



<b>TITLE:</b> Resident Feedback and Complaints	<b>REFERENCE NO:</b> CS-026
<b>AUTHOR:</b> Rose Collins, Director of Nursing	<b>REVISION NO:</b> 07
<b>APPROVED BY:</b> Stephen Murphy, General Manager Rose Collins, Director of Nursing	<b>EFFECTIVE FROM:</b> 1 <sup>st</sup> Dec 2018
<b>REVIEW DATE:</b> 1 <sup>st</sup> Dec 2020	<b>Page 1 of 5</b>

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**DEPARTMENT:** All Departments

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## **1.0 Policy**

Cahercalla Community Hospital and Hospice shall actively seek out resident feedback to assist in the ongoing improvement of the care and service provided. Cahercalla Community Hospital and Hospice are committed to dealing with all complaints in as efficient a manner as possible.

## **2.0 Responsibility**

- 2.1** All Staff – Actively seek client feedback. Respond immediately to resident's complaints.
- 2.2** Director of Nursing – Deal with complaints and maintain a record of all complaints received detailing the investigation and outcome of the complaint and whether or not the resident was satisfied with the outcome.
- 2.3** Department Managers – Communication of feedback/complaints with staff
- 2.4** Quality & Safety Committee – Review feedback data
- 2.5** General Manager – Review all complaints on a regular basis
- 2.6** Chairperson of the Board of Directors – conduct independent appeal

## **3.0 Definitions**

**Complaint:** An unsatisfactory experience identified, however made, about the standard of service, action or lack of action by the hospital staff affecting a resident/relative.

## **Procedure**

### **4.1 Proactive – Resident Feedback Forms (Long term and Short term)**

- 4.1.1** Resident Feedback Forms and Comment Cards shall be provided to all long term and short term residents of Cahercalla Community Hospital and Hospital.
- 4.1.2** The Resident Feedback Form (CS-026F) shall evaluate various aspects of the care and service provided in Cahercalla Community Hospital and Hospital, including, but not limited to, information provided, care received, catering and daily living activities. The form may be returned anonymously or signed.
- 4.1.3** Long term residents, or their representatives, shall receive Resident Feedback Forms annually. The Forms will be distributed by the Ward Manager.



- 4.1.4 Short term clients, or their representatives, are issued the Feedback Form by the Ward Manager as part of the discharge process. Comment Cards along with collection boxes and information regarding collation of feedback are available within the hospital.
- 4.1.5 Residents shall be informed that all completed Resident Feedback Forms and Comment Cards may be returned to the designated collection points either in the wards or at reception. The collection points shall be locked boxes to maintain confidentiality.
- 4.1.6 Where the Director of Nursing identifies feedback from a questionnaire as significantly negative this shall be identified as a complaint and addressed as per Section 6.0 below.
- 4.1.7 A report of all feedback obtained shall be presented to the Quality & Safety Committee. Resultant quality improvement plans will be agreed and progress reviewed at subsequent Quality & Safety Committee meetings.
- 4.1.8 Department Managers are responsible for communicating feedback to the staff through Multidisciplinary Team Meetings.

## 4.2 Proactive - Residents forum

- 4.2.1 In an effort to communicate better with the resident and their families a resident's forum is in operation at Cahercalla Community Hospital & Hospice. This is co-ordinated by the activities co-ordinator.
- 4.2.2 The forum is held in each ward at a minimum every 6 months and residents and their families are invited to attend.
- 4.2.3 The forum is co-ordinated by a resident and/or resident representative who has volunteered to represent the ward and with the assistance of the activities co-ordinator. The representative will take notes on the meeting. All feedback given will be treated with confidence and the identity of residents and their families will not be identified by the representative when relaying feedback.
- 4.2.4 Discussions at the meeting are relayed by the activities co-ordinator in a meeting with the Director of Nursing and General Manager – an action plan and a response is agreed and forwarded to the forum representative.
- 4.2.5 The management of Cahercalla Community Hospital & Hospice will be responsible for relaying the feedback to the Quality & Safety Committee and the MDT meetings. Action plans will be agreed.

## 5.0 Reactive - Complaints

- 5.1 Where a member of staff receives a verbal complaint from a resident they shall attempt to deal with it immediately in a calm, caring and concerned way. If the member of staff concerned cannot deal with the problem he or she should



request that the Ward Manager speak to the resident. Where the verbal complaint remains unresolved at this level the complainant should be advised of the situation and given the option to make a written complaint.

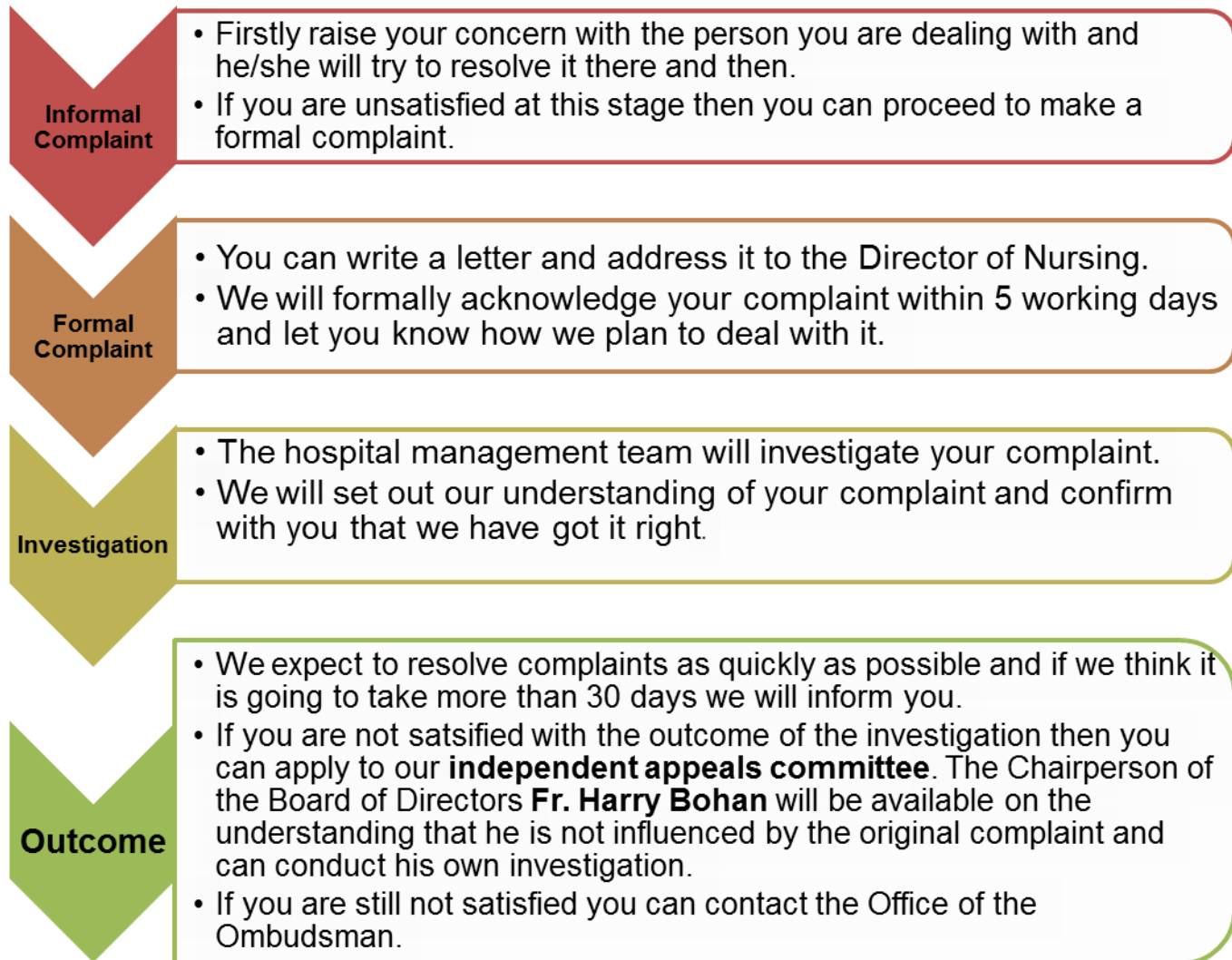
- 5.2 The details of the verbal complaint including the action taken to resolve the complaint shall be recorded in the Complaints Form (CS-026) by the person receiving the complaint.
- 5.3 The Director of Nursing shall investigate the nature of the complaint, determine the necessary corrective and preventative actions and document these actions within the Complaints form. The actions and their implementation shall be communicated with the complainant.
- 5.4 If the complainant is not satisfied with the outcome an Independent Appeals Process will be available to them. The Chairperson of the Board of Directors, Fr. Harry Bohan will be available on the understanding that he is not influenced by the original complaint and can conduct his own investigation. He can be contacted by phone on (086) 8223362.
- 5.5 A report of all complaints shall be presented to the Quality & Safety Committee. All complaints shall be reviewed on a monthly basis by the General Manager to ensure that all complaints are appropriately responded to and that the appropriate records are maintained including the details of the investigation undertaken, the outcome of the complaint and whether or not the complainant was satisfied with the outcome. The Department Managers shall communicate recommendations and corrective actions resulting from complaints to staff through Multi-Disciplinary Team Meetings.
- 5.6 In addition the General Manager and the Director of Nursing will audit the complaints and the complaints procedure on a quarterly basis. The following categories will be used to trend and track complaints and develop appropriate action plans:

<b>CATEGORY</b>	<b>EXAMPLE</b>
<b>Staff</b>	Conduct, attitude, approach, staffing levels etc.
<b>Facilities</b>	Room temperatures, TV, lighting, dining, leisure, seating etc.
<b>Services</b>	Activities, catering, hairdressing, chiropody, physiotherapy etc.
<b>Care</b>	Personal care to residents e.g. hygiene, dressing, medical, nursing, caring etc.

## How to Make a Complaint

Here at Cahercalla Community Hospital and Hospice we are committed to dealing effectively with any complaints you may have about our service.

If we have gotten something wrong we will apologise and try to put it right. We aim to learn from mistakes and use this learning to make our service better.



The Office of the Ombudsman	Director of Nursing	Fr. Harry Bohan
18 Lower Leeson Street, Dublin 2. <b>Phone:</b> LoCall 1890 22 30 30 or (01) 6395600 <b>Email:</b> <a href="mailto:ombudsman@ombudsman.gov.ie">ombudsman@ombudsman.gov.ie</a> Or online at: <a href="http://www.ombudsman.gov.ie">www.ombudsman.gov.ie</a>	Rose Collins  <b>Phone:</b> 065 6824388  <b>Email:</b> <a href="mailto:rosecollins@cahercalla.ie">rosecollins@cahercalla.ie</a>	   <b>Phone:</b> 086 8223362