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## COMPLAINTS POLICY AND PROCEDURES FOR STAKEHOLDERS

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| <b>Document:</b>             | <b>Complaints Policy</b>   |
| <b>What is this?</b>         | This is the current policy on complaints for Cara House FRC.   |
| <b>CRA Code Sections:</b>    | 6.4  |
| <b>Notes:</b>                | This document is a summary of Cara House FRC operations regarding complaints.                              |
| <b>Use of Document:</b>      | Trustees of the Cara House FRC CRA Compliance  |
| <b>Date Policy Approved:</b> | This Policy was approved by the Voluntary Board of Trustees of Cara House FRC at its meeting on 26/02/2024 |
| <b>Review Date:</b>          | This Policy will be reviewed by the Voluntary Board of Trustees of Cara House FRC in June 2024             |

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## **SECTION 1. COMPLAINTS POLICY**

### **1.1. Scope**

This policy and procedure relates to both informal and formal complaints made by stakeholders of Cara House Family Resource Centre, and what steps should be followed if a complaint is made. This Complaints Policy and Procedures does not cover complaints made by staff as this is managed through the Centre's Grievance and Disciplinary Policy. This policy does not cover the reporting procedures for complaints which are a child protection and vulnerable adult concern. Any child protection and vulnerable adult concern must be raised using 2017 Children First Guidance and Mandatory Reporting.

### **1.2. Definition of a complaint?**

A complaint is when you, the stakeholder, tell us you are not happy about the service we provide. It can be about anything and could include:

- When we do not deliver a satisfactory service.
- When you receive a poor-quality service.
- When you have a problem with a member of staff, or another service user.

### **1.3. Who might make a complaint?**

- Participants of programmes / courses.
- People who come into the Centre looking for information.
- Parents of children in the Childcare Service, After Schools Programme or Youth Initiatives etc.
- People who avail of a service operating within the Centre.
- Other agencies who may operate from the Centre.
- People from the local community.
- Organisations and agencies that the Centre engage with etc.

### **1.4. Principles**

Cara House Family Resource Centre (FRC) is committed to the principles (below) when a stakeholder wishes to make a complaint.

Cara House FRC will:

- Make sure everyone in Cara House FRC treats a complaint seriously and knows what to do if a complaint is received.
- Provide a fair and easy process for anyone wishing to make a complaint.
- Publicise and raise awareness of our procedures so that people know how to make a complaint.
- Make sure confidentiality is upheld and that complaints are dealt with and investigated in a timely manner.
- Endeavour to resolve a complaint, and restore relations whenever possible.
- Learn from complaints: gather information which helps us to review and improve our service.

Cara House FRC will ensure that if a complaint is made:

- The principles of natural justice will be recognised at all stages of the complaint procedure in relation to all parties.
- That any formal complaint received into Cara House Family Resource Centre is

logged, and after investigation will be categorised as either upheld or dismissed or withdrawn.

- Volunteer Directors, both complainant and the person / group complained against, may at all stages of the procedures be advised and / or accompanied by a representative of their choice.
- The Chairperson will keep a written record of each meeting, including details of the complainant's case and any response made. All parties will be asked to sign records of any meetings and copies will be made available to everyone who attended the meeting <sup>1</sup>
- The complainant and the person / group complained against will be advised of the next stage at the end of every stage of the procedure.
- The date and time of all meetings will be agreed by all parties.
- All parties will be allowed adequate time to prepare their case.
- Every effort will be made to resolve the complaint at each stage.
- The proceedings will remain confidential to those parties involved.
- Copies of correspondence and written records relating to the complaint will be kept on file by the Chairperson (or alternate). The information will be destroyed after 12 months unless there are important reasons not to do so, in which case the complainant will be informed of the fact.

### **1.5. Responsibility for dealing with complaints**

Overall responsibility for the implementation of this policy lies with the FRC Manager, relevant other Line Managers, and the Chairperson of the Board.

If you wish to make a complaint you can contact the Project Manager or the Chairperson of the Board of Directors in any of the ways listed below:

**Telephone:** 0749123986

**Email:** coordinator@carahouse.ie

**In writing:** Cara House Family Resource Centre, Pearse road, Letterkenny, Co. Donegal, F92YA21.

### **1.6 Confidentiality**

All complaint information will be handled sensitively, telling only those who need to know / or are directly involved following all relevant data protection requirements.

### **1.7 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.

### **1.8 Refusal to investigate or further investigate a complaint**

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<sup>1</sup> Where the Chairperson is the complainant, or the person / member of the group complained against, this role will be filled by an alternate. The alternate will be a Volunteer Director agreed by the complainant and the person / group complained against.

- (1) A complaints officer shall not investigate a complaint if;
- a) 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
  - 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) A 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,
- a) is 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) 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.

## **1.9 Review of policy**

This policy will be reviewed at least annually and up-dated as required.

## **1.10 Redress**

Cara House FRC will offer forms of redress or responses that are appropriate and reasonable where it has been established that a measurable loss, detriment or disadvantage was suffered or sustained by the claimant.

Under this policy, redress may include:

- An apology
- An explanation
- A refund
- An admission of fault
- Change of decision and/or
- The correction of misleading or incorrect records.

## **1.11 Reporting to the HSE in line with signed SLA**

Cara House FRC has established a complaints procedure by agreement with the HSE, and shall in each year, at such time and in such manner as the HSE may determine, provide the HSE with a general report on the complaints received by the service provider during the previous year including-

- (a) *the total number of complaints received*
- (b) *the nature of the complaints,*
- (c) *the number of complaints resolved by:*
  - a. *formal means within the timeframe,*
  - b. *formal means outside the timeframe,*
  - c. *informal means,*

- (d) *the outcome of any investigations into the complaints.*
  - a. *Complaints upheld/partially upheld*
  - b. *Recommendations made arising from a complaint*
  - c. *Recommendations implemented arising from a complaint*
- (e) *the total number of reviews received,*
  - a. *the outcome of the reviews.*
    - i. *Number of recommendations upheld*
    - ii. *Number of recommendations varied*
    - iii. *Number of new recommendations*

In order to ensure compliance the following procedure shall be followed to allow for the smooth and efficient collection of data in relation to complaints:

- Cara House FRC shall submit a copy of their complaints policy to their relevant Consumer Affairs Area Office, for approval, who will validate the policy and link in directly with Cara House FRC if any changes/ amendments are required. The Consumer Affairs Area Office will advise Cara House FRC and the Community Health Organisation when the policy has been approved.
- Cara House FRC will submit returns on an agreed template to the National Complaints Governance and Learning Team on a quarterly basis for the periods of January-March, April-June, July-September and October-December. The deadline for the return of these templates shall be 20<sup>th</sup> April, 20<sup>th</sup> July, 20<sup>th</sup> October and 20<sup>th</sup> January respectively. Any queries arising from the templates will be followed up by the National Complaints Governance and Learning Team ([nationalcglt@hse.ie](mailto:nationalcglt@hse.ie)).

### **1.12 Unreasonable complainant behavior**

Where a complainant's behaviour could be considered abusive, unreasonable or vexatious, Cara House FRC may consider invoking their Policy for Dealing with Vexatious Complaints. A vexatious complaint would be categorised as follows:

- The claimant persist in pursuing a complaint and Cara House FRC's complaints procedure has been fully and properly implemented and exhausted.
- Persistently change the substance of a complaint or continually raise new issues or seek to prolong contact by continually raising further concerns or questions upon receipt of a response whilst the complaint is being addressed. (Care must be taken, however, not to disregard new issues which are significantly different from the original complaint as they need to be addressed as separate complaints)
- Are repeatedly unwilling to accept documented evidence given as being factual or deny receipt of adequate response in spite of correspondence specifically answering their questions or do not accept that facts can sometimes be difficult to verify when a long period of time has elapsed.
- Repeatedly do not clearly identify the precise issues which they wish to have investigated, despite reasonable efforts of Cara House FRC or persons appointed by Cara House FRC within the complaints procedure to help them specify their concerns, and/or where the concerns identified are not within the remit of Cara House FRC to investigate.

Procedure:


- Complainant will be notified in writing that Cara House FRC has responded fully to the points raised and has tried to resolve the complaint but there is nothing more to add and continuing contact on the matter will serve no useful purpose.

- The complainant should also be notified that the correspondence is at an end and that further letters received will be acknowledged but not answered.
- Inform the complainant that in extreme circumstances Cara House FRC reserves the right to pass unreasonable or vexatious complaints to its solicitors/report to Gardai. Temporarily suspend all contact with the complainant or investigation of a complaint whilst seeking legal advice.

If found to be vexatious; Cara House FRC will not pursue the complaint any further.

### 1.13 Signature

This Complaints Policy and Procedures was discussed and agreed, and adopted by the Voluntary Board of Directors at a meeting on 26/02/2024

Signed:   
Chairperson

| Revision No. | Approval Date | Document Reference and Changes Made        | Name            |
|--------------|---------------|--|-----------------|
| 1            | 14/09/2023    | Complete New Policy                        | Martina McGinty |
| 2            | 26/02/2024    | Amendments as per recommendations CH01 HSE | Martina McGinty |
|              |               |  |                 |

#### Review History:

## SECTION 2: COMPLAINT PROCEDURES

The aim of the Complaint Procedures is to facilitate a fair and quick resolution of any problem or grievance. A complaint may be about the organisation or about an individual in the organisation whose behaviour the complainant felt was inappropriate.

Cara House Family Resource Centre (“the FRC”) Complaints Procedure offers a facility to members of the public who wish to make a complaint to the FRC regarding our services or the way we conduct our business. It is the policy of the FRC to deal with all complaints in a fair manner and in accordance with the principles of natural fairness and equality.

*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.*

Anyone who wishes to make a complaint about the services or the conduct of an employee of the FRC should follow the steps outlined STAGES 1, 2 3, 4 and 5.

## **STAGE 1: Informal Complaint**

In the case of an informal complaint about the FRC, a complainant should firstly raise the complaint informally with the Chairperson of the Voluntary Board of Directors (VBODs) or the Manager responsible for the relevant area of work within the Centre who may be able to resolve the issue(s) immediately.

If the informal complaint is about an individual, Cara House FRC encourages complainants to first raise the matter with the individual concerned and seek resolution.

Staff who receive informal complaints from a service user/client will always inform their Line Manager. In the case of an external tutor or service provider, any informal complaint will also be referred to the FRC Manager.

All relevant staff will make every effort to resolve the issues as swiftly as possible where appropriate.

The informal complaint and outcomes will be written into the Complaint Record Sheet in APPENDIX 1.

Should the issue not be resolved by informal means, the complainant can then make their complaint formally in writing to the Chairperson of the FRC. See STAGE 2.

| <b>Recommendations following a complaint: Stage 1</b> |  |
|---|--|
| <b>How</b>  | Verbally                                 |
| <b>Where to</b>                                       | Individual concerned and Project Manager |
| <b>Service Learning &amp; Improvement</b>             | Review of stage 1 and it's adequacy      |

## **STAGE 2: Formal Complaint**

The complainant should detail the complaint and provide any relevant documentation to support the complaint.

The Manager will use the Complaints Record Form attached to this document in APPENDIX 1 to further document the issues and will:

- Write down the facts;
- Take complainants name, address and telephone number;
- Note down the relationship of the complainant to the Centre;
- Explain to the complainant the Formal Complaints Process;
- Explain that the written record of the complaint must be sent to the appropriate staff / member of Voluntary Board Of Directors (VBODs) as part of any discussion or investigation of the complaint and they will be given a fair opportunity to respond.

The Chairperson will acknowledge the complaint, in writing, within 5 working days.



The VBODs will do their best to resolve the matter as soon as possible and, in any event, within 30 working days, and can be extended ensuring to notify the complainant. The Manager and Chairperson will ensure the complaint is investigated and take appropriate action.

If the complaint or grievance is against the Chairperson, the matter can be brought to the attention of an Officer of the VBODs who will acknowledge the complaint, in writing, within 5 working days and strive to resolve the issue within 30 working days. If this is not possible to issue a reply due to, for example, an investigation not fully completed, a progress report should be sent with an indication of when a full reply will be given.

Whether the complaint is justified or not, the reply to the complainant will describe:

- The action taken to investigate the complaint
- The conclusions from the investigation
- Any action taken because of the complaint.

If the complaint has not been resolved to the satisfaction of the complainant through the efforts of the VBODs and Project Manager in STAGE 2, the complainant has the right to review—STAGE 3.

| <b>Recommendations following a complaint: Stage 2</b> |  |
|---|--|
| <b>How</b>  | Detail complaint in writing and provide any relevant documentation |
| <b>Where to</b>                                       | Project Manager  |
| <b>Service Learning &amp; Improvement</b>             | Review of stage 2 and it's adequacy                                |

### **STAGE 3: Internal Review**

If the matter is not resolved at Stage 2, and the complainant wishes a review, they must send a request in writing to the Chairperson (or Officer of the Voluntary Board Of Directors if the complaint concerns the Chairperson) within 5 working days.

If a complainant formally requests an review, this will be acknowledged in writing by the VBODs within 5 working days—this acknowledgement includes receipt of the request along with notice that a review will be undertaken.

The Voluntary Board of Directors (VBODs) will establish an independent sub-group (which does not involve anybody involved in the initial investigation) to review the complaint, actions taken in response, and any decisions made in relation to the complaint.

The sub-group concerned will:

- Decide how the complaint should be handled
- Seek support and advice to address the complaint, if necessary
- Make sure the complaint is dealt with in confidence
- Make sure a decision following a review of the complaint is issued to the complainant within 20 working days, which can be extended ensuring to notify the complainant of

the letter of acknowledgement.

As an organisation, Cara House FRC aims to be a model of best practice in relation to how it operates and conducts its business.

The VBODs will work to address the complaint. This may involve participating in training, developing appropriate Terms of Reference, participating in a facilitated discussion and / or adopting and implementing appropriate policies and procedures to ensure best practice.

| <b>Recommendations following a complaint: Stage 3</b> |                                     |
|---|-------------------------------------|
| <b>How</b>  | Request in writing for a review     |
| <b>Where to</b>                                       | Chairperson                         |
| <b>Service Learning &amp; Improvement</b>             | Review of stage 3 and it's adequacy |

#### **STAGE 4: External Review – Ombudsman**

If the complainant is not satisfied with the outcome of the complaints management process in stage 3 the complainant may seek a review of the complaint by the Ombudsman or Ombudsman for Children. The complainant must be informed of their right to seek an independent review from the Ombudsman or Ombudsman for Children at any stage of the complaint management process. All requests for reviews may be addressed to the Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773 or Ombudsman for Children's Office Millennium House, First Floor, 52-56 Great Strand Street, Dublin 1, DO1 F5P8.

| <b>Recommendations following a complaint: Stage 4</b> |   |
|---|---|
| <b>How</b>  | In writing  |
| <b>Where to</b>                                       | Ombudsman or Ombudsman for Children   |
| <b>Service Learning &amp; Improvement</b>             | Reflection of all stages 1 to 3 within the policy, for rigidity and effectiveness |

#### **STAGE 5: Alternative options for resolution**

##### **5.1 Mediation:**

If the matter is not resolved at Stage 4, then the VBODs will provide the option of an external mediator.

##### **5.2 Arbitration:**

If the matter is still not resolved at Mediation, the VBODs will appoint an External Arbitrator to do an investigation and make recommendations on how best to progress. Terms of Reference will be drawn up for the investigation. On completion of the investigation, and based on the recommendations of the Arbitrator, the VBODs will then conclude that:

1. There has been a breach of the FRC's Code of Conduct(s) and that formal disciplinary action will be taken;

2. There has been a breach of the FRC's Code of Conduct(s), but of a minor nature and that no formal disciplinary action will be taken. The member of the project may be asked to take corrective action to effect improvement in practice in a specific way, within a specific time frame.
3. There is no evidence of a breach and that the complaint should not be taken any further.

The Chairperson will write to both the complainant, and the person complained against, and inform them of the decision.

| <b>Recommendations following a complaint: Stage 5</b> |   |
|---|---|
| <b>How</b>  | Mediation and/or Arbitration  |
| <b>Where to</b>                                       | Manager and/or Chairperson  |
| <b>Service Learning &amp; Improvement</b>             | Begin a reflection of all stages of the complaints policy and implementation of future recommendations. |

## APPENDIX 1: Complaints Record Form

| COMPLAINTS RECORD FORM   |  |
|--|--|
| <b>NAME OF PERSON<br/>COMPLAINING:</b>   |  |
| <b>RELATIONSHIP WITH THE<br/>FRC:</b>  |  |
| <b>ADDRESS :</b>   |  |
| <b>TELEPHONE:</b>  |  |
| <b>MOBILE No:</b>  |  |
| <b>EMAIL:</b>  |  |
| <b>DATE OF COMPLAINT:</b>  |  |
| <b>Describe in detail the nature and facts of the complaint. Be as accurate as possible.</b> |  |
| <b>SIGNATURE OF<br/>COMPLAINANT:</b>   |  |
| <b>DATE:</b>   |  |
| <b>COMPLAINT RECORDED BY:</b>  |  |
| <b>DATE:</b>   |  |

## APPENDIX 2: Tips for handling verbal complaints

When handling complaints relevant parties will make every effort to:

- Remain calm and respectful throughout the conversation
- Listen. Allow the person to talk about the complaint in their own words
- Make every effort not to debate the facts in the first instance, especially if the person is angry or upset
- Ask for clarification wherever necessary
- Show that they have understood the complaint by reading back to the complainant what you have noted down
- Always seek explicit consent that is “freely given, specific, informed and an unambiguous indication of the data subject's wishes by which they, by statement or by a clear affirmative action, signifies agreement to the processing of personal data relating to themselves” (GDPR) if you must record any necessary details that is personal or sensitive data
- Acknowledge the person's feelings. For example, "I understand that this situation is frustrating for you"
- Ask the person what they would like done to resolve the issue
- Be clear about what can be done, how long it will take and what it will involve
- Give clear and valid reasons why requests cannot be met
- Do not promise things that cannot be delivered
- Make sure that the person understands what they have been told
- Wherever appropriate, inform the person about the available avenues of review.

### APPENDIX 3:

#### Overview of FRC Policies and Procedures for Grievances, Complaints and Concerns

|  |  |
|--|--|
| <b>Employees<br/>Hosted<br/>Employees</b>                  | <ul style="list-style-type: none"><li>• Grievance Procedures</li><li>• Protected Disclosure a.k.a 'Whistleblowing' Policy</li><li>• Employees/Students/Scheme Participants Hosted by the FRC</li></ul>   |
| <b>Volunteers and<br/>Groups</b>                           | <ul style="list-style-type: none"><li>• Complaints Policy</li><li>• (Volunteers) Protected Disclosures</li><li>• Volunteer Policy</li><li>• Code of Conduct and Conflicts of Interest Policy</li></ul>   |
| <b>FRC Service<br/>Users</b>                               | <ul style="list-style-type: none"><li>• Complaints Policy</li><li>• Groups Using the Centre Policy</li><li>• Children First and Vulnerable Adults Policy</li><li>• Data Protection Policy (including Data Breach and Subject Access Request)</li></ul> |
| <b>Childcare<br/>Facility</b>                              | <ul style="list-style-type: none"><li>• Childcare Centre Complaints Policy</li><li>• Children First and Mandatory Reporting</li></ul>  |
| <b>Child Protection<br/>/ Vulnerable<br/>Adult Concern</b> | <ul style="list-style-type: none"><li>• Children Protection Policy (Children First Guidelines and Mandatory Reporting)</li><li>• Designated Liason Person / Tusla Social Work</li></ul>  |

