Your Service Your Say

Your Service Your Say 2024

Managing Feedback within the Health Services

Foreword

I am pleased to provide an update on the work of the National Complaints Governance and Learning Team (NCGLT) over the past year and to present the data on complaints received by the health services during 2024.

The health services experienced significant change and reform during 2024 but continued to respond to the experiences of our patients and service users, their families and carers. The health services handled 16,400 new complaints in 2024. This was an increase of 11% from 2023 in the numbers of complaints recorded and examined by Complaints Officers in both the HSE statutory and funded health services. The health services responded to 75% of these complaints within the legislative timeframe of 30 working days, meeting its national key performance indicator (KPI) of 75%. In addition, the HSE returned a KPI of 87%, 22% ahead of the target of 65% to have, where identified as necessary, an action plan in place and progressing. For 2025, this target will be increasing to 75%.

The key categories of complaint remain to be *safe and effective care*, *communication and information*, and *access,* closely followed by d*ignity and respect* and a*ccountability*.

The National Complaints Governance and Learning Team continued to focus on learning and promoting best practice in the area of feedback. Although some services were scaled back to facilitate the reforms taking place at local level, NCGLT still facilitated two of the four Complaints Managers Governance and Learning Forums and published a whole of year casebook to highlight and share the learning from complaints and positive feedback.

NCGLT continued to expand and support the capture of complaints data on the Complaints Management System (CMS) and trained 107 inputters during 2024.

Our operational services, the National Your Service Your Say Team and the Assessment of Need Disability Complaints Team experienced a surge in demand during 2024. Your Service Your Say recorded a 7% increase in activity with 28,069 interactions. Assessment of Need Disability complaints experienced the greatest increase in activity with complaints received jumping from 1506 in 2023 to 1898 in 2024, a 26% increase which pressured the capacity of the office to respond. Delays experienced as a result are much regretted but measures to address this will be in place in early 2025.

I acknowledge and appreciate the engagement and cooperation of the operational system to work with NCGLT to realise the potential that a positive feedback culture can deliver.

Finally, I hope that you, our patients and service users, are reassured of the HSE's commitment to listen, respond and learn from your experience.

Mr Christopher Rudland, Assistant National Director
National Complaints Governance and Learning Team

2024. . . at a glance

The health services received

16,400 new complaints

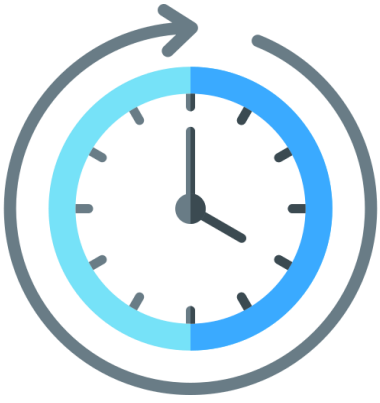
- 16,400 Stage 2 complaints recorded and examined by Complaints Officers in both the HSE and Voluntary Health Services
- 11% increase in complaints compared with 2023

- **5,288 complaints to statutory services**
- **11,112 complaints to Voluntary Hospitals and Agencies**

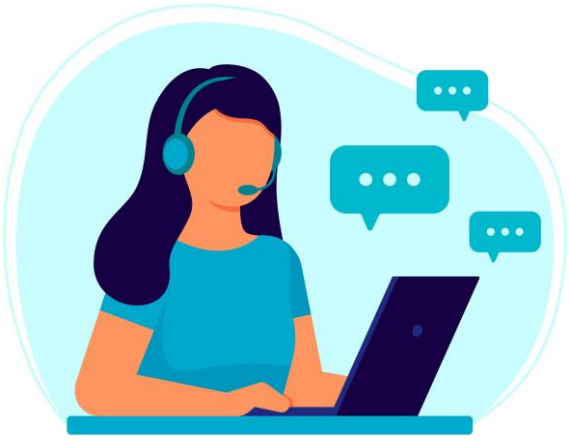
Causes for Complaints

- **Safe and Effective Care**
- **Communication & Information**
- **Access**
- **Dignity and Respect**
- **Accountability**

The health services responded to 75% of complaints within 30 working days (KPI of 75%) with 87% of action plans in place and progressing (KPI of 65%)



- 7,297 staff completed HSeLanD Effective Complaints Handling
- 1043 staff completed HSeLanD Effective Complaints Investigation
- 2,583 staff completed HSeLanD YSYS Guidance for Clinical Staff
- NCGLT trained 107 CMS inputters
- NCGLT trained 36 Review Officers



National Your Service Your Say Team

28,069

client interactions

1,898

Assessment of Need Disability Complaints received

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1.0 Background

Feedback, both positive and negative, can provide unique insights into the standards of care those who use our services receive. Capturing and analysing this feedback should be central to how we learn and improve the quality of our services.

The National Complaints Governance and Learning Team is the national office tasked with developing the policy, systems and supports to deliver on the HSE's commitment to provide an enhanced service user feedback process that is accessible, flexible and responsive as well as the mechanisms that enable the narrative and data from feedback to drive learning and quality improvement.

2.0 Complaints recorded in the Health Services 2023 (Community Services, Statutory Hospitals, Voluntary Hospitals and Voluntary Agencies)

In 2024, there were 16,400 **new** complaints received by the health services. Of these, 5,288 were recorded as received and examined by Complaint Officers in the Health Service Executive with 11,112 recorded and examined by Complaints Officers in Voluntary Hospitals and Agencies.

Under legislation and policy, Complaints Officers should attempt to complete formal investigations within 30 working days. The HSE key performance indicator (KPI) target is set at 75%. For 2024, the HSE met its KPI with 75% of complaints dealt with within 30 working days or less.

The main issues within complaints for 2024, as with past years, relate to *Safe and Effective Care*, *Communication and Information*, *Access*, *Dignity and Respect* and *Accountability.*

Compared with 2023, there was an overall increase of 11% in complaints handled by Complaints Officers in the health services in 2024. The Primary Care Reimbursement Service (PCRS) experienced a significant increase in complaints at 36% higher than the previous year. There was no change in complaints recorded by HSE statutory or voluntary hospitals with community services only slightly up at 5%. The National Ambulance Service had the greatest decline in complaints recorded at 30% less for 2024 as against 2023.

Learning from feedback is fundamental in providing high quality services. Listening to and acting on the views, concerns and experiences of patients, service users and their families enable us to provide the best possible care. The recording, analysing and reporting of such data across our health services will ensure feedback is integral to business improvement.

2.1 Key Findings

In 2024 the total number of complaints received by the health services was **16,400**[1], an increase of 11% from 2023.

Health Service Executive (HSE)

Of the total complaints received by health services, 5,288 formal complaints were recorded as received and examined by Complaint Officers under the *Health Act 2004* (Part 9: Health Act, 2004, and Part 3: Disabilities Act, 2005) in the **Health Service Executive**.

- Of the total number of complaints recorded by HSE statutory services on the HSE's Complaints Management System (CMS), **367 complaints** were excluded as they were either not subject to legislation, withdrawn by the service user or were anonymous complaints.
- Of the remaining 4,921 complaints**, 3,075 (62%)** were investigated within the legislative timeframe of 30 working days.

[1] The data presented in this report is the data that has been collected from the Complaints Management System (CMS) as well as the individual service data spreadsheets and collated and analysed by the National Complaints Governance and Learning Team (NCGLT).
The Complaints Management System (CMS) is the national database management system developed to support the HSE's complaints management process and to enable management and tracking of Stage 2 formal complaints as set out in the Your Service Your Say: The Management of Service User Feedback for comments, compliments and complaints Policy 2017. All statutory HSE services are mandated to use the CMS.
The voluntary hospitals and agencies' data is taken from individual service data spreadsheets returned directly by the services to the NCGLT.
The data presented is a combination of both the CMS data returns and the data sheets.

Voluntary Hospitals and Agencies

Of the total complaints received by health services, there were 11,112 formal complaints recorded and examined by Complaints Officers in **Voluntary Hospitals and Agencies.**

- Of the total number of complaints received, **410 complaints** were excluded, as they either were not subject to legislation, withdrawn by the service user, or anonymous complaints.
- Of those 10,702 remaining complaints, **8,578 (80%)** were investigated within the legislative timeframe of 30 working days.

2.2 Overall Findings

Summary Table of Variance	**2024**	**2023**	**% Change**
HSE Statutory Hospitals	**3803**	**3358**	**13%**
Voluntary Hospitals within Hospital Groups	**6864**	**6068**	**13%**
HSE Community Healthcare Organisations	**968**	**925**	**5%**
HSE National Ambulance Service	**48**	**69**	**-30%**
Primary Care Reimbursement Service (PCRS)	**325**	**239**	**36%**
National Screening Service (NSS)	**142**	**0**	**n/a**
National Forensic Mental Health Service (NFMHS)	**8**	**15**	**-47%**
National Complaints Governance and Learning	**0**	**1**	**-100%**
Other Voluntary Hospitals and Agencies	**4244**	**4144**	**2%**
Total	**16400**	**14819**	**11%**

Table 1: Summary of % Variance Complaints recorded 2023 to 2024

2.3 Key Performance Indicator (KPI)

NCGLT reports on two national KPI's related to complaints.

The first Key Performance Indicator (KPI) is defined as ***"the percentage of Stage 2 formal complaints submitted to the HSE that are investigated by assigned Complaints Officers within the 30 working day legislative timeframe".***

The national KPI target is set at 75%. The overall national KPI return for **2024 is 75%**

The second KPI, which was introduced in 2023 is defined as ***"the percentage of Stage 2 YSYS Formal Complaints, where an action plan is identified as necessary, is in place and progressing".***

The national KPI target is 65%. The overall national KPI return for **2024 is 87%.**

2.4 Category of Complaint

Many complaints contain multiple issues and therefore fall under more than one category.

The top **5** causes of complaints contained an issue relating to the following classification:

1. Safe & Effective Care (32%)
2. Communication and Information (30%)
3. Access (23%)
4. Dignity and Respect (9%)
5. Accountability (3%)

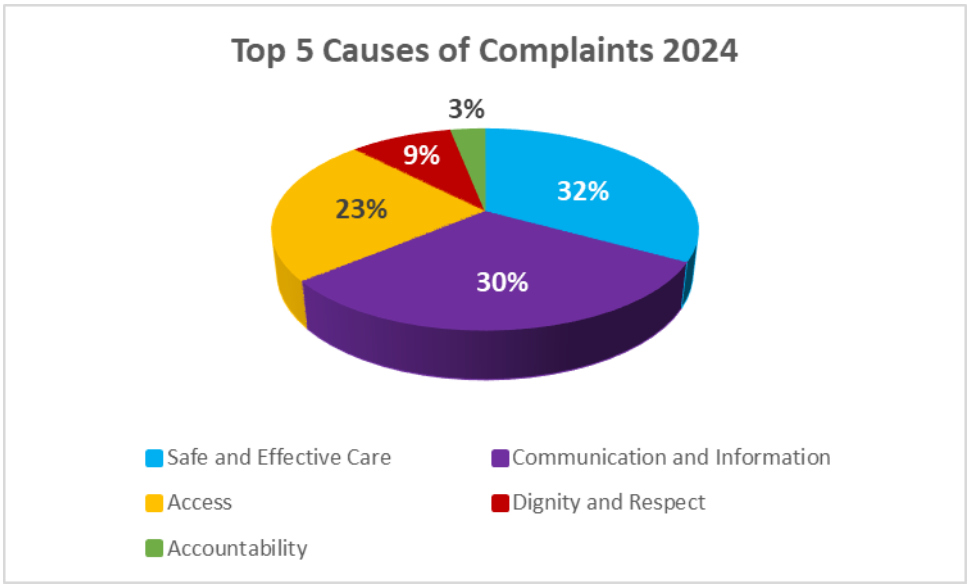


Figure 1: Top 5 complaint cause category 2024

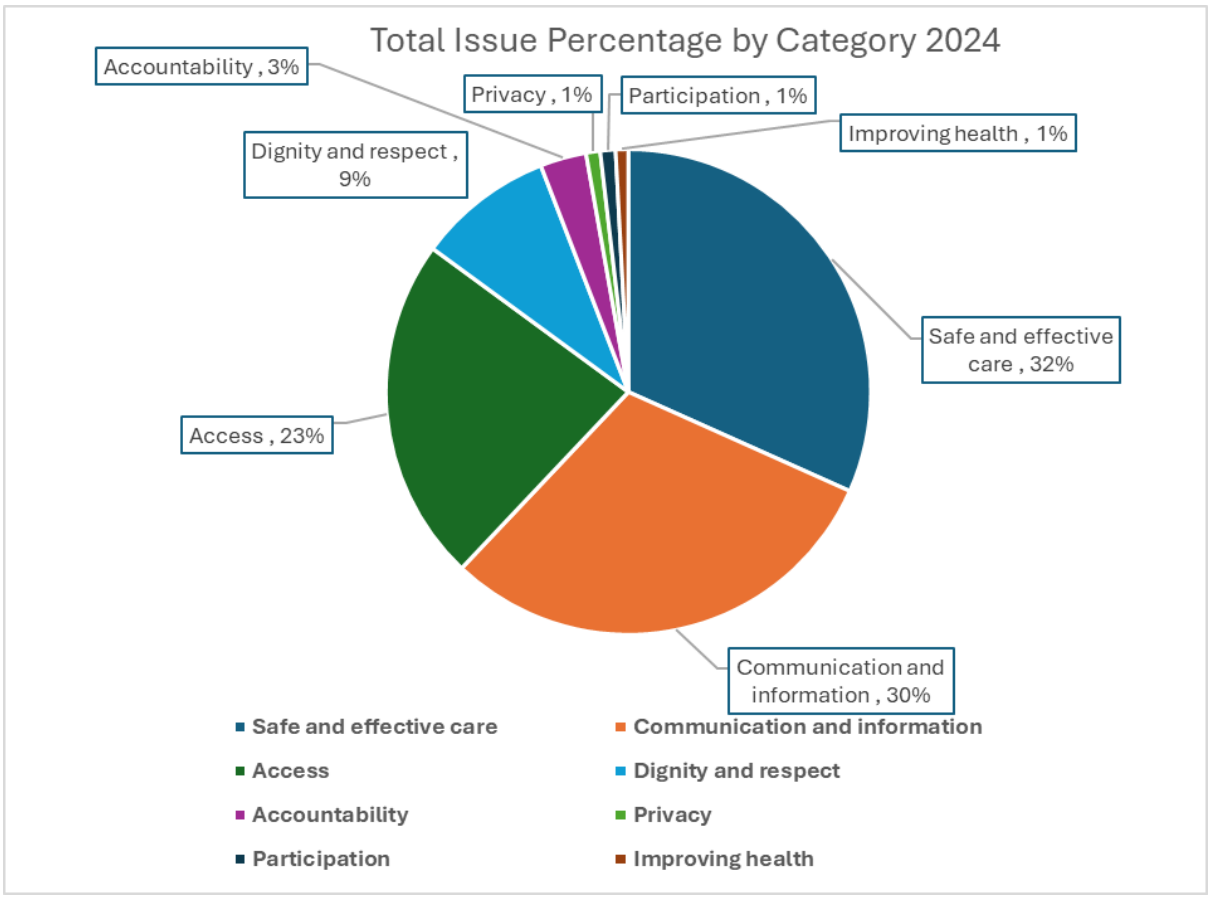


Figure 2: Percentage of issues recorded under each complaint category

2.5 Complaints Management System

The Complaints Management System (CMS) facilitates the capture and aggregation of comprehensive complaints data from across community, hospital and national services to enable analysis and comparison. This supports learning from complaints by enabling the reporting of issues and trends at various levels throughout the HSE and ensuring that evidence based best practice is shared across services to assist in decision-making and the targeting of resources to deliver quality improvements and better health outcomes and experiences for those who use our services.

The Complaints Management System (CMS) Team trained Complaints Officers and Support Staff in CMS in 2024 as follows; 96 in CMS General Training and 11 in CMS Report Training.

2.5.1 Complaints Management System (CMS) Steering Group

A CMS Steering Group was established to provide governance and direction for the implementation and further development of agreed modules of the Complaints Management System. Each member of the CMS Steering Group is a nominated lead and represents their own Community Healthcare Organisation, Hospital Group or National Service.

The group also functions as an approval committee for change requests from users of the CMS before changes are forwarded to the NIMS Steering Group and State Claims Agency for implementation on the system.

3.0 The National Complaints Governance and Learning Team

The National Complaints Governance and Learning Team (NCGLT) is a national unit tasked with developing the systems and supports to deliver on the HSE's commitment to provide an enhanced service user feedback process that is accessible, flexible and responsive as well as the mechanisms that enable the narrative and data from feedback to drive learning and quality improvement.

NCGLT provides a range of services broadly covering policy development, assurance and governance, training and development, and data analytics.

NCGLT facilitates the quarterly National Complaints Managers Governance and Learning Forum providing a platform for shared learning, peer support and networking for Complaints Managers across Hospital Groups, CHOs and National Services.

NCGLT delivered training for Review Officers under Stage Three of the Your Service Your Say Policy and supported staff to respond to feedback by developing and hosting online e-learning modules and webinars on HSeLanD as well as through MS Teams. During 2024 a total of 10,923 HSE staff completed the online YSYS training modules. NCGLT delivered Review Officer training to 36 appointed Review Officers and trained 107 inputters on the Complaints Management System (CMS).

NCGLT published a full year edition of the National Your Service Your Say Anonymised Feedback Learning Casebook for 2023. The casebook featured a total of 35 cases, both complaints and compliments, received and responded to by community, acute and national Services.

NCGLT collates and presents annually to the HSE Senior Leadership Team and to the Office of the Ombudsman, the HSE's self-assessment of compliance with the recommendations set out in the Ombudsman's Learning to Get better report.

NCGLT operates two national frontline complaints services that are co-located between Naas and Limerick.

3.1 Complaints Governance

3.1.1 Complaints Managers

The Ombudsman's Learning to Get Better report recommended the appointment of '*a senior member of staff to assume an active and visible leadership role in the complaints process with key involvement in education, training and reporting arrangements*.' (Rec #32)

Complaints Managers are involved in education, training and reporting arrangements around Your Service Your Say. They ensure implementation of the HSE's feedback policy and that the system is functioning in line with policy and legislation, with key staff, including clinicians, supported to understand how to handle complaints. They provide assurance, through casebooks, that learning from feedback is captured and shared, supports quality improvement initiatives and reports locally on the effectiveness of the Your Service Your Say process. Complaints Managers are also responsible for assigning Review Officers to complaints following a request for a review.

Complaints Managers were appointed within Community Healthcare Organisations, Hospital Groups and National Services as mandated by the HSE.

The change in structures within the Health Service Executive in February 2024, from Community Healthcare Organisations and Hospital Groups to Health Regions encompassing both community and acute services, required a reconfiguration of the complaints function and staffing at regional level.

At the end of 2024 models for complaints management and governance at regional level were examined and proposed and these will be worked through during 2025.

NCGLT will continue to provide support and advice to Complaints Managers during this transition phase.

3.1.2 National Complaints Managers Governance and Learning Forum

NCGLT facilitates the hosting of the National Complaints Governance and Learning Forum; attendance at which is mandatory, to support Complaints Managers in the execution of their role.

The National Complaints Managers Governance and Learning Forum, established in 2016 and held on a quarterly basis, offers a valuable opportunity for shared learning, problem solving, discussion around issues, expert input into specialist topics as well as an arena for exploring areas for development to ensure the continuous evolvement of our feedback processes.

Complaints Managers share key messages and learning from the Forum, including matters identified or arising with their respective Senior Management Teams at Community Healthcare Organisation, Hospital Group and National Service level for consideration and action as appropriate.

The Forum offers Complaints Mangers an opportunity to relate their experience of responding to and managing feedback from an operational perspective and flag issues for further discussion. Members also have the chance to network with peers and build informal as well as more formal connections that will support them in their role.

In 2024, the Forum was held in March and May but was deferred for September and December to facilitate the restructuring and realignment of functions and staff into six Health Regions and a refined centre structure under the Sláintecare programme.

Specialist Topic

The March Forum was primarily dedicated to the specialist topic of clinical complaints. With the permission of NCGLT, the Department of Health utilised the Forum to engage with Complaints Managers and run a scoping workshop on the future development of national policy and legislation around complaints management and particularly, clinical complaints within the health services. Academic research into the future of the complaints policy was presented to Forum members highlighting what was working well and where improvements could be made as well as setting out stakeholder expectations of pathways for clinical complaints. Feedback from the session will inform the Department's wider stakeholder engagement process.

Case Study Presentations

Case studies are an integral part of the learning agenda that is fostered and facilitated at the Forum.

NCGLT would like to thank the ***Primary Care Reimbursement Service (PCRS)*** for presenting at the May Forum the learning and resulting service changes arising from their Customer Relationship Management Unit's (CRM) examination of the key drivers of complaints received and the positive impact this had on the service, service user experience and overall satisfaction.

Guest Presenters

Presentations on specialist topics or from partner agencies feed into the professional expertise and the continuous development of the feedback service within the HSE.

NCGLT would like to thank ***Mr Iolo Eilian, Assistant National Director of the Patient and Service User Experience*** for presenting an update in relation to the Patient and Service User Experience function including a brief background, examples of their work and their plans / priorities.

Iolo confirmed that the function would be moving under the remit of Bernard Gloster, CEO HSE, within the new HSE structures.

Iolo confirmed that there would be a Patient Engagement Team within each one of the six new Health Regions. There will be a Patient and Service User Engagement Lead in each of the Health Regions as well as a council that will link in directly with the Senior Management Team of the Health Region.

It is to be determined how these teams will look and there will be a need for resources to be provided to populate those teams.

NCGLT would also like to thank ***Ms Georgina Cruise, National Manager of the Patient Advocacy Service*** who presented an overview of their work in 2024 and outlined the main issues experienced by patients and service users who availed of their service as well as their various collaboration and engagement efforts.

Previous minutes from the National Complaints Managers Governance and Learning Forum are available on www.hse.ie/yoursay

Forum Attendees

While Complaints Managers nominated at CHO, Hospital Group and National Service level attend the Forum, representatives from Consumer Affairs, the Office of the Ombudsman, and, on occasion, the Ombudsman for Children, national advocacy groups and service users also attend.

Consumer Affairs provides training, support and advice to Complaints Officers on complaint investigations. Consumer Affairs is also the key contact for the Office of the Ombudsman for any external review by that office.

NCGLT would also like to give a special thanks to Ms Geraldine McCormack from the Office of the Ombudsman. As a member of and contributor to the Forum, Ms McCormack keeps members updated on developments within the Office of the Ombudsman, assists the HSE in furthering progress in the area of feedback and compliance with the recommendations set out in Learning to Get Better while addressing any practical issues arising at the operational level.

Attendance

The Forum is scheduled on a quarterly basis and attendance is mandatory. For those who send apologies a nominated representative can be sent in their stead.

3.1.3 Complaints Officers and Review Officers

In the HSE, Complaints Officers and Review Officers are appointed into their role and act independently and with the authority of the now Regional Executive Officer (REO) of a Health Region or other such office so delegated.

NCGLT, together with the National Delegations Office, have update the guidance to support and ensure appropriate governance regarding the appointment of Complaints Officers and Review Officers.

The guidance can be accessed at:
https://www.hse.ie/eng/about/who/complaints/ysysguidance/appendices/final-guidance-for-appointment-of-cos-and-ros.pdf

Once completed, the original Appointment Order must be sent to the Complaints Officer / Review Officer with a copy held by the office issuing the order and a further copy sent to the following:

1. the Complaints Manager for filing.
    a. Where no Complaints Manager has been appointed at Health Region level, a copy should be issued to the Assistant National Director for Communications and Public Affairs for the Health Region.
    b. Similarly where no Complaints Manager has been identified at national service level, then the forms are held by the office of the National Director / Assistant National Director for the relevant national service.

2. National Complaints Governance and Learning Team at nationalcglt@hse.ie **only** where the Complaints Officer or Review Officer is accessing the Complaints Management System (CMS) as part of the governance for the CMS and where the Review Officer is attending for Review Officer training.

Please follow the same process for Appointment Revocation Notifications.

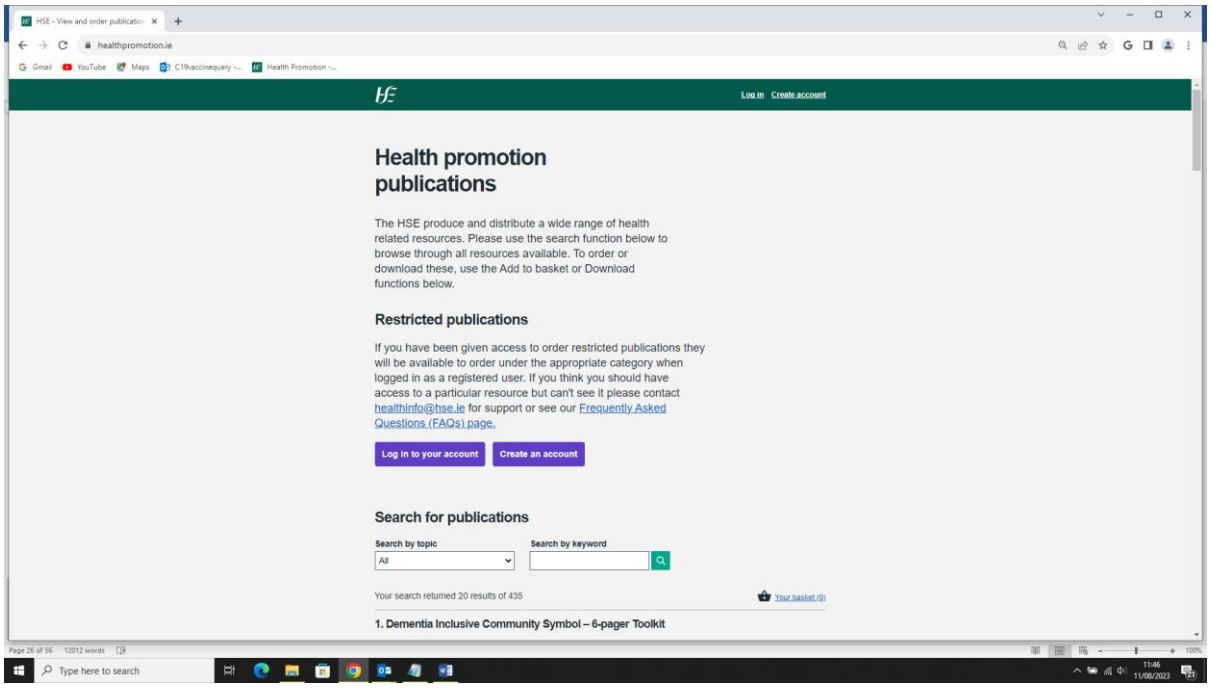
Under Section 19 ***Public Awareness of Complaints Procedures*** of the Health Act 2004 (Complaints) Regulations 2006, online service information is to contain a section on, or link to, how to provide feedback and the procedures involved as well as a listing of the **names and contact details** of appointed Complaints Officers and **names only** of appointed Review Officers.

3.2 Your Service Your Say Materials

All Your Service Your Say published materials are available to order from www.healthpromotion.ie

To order materials, log into www.healthpromotion.ie and follow the instructions on screen.

Your Service Your Say publications are only available to order by healthcare staff. You will need to register for an account to access these. If you have previously registered for an account, enter in your login details and enter *Your Service Your Say* in the search box and all publications available to order will be listed.



If you do not currently have a registered account and require one, please select 'Create Account' or if you think you should have access to a particular resource but can't see it please contact healthinfo@hse.ie for support.

Materials available to order from the site include:

- Your Service Your Say Adult Information Leaflet in Irish and English
- Your Service Your Say Children's Information Leaflet in Irish and English
- Your Service Your Say A3 and A4 English Poster
- Your Service Your Say A3 and A4 Irish Poster
- Your Service Your Say Feedback Box Stickers

Materials available to download are:

- Your Service Your Say Policy Document

Feedback boxes are not available to order from the site. Please source these locally.

Information in other Languages
Both the adult and children's YSYS information leaflets are now available in 24 languages and a QR code has been added to the YSYS poster and both information leaflets so that the public can easily access the various language versions.

Information and feedback forms for adults as well as children and young persons are available in 24 different languages from the HSE website at:
https://www2.hse.ie/complaints-feedback/languages/

English
Albanian (Shqip)
Brazilian Portuguese (Português do Brasil)
Chinese (中文)
Farsi (فارسی)
French (Français)
Georgian (ქართული)
Kurdish (کوردی)
Pashto (پښتو)
Portuguese (Português)
Russian (Русский)
Somali (Afsoomaali)
Ukrainian (Українська)
Irish (Gaeilge)
Arabic (العربية)
Bulgarian (Български)
Czech (Čeština)
French (Français)
German (Deutsch)
Italian (Italiano)
Lithuanian (Lietuvių)
Polish (Polski)
Romanian (Română)
Slovak (Slovenčina)
Spanish (Español)
Urdu (اردو)

These developments will enhance and support access to Your Service Your Say and enable the HSE to hear and benefit from the experiences of a wider service user base.

Posters
In addition to the above materials, NCGLT have developed a suite of posters.

- **Assessing a Complaint:** Designed to assist staff in relation to complaints that cannot be managed under Part 9 of the Health Act 2004 and therefore cannot be investigated under the Your Service Your Say policy.
- **Complaints Management Pathway:** Designed to provide an overview of the four stages in the Your Service Your Say process and the key steps to take at each stage along with the timeframes applying.
- **Timeframes for the Complaints Management Process:** Designed to provide a guide for each person involved in the Your Service Your Say process regarding the legislative and policy timeframes applying to the various stages of the complaints management process.

Posters are available on request from NCGLT or alternatively a PDF version can be downloaded by following this link:
https://www.hse.ie/eng/about/qavd/complaints/ysysguidance/appendices/

3.3 Training

NCGLT develop and deliver training programmes in order to support staff in their efforts to respond to and deal with complaints from point of contact through to the internal review stage as well as delivering train the trainer workshops.

HSeLanD is an online learning forum developed and run by the Health Service Executive. Access to hseland.ie is available over the internet, on a secure site. It is available to all Healthcare Professionals in the Republic of Ireland, both within Health Service Executive (HSE), Voluntary Hospital Sector, and associated Non-Government-Organisations (NGO's).

By providing guidance through this online platform, NCGLT hoped to increase the access by staff to training as well as offer greater flexibility over that access.

The following webinars remain available to staff to support them in managing complaints as well as guiding them through the complaints process.

- Assessment of Need and Complaints Awareness Training
- Complaints Management System Training
- Learning from Complaints
- Telephone Etiquette and Tips for Managing Unreasonable Caller Behaviour
- Your Service Your Say Review Officer Training
- Resilience Training

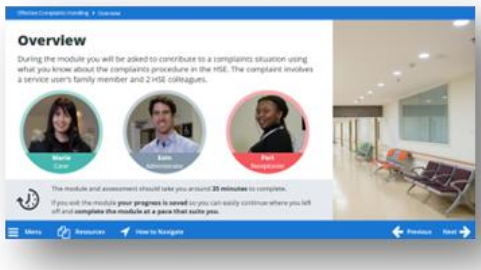
3.3.1 HSeLanD Complaint Modules

Staff can access the following NCGLT complaint modules on HSeLanD.

- Module 1: Effective Complaints Handling
- Module 2: Effective Complaints Investigation
- Module 3: Your Service Your Say: Complaints Handling Guidance for Clinical Staff

The Nursing and Midwifery Board of Ireland (NMBI) has awarded one continuing education unit (1 CEU) to each module.

Module 1, Effective Complaints Handling is for all staff to use and encompasses a number of interactive complaint handling scenarios that encourages engagement of the staff member through the exploration of different e-learning paths. This is very effective for empowering staff to respond to point of contact complaints.



A total of **7,297** staff completed this module to date up to December 2024.

Module 2, Effective Complaints Investigation is an interactive learning tool for Complaints Officers, taking them through the entire process of handling a written complaint from when it initially received right through to guiding the user on how to create a final report.

A total of **1043** staff have completed this module to date up to December 2024.

Module 3: Your Service Your Say: Complaints Handling Guidance for Clinical Staff gives practical application to the guidance document *YSYS Guidance for Clinical Staff.* Both the guide and module were developed to provide support to the various clinical professionals who may, at some point, be asked to contribute their views as part of a complaints investigation or to write a specific clinical report as part of the complaints investigation.

The module provides clinical staff with a clear understanding of the YSYS complaints process and outlines how individual clinical staff may become involved in the process as well as assisting clinical staff in understanding what is required of them under the YSYS complaints management process.

A total of **2,583** staff completed this module to date up to December 2024.

3.4 Audit

3.4.1 General Audit

The general audit of services in relation to compliance with the *Your Service Your Say, the Management of Service User Feedback for Comments, Compliments and Complaints 2017 Policy* is deferred until 2025.

3.5 Healthcare Complaints Audit Tool (*HCAT)*

The Healthcare Complaints Audit Tool (HCAT) is an innovative method of classifying complaints developed by the London School of Economics (LSE) after a rigorous analysis of 80,000 NHS complaints. The HCAT tool is a reliable method of coding and systemising healthcare complaints that also supports international comparability of data.

In addition, applying HCAT to complaints helps services to identify 'hot spots' for harm, i.e. an area in care where harm occurs frequently, as well as 'blind spots', i.e. areas in care that are not easily observed.

Following an extensive project with NUIG and the London School of Economics to examine the suitability of HCAT within the Irish healthcare context and piloting the use of HCAT in both community and acute services, HCAT is now a mandatory feature of complaints recording on the national Complaints Management System (CMS).

The improved classification system will support the identification of systemic issues and trends within services leading to improvements in healthcare delivery and ensuring high standards of quality and safety.

3.6 Learning from Individual Complaints: HSE Anonymised Feedback Learning Casebook

While analysing aggregated complaints data provides great insight into trends and issues, there is a lot to be learned from the narrative of individual complaints and compliments.

NCGLT presents anonymised cases of Your Service Your Say complaints and compliments in a national feedback learning casebook that is published quarterly.

Casebooks form part of the HSE's commitment to use feedback as a tool for learning and to share that learning to demonstrate to services users that sharing their experience has made a difference and has led to change

The development and publication of casebooks was also a recommendation by the Ombudsman in his report, *Learning to Get Better* and further progresses the HSE's promise to implement all recommendations from the Ombudsman's report pertaining to the HSE.

The HSE National Your Service Your Say Anonymised Learning Casebook is available to view on https://www.hse.ie/eng/about/who/complaints/hse-complaints-casebook/

3.6.1 Casebook Development

National casebooks are generated from the learning notification forms that are completed by Complaints Officers, following a complaint investigation, and Review Officers, following a complaint review and forwarded to Complaints Managers. Complaints Managers review these forms and submit those cases with organisational learning to NCGLT for the inclusion in the national casebook.

Copies of the notification forms can be found at:
https://www.hse.ie/eng/about/who/complaints/ysysguidance/

Complaints Managers also collate compliments received and where there is learning from the positive practice highlighted these are also submitted for inclusion in the casebook.

3.6.2 2024 Anonymised Feedback Learning Casebook

The full year edition of the casebook for 2024 presented 35 cases of both complaints and compliments received by hospitals, community services and national services.

The casebook featured a total of **18 complaints**; 6 complaints from hospitals, 9 from community services and 3 from national services that were investigated, along with their outcomes. The casebook also features **17 compliments;** 9 from hospitals, 4 from community services and 4 from national services, which highlighted the learning to be gained from positive patient and service user feedback.

The dominant theme for complaints cases presented in the 2024 edition of the casebook is ***Communication and Information.*** This category of complaint continues to be a key theme for complaint cases and featured in fourteen of the eighteen complaint cases presented. This was followed closely by ***Safe and Effective Care*** which featured in eleven of the eighteen complaint cases. Other categories featured were ***Dignity and Respect, Access*** and ***Improving Health.***

Below is a breakdown of the issues within the main complaint categories:

- ***Communication and Information*** related to issues such as accessing and being provided with sufficient or appropriate information at relevant times. It also concerned the availability of accurate service information, as this can be a barrier to supporting people to access services. Being clear when communicating, providing detailed explanations and the proper recording or documenting of information that would be relied upon for accessing supports was also highlighted. Issues were also raised around general communication skills such as how those using our services were spoken with.

- ***Safe and Effective Care*** issues concerned the failure to identify care needs resulting in a delay in receiving treatment, delays in accessing necessary treatment due to process issues as well as delays in providing time sensitive treatment. The general care provided as well as the follow up care following initial treatment also featured.

- ***Dignity and Respect*** concerned the delivery of care that is responsive to and respectful of individual needs. The lack of awareness and sensitivity around engagements with families of young patients caused upset and impacted a family in the final days of a young patient. Dignity and respect also concerned the behaviours of staff towards patients and service users.

- ***Access*** related to having the appropriate facilities available to accommodate patients/service users with different or additional needs comfortably and contribute to a more positive service experience.

- **Improving Health** concerned having no healthy snack options available as per the HSE Vending Policy 2019.

A new feature to the casebook is the addition of the HCAT ratings for the complaint cases presented. The Healthcare Complaints Audit Tool or HCAT is an innovative method of classifying complaints developed by the London School of Economics (LSE). The HCAT tool is a reliable method of coding and systemising healthcare complaints. By applying HCAT to complaints, it can assist services to identify 'hot spots' for harm, i.e. an area in care where harm occurs frequently, as well as 'blind spots', i.e. areas in care that are not easily observed.

The complaints presented in this casebook were assessed to be of **no or low severity** with **no or minimal** harm identified.

The positive feedback presented in the casebook related to the categories of ***Communication and Information*** and ***Dignity and Respect*** with these featuring in twelve and eleven of the compliments presented respectively. Other categories of positive feedback that featured were ***Safe and Effective Care, Improving Health, Access*** and ***Participation.***

The cases presented offer services an opportunity to reflect on service delivery, to understand the issues experienced by Service Users, to examine the measures and initiatives used to address these and how such methods can be utilised in their area to address or prevent similar issues.

Current and past casebooks can be accessed from:
https://www.hse.ie/eng/about/who/complaints/hse-complaints-casebook/

3.7 Annual HSE Self-Assessment of Compliance with the Recommendations set out in the Ombudsman's report, Learning to Get Better

In 2015 the Ombudsman conducted an investigation into how Irish public hospitals handle complaints. He published his findings in *Learning to Get Better, An investigation by the Ombudsman into how public hospitals handle complaints' (LTGB) and* set out 36 recommendations in total applying to the HSE, both at operational and strategic level as well as to the Department of Health. The HSE conducts an annual self-assessment on its compliance with the LTGB recommendations applying to the operational system: 28 to community and the National Screening Service and 29 to acute services.

For 2024, **community services** within Health Regions recorded **90% full compliance**, **9% partial compliance** and just **1% non-compliance** across 28 recommendations. (averaged and rounded)

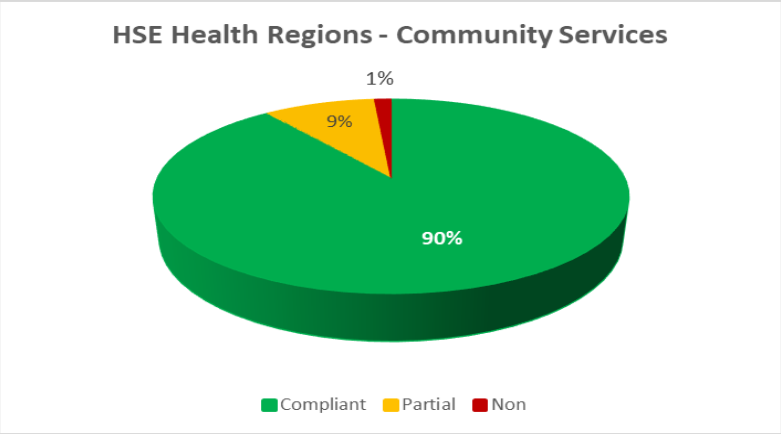


Figure 3: Health Region Community Services average overall compliance rating for 2024*
Please note that analysis of compliance for community services is based on IHA returns received from each Health Region. At the time of publication of this report, all IHAs submitted returns save two IHAs from Dublin and South East. The single IHA return received from Dublin and South East has been used to represent that Region in the overall analysis.

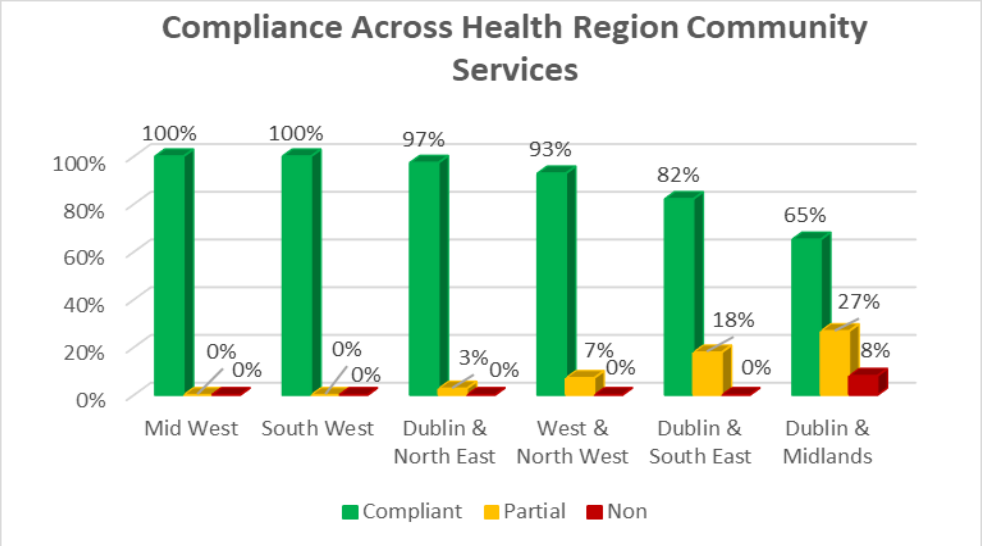


Figure 4: Chart showing individual Health Region compliance rating for all community services (averaged and rounded) returned for 2024. *Please note that the return for Dublin and South East is based on the IHA returns received at the time of publication of this report, which was one IHA out of three.*

Two Health Regions self-assessed community services as fully compliant with all 28 recommendations. Only one Health Region assessed three recommendations as non-compliant: recommendation 16 (having a Complaints Lead), 32 (appointing a Complaints Manager) and 36 (producing or contributing to casebooks).

For 2024 **acute or hospital services** within Health Regions recorded **80% full compliance**, **16% partial compliance** and **4% non-compliance** across 29 recommendations. (averaged and rounded)

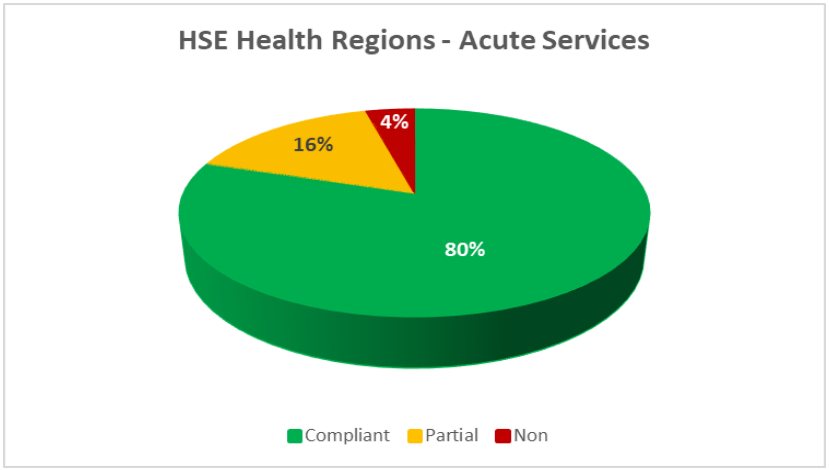


Figure 5: Health Region Acute Services average overall compliance rating for 2024

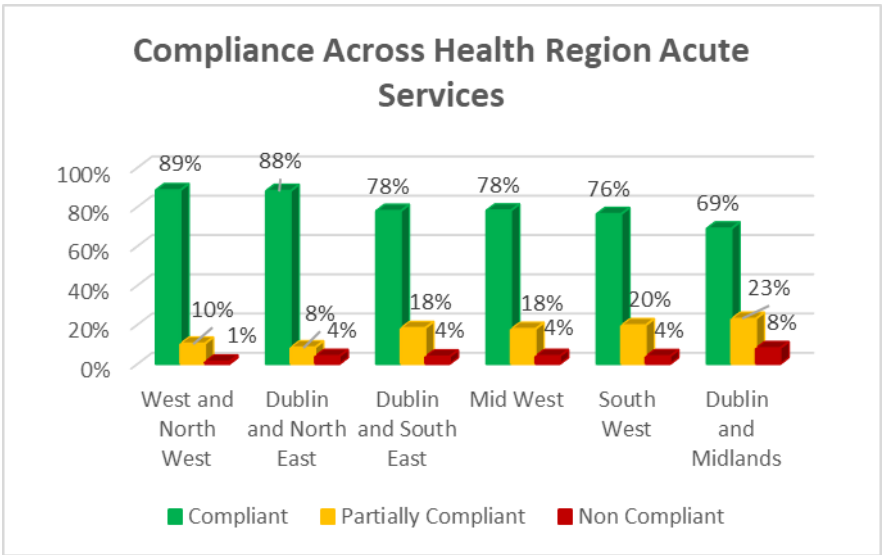


Figure 6: Chart showing individual Health Region compliance rating for all acute hospital services (averaged and rounded) returned for 2024.

No Health Region self-assessed acute services as fully compliant with all 29 recommendations. All Health Regions self-assessed some non-compliances with the recommendations

For 2024 the **National Screening Service** assessed that their services are **86%** fully compliant, **14%** partially complaint and have identified no recommendation that is non-compliant.

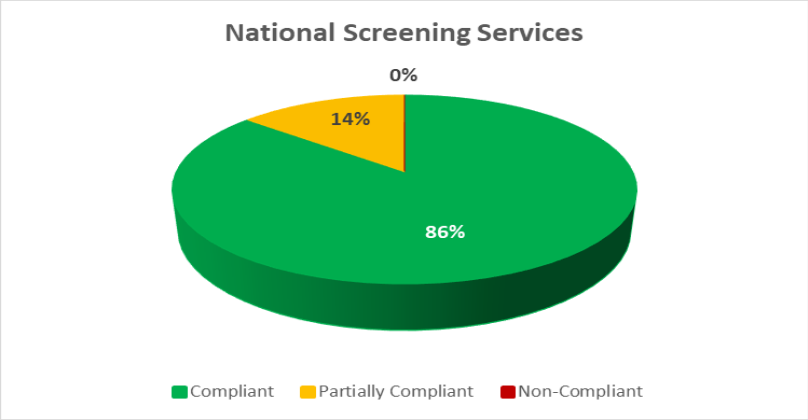


Figure 7: National Screening Service compliance rating for 2024

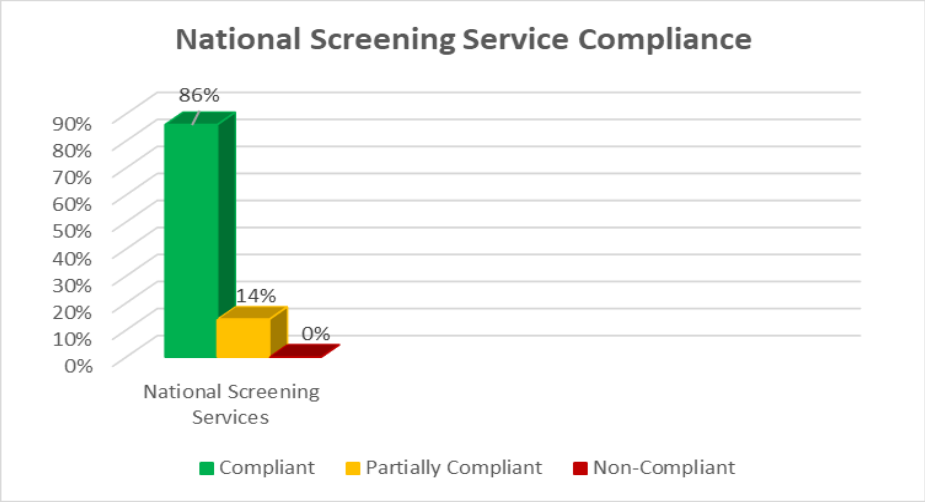


Figure 8: Chart showing the National Screening Service compliance rating returned for 2024

A self-assessed fully compliant position with all recommendations under the headings of Process, Response and Learning was returned. While no recommendation was assessed as being non-compliant, four recommendations, under Access (2) and Learning (2) were identified as being partially compliant with further work needed to progress these to full compliance.

3.7.1 Category Compliance 2024

The recommendations set out under Learning to Get Better are grouped under the key category headings of Access, Process, Response, Leadership and Learning.

Tables showing the compliance position for 2024 with the recommendations under each category heading for community and acute services are set out below.

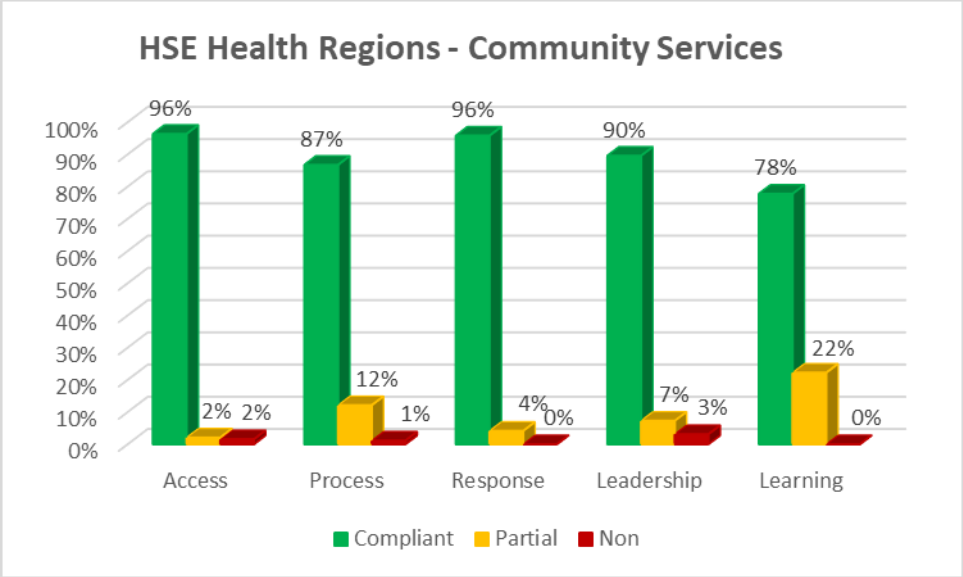


Figure 9: Chart showing the averaged compliance rating across Health Region community services for recommendations under each of the five heading categories in Learning to Get Better for 2024

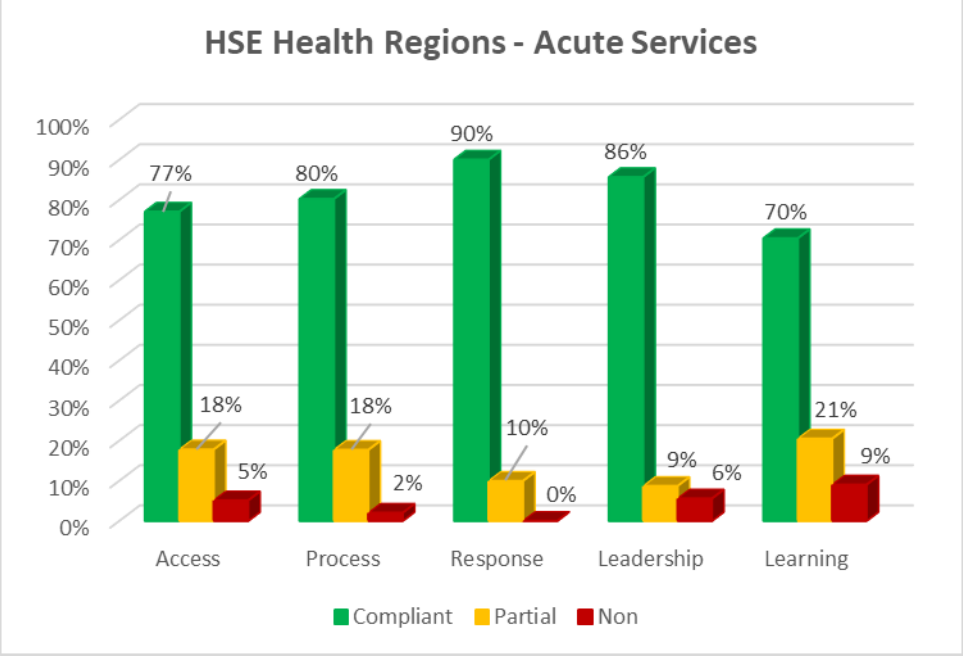


Figure 10: Chart showing the averaged compliance rating across Health Region acute services for recommendations under each of the five heading categories in Learning to Get Better for 2024

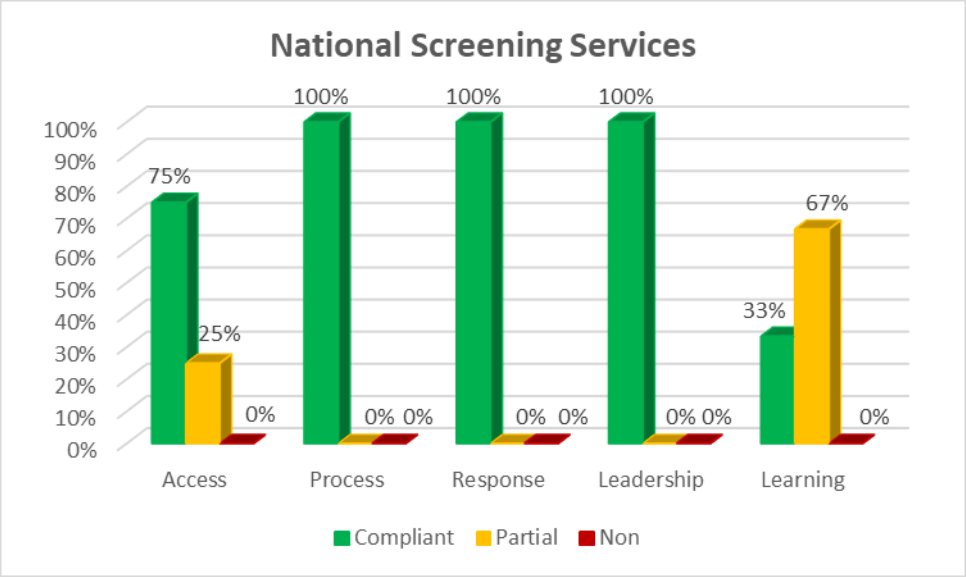


Figure 11: Chart showing the compliance rating for the National Screening Service for recommendations under each of the five heading categories in Learning to Get Better for 2024

Community Services

Only one Health Region assessed three recommendations as non-compliant; recommendation 16 (having a Complaints Lead) under **Process**, recommendation 32 (appointing a Complaints Manager) under **Leadership** and recommendation 36 (producing or contributing to casebooks) under **Learning.**

Acute Services

The main recommendations attracting an assessment of non-compliance under **Access** related to having volunteer advocates (recommendation 6) and appointing Access Officers (recommendation 10); under **Process** was conducting bi-monthly audits of the complaints process (recommendation 22); under **Leadership** was the appointment of a Complaints Manager (recommendation 32) and under **Learning** was the implementation of a standardised learning implementation plan (recommendation 34).

Other recommendations that received a rating of non-compliant across acute services for one or two Health Regions are recommendations 17 (recording complaints at ward level), 19 (standardised recording of complaints), 21 (induction module) and 23 (external investigation for complaints) under **Process**, recommendation 30 (six-monthly report) under **Leadership** and recommendations 35 (sharing good practice) and 36 (casebooks) under **Learning**.

Both community and acute services record low compliance under **Learning**.

National Screening Service

There is full compliance with the recommendations under the categories of *Process, Response and Leadership.* While further work is required to progress compliance with the recommendations under Access and Learning, non-compliance has not been assessed for any recommendation.

4.0 The National Complaints Governance and Learning Team: Operational Services

The National Complaints Governance and Learning Team (NCGLT) operates two national frontline complaints services that are co-located between Naas and Limerick.

1. The **National Your Service Your Say office** provides a dedicated national contact point for Service Users, or an individual acting on behalf of a Service User, to provide feedback (comments, compliments and complaints) on their experience with our health services or to seek assistance with providing feedback. During 2024 the office engaged in **26,129** client interactions, an increase of 3% on the previous year.

2. **Assessment of Need Disability Complaints service**
   NCGLT also offers a specialised service for those wishing to make a complaint under the Disability Act 2005 where they are unhappy with their child's assessment of need or Service Statement. In 2024, the **Assessment of Need Disability Complaints Service** received 1,898 disability complaints relating to Assessment of Need (AoN). This was up 26% from 2023 figures.

4.1 The National Your Service Your Say Office

The HSE is committed to encouraging and enabling those who use our services to share their experiences with us, so that we learn from this and improve the safety and quality of our services.

The National Your Service Your Say Office comes under the remit of the National Complaints Governance & Learning Team (NCGLT). The Your Service Your Say Team responds to queries, provides advice and information as needed and ensures that any feedback given is directed to the appropriate local service for their examination and direct response to the person raising the concern.

The Team also supports the office of the HSE Chief Executive Officer and the Department of Health. The Team ensures that Service Users who have been in contact with these offices have their issues routed to the appropriate service for examination and response within the Your Service Your Say process, as appropriate, to provide them access to review mechanisms both internally and externally, if required.

The National Your Service Your Say Office Activity

Activity for the National Your Service Your Say Office is based on the interactions generated by calls, emails, online forms and post received into the National Your Service Your Say Office, either directly from Service Users, or from individuals acting on behalf of a Service User, or through the Office of the Chief Executive Officer or the Department of Health.

In 2024, the National Your Service Your Say Office recorded **28,069** interactions, which was a 7% increase on office activity noted for 2023.

Email continued to be the preferred method of contact with the National Your Service Your Say Office accounting for 37% of office activity, while online forms were the next preferred method of contact accounting for 28% of office activity.

4.1.2 Activity Overview

In 2024 there were 14,551 comments, compliments, complaints and queries logged under Your Service Your Say, compared to 12,825 in 2023. Of this, 10,621 were complaints, 2,352 were compliments, 404 related to comments, while 1,174 queries were received. Seven complaint review requests were received.

The feedback can be broken down between services as follows:

Community	Acute Services	National Services	Voluntary Agencies	Voluntary Hospitals
3,961	5,387	1,531	11	926

Table 2: Breakdown of YSYS feedback by service area for 2024

The top two categories of feedback in 2024, as in 2023, were *Dignity and Respect* and *Access.* In 2024, *Dignity and Respect,* which accounted for 27% of correspondence received, replaced Access (26%), which was the highest feedback category in 2023 and 2022.

Safe and Effective Care (19%) and *Communication and Information* (15%), were the next highest categories of feedback.

As in 2023, *Delivery of Care* was the highest recorded sub-category within *Dignity and Respect.* Accessibility and Resources was the top sub-category within Access, as similarly observed in 2023, 2022 and 2021. *Treatment and Care* was the top sub-category within *Safe and Effective Care*, while *Information,* was the highest sub-category within *Communication and Information.*

Full breakdown of the issue categories logged are below:

Access	Accountability	Improving Health	Communication & Information	Dignity & Respect	Privacy	Safe & Effective Care	Participation
26%	2%	.2%	15%	27%	.2%	19%	.1%

Table 3: Breakdown of issue categories for YSYS feedback for 2024

Office of the HSE Chief Executive Officer

In 2024 there were 185 items of feedback received from the CEO's Office, which represents an increase when compared with 130 items received in 2023.

Department of Health

In 2024 there was a total of 2,498 items of feedback received from the Department of Health via email.

Summary of Your Service Your Say National Office Activity for 2024

Matters relating to *Access, Dignity and Respect, Safe & Effective Care* and *Communication and Information*, were the four main categories of feedback received into the National Your Service Your Say Office, either directly or via the CEO's Office and the Department of Health.

Overall, Access accounted for 4,746 (28%) of categories recorded, Dignity & Respect accounted for 3,963 (23%), Safe & Effective Care accounted for 3,041 (18%) and Communication and Information accounted for 2,398 (14%) of the categories recorded.

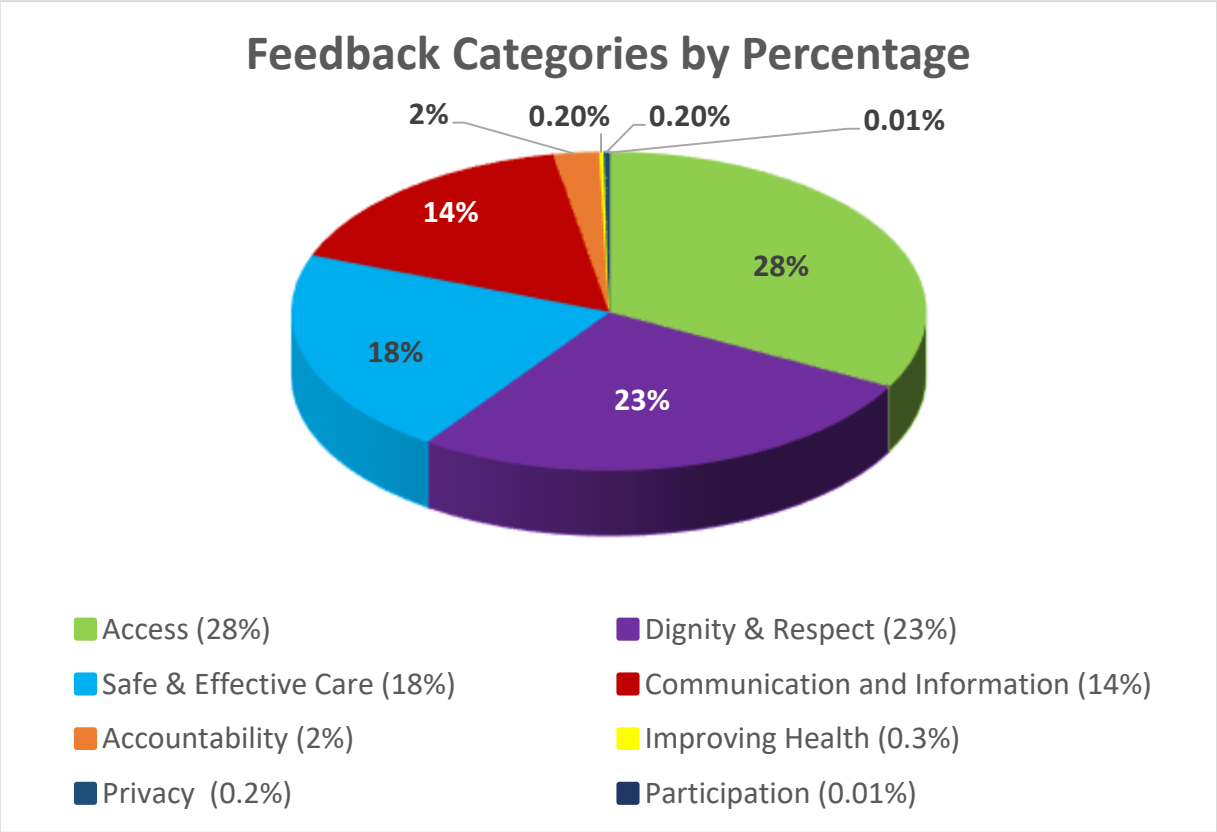


Figure 12: Feedback categories by percentage for 2024

4.2 Assessment of Need (AoN) Complaints - 2024

The Disability Act 2005 provides for a special complaints and appeals procedure for service users if they are unhappy with their child's assessment of need or Service Statement.

Under the Act a parent/guardian can make a complaint in relation to one or more of the following:

(a) a determination by the assessment officer concerned that he or she does not have a disability;
(b) the assessment under section 9 was not commenced within the time specified in section 9(5) or was not completed without undue delay;
(c) the assessment under section 9 was not conducted in a manner that conforms to the standards determined by a body referred to in section 10;
(d) the contents of the service statement provided;
(e) the Executive or the education service provider, as the case may be, failed to provide or to fully provide a service specified in the service statement.

In 2024, 1898 complaints were received by the AoN Complaints Office. 5% of completed investigations were dealt with by an AoN Complaints Officer within 30 days.

No. of complaints received variance from 2023

Summary Table of Variance	2024	2023	% change
HSE Assessment of Need	1898	1506	+26%

Breakdown of Recorded 2024 Complaints (Excluding Voluntary Hospitals and Agencies)

HSE: Excluding Voluntary Hospitals and Agencies	Total
Complaints received under Part 2 of the Disabilities Act 2005 (Assessment of Need)	1898

Complaints received and resolved by the AoN Complaints Office (Disabilities) (across all CHOs) under the Disability Act.

AoN Nationally (across all CHOs)	Complaints received 2024	Complaints that do not fall under Part 2 of the Disability Act 2005	Withdrawn	Anonymous	Resolved informally	Resolved through formal investigation ≤30 working days	Resolved through formal investigation >30 working days	% Resolved ≤30 working days
Total	1898	69	26	0	2	74	1384	5%

Table 4: Assessment of Need complaints received and resolved across all CHOs

- The number of complaints received by the AoN Complaints Office in 2024 was 1,898; a 26% increase in complaints received in 2023.
- Of the complaints investigated, the average number of days taken by AoN Complaint Officer to close out a complaint decreased from increased from 175 days, for those received in 2023; to 101 days, for those received in 2024.
- Of the complaints investigated, the primary ground for complaint was Ground B and of these 85% were Ground B only.
- Single issue complaints make up the vast majority (96%) of complaints investigated thus far, up 4%.

Assessment of Need Nationally (Disabilities) (across all CHOs)

	Complaints received 2024	Withdrawn, Anonymous, Excluded	Less Withdrawn, Anonymous, Excluded	Resolved through formal investigation ≤30 working days	Resolved through formal investigation >30 working days	Complaints not yet resolved	% Resolved ≤30 working days
Across all CHOs	1898	95	1803	74	1384	345	5%

Table 5: Assessment of Need complaints across all CHOs

Area	Complaints received under Part 2 of the Disability Act 2005 (AoN)
CHO 1	74
CHO 2	14
CHO 3	53
CHO 4	74
CHO 5	104
CHO 6	131
CHO 7	759
CHO 8	242
CHO 9	438

Table 6: Assessment of Need complaints received, 2024

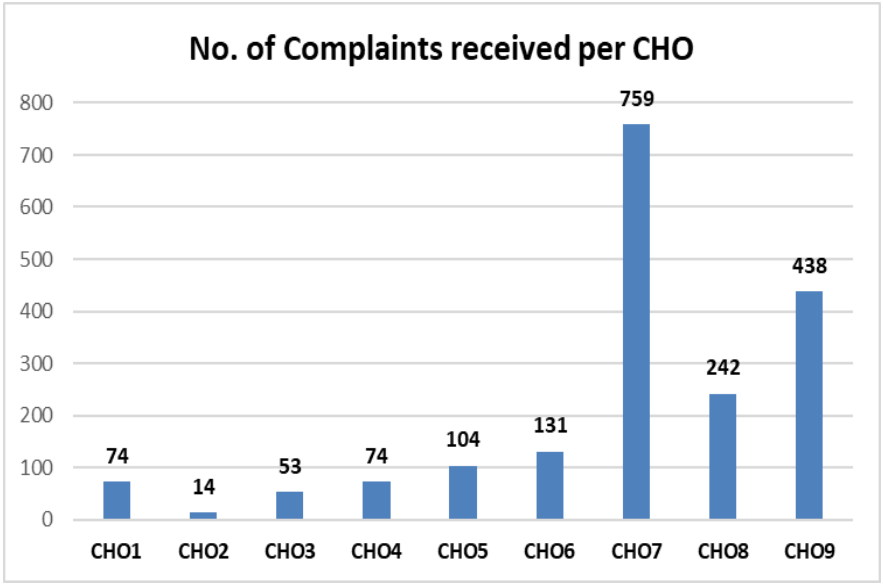


Figure 13: No of AoN complaints received per CHO

Assessment of Need Nationally (across all CHOs)

Assessment of Need Nationally (across all CHOs)	Access (ground B, D, E)	Dignity and Respect	Safe and Effective Care (ground C)	Communication and information	Participation	Privacy	Improving Health	Accountability	
AoN	1704	0	70	0	0	0	0	0	
Assessment of Need Nationally (across all CHOs)	**Clinical Judgement (ground A)**	**Vexatious Complaints**	**Nursing homes / residential care age >65**	**Nursing homes and residential care age ≤64**	**Pre-school inspection services**	**Trust in Care**	**Children First**	**Safeguarding Vulnerable Persons**	**Yet to be determined via investigation**
AoN	61	0	0	0	0	0	0	0	84

Table 7: AoN Complaints Categories 2024

Note: A complaint may contain multiple grounds for complaint. For the purposes of the table above one complaint may be counted in more than one category, hence the total of the above figures surpasses the total no. of complaints received.

Complaints Reported by Service

Assessment of Need Nationally (across all CHOs) 2023

Complaints received - Assessment of Need - Nationally (across all CHOs)	Social Care	Primary Care	Mental Health	Health and Wellbeing
AoN	1898	0	0	0

Table 8 : AoN Complaints by Service, 2024

5.0 Appendices

Appendix 1: Complaint Categories

Incident /Category	Sub Category Type	Sub Category Please Specify
Access	Accessibility / resources	Equipment
		Medication
		Personnel
		Services
		Treatment
	Appointment - delays	Appointment - cancelled and not rearranged
		Appointment - delay in issuing appointment
		Appointment - postponed
		Surgery / therapies / diagnostics - delayed or postponed
		Operation and opening times of clinics
	Appointment - other	No / lost referral letter
		Appointment - request for earlier appointment
		Unavailability of service
	Admission - delays	Delayed - elective bed
		Delayed - emergency bed
		Admission - delay in admission process
		Admission - postponed
	Admission - other	Admission - refused admission by hospital
	Hospital facilities	Crèche
		Lack of adequate seating
		Lack of baby changing facilities
		Lack of / minimal breastfeeding facilities
		Lack of toilet and washroom facilities (general)
		Lack of toilet and washroom facilities (special needs)
		Lack of wheelchair access
		No treatment area / space for consultation / trolley facilities
		Shop
		Signage (internal and external)
	Hospital room facilities (access to)	Bed location
		Disability facilities
		Isolation / single room facilities
		Overcrowding
		Public
		Semi-private / private
	Parking	Access to disabled spaces
		Access to spaces
		Car parking charges

Access contd.	Parking contd.	Damaged cars
		Clamping / Declamping of car
		Condition or maintenance of car parks
		Location of pay machine
	Transfer issues	External transfer
		Internal transfer
	Transport	External transportation
		Internal transportation
	Visiting times	Lack of visiting policy enforcement
		Special visiting times not accommodated
Dignity and Respect	Alleged inappropriate behaviour	Patient
		Staff
		Visitor
	Delivery of care	Lack of respect shown to patient during examination / consultation
		No concern for patient as a person
		Patient's dignity not respected
	Discrimination	Age
		Civil status
		Disability
		Family status
		Gender
		Membership of traveller community
		Race
		Religion
		Sexual orientation
		Socio-economic
	End-of-Life Care	Breaking bad news
		Breaking bad news - private area unavailable
		Death cert - delay in issuing death cert
		Death cert - incorrect / returned death cert
		Delay in release and condition of body
		Inattention to patient discomfort
		Mortuary facilities
		Organ retention
		Palliative care
		Poor communication
	End-of-Life Care (contd.)	Single room for patient unavailable
		Treatment of deceased not respected
	Ethnicity	Insensitivity to cultural beliefs and values
		Requests not respected
		Special food requests unavailable
Safe & Effective Care	Human Resources	Competency
		Complement
		Skill mix

Safe & Effective Care contd.	Diagnosis	Diagnosis - misdiagnosis
		Diagnosis – delayed diagnosis
		Diagnosis – contradictory diagnosis
	Test	Delay / failure to report test results
		Incorrect tests ordered
		No tests ordered
		Mislabelled test result/sample
		Mislaid sample
		Performed on wrong patient
		Repeat test required
		Result not available
		Delay in transport/collection of sample
	Continuity of care (internal)	Poor clinical handover
		Lack of approved home care packages
		Lack of community supports
		Lack of medical devices / faulty equipment
		Lack of support services post discharge
		Unsuitable home environment
	Discharge	Adherence to discharge policy
		Delayed discharge
		Discharge against medical advice
		No discharge letter
		Patient / family refuse discharge
		Premature discharge
	Health and Safety issues	Building not secure
		Central heating
		Equipment (lack of / failure of / wrong equipment used)
		Failure to provide a safe environment
		Fixtures and fittings
		Furnishing
		Lights
		Manual handling
		Noise levels
		Overcrowding
		Pest control
		Slips / trips and falls
		Temperature regulation
		Waste Management
	Health Care Records	Admission / registration process error
		Inaccurate information on healthcare record / hospital systems
		Missing chart
		Missing films/scans
		Patient impersonation (identify theft)
		Poor quality control of chart

Safe & Effective Care contd.	Health Care Records (contd.)	Poor recording of information
		Wrong records applied to patient
	Hygiene	Cleanliness of area
		Hand Hygiene / Gel Dispensers
		Linen (beds and Curtains)
		Spills on floors
		Waste management
	Infection prevention and control	Communication deficit - infection status
		Health Care Associated Infection
		Non-compliance with Infection, control policies, protocols
		Personal hygiene of staff
	Patient property	Clothes
		Dentures
		Glasses
		Hearing Aid
		Jewellery
		Lack of secure space
		Money
		Personal equipment
		Toys
	Medication	Administering error
		Dispensing
		Prescribing
	Tissue Bank	Bone marrow
		Cord blood
		Cornea implant
		Cryogenics
		Fertility issues
		Heart valves
		Samples/test results
		Skin
		Stem cell
	Treatment and Care	Failure / delay in treatment / delivery of care
		Failure / delay to diagnose
		Failure to act on abnormal diagnostic results
		Inconsistent delivery of care
		Insufficient time for delivery of care
		Lack of follow-up care
		Lack of knowledge in staff
		Lack of monitoring of pain control
		Lack of patient supervision
		Practitioners not working together / cooperating
		Prolonged fasting
		Unsatisfactory treatment or care
		Unsuccessful treatment or care

Communication & Information	Communication skills	Patient felt their opinion was dismissed / discounted
		Disagreement about expectations
		Inadequate listening and response
		Inappropriate comments from staff member
		Lack of support
		Language barrier between patients/relatives and staff
		No opportunity to ask questions
		Non-verbal tone / body language
		Open disclosure (lack of)
		Patient dissatisfied with questions
		Patient felt rushed
		Staff not introducing themselves and letting patients know their role
		Staff unsympathetic
		Tone of voice
		Untimely delivery of information
	Delay and failure to communicate	Breakdown in communication between staff or areas
		Failure / delay to communicate with outside agency/organisation
		Failure / delay in communicating with patient
		Advising patient of treating consultant
		Failure / delay in communicating with relatives
		Failure / delay in notifying consultant (external)
		Failure / delay to communicate with GP / referral source
		Lack of information provided about medication side effects (KPI)
	Diverse Needs	Interpretation service (e.g. Braille services)
		Special needs
		Translation service
	Information	Conflicting information
		Confusing information
		Insufficient and inadequate information
		Misinformation
	Telephone calls	Telephone call not returned
		Telephone call unanswered
Participation	Consent	Consent not obtained
		Lack of informed consent
		Patient felt coerced
	Parental Access and Consent	Consent, guardianship and information issues related to lesbian, gay parental relationships
		Correct procedure not consented for
		Guardianship consent not explained
		Mother or father unable to access information
		Mother/Father/Guardian not informed

Participation contd.	Patients/ Family/ Relatives	Excluded from decision making process - family / relatives / advocate / next of kin
		Excluded from decision making process - patient
		Opinion discounted - family / relatives / advocate / next of kin
		Opinion discounted - patient
		Parent not allowed accompany child in recovery room
		Parent not allowed accompany child to theatre
		Second opinion
Privacy	Confidentiality	Breach of another patient's confidentiality
		Breach of patient confidentiality
		Security of files and records
	Hospital Facilities (Privacy)	Lack of privacy during consultation/discussing condition
		Lack of privacy during examination/ treatment
		Privacy - No single room
		Privacy - Overcrowding
Improving Health	Empowerment	Independence and self care not supported
		Lack / provision of patient / carer education
		Patient / family preference discounted / disrespected
	Holistic Care	Lack of information / support on how to prevent further illness / disease
		Lack of understanding as to what is important to the patient
	Catering	Dietary requirements not met
		Food quality
	Smoking Policy	Non-compliance (visitor, patient, staff smoking)
Accountability	Patient feedback	Feedback not provided to patients on improvements made as result of their feedback
		Information about the complaints / patient feedback process not available
		Patient concerns not dealt with promptly
		Quality of response to the complaint made
		Where to go to ask questions in relation to services and giving feedback (visibility of customer services)
	Finance	Bill dispute
		Bill sent to deceased patient
		Cost of products
		Insurance cover
		Invoice error
		Unhappy with income collection process