

Nurse on Call Complaints Policy

Introduction

If clients are unhappy with the treatment or service they have received through Nurse on Call, they are entitled to make a complaint, have it considered, and receive a response from Nurse on Call. This procedure covers complaints made by Clients or Staff about any matter connected with the provision of primary care services by Nurse on Call.

Definition of a complaint

(Definition as per the Health Act 2004) "complaint" means a complaint made under this Part about any action of the Executive or a service provider that— (a) it is claimed, does not accord with fair or sound administrative practice, and (b) adversely affects the person by whom or on whose behalf the complaint is made;

Who can Complain?

Nurse on Call may receive a complaint made by a recipient, a former recipient or (with his/her consent) by another party on behalf of a recipient or:

- (a) The service in which Nurse On Call supply staff too
- (b) Staff registered with Nurse On Call; Nurses and HCAs

For issues in relation to Agency staff please refer too;

Document: STANDARD OPERATING PROCEDURE

Title: Grievance and Disciplinary Procedure-Agency Staff

Purpose of this document;

(a) In the interest of fairness and justice, and to ensure the proper conduct of business, certain provisions to deal with matters of grievance and discipline are necessary.

How complaints can be made

Verbal, written, email, fax. Outline if there are any complaints forms which should be used.



What is the Time Limit for Making a Complaint?

The period for making a complaint is:

(a) Twelve months from the date on which the event which is the subject of the complaint occurred;

or

(b) Twelve months from the date on which the event which is the subject of the complaint comes to the complainant's notice (provided that the complaint is made no later than 12 months after the date of the event).

Nurse on Call has the discretion to extend the time limits if the complainant has suffered particular distress that prevented them from acting sooner. However, when considering an extension to the time limit, the Manager takes into consideration the fact that the passage of time may prevent an accurate recollection of events by the nurse concerned or by the complainant. The collection of evidence, clinical guidelines or other resources relating to the time when the complaint event arose may also be difficult to establish or obtain. These factors may be considered as suitable reason for declining a time limit extension.

Complaints Handling

The Manager is responsible for the day to day operation of the complaints procedure and the investigation of complaints. The Manager is responsible for the effective overall management of the complaints procedure and for ensuring that action is taken in the light of the outcome of any investigation.

Recording of Complaints

All complaints will be recorded as well as the action taken to resolve them. Any complaint will be documented in a complaints log which is password protected and only accessible to the Manager.

Complaints may be received either verbally or in writing and must be forwarded to the Manager who must:

- (a) Acknowledge in writing to the complainant within the period of two working days, where that is not possible, as soon as reasonably practicable
- (b) Ensure the complaint is properly investigated in accordance with the Health Act 2004, and Health Act 2004 (Complaints) Regulations 2006 (S.I. 652 of 2006)



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(c) Provide a full response, unless there are exceptional circumstances, within fifteen working days. If occasionally more time is required a timescale should be agreed with the complainant. If there are unavoidable delays with an investigation the complainant must be kept informed of delays and the reasons for them.

Advocacy

All complainants have the right to appoint an advocate who, if a person is unable to make a complaint themselves can assist them in making the complaint. The Citizen Information (Comhairle 2005) defines advocacy as 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.

Complaint Resolution/Management Process

Inevitably, because of the severity of the complaint or the expectation of the complainant, most complaints may require investigation and a more formal resolution.

Complaints relating to staff skills or judgement, are likely to require a formal and full investigation leading to a meeting or written response.

Stage 1: Point of Contact Resolution

Where the formal complaint is verbal the complainant should meet with the Manager and a full verbal record made of the details of the complaint. The complainant should then be asked to sign the record and given a copy of it. The complaint will then be dealt with in the same manner as a written complaint.

Stage 2: Formal Investigation Process

Written complaints handed in or sent to a member of staff must be given to the Manager. For both oral and written complaints, the subject of the complaint needs to be reviewed. This may include looking at relevant documentation and interviewing staff involved.

A final reply, incorporating all aspects of the complaint and the comments of the individuals is then compiled by the Manager. The response should include:

- (a) An explanation of how the complaint was considered
- (b) The conclusions reached in relation to the complaint and any remedial action that will be needed
- (c) Confirmation as to whether the practice is satisfied that any action has or will be taken

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If the issues raised are very serious, the HSE will be notified in line with the National Incident Management System guidelines.

"Incident" means, as defined by the HSE Safety Incident Management Policy, an event or circumstance which could have, or did lead to unintended and/or unnecessary harm. Incidents include adverse events which result in harm; near misses which could have resulted in harm, but did not cause harm, either by chance or timely intervention; and staff or service user complaints which are associated with harm. Incidents can be clinical or non-clinical and include incidents associated with harm to:

- patients, service users, staff and visitors
- the attainment of HSE objectives
- ICT systems
- data security e.g. data protection breaches
- the environment

Stage 3: Review

Should the complainant be dissatisfied with the outcome of stage 2 A request for a review must be made within 30 days of the investigation report being sent.

Nurse on Call where possible can do their own review or link in with Management.

The complainant may also choose to go directly to the Office of the Ombudsman, Ombudsman for Children, or other professional bodies to whom the complainant could make an application for review.

The Review Officer's function is to:

- (i) To determine the appropriateness of a recommendation made by the Complaints Officer, having regard to the two elements:
 - a. All aspects of the complaint
 - b. The investigation of the complaint

And



Having determined the appropriateness of the recommendation to uphold it, vary it, or make a new recommendation if he/she considers it appropriate to do so.

Implementation of Recommendations made by Review Officers

- Within 30 working days the Accountable Officer will write to the Complainant and the Review Officer detailing recommendation.
- Where a recommendation, the implementation of which would require or cause the Executive to make a material amendment to its approved service plan, the relevant Head of Service (Accountable Officer) may amend or reject the recommendation.
- Where the recommendation is being amended or rejected or where alternative measures are being taken, the relevant Head of Service (Accountable Officer) must give the reasons for their decisions.
- The relevant Head of Service (Accountable Officer) must put an action plan in place for the implementation of the recommendations of the investigation. The action plan, persons responsible and timeframes are to be identified and recorded.

Timeframes involved once a complaint is received

Service User / Complainant Timeframes	
To make a complaint	12 months
If Complainant does not wish patient	5 working days from date of
confidential information to be accessed	Acknowledgement Letter
Withdraw complaint	At any stage
Request a review of a complaint	30 working days
Refer complaint to Ombudsman	At any stage
All staff	
Respond to request for information	10 working days
All staff at Point of Contact	
Point of Contact Resolution	Immediately / < 48 hours* – where
	possible
Point of Contact Resolution – Line	< 48 hours* – where possible
Manager	
Complaints Officer Timeframes	
Notify Complainant of decision to	5 working days
extend/not extend 12 months timeframe	
Complaints Officer (& QPS/Clinical	< 48 hours* – if appropriate
Director) Resolution	
Notification Letter to QPS/Clinical	On receipt of complaint – if appropriate
Director	
If complaint does not meet criteria for	5 working days
investigation – inform Complainant	

NURSE ON CALL

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Acknowledgment Letter	5 working days from receipt of complaint in HSE
Seeking further information	10 working days
Update Complainant and relevant staff	Every 20 working days after initial 30 day due date
Investigate and conclude (Report)	30 working days from date of Acknowledgement Letter
Conclude at latest	6 months
Review Officer Timeframes	
Notify Complainant of decision to extend/not extend 30 days timeframe	5 working days
Review Officer should make contact with Complainant & explain process	48 hours* – if appropriate
Acknowledgement Letter	5 working days from receipt of review request in HSE
If complaint does not meet criteria for review – inform Complainant	10 working days
Investigate and conclude (Report)	20 working days from date of Acknowledgement Letter
Head of Service / Accountable Officer Timeframe	
Complaint – Recommendation(s) Action Letter	30 working days
Review – Recommendations(s) Action Letter	30 working days

^{* 2} working days

Stage 4: Independent Review

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.

Matters Excluded

- (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)

Appendix 2.1

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- 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 Siochana;
- i) a matter that has been brought before any other complaints procedure established under an enactment.
- 2) Subsection (1)(i) does not prevent The Manager from dealing with a complaint that was made to the Ombudsman or the Ombudsman for Children and that is referred by him or her to a complaints officer.

Refusal to investigate or further investigate complaints.

- (1) The Manager shall not investigate a complaint if
- a. the person who made the complaint is not entitled under section 46 to do so either on the person's own behalf or on behalf of another,
- b. 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).
- (2) The Manager 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, if they are of the opinion that
- 1. the complaint does not disclose a ground of complaint provided for in section 46,
- 2. the subject-matter of the complaint is excluded by section 48,
- 3. the subject-matter of the complaint is trivial, or
- 4. the complaint is vexatious or not made in good faith,

or

- (b) is satisfied that the complaint has been resolved.
- (3) The Manager 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.



Unreasonable Complainant Behaviour

Nurse On Call will take all reasonable measures to try to resolve a complaint through the complaints procedure, the complainant does not accept these efforts. Where a complainant's behaviour could be considered abusive, unreasonable or vexatious, the organisation may consider invoking their equivalent of the HSE Policy for Dealing with Vexatious Complaints.

The complainant will be notified of their right of review to the National Advocacy Unit if they are not happy with the outcome of the complaint.

Redress

Nurse on Call take a fair approach and offers solutions to both the complainant and the service against which the complaint was made.

The redress will include the following where applicable;

Apology
An explanation
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 or law
A waiver of debt

Confidentiality

All complaints are treated in the strictest confidence. A record of all complaints and copies of all correspondence relating to complaints are logged which is password protected.

Acknowledgement

(HEALTH ACT 2004)

Acknowledgement of complaints

Upon a complaint being received by or assigned to the complaints officer (including a referral under section 48(2)), he or she shall notify, within 5 working days, the complainant, in writing, that

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the complaint has been so received or assigned and outline the steps that he or she proposes to take in investigating the complaint and the time limits for the completion of the investigation.