of the complaint management process.

Staff should only attempt to manage complaints received at the point of contact if due care has been taken to establish that all issues can be addressed appropriately at the point of contact.

4.4.1.3 Determine the appropriate options for the management of the complaint:

The person receiving the complaint must determine the most appropriate process for the management of the complaint. These options are:

- 1) The complaint is received by a staff member who determines that it is appropriate to manage the complaint at the point of contact with a view to resolving the complaint.
- 2) The complaint is received by or escalated to the Feedback and Complaints Officer who determines that the complaint may be managed with a view to resolution at the point of contact and links with the relevant staff member, or where appropriate the relevant Service Manager, whichever can most appropriately manage the complaint.
- 3) The staff member/ Service Manager/ Feedback and Complaints Officer who receives the verbal complaint decides that the complaint cannot or should not be resolved by them and advises the complainant to submit their complaint as a formal written complaint for investigation.

4.4.1.4 Timeframes for the Management of a Verbal Complaint

Every effort should be made to resolve a verbal complaint immediately or within 24 hours of receiving the verbal complaint if it is deemed appropriate to manage the complaint, with a view to resolution, at the first point of contact.

4.4.1.5 Recording Verbal Complaints

It is the preference of WALK that the Feedback and Complaints Officer reports on trends in relation to complaints to the Quality department.

Where a person we support wishes that a complaint goes no further than the local manager at their service location, this is respected, however, it should be explained to the person that if a resolution is outside the direct control of the Line Manager or person receiving the complaint that by not allowing the complaint to progress further there may not be a satisfactory resolution to the problem. If by not escalating the complaint the person is put at risk of harm or the complaint sits within any aspect of an Act of Mistreatment as per WALK's Policy on Safeguarding Vulnerable Adults, then, in accordance with said policy the person is informed that confidentiality cannot be maintained.

Verbal complaints made by people who are currently using the support services are documented in the daily contact sheet for the individual concerned. An email is also sent to complaints@walk.ie by the staff member to inform the Feedback and Complaints Officer that a verbal complaint has been made so that it can be recorded by the Feedback and Complaints Officer.

If the situation has been resolved, to the satisfaction of the complainant, this is stated clearly and an outline of the measures taken to achieve the resolution noted on the daily contact sheet and in the email to the Feedback and Complaints Officer.

Emails to the Feedback and Complaints Officer are sent before the staff member goes off duty or in any case within 24 hours of the complaint being received with 'Verbal Complaint' written in the subject line. The following information is on the email:

- Who made the verbal complaint;
- Who received the complaint;
- What the complaint was about;
- And, how the complaint was resolved;

The Feedback and Complaints Officer compiles these reports to comply with the Health Act 2004 and regulations made under it, and report into the HSE. The recordings are reported to the Senior management team.

In cases where a person has a query about whether the contents of the complaint has an impact on the rights of any person we are supporting at the time of the complaint, the Feedback and Complaints Officer checks with the line manager for confirmation that a rights restriction has been submitted through the appropriate channels for due process and that reviews are up to date.

The Feedback and Complaints Officer reports on trends in relation to complaints to the Senior Management Team. The report has SMART actions attached to it.

4.4.2 Stage 2 Escalating complaints

The following sections deals with identifying and escalating complaints to stage 2.

4.4.2.1 When should a complaint not be managed at Stage 1?

There are a variety of reasons why a complaint should not be managed at Stage 1 of the process. The key reasons include:

- The complaint involves too many issues to resolve at the point of contact.

- The complaint was a result of harm/incident or a near miss and requires further investigation to identify and eliminate the root causes.
- The complaint was as a result of deviations from quality standards that require further investigating to identify the reasons for the deviation and if there are any system improvements required.
- The complaint involves a number of people or a number of locations and involvement of all parties is required to effectively and fairly investigate the complaint.
- A complaint is made of an allegation of an act of mistreatment as per WALK's Safeguarding Policy. This must be escalated in the appropriate channels as described in WALK's Safeguarding Vulnerable Adults Policy.

4.4.2.2 Complaints that cannot be resolved at Stage 1

If it is not possible to resolve the complaint to the satisfaction of the complainant at the first point of contact, the person receiving the complaint must advise the complainant:

- Of the reasons why the complaint cannot be resolved at the point of contact
- That they may submit the complaint as a formal written complaint
- Of the process for submitting a formal written complaint
- What will happen with their complaint?

4.4.3 Stage 2a - Local level resolution with Feedback and Complaints Officer (Informal)

The Feedback and Complaints Officer must consider whether it would be practicable, having regard to the nature and the circumstance of the complaint, to seek the consent of the complainant and any other person to whom the complaint relates to finding an informal resolution of the complaint by the parties concerned.

Mediation may be used to attempt resolution of the complaint at Stage 2 if both parties agree.

Where informal resolution is not successful or is deemed inappropriate, the Feedback and Complaints Officer initiates a formal investigation of the complaint as outlined in stage 2b below.

4.4.4 Stage 2b – Local investigation of written and serious complaints (formal):

The Feedback and Complaints Officer must inform the relevant senior manager, in writing, within 2 working days of receipt of a formal complaint is submitted. A decision is then made about how best to proceed with the resolution of the complaint. This may or may not involve a full investigation.

The Feedback and Complaints Officer, or a person who the relevant senior manager appoints (the investigator) becomes responsible for the achievement of a resolution.

The complaint form is responded to, in writing, by the investigator within five working days of receipt of the complaint form by the Feedback and Complaints Officer. This written response is sent to the person who made the complaint and outlines the steps that the investigator will take to investigate the complaint. It also outlines the amount of time that will be spent investigating the complaint before the investigator will discuss the complaint further with the complainant and/or their representative.

Generally, the timeframe for an investigator investigating a complaint is no longer than 30 working days. However, if it is likely to be longer than 30 working days the investigator lets the complainant know how much longer the investigation will take. The investigator updates the complainant of the progress being made at least every 20 working days.

If a complaint is likely to take longer than six months to investigate the Director of Services explains to the complainant why the investigation is taking this length of time. He/she outlines other options open to the complainant, for example, the Ombudsman. The Director of Services encourages the complainant to stay within the local WALK process.

If a resolution is achieved to the satisfaction of the complainant then the person investigating the complaint should report this to the Service Manager, the Director of Services and the Feedback and Complaints Officer within two weeks of the date on the report.

If a complainant feels the issue is unresolved after Stage 2, they may make an application for review, as outlined in Stage 3.

4.4.5 Stage 3 – Review by the Designated Internal Reviewer (formal):

The Complainant can make a 'request for review' of the outcome of the complaint. This is done by writing to the Designated Internal Reviewer at WALK within 30 days of the date on the final outcome of Complainant's Officer. The Designated Internal Reviewer will send an acknowledge letter of their receipt of the 'request for review' within 5 working days of receiving the request. If the complaint does not meet criteria for review, the Designated Internal Reviewer will write to the Complainant within 5 days to inform them that their request for review cannot be upheld. If complaint does meet criteria for review, the Designated Internal Reviewer will work to a schedule whereby they will gather information within 10 working days. The Designated Internal Reviewer will aim to investigate, conclude and write a report on the review within 20 days of the date of the 'acknowledgement letter'. In cases where the review cannot be completed within the 20 day time frame, the Designated Internal Reviewer will update the Complainant and relevant staff every 20 working days after the initial 20 day due date.

It is the role of the Review Officer to;

- Engage with the Complainant as appropriate throughout the review process.
- Determine the appropriateness of the recommendations by reviewing the processes used to investigate the complaint and having regard to all aspects of the complaint and its investigation.
- Uphold, vary or make a new recommendation.
- Complete the review within 20 working days. A Review Officer may request in writing, to the CEO, an extension and indicate the additional time considered necessary for completion.
- Prepare a report on the review and circulate same as appropriate under the *Your Service Your Say, the Management of Service User Feedback for Comments, Compliments and Complaints Policy and Guidance Manual*.
- Advise a person if a finding in the report is adverse to that person and afford them the opportunity to consider the finding and to make representations in relation to it.
- Advise the person supported that they may seek a further review of the complaint by contacting the Office of the Ombudsman/Ombudsman for Children's Office.

In addition, in order to fulfil regulation 34.3(a)(b), a member of the senior management team annually nominates a member of the quality department to complete a review of the complaints process. This is to ensure "all complaints are appropriately responded to" and to ensure that the Feedback and Complaints Officer "maintains the records specified under [the legislation]". To do this, the Quality Department reviewer takes a random sample to audit the documentation. Using this documentation, the reviewer seeks to determine the Complainant's

level of satisfaction from their engagement with the complaint's process. The Reviewer reports on their findings to the CEO and make recommendations if required.

There is also an ongoing conversation as part of the satisfaction surveys we conduct with the people we support and family members. Recommendations and actions thereafter are monitored by the quality department and reported to the CEO.

4.4.6 Stage 4 - Independent Review (external appeal):

If the complainant is not satisfied with the outcome of an investigation into their complaint or if the complainant is not happy with the steps taken in the process for the investigation then they are free to refer the complaint to the Ombudsman at the following address:

Office of the Ombudsman
18 Lower Leeson Street,
Dublin 2
Telephone: (01) 639 5600
Lo-Call telephone number: 1890 223 030
Fax: (01) 639 5674.

4.5 Vexatious Complaints:

When a complaint is being investigated or has been investigated and the complaint is believed to be vexatious in nature, the organisation will deal with the individual ~~service user~~ taking into consideration the person's history and behaviours in general. In the case that a vexatious complaint has been made by a person not availing of WALK services the organisation will review the content of the claim and may begin with legal proceedings against the person, depending on the seriousness of the content of the complaint.

4.6 Redress:

WALK endeavours to 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 complainant personally.

Here is a list of the different types of redress (other types of redress may be also considered):

- A verbal apology
- A written apology
- An explanation
- A refund
- Admission of fault
- Change of decision
- Replacement
- Repair/rework
- Correction of misleading or incorrect records
- Technical or financial assistance
- Recommendation to make a change to a relevant policy
- Waiver of debt.

The investigator can make a recommendation that policies, procedures and guidelines in place in WALK are amended to try to ensure that an action that gave rise to the complaint does not happen again.

5.0 Audit and Evaluation

WALK may audit any aspect on the implementation of this policy. Various different methods may be employed to conduct any such audit including but not limited to observation, discussion with any person who can make a complaint, discussion with staff and/or volunteers and review of paperwork and records. Any audit of this policy or part thereunder may be undertaken at any time and may be announced or unannounced. Any audit is sanctioned by a member of the Senior Management Team. When identifying the auditor or audit team, consideration will be given to the sensitive nature of any complaints and investigations made under this policy.

6.0 Review:

This policy is reviewed in line with WALK's Policy Schedule, available from the Quality Department. WALK submits this policy to the HSE for review when requested.

Appendix 1: Dealing with aggressive callers

(This wording is extracted directly from the HSE's fast fact sheet on the subject, 23.01.19)

No member of our staff is expected to have to deal with aggressive/abusive callers. Sometimes, the behaviour on the telephone of the caller or representative may fall short of the normal standards we would expect.

Suggested Actions:

If you receive an abusive call, or during the call the caller becomes abusive: Inform the caller, firmly but politely, that you find the language they are using offensive and that you will end the conversation and put the phone down if the abusive language does not stop

- If it continues, despite repeating your warning, hang up
- Make a detailed note of the call
- Inform the staff member(s) who is/are involved with the caller
- Report any incidents of abusive threatening behaviour or language to your line manager

To maintain control of a call and avoid, if possible, the need to terminate the call:

- Keep calm and try to remain as objective as possible
- Do not respond with aggression
- Try not take what caller is saying personally
- Ask and keep asking for the facts
- Try to keep the tone of your voice calm and measured
- Let the caller "vent and have his/her say"
- Listen! Question and confirm what they are saying
- Remain positive and confident, do not allow the caller to take over the call
- Follow through on agreed actions
- END the call as recommended above if necessary.

See HSE Website Page: Vexatious & Unreasonable Behaviour for more resources.