



FEEDBACK, COMPLIMENTS, AND COMPLAINTS POLICY

April 2023

Revision History

Revision	Date of Release	Purpose
Initial Draft	January 2013	Initial Release
Version 2.0	April 2023	Updated for GDPR and Complaints Management Procedure for Voluntary Orgs issued by the HSE, Jan 2021, v9

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Policy Statement

Outhouse CLG (hereinafter referred to as the "Organisation") feedback, compliments, and complaint handling policy and associated procedures have been created to meet general standards and requirements and complies with standard complaint handling procedures, including;

- A. the Children First: National Guidelines for the Protection and Welfare of Children
- B. Your Service Your Say – Complaints Management Procedures for Voluntary Organisations (v9) funded under s38 or 39 of the Health Act 2004
- C. The Data Protection Acts and the EU's General Data Protection Regulation (GDPR)
- D. The Charities Governance Code issued by the Charities Regulator
- E. The Fundraising Guidelines issued by the Charities Regulator

This policy aims to ensure that all feedback, compliments, and complaints, either written or verbal, are handled in a consistent and regulated manner and that further complaint incidents are mitigated and where possible, prevented. Where a stakeholder has cause to complain, the complaints handling procedure will be followed in every instance, and a record will be made of the complaint nature and details to help improve our services and reduce the occurrence of similar complaints.

Purpose

The organisation is committed to delivering a fair, open, and clear process for feedback, compliments, and complaints and ensuring a satisfactory outcome for all stakeholders who raise a complaint. We provide thorough staff and volunteer training in our internal complaint-handling procedures and support our staff and volunteers in handling complaint situations in a face-to-face, written and/or telephone environment.

This policy sets out our intent and objectives for how we handle complaints, from offering a clear and approachable system for individuals to complain to conducting root cause analysis on all complaints received to identify the cause, issues and corrective actions regarding the complaint and to implement measures to prevent reoccurrences where applicable.

Scope

This policy applies to all team members in the organisation (meaning permanent, fixed term, and temporary staff, any third-party representatives or sub-contractors, agency workers, volunteers, trustees, interns, and agents engaged with the organisation in Ireland or overseas). Adherence to this policy is mandatory, and non-compliance could lead to disciplinary action, including dismissal.

Objectives

The organisation's objectives are laid out below regarding complaint handling. For the purposes of this policy, a complaint is defined as any contact whereby a negative communication or outcome has occurred. The complainant does not have to address their communication as an official complaint formally or request a response for the organisation to treat the incident as a complaint and to follow the related procedures.

The organisation's objectives for internal complaint handling are:

- To provide a fair complaints procedure which is clear and easy to use for anyone wishing to make a complaint
- To ensure that our complaints procedure is fully accessible so that people know how to contact us to make a complaint
- To make sure everyone at the organisation knows what to do if a complaint is received
- To make sure all complaints are investigated fairly and in a timely way
- To gather information which helps us to improve what we do and how we do it
- To ensure that the Data Protection Team is involved in any complaints relating to personal data
- To ensure that the Designated Liaison Person for Child Protection and Safeguarding is involved in any complaints relating to safeguarding and child protection

The organisation's objectives for the complaint handling process are:

- Complaints will be investigated and responded to within 8 weeks from the initial contact
- If a full response cannot be given within 8 weeks (e.g. when a matter is very complex or where consultation with a third party is

necessary), complainants will be informed of the status of the complaint within 8 weeks and provided with a status update weekly thereafter

- Complainants will be sent a copy of the formal complaint's procedure along with any relevant or mandatory consumer leaflet
- Complaint responses will always be provided in writing (unless the complainant makes a specific request for an alternate form of communication, which will be provided in addition to the written format)
- Complaint procedures and forms will be available via the organisation's website as well as upon written and/or verbal request
- All complaints will be investigated by a trained member of staff and a full outcome summary provided to Senior Management Team
- Complaint records will be used to revise organisational procedures and to improve communication and organisational practices where applicable
- Complainants are advised of their rights and provided with any relevant right to refer/lodge/ or appeal the complaint and the applicable contact details for the relevant bodies

Compliments

The organisation recognises that compliments about positive experiences stakeholders have when interacting with our organisation are valuable measures of success. All compliments should be recorded on the register so that good practices can be highlighted and shared across the organisation to improve the quality of our services.

Procedures and Guidelines

Definition of a Complaint

As per the Health Act 2004, a 'complaint' means a complaint made under this law about any action of the HSE or a service provider (Outhouse) 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 Make a Complaint?

Any person who is being or was provided with a health or personal social service by the organisation or has sought such a service may complain.

Any person who has been a donor or contributor to the organisation may complain.

Any person who has participated in or sought to participate in any of the organisation's activities, training programs or volunteer opportunities may complain.

How to Make a Complaint

Individuals who request the organisation's complaint handling procedure will be provided with a copy of the procedure and form either by email, in a .pdf format or in the post, and will be asked to raise their complaint in writing as soon as possible after the incident.

NOTE: Complaints are to be raised in writing. However, verbal complaints will be accepted and dealt with per the same procedures.

If an individual telephone's the organisation and wishes to raise a complaint, they should be passed through to the Complaints Officer, who will try to resolve the complaint then and there.

Even if the complaint is resolved at the time, the complainant must still be offered the option of receiving the complaints handling procedure and form before ending the call.

Acknowledgements

Per the requirements of the Health Act 2004, upon a complaint being received by or assigned to the complaints officer (including a referral under section 48(2) of the Act), they shall notify, within five working days, the complainant, in writing, that 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.

Advocacy

All complaints have the right to appoint an advocate who can assist them in making the complaint if a person is unable to make a complaint themselves. The Citizen Information (Comhairle 2005) defines advocacy as empowering people by supporting them to assert their views and claim their entitlements and, where necessary, representing and negotiating on their behalf.

Complainants who wish to have the support of an advocate and wish to have us deal with or correspond with an advocate must appoint them in

writing and give free, informed, and explicit consent for us to correspond with them regarding their matters. We cannot share your personal information with an advocate who has not been appointed in writing. This is to protect your privacy under the GDPR.

The Stages of the Complaints Management Process

Stage 1: Point of Contact Resolution

The organisation takes every opportunity to resolve complaints at the first initial point of contact where feasible and possible. Informal resolution is always attempted where the issues raised are straightforward and potentially easily resolved, requiring little or no investigation. Most face-to-face and telephone issues can be resolved in this manner. However, the complainant is always offered the option of making the complaint formal if the resolution is not to their satisfaction.

Frontline staff are trained to deal with basic issues and informal complaint resolution and know their obligations and the subsequent reporting lines. Such employees and volunteers are equipped to attempt to resolve a complaint relevant to their area of service or expertise wherever possible.

Stage 2: Formal Investigation Process

Unresolved complaints at Stage 1 may need to be referred to a Complaints Officer. More serious or complex matters may need to be addressed immediately under Stage 2. There may be a need for investigation and action(s) as appropriate.

The Complaints Officer must consider whether it would be practicable, having regard to the nature and the circumstance of the complaint, to seek the consent of the complainant and any other person to whom the complaint relates to finding an informal resolution of the complaint by the parties concerned.

Where informal resolution was not successful or was deemed inappropriate, the Complaints Officer will initiate a formal investigation of the complaint.

The Complaints Officer is responsible for carrying out the formal investigation of the complaint at Stage 2 but may draw on appropriate expertise, skills etc., as required. All correspondence will be dealt with in confidence. Staff have an obligation to participate and support the investigation of any complaint where requested.

At the end of the investigation and within 8 weeks of receiving the complaint, the Complaints Officer must write a report of their investigation and give a copy of the report to the complainant, to the

manager of the relevant service (Accountable Officer) and / or staff member that was the subject of the complaint.

The final report will include any recommendations needed to resolve the matter. The complaints officer will invite everyone involved to contact them with questions about any issues and will advise the complainant of their right to a review of the recommendations made by the complaints officer.

Where the investigation at Stage 2 fails to resolve the complaint, the complainant may seek a review of their complaint from the Review at Stage 3, or the complainant may seek an independent review of their complaint from, for example, the Ombudsman/Ombudsman for Children.

Implementation of Recommendations made by Complaints Officers

- Within 30 working days the relevant Head of Service (Accountable Officer) will write to the Complainant and Complaints Officer detailing their Recommendation Action Plan.
- Where a recommendation is made, the implementation of which would require or cause the organisation to make a material amendment to its approved operational 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.
- Where a Complainant has requested a review of the outcome of the investigation, the relevant Head of Service (Accountable Officer) will suspend the implementation of a recommendation and will notify the Complainant of this suspension.
- If, after a period of time, recommendations made are not implemented, and the Complainant is dissatisfied, they should be advised to contact the relevant [Community Health Organisation, Chief Officer](#).
- Where no Recommendation Action Plan is forthcoming from the relevant Head of Service (Accountable Officer), the Complaints Officer must follow up.

Stage 3: Review

If the complainant is dissatisfied with the outcome of the complaint investigation at Stage 2, a request for a review can be made. This request must be made within 20 days of the investigation report being sent.

Clear details as to whom a complainant may apply to for a complaint review should be outlined within the complaint letter being sent out by the Complaints Officer. The individual appointed will hereinafter be referred to as the Review Officer.

Small agencies that do not have the capacity to undertake their own reviews should link in with their [local HSE Complaints Manager](#) to identify an appropriate person to assist.

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:

- A. 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
- B. 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

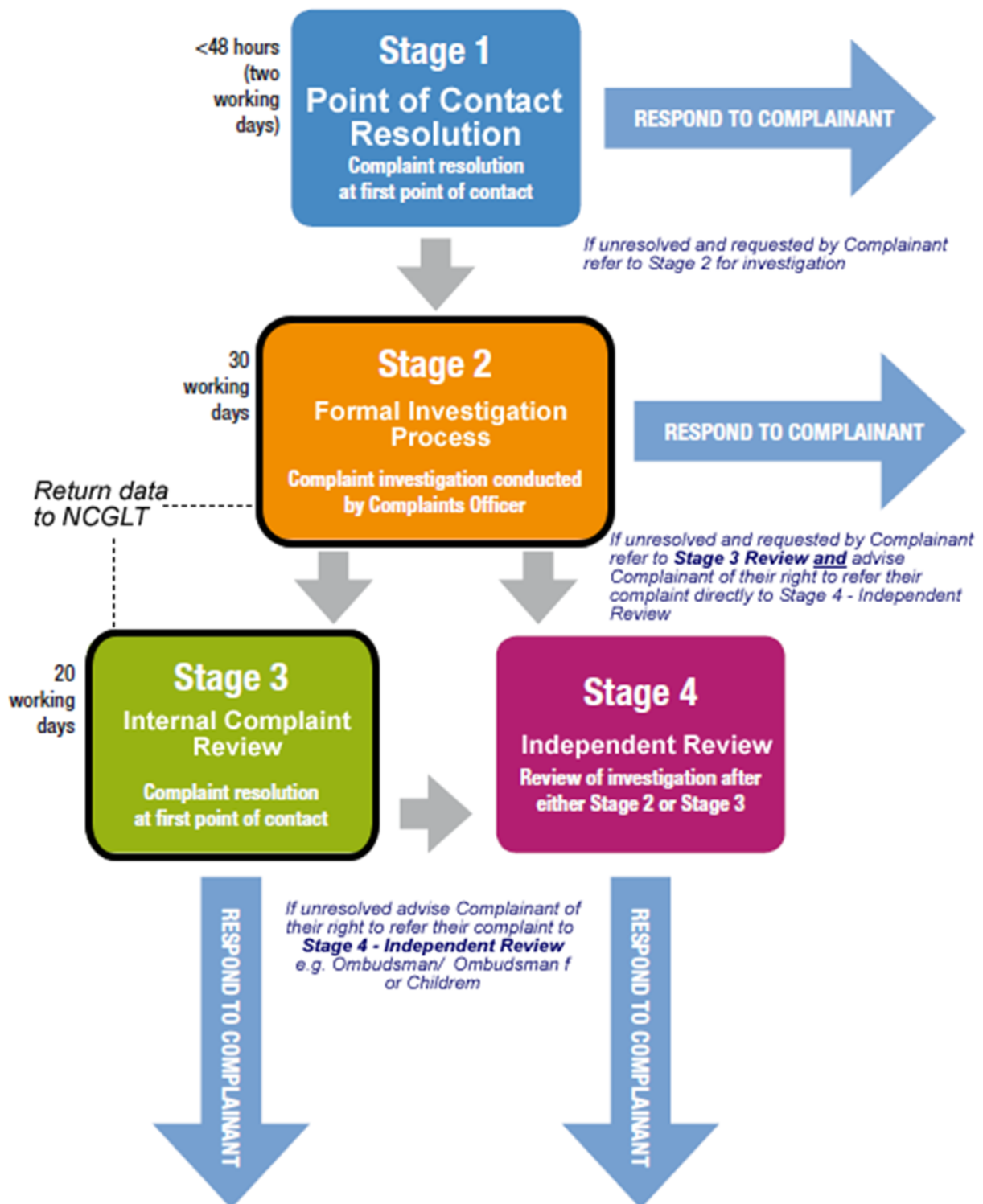
- Within 20 working days the Accountable Officer will write to the Complainant and the Review Officer detailing recommendation.
- Where a recommendation, the implementation of which would require or cause the organisation to make a material amendment to its approved operational plan, the relevant Head 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, responsible persons, and timeframes will be identified and recorded.

Stage 4: Independent Review

If the complainant is not satisfied with the outcome of the complaints management process, they may seek a review of the complaint by the Ombudsman/ Ombudsman for Children.

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.

Process Flow Chart



Managing Complaints

Timeframes Involved Once a Complaint is Received

Service User / Complainant Timeframes	
To make a complaint	12 months
If Complainant does not wish personal confidential information to be accessed	5 working days from date of 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 Manager	< 48 hours – where possible
Complaints Officer Timeframes	
Notify Complainant of decision to extend/not extend 12 months timeframe	5 working days
If complaint does not meet criteria for investigation – inform Complainant	5 working days
Acknowledgment Letter	5 working days from receipt of complaint
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
If complaint does not meet criteria for review – inform Complainant	5 working days
Seeking further information	10 working days
Update Complainant and relevant staff	Every 20 working days after initial 20 day due date
Investigate and conclude (Report)	20 working days from date of Acknowledgement Letter
Head of Service / Accountable Officer Timeframes	
Complaint – Recommendation(s) Action Letter	30 working days
Review – Recommendations(s) Action Letter	30 working days

Time Limits for Making a Complaint

The Complaints Officer must determine if the complaint meets the time frames as set out in Section 47, Part 9 of the Health Act 2004 which requires that:

- 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

A Complaints Officer may extend the time limit for making a complaint if in the opinion of the Complaints Officer special circumstances make it appropriate to do so. These special circumstances include but are not exclusive to the following:

- If the complainant is ill or bereaved

- If new relevant, significant, and verifiable information relating to the action becomes available to the complainant
- If it is considered in the public interest to investigate the complaint
- If the complaint concerns an issue of such seriousness that it cannot be ignored
- Diminished capacity of the complainant at the time of the experience, e.g. mental health, critical/ long-term illness.
- Where extensive support was required to make the complaint, and this took longer than 12 months

A Complaints Officer must notify the complainant of the decision to extend / not extend time limits within 5 working days.

Principles Governing the Investigation Process

The investigation will be conducted thoroughly and objectively with due respect for the complainant's rights and the rights of the staff members and volunteers to be treated following the principles of natural justice.

The Complaints Officer will have the necessary expertise to conduct an investigation impartially and expeditiously. Where appropriate, the Complaints Officer may request appropriately qualified persons to carry out clinical assessments, validation exercises etc.

Confidentiality will be maintained throughout the investigation to the greatest extent, consistent with the requirements of a fair investigation.

A written record will be kept of all meetings and treated in the strictest confidence.

The Complaints Officer may interview anyone they feel can assist with the investigation. Staff and volunteers are obliged to cooperate fully with the investigation process and will be fully supported throughout the process.

Staff and volunteers who participate in the investigation process will be required to respect the privacy of the parties involved by refraining from discussing the matter with other colleagues or persons outside the organisation.

It will be considered a disciplinary offence to intimidate or exert pressure on any person who may be required to attend as a witness or to attempt to obstruct the investigation process in any way.

Matters Excluded (per part 9 of the Health Act 2004)

As per part 9 of the Health Act 2004, a person is not entitled to make a complaint about any of the following matters:

- 1) a matter that is or has been the subject of legal proceedings before a court or tribunal;

- 2) a matter relating solely to the exercise of clinical judgement by a person acting on behalf of either the Executive or a service provider;
- 3) an action taken by the Executive or a service provider solely on the advice of a person exercising clinical judgement in the circumstances described in paragraph (2)
- 4) a matter relating to the recruitment or appointment of an employee by the Executive or a service provider;
- 5) 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;
- 6) a matter relating to the Social Welfare Acts;
- 7) a matter that could be the subject of an appeal under section 60 of the Civil Registration Act 2004;
- 8) a matter that could prejudice an investigation being undertaken by the Garda Síochana;
- 9) a matter that has been brought before any other complaint's procedure established under an enactment.
- 10) 2) Subsection (1)(i) does not prevent a complaints officer from dealing with a complaint that was made to the Ombudsman or the Ombudsman for Children, and that is referred by them to a Complaints Officer.

Complaints made to the organisation which relate to the above will not be progressed, and complainants will be advised that we are statute barred from accepting their complaint.

Refusal to Investigate or Further Investigate Complaints

50.—

(1) A Complaints Officer 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) 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, that officer—

(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.

Data Protection Related Complaints

Where a complaint is related to the processing of personal data, this policy ensures that the organisation complies with the data protection laws and notification requirements.

Every individual has the right to lodge a complaint with the supervisory authority if they consider that the processing of personal data relating to them infringes the General Data Protection Regulation (GDPR) or we have breached data protection law. All individuals using our products or services and those employed by or volunteering with us are notified of this right via our [Privacy Notice](#), in our complaint handling procedures and in our information disclosures.

The supervisory authority with which the complaint has been lodged is responsible for informing the complainant on the progress and the outcome of the complaint, including the possibility of a judicial remedy where the supervisory authority does not handle a complaint or does not inform the data subject within three months on the progress or outcome of the complaint lodged.

Unreasonable Complainant Behaviour

It is noted that in a minority of cases where the organisation will take all reasonable measures to try to resolve a complaint through the complaint's procedure, the complainant does not accept these efforts. Where a complainant's behaviour could be considered abusive, unreasonable, or vexatious, the organisation may consider declaring it a Vexatious Complaint.

The complainant must be notified of their right to a review of their complaint if they are not happy with the outcome of the complaint.

Complainants (and/or an advocate acting on their behalf) may be deemed to be vexatious where previous or current contact with them shows they meet two or more of the following criteria:

- a) Persist in pursuing a complaint, and the Outhouse complaints procedure has been fully and properly implemented and exhausted;
- b) 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. However, care must be taken not to disregard new issues significantly different from the original complaint, as they need to be addressed as separate complaints.
- c) 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;
- d) Repeatedly do not clearly identify the precise issues which they wish to have investigated, despite reasonable efforts of Outhouse to help them specify their concerns, and/or where the concerns identified are not within the remit of Outhouse to investigate;
- e) Regularly focus on a trivial matter to an extent which is out of proportion to its significance and continue to focus on this point. Determining what a trivial matter is can be subjective; therefore, careful judgement must be used in applying this criterion;
- f) Have threatened or used physical violence towards staff at any time – this will, in itself, cause personal contact with the complainant and/or their representatives to be discontinued and the complaint will, thereafter, only be continued through written communication. All such incidents must be documented;
- g) Have, in the course of addressing a registered complaint, had an excessive number of contacts with Outhouse, placing unreasonable demands on staff or volunteers. To determine an excessive number, a contact may be in person, by telephone, by letter, e-mail, or by fax. Discretion must be used in determining the precise number of "excessive contacts"

applicable under this section, using judgement based on the specific circumstances of each individual case;

- h) Have harassed or been personally abusive or verbally aggressive on more than one occasion towards staff dealing with the complaint. Staff and volunteers must recognise that complainants may sometimes act out of character in times of stress, anxiety or distress and will make reasonable allowances for this. All instances of harassment, abusive or verbally aggressive behaviour must be documented.
- i) Are known to have recorded meetings or face-to-face/ telephone conversations without the prior knowledge and consent of other parties involved;
- j) Display unreasonable demands or expectations and fail to accept that these may be unreasonable (e.g. insist on responses to complaints or enquiries being provided more urgently than is reasonable or normal recognised practice).

Process

In determining the options for dealing with vexatious complaints, it is important to ensure that:

- A. The complaints procedure has been correctly followed so far as possible, and no material element of a complaint has been overlooked or inadequately addressed.
- B. Staff dealing with complaints appreciate that even habitual or vexatious complaints may have aspects which contain some substance.

Where complainants have been identified as vexatious in accordance with the criteria identified above, a Senior Manager will determine what action needs to be taken. The Senior Manager will implement such action and will notify complainants in writing of the reasons why they have been classified as vexatious and the action to be taken. This notification will be copied for the information of others involved, e.g. Complaints Officer/ Head of Service.

A record must be kept for future reference of the reasons why a complainant has been classified as vexatious.

The Senior Manager may decide to deal with complaints in one of more of the following ways:

- Try to resolve the matters, before invoking this policy, by drawing up a signed "agreement" with the complainant which sets out a code of behaviour for the parties involved if Outhouse is to continue processing the complaint. If these terms are contravened,

consideration would then be given to implementing other actions as indicated in this section.

- Decline contact with the complainant either in person, by telephone, by fax, by letter or any combination of these, provided that one form of contact is maintained.
- Notify the complainant in writing that Outhouse 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, Outhouse 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, Outhouse will not pursue the complaint any further. However, this does not remove the complainant's right to submit their complaint to independent agencies, such as the Ombudsman or the Ombudsman for Children. If a complaint is found to be vexatious, there will be no record of the complaint in the file of the staff member/volunteer/service about which the complaint was made.

Withdrawing 'Vexatious' Status

Once a complainant has been deemed vexatious, there needs to be a mechanism for withdrawing this status at a later date if, for example, the complainant subsequently demonstrates a more reasonable approach, or they submit a further complaint for which normal complaints procedures would appear appropriate. Staff should previously have used discretion in recommending 'vexatious' status at the outset, and discretion should be similarly used in recommending that this status be withdrawn when appropriate. Where this appears to be the case discussion will be held with the relevant Senior Manager. Subject to their approval normal contact with the complainant and application of Outhouse's complaints procedure will then be resumed.

Redress

An effective complaints system which offers a range of timely and appropriate remedies will enhance the quality of service to the consumers of Outhouse. It will have a positive effect on staff/ volunteer morale and improve Outhouse's relations with the public. It will also provide useful

feedback to Outhouse and enable it to review current procedures and systems which may be giving rise to complaints.

Redress should be consistent and fair for both the complainant and the service against which the complaint was made. Outhouse 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 personally. This redress could include:

- 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

A complaints officer may not, following the investigation of a complaint, make a recommendation the implementation of which would require or cause—

a) the Executive to make a material amendment to its approved service plan, or

b) a service provider and the Executive to make a material amendment to an arrangement under section 38.

(2) If, in the opinion of the relevant person, such a recommendation is made, that person shall either—

(a) amend the recommendation in such manner as makes the amendment to the applicable service plan or arrangement unnecessary, or

(b) reject the recommendation and take such other measures to remedy, mitigate or alter the adverse effect of the matter to which the complaint relates as the relevant person considers appropriate.

Record-Keeping

All complaints that reach stage 2 in the process will have a formal record of the complaint made, 'the complaints register'. It shall be the

responsibility of the Complaints Officer to maintain and update the register.

The register will contain the following information with respect to complaints:

- The date on which the complaint was made
- The nature of the complaint
- The name and contact details of the complainant
- The name of the Complaints Officer assigned
- The current status/ stage of the complaint
- The outcome of the complaint
- The date on which the complaint was closed

The complaints register will be made available to any competent authority, ombudsman or body who relates to or oversees complaints made to the organisation.

The following records will be created and maintained with respect to feedback, compliments, and complaints:

Record	Retention Period	Requirement	Action	Designated Owner
<i>Information, data, or records</i>	<i>Period for keeping record and organisational notes.</i>	<i>Purpose of retention</i>	<i>Destroy, archive, review, etc.</i>	<i>Who</i>
Complaint files and investigation notes, and findings	6-years	Statute of limitations	Destroy under confidential conditions	Complaints Officer
Annual reports to the Board of Trustees on Complaints	8-years	Financial records retention period	Destroy under confidential conditions	Complaints Officer

Patterns and Analysis

The complaint logs are reviewed regularly by the Complaints Officer to identify any patterns or reoccurring issues. The organisation is dedicated to improving our performance, services, and functions through the auditing of our complaint records and our investigation process. Where gaps or patterns are identified, we put corrective actions and mitigating solutions into place as soon as possible and keep the function, process or person under review until a satisfactory improvement is noted.

Reporting on Complaints

The Complaints Officer shall prepare an annual report on the complaints received by the organisation once annually and present the report to the Board of Trustees.

The Complaints Officer

The Operations and Development Manager is the appointed Complaints Officer for Outhouse.

Heads of Service/ Accountable Officer

The Head of Service/ Accountable Officer is the staff member responsible for the functional area. For example, the Fundraising Manager is the Head of Service/ Accountable Officer for complaints related to fundraising.