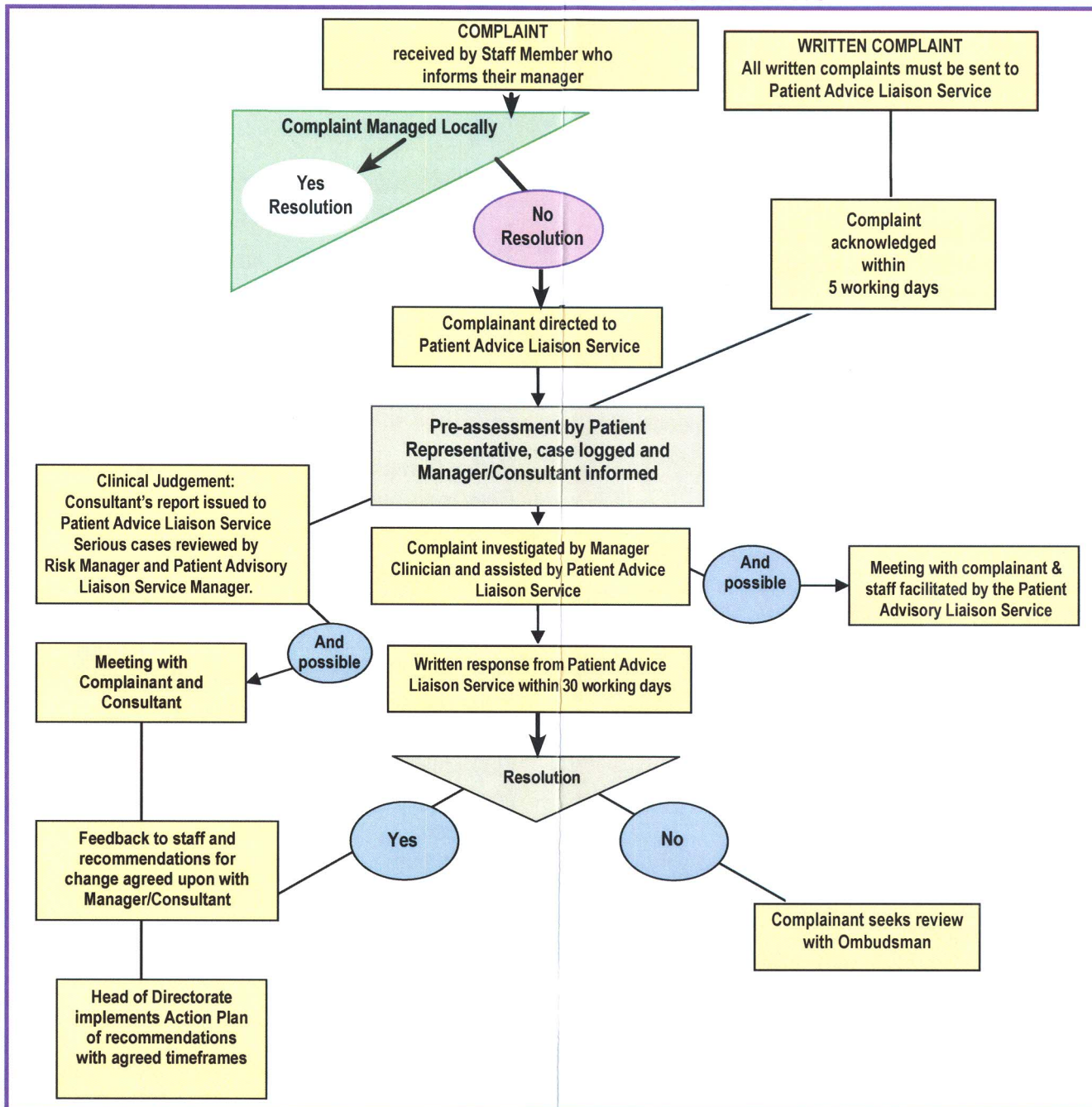


GUIDE TO MANAGEMENT OF COMPLAINTS



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PALS

Patient Advisory Liaison Service

(Formerly Patient Representative Department)



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Patient Representative Department

Policy and Procedures on the Management of Complaints

UPDATED JAN 2016

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AIM

It is always our aim to resolve issues identified by our patients at local level. Therefore we value such matters being raised with staff at the time. We understand that despite best efforts issues may not always be resolved locally. The aim of this leaflet is to provide information on how your complaint is managed in the hospital if it is unresolved with the local manager.

POLICY STATEMENT

It is the policy of the hospital to invite comments and feedback from patients, relatives and service users and to use this information to gauge the quality of our services. Beaumont Hospital is committed to providing a high standard of care to our patients and feedback plays a vital part in understanding patients' needs and improving overall quality.

COMPLAINTS

We recognise that from time to time you may feel dissatisfied with a service provided or with a decision that affects you. You have the right to complain about any aspect of the hospital services, to have the complaint investigated and be informed of the outcome. However, we ask that you raise such issues as soon as possible with the manager of the service.

NATIONAL HEALTHCARE CHARTER *You and Your Health Service, HSE 2012*

This Charter is a statement of commitment outlining what your rights are, what you can expect and what you can do to help when you use the Health Services in Ireland. Further information is available from www.hse.ie

GENERAL PRINCIPLES

- Details on the management of complaints will be well publicised, written in plain language and be accessible to patients and complainants.
- Patients and families will be made aware of their right to complain, the process of doing so and the timeframe for issuing a response.
- Unresolved complaints at local level will be referred on to the Patient Advisory Liaison Service for investigation.
- Complainants will be requested to detail their concerns in writing to the Patient Advisory Liaison Service.
- Special attention will be paid to the needs of vulnerable people needing support and assistance in making a complaint
- Confidentiality will be maintained at all times.
- Consent will be required in the case of a person making a complaint on behalf of another adult.
- A fair, full and impartial investigation will be provided without any penalty in respect of quality of service to the patient.
- Every effort will be made to ensure a speedy resolution within predetermined time limits.
- Following the investigation of the complaint recommendations for the improvement of services will be made, if appropriate.
- The complainant and the service provider will have an equal voice and are of equal importance in the complaints process.
- Anonymous complaints will not be investigated.

The Hospital's Complaints Procedure is without prejudice to your statutory rights to complain elsewhere.

TIME FRAME

Complaints should be made as soon as possible after the event and complaints will be investigated that are:

- Made within 12 months or
- Made within 12 months of the complainant realising that they have cause for complaint.

The designated Patient Advisory Liaison Service Manager may extend the time limit for making a complaint if it is of her/his opinion that special circumstances make it appropriate to do so.

OPERATIONAL PROCEDURE

Verbal Complaints

Complaints may be made to any member of staff and will be dealt with, where possible, at local level.

Written Complaints

All written complaints will be acknowledged in five (5) working days.

All issues of the complaint should be clearly outlined at the outset.

Complainants will receive a full response within thirty (30) working days. Where this is not possible the complainant will be contacted or an interim letter will be issued.

Complainants may be invited to meet with representatives of staff in an effort to answer the concerns set out in the complaint. Issues of concern must be outlined in writing prior to the meeting.

INDEPENDENT REVIEW

Complainants who are dissatisfied with the outcome of the investigation into their complaint may seek an independent review by the Office of the Ombudsman.