

# ST AIDAN'S DAY CARE CENTRE LTD

## QUALITY POLICY STATEMENT

QP-01

### Title: COMMENTS, SUGGESTIONS AND COMPLAINTS

#### 1.0 General Policy

- 1.1 It is our policy that all comments, suggestions and complaints are dealt with quickly and effectively.
- 1.2 We shall make every effort to provide the best possible service. However, there may be occasions when people are not happy with the service.
- 1.3 We recognise the right of all residents, relatives, representatives and members of staff to inform us of any problems or complaints they may have.
- 1.4 We are always looking to improve our services. All comments, suggestions or complaints regardless of how small they may appear will be treated seriously and used to improve the service offered.
- 1.5 It is our policy that a nominated Director on the St. Aidan's Board of Directors will oversee the role of the Complaints Officer to ensure that all complaints are appropriately responded to and a record of all complaints are maintained.

#### 2.0 Principals and goals

- 2.1 We are committed to the six principals of good practice in the management of complaints, as identified by the Health Services Ombudsman:
  - Getting it right
  - Being customer focused
  - Being open and accountable
  - Acting fairly and proportionately
  - Putting things right
  - Seeking continuous improvement
- 2.2 The goals of our complaints procedure are to:
  - take a flexible approach towards handling individual complaints which focuses on the needs and wishes of the people involved.
  - keep the procedure simple so that it is much easier for people to share experiences and for service to respond
  - make sure that people's experiences help to improve services.

#### 3.0 Making a Complaint

- 3.1 Complaints should be made within 12 months of the incident happening or of the person becoming aware of the incident, and can be made to the local authority social care commissioner or the provider of the service.

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3.2 The member of staff who has been designated to manage complaints in the home is:  
.....(Name and position).

**4.0 Timeframes for responding to complaints** (refer to flowchart in SD-16 Comments Suggestions and Complaints)

4.1 **Verbal complaints** made to any staff member. Immediately or within 24 hours.

4.2 **Formal written complaint** Acknowledge within 5 working days from receipt of complaint.  
Investigate within 30 working days or communicate progress within 30 working days, with updates every 20 working days.

**5.0 Complaints Review**

5.1 Where a complainant seeks a review of the complaint within 20 working days of the final report into their formal written complaint that has been signed and dated. The review should be concluded within 20 working days of receipt of the request for review or progress report within 20 working days with updates 20 working days thereafter.

**6.0 Arriving at an acceptable resolution to the complaint**

6.1 Every effort will be made by the complaints manager to assist the complainant with the complaints procedure and by our service to rectify and learn from the complaint.

6.2 On completion of the investigation, the complaints manager will make arrangements to discuss with the complainant the outcome of the investigation: how it has been resolved, what actions were taken or are to be taken and will remind of the right to take the complaint to the Health Board.

6.3 If the home cannot rectify the complaint to the complainant's satisfaction, the complainant may at any stage contact the Health Information Quality Authority at the following address:

Office of the Ombudsman  
18 Lower Leeson Street  
Dublin 2

Office of the Ombudsman for Children  
Millennium House  
52-56 Great Strand Street  
Dublin 1

**NATIONAL STANDARDS FOR RESIDENTIAL SERVICES FOR CHILDREN AND ADULTS WITH DISABILITIES** – This policy addresses:

Theme 5: Leadership Governance and Management    Standard 5.2    Feature 5.2.15