Standard Letters  
for use by  
**Complaints Officers**

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# General Information

All correspondence should be typed on HSE headed paper.

**Please note that the following standard letters should be tailored and personalised to suit the type and nature of the complaint.**

Remember:

* Identify what questions the complainant wants answered
* List and address each item of concern clearly
* Make recommendations – All complaint investigation reports must include a recommendation. Where a complaint is not upheld, the recommendation of the Complaints Officer is: Recommendation that the complaint is not upheld and therefore no further action is needed
* In your response delete any standard fields not required - in particular please ensure that you delete the sections that do not apply to your complainant e.g.
  + Double check titles and ensure that the title used aligns with the Service User’s / Complainant preferences – Miss, Mrs, Ms, Mr, etc.
  + Use the Office of the Ombudsman or Office of the Ombudsman for Children as appropriate
* Where learning is identified, please complete the Learning Notification Form and forward to your local Complaints Manager upon completion of your investigation

**In relation to timeframes, please note ‘days’ outlined within the following standard letters refers to working days i.e., does not include weekends and bank holidays.**

# Letter from Complaints Officer to Complainant acknowledging receipt of complaint - when the complaint submitted is outside legislative timeframes

(to be issued within 5 working days of the complaint being received)

*[Insert complaint officer’s address]*

*[Insert HSE reference number]*

*[Insert date]*

**Private & Confidential**

*[Insert complainant’s name and address]*

Dear *[Insert complainant’s name]*

Thank you for your recent correspondence regarding a complaint made on *[insert date]* to *[insert HSE location/service].*  I wish to inform you that I have been assigned as Complaints Officer to examine this matter.

I note your complaint relates to issues that occurred on *[insert date].*

Under *Your Service Your Say, the Management of Service User Feedback for Comments, Compliments and Complaints* policy and in line with the Health Act 2004, a complaint can be submitted up to 12 months after the date on which the matter which is the subject of the feedback occurred or became known. However, a Complaints Officer has the discretionary delegated authority to investigate a complaint outside these timeframes if they deem it appropriate to do so.

Section 47 of Part 9 of the Health Act 2004 states:

(1) A complaint must be made within the specified period or any extension of that period allowed under subsection (3).

(2) The specified period is 12 months beginning before or after the commencement of this section, but not later than—

(a) the date of the action giving rise to the complaint, or

(b) if the person by whom or on whose behalf the complaint is to be made did not become

aware of that action until after that date, the date on which he or she becomes aware of it.

(3) 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.

[Consider the circumstances for the delayed complaint and decide to proceed or not proceed. Accompany this decision with an explanation,

*Unfortunately, having considered the circumstances for the delay in submitting your complaint I will not be proceeding with an investigation into your complaint. [insert explanation]*

*OR*

*Having considered the circumstances for the delay in submitting your complaint I am happy to proceed with investigating your complaint.*

*I propose to conduct and conclude this investigation within 30 working days of receipt of your complaint, that is, [insert date].*

*If I am not in a position to conclude the investigation within the proposed timeframe I will notify you in writing of the fact and provide you with an alternative conclusion date.*

*Should you wish to clarify any matter or issue relating to the report please do not hesitate to contact me on [insert phone number/email]. Please personalise as appropriate.*

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*[Insert name]*

Complaint Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Summary letter template (to be used when ALL issues within a complaint are resolved informally e.g. over telephone or through face to face meeting)

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

Thank you for your *(letter/email)* dated, *(insert date,* which was received on *(insert date)*. As per our *(telephone conversation/ meeting this morning/yesterday, etc.)* I would like to again offer my sincerest apologies over the *(insert detail on issue/s)*. I can appreciate your frustration and I can assure you that this is not the level of service we would wish for our service users to experience.

*(Insert summary of explanation that was discussed over phone/at meeting)*. Again I sincerely apologise for *(insert specifics)*. As I outlined to you in our conversation *(detail of steps taken to prevent issues reoccurring)*. You agreed that you were satisfied that *(this element/these elements)* of your complaint have been addressed, however, if you change your mind and require further investigation around *(this issue/these issues)* then please don’t hesitate to contact me.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter seeking further information

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

I refer to your letter of complaint dated *(insert date),* which was received on *(insert date).*

I would be grateful if you could contact me either by telephone or in writing to clarify the following *(insert details of where clarification is needed e.g. exact location, date of incident, etc.)* so that I can fully investigate your complaint. I would be most obliged if you could please forward these details to me within 10 working days of receipt of this letter.

You may contact me on *(insert contact number)* or email me at *(insert email address)* to discuss this request.

Please note, however, that any delay in receiving this information may impede a thorough investigation into the issues you raise and may impact on the timeframe for completion of this investigation.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter following lack of response to request for further information to provide additional time or to inform of ending of investigation

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

I refer to my letter(s) dated *(insert date of initial and reminder letter that have previously issued)* seeking further information in relation to *(insert detail)* and I have not yet received a response from you. *(Please note that I have also attempted to contact you unsuccessfully on the number you have provided) - (insert where appropriate).*

[For further information request letter]

Please note that without this information I will not be able to conduct a thorough investigation into the issues you raise. This delay is also impacting on the timeframe for completion of this investigation.

OR

[For closing investigation as no information forthcoming]

Please note that as the information sought was critical to the investigation, I am unfortunately, unable to conduct an investigation into the issues raised and now consider this matter closed.

You may contact me on *(insert contact number)* or email me at *(insert email address)* to discuss any issues.

Yours sincerely\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter notifying complainant of complaint being sent for investigation under an alternative pathway

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

I refer to your letter of complaint dated *(insert date),* and received (insert date). Please note that as the issue within your complaint is in relation to *(insert as appropriate, i.e. clinical issue/HR issue, etc.)* it is excluded from being examined under Part 9 of the Health Act 2004.

However, I have forwarded your complaint to *(insert contact details as appropriate)* who will follow up with you in relation to this.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Notification letter to be sent to clinical staff when a complaint contains both YSYS & clinical judgment issues

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

Dear *(Insert Title & name)*

Please find attached *(insert as appropriate a complaint letter or an extract from a complaints letter)* where a complaint involves a matter(s) of clinical judgment. As per Your Service Your Say Feedback Policy 2017, matters involving clinical judgment must be sent to the appropriate clinical professional for investigation and response.

Please find attached the **Clinical Judgment Complaint Response Report** template to be completed following your investigation and forwarded to me for inclusion, as an appendix, in my overall response to the complainant regarding their complaint.

Please note that I am investigating other non-clinical issues and hope to have my response completed by *(insert date as appropriate).*

If you would like to arrange a meeting with the complainant to either attempt to informally resolve the issues or to clarify issues, please let me know and I will endeavour to arrange same.

As I will be attaching your final report in my overall response, I would appreciate if you could advise if you anticipate any delays so I can inform the complainant.

I would be most obliged if you could have your report to me by *(insert date),* and if you wish to discuss anything please don’t hesitate to contact me.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

## Template for clinic judgment complaint response report

**HSE Reference Number (supplied by Complaint’s Officer)**

**Summary of Issue(s):**

**Investigative Process:**

**Findings & Recommendations:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title / Name**

**Date of Report**

# Standard acknowledgement letter (no clinical elements in complaint / no YSYS issues resolved informally)

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

Thank you for your *(letter/email)* dated *(insert date),* which was received on *(insert date),* regarding your concerns arising from *(insert detail).*

I will be undertaking a full investigation of the issues listed hereunder and hope to have a response to you by *(insert date 30 working days from date of acknowledgment).*

*(List and number non-clinical issues identified within complaint)*

I would be grateful if you could contact me within 5 working days of receipt of this acknowledgement if you **do not wish** for your personal information held by the HSE to be accessed by me. Please note that in my investigation, the **only** records I may need to access are those that relate specifically to the issues identified within your complaint. If I do not hear from you within that timeframe I will proceed with my investigation on the basis that you do not object to me accessing your personal information.

Please note that you will be kept informed of any delay that may arise in dealing with your complaint, before the end of the 30 working days timeframe.

If, on conclusion of the investigation, you are not satisfied with the outcome of this process then you can seek a review; either a HSE Internal Complaint Review or an Independent Review from the Office of the Ombudsman / Ombudsman for Children as appropriate.

To request a HSE Internal Complaint Review, please submit your request, setting out your reasons in writing, within 30 working days of the date the investigation report was signed, to:

Complaint Manager:

Address:

Email:

Tel:

You can also request an Independent Review from the Office of the Ombudsman.

The Ombudsman is fair, independent, and free to use. The Ombudsman will ask you for details of your complaint and a copy of our final response to your complaint.

The best way to contact the Ombudsman is by:

* ***Clicking on the ‘Make a Complaint’ link at*** [***www.ombudsman.ie***](http://www.ombudsman.ie)
* Writing to: Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773
* Calling the Ombudsman on 01 639 5600 if you have any queries

*OR, as appropriate*

Office of the Ombudsman for Children

Millennium House

*52-56 Great Strand Street*

*Dublin 1*

D01 F5P8

Tel: +353-1-8656800

LoCall: 1-890-654654(from outside 01 area)

E-mail: [oco@oco.ie](mailto:oco@oco.ie)

***May need to remove this paragraph in very serious cases***

*Thank you again for taking the time to bring your concerns to our attention. We welcome all feedback as this provides us with a valuable insight into our services from the service user perspective and can inform service improvement.*

If you require further clarification on anything then please don’t hesitate to contact me on the number below.

Please note that the details of your complaint will be recorded on the HSE’s Complaints Management System (electronic system on which all HSE complaints are recorded).

I have enclosed an overview on what to expect under the Stage 2 Formal Investigation as well as an information sheet on the Complaints Management System.

Yours sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Complex acknowledgment letter where complaint contains both YSYS and clinical judgment issues

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert Name)*

Thank you for your letter dated *(insert date),* regarding your concerns arising from *(insert details).*

*1) To be used if any of the issues are resolved informally.*

As per our *(insert as appropriate e.g. telephone conversation/meeting yesterday/ this morning/last week)* I would like to again offer my sincerest apologies over the *(insert the specific issue/s that were resolved informally).* I can appreciate your frustration and I can assure you that this is not the level of service we would wish for our service users.

As I explained *(insert explanation of what went wrong and what has been agreed to be done to resolve issue)*. Again I sincerely apologise that *(insert details).* As I outlined to you (*insert as appropriate this morning/yesterday/last week on the phone/at the meeting)*, *(insert action that has been taken).* You agreed that you were satisfied that this element of your complaint has been addressed. However, if you change your mind and require further investigation around this then please don’t hesitate to contact me.

I will be undertaking a full investigation of the issues listed hereunder and hope to have a response to you by *(insert date 30 working days from date of acknowledgment)*.

*(List and number non-clinical issues identified within complaint)*

I would be grateful if you could contact me within 5 working days of receipt of this acknowledgement if you **do not wish** for your personal information held by the HSE to be accessed by me. Please note that in my investigation, the **only** records I may need to access are those that relate specifically to the issues identified within your complaint. If I do not hear from you within that timeframe I will proceed with my investigation on the basis that you do not object to me accessing your personal information.

Please note that you will be kept informed of any delays that may arise in dealing with your complaint, before the end of the 30 working days timeframe.

If on conclusion of the investigation you are not satisfied with the outcome of this process then you can seek a review; either a HSE Internal Complaint Review or an Independent Review from the Office of the Ombudsman / Ombudsman for Children as appropriate.

To request a HSE Internal Complaint Review, please submit your request, setting out your reasons in writing, within 30 working days of the date the investigation report was signed, to:

Complaint Manager:

Address:

Email:

Tel:

You can also request an Independent Review from the Office of the Ombudsman.

The Ombudsman is fair, independent, and free to use. The Ombudsman will ask you for details of your complaint and a copy of our final response to your complaint.

The best way to contact the Ombudsman is by:

* ***Clicking on the ‘Make a Complaint’ link at*** [***www.ombudsman.ie***](http://www.ombudsman.ie)
* Writing to: Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773
* Calling the Ombudsman on 01 639 5600 if you have any queries

*OR, as appropriate*

Office of the Ombudsman for Children

Millennium House

*52-56 Great Strand Street*

*Dublin 1*

D01 F5P8

Tel: +353-1-8656800

LoCall: 1-890-654654(from outside 01 area)

E-mail: [oco@oco.ie](mailto:oco@oco.ie)

*2) To be used when the complaint contains both YSYS and clinical elements*

In relation to *(insert details of clinical issue/s)* outlined within your complaint please note that *this/these* are clinical issue/s have been referred to *(insert appropriate clinical person)* for investigation and response. I hope to include this response as an appendix to my final report.

***May need to remove this paragraph in very serious cases***

*Thank you again for taking the time to bring your concerns to our attention. We welcome all feedback as this provides us with a valuable insight into our services from the service user perspective and can inform service improvement.*

If you require further clarification on anything then please don’t hesitate to contact me on the number below.

Please note that the details of your complaint will be recorded on the HSE’s Complaints Management System (electronic system on which all HSE complaints are recorded).

I have enclosed an overview on what to expect under the Stage 2 Formal Investigation as well as an information sheet on the Complaints Management System.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# What to expect under stage 2 overview leaflet and information on the Complaints Management System (to be sent with acknowledgement letter)

**The Your Service Your Say – *what to expect sheet has been developed to give the Complainant an overview of the YSYS complaints process under Stage 2 and should be sent out with the Acknowledgment Letter. An overview of the Complaints Management System used to record their complaint and how this information will be used should also be attached.***

**Your Service Your Say – Stage 2 Formal Investigation: *what to expect.***

**Stage 2: HSE Formal Investigation Process**

A verbal complaint that could not be resolved at the point of contact or a written complaint sent into the HSE will be examined by a Complaints Officer under **Stage 2 HSE Formal Investigation Process** of the Your Service Your Say complaints management process.

***Assessment:***

The Complaints Officer upon receipt of a complaint will assess the complaint to make sure that it can be investigated under Your Service Your Say. You will be advised if the complaint needs to be examined under a different process and the Complaints Officer will ensure that your complaint is forwarded to the appropriate office or service.

***Informal Resolution:***

The Complaints Officer may contact you within **two working days** of receiving your complaint and attempt to resolve your complaint informally. However, if the complaint cannot be informally resolved or only partially resolved, the Complaints Officer will proceed to a formal investigation of the complaint.

***Formal Investigation:***

The Complaints Officer will acknowledge your complaint within **5 working days** of receiving your complaint setting out the issues to be investigated and which issues will be examined under Your Service Your Say complaints management process (Part 9 of the Health Act 2004) and which issues will be examined under an alternative pathway and how these will managed.

The Complaints Officer will also advise you that they may need to access your personal information as needed in order to fully investigate the complaint. ***Please be assured that only those records that relate specifically to the issues identified within your complaint will be accessed and only those involved in investigating your complaint will have access to this information***. Your information will be safeguarded in line with Data Protection legislation and regulations. However, if you do not wish for your personal information to be accessed then you will have **5 working days** from receipt of the acknowledgement to advise of this. Otherwise, the Complaints Officer will proceed with the investigation on the basis that you do not object to the accessing of your personal information.

If a complaint is submitted by a third party on your behalf, the Complaints Officer will contact you directly to confirm your consent to the complaint and your permission for the Complaints Officer to communicate with the person who submitted the complaint and answer any questions they raise. They will also seek your preference in regard to being copied on all communication. The Complaints Officer will include a HSE Consent Form for you to complete and return which will indicate your consent or otherwise and your preferences.

A Complaints Officer may also contact you if more information is needed and you will have **10 working days** to provide this. If you cannot provide this information in that timeframe, the Complaints Officer may extend the deadline. However, if you do not respond to the request for information please know that this may impact the investigation. Also any delay in submitting information required will also impact on the timeframe for completion of the investigation.

The Complaints Officer will try to investigate your complaint within **30 working days**, but will advise you if more time is needed before the end of the 30 working day period. The Complaints Officer will then keep you **updated every 20 working days** thereafter if additional time is needed.

When the Complaints Officer has completed the investigation a report will be issued outlining the issues that were examined, how these were investigated, the findings and any recommendations arising as a result of your complaint. In the cover letter accompanying the report the Complaints Officer will also set out your rights for further review of your complaint should you be unhappy with the outcome of the investigation under Stage 2 of the Your Service Your Say process.

If your complaint contained clinical judgment issues that could not be investigated under the Your Service Your Say complaints management process (Part 9 of the Health Act 2004), the clinical judgment report on those issues will be attached as an appendix to the Complaints Officers report.

**Review Rights**

You can request a **Stage 3 HSE Internal Complaint Review** of those issues investigated under the Your Service Your Say complaints management process (Part 9 of the Health Act 2004) where a Review Officer will be appointed to examine the appropriateness of any recommendations made having regard to all aspects of the complaint and its investigation.

**Stage 3: HSE Internal Complaint Review**

**al Investigation Process**

**Stage 4: Independent Review**

**al Investigation Process**

You can also request a **Stage 4** **Independent Review** of your complaint from, for example, the Office of the Ombudsman / Ombudsman for Children, either directly after Stage 2 Formal Investigation or following a Stage 3 Internal Complaint Review.

***Follow up to the investigation:***

A copy of the Complaints Officer’s investigation report will be issued to you and to the relevant head of service (Accountable Officer).

The head of service (Accountable Officer) will write to you and the Complaints Officer within **30 working days** to advise of their acceptance of the recommendations and an action plan to implement same as appropriate or to advise if they intent to amend or reject a recommendation, the reasons why and any alternative measures being taken.

Where no Recommendation Action Plan is forthcoming from the relevant head of service (Accountable Officer), the Complaints Officer must follow up.

If after a period of time recommendations made are not implemented, you can contact the Complaints Officer or the relevant Hospital Group Chief Executive Officer or Community Health Organisation Chief Officer.

Please note that where you request a review of the outcome of the investigation, the relevant head of service (Accountable Officer) may suspend the implementation of recommendations, pending the outcome of the review but will notify you of this suspension within **5 working days** of making that decision.

Further information on Your Service Your Say can be found at [www.hse.ie/yoursay](http://www.hse.ie/yoursay)

Information on advocacy services available to assist you can be found at:

<https://www.hse.ie/eng/services/yourhealthservice/feedback/services/>

## What is the HSE’s Complaints Management System (CMS)?

The CMS is a national database management system.  The Complaints Management System has been developed by State Claims Agency and is hosted on the Government VPN, which means it can only be accessed by users approved to have access to this network. Users are only allocated access to the system based on their requirement, role and location.

The CMS was developed to support the HSE’s complaints management process and to enable the end-to-end management and tracking of complaints, investigations, outcomes and recommendations at local level.

Anonymised data will enable all participating service areas take appropriate decisions in the light of accurate and up-to-date information and will drive better complaints management standards not only in those sites but throughout the HSE.

## What information is recorded?

* Your name and contact details
* The details of your complaint
* The record of the complaint investigation and outcomes

## What happens to my information?

Primarily the information is used by a delegated Complaints Officer to investigate your complaint.

Secondary usage may include research, statistical data and reports.\*

\*If your information is used for any of these purposes you can be assured that all your personal identifying information is removed and fully anonymised, thus protecting your identity.

## What about confidentiality?

Everyone working within the Health Service Executive has a legal duty to keep service users’ personal information confidential. The HSE has a strict code of conduct in place to ensure that your information is kept safe and secure. The HSE is obliged to be fully compliant with all aspects of Data Protection legislation.

## Who can see my information?

The CMS has restricted access. Your personal information will only be seen by HSE staff involved **directly** in the investigation of your complaint. Complaints Officers and support staff can only access records relevant to where they investigate complaints. Support staff must also sign a Memorandum of Understanding, which sets out areas of mutual responsibility in relation to confidentiality of records held on the CMS.

## Are there times when information cannot be kept confidential?

Yes, in certain circumstances, outlined below, it may be necessary for us to disclose personal information to third parties:

* If we have concerns about a child or parent at immediate risk of abuse or a potential safety risk to themselves or others, we must report our concerns to authorities such as An Gardaí or other health or social services.
* We must share information when it is urgently needed to prevent injury or damage to the health of any person or prevent serious loss of or damage to property.
* We must share details if required by law or ordered by a court.
* We must disclose information to other health professionals in a medical emergency.

## What say do I have in what happens to my information?

You have a say in what happens to your information. If you decide not to share some of your information or restrict access to your complaint record, this is your right, but it may affect our ability to fully investigate and learn from your complaint. Talk to us if you wish to change or cancel your consent ([nationalcglt@hse.ie](mailto:nationalcglt@hse.ie)), or call 061-483297.

## Can I access my information?

There are 2 methods of requesting access to records. You can:

* Request records under the Freedom of Information Acts 2014.
* Request records under the General Data Protection Regulation (GDPR) and Data Protection Act 2018.

## I want more information

For more information about how we use information about complaints, email the National Complaints Governance and Learning Team at [nationalcglt@hse.ie](mailto:nationalcglt@hse.ie), or call 061-483297.

# Letter to be sent to Complainant where consent is required from Service User

*[Insert complaint officer’s address]*

*[Insert HSE reference number]*

*[Insert date]*

**Private and confidential**

*[Insert name and complainant’s address]*

Dear *[Insert review requester’s title and name]*

I wish to inform you that I have been appointed as the Complaints Officer for the complaint that you submitted on *[insert date]* in relation to *[insert brief description].*

As this request is made on behalf of *[insert name of service user],* I must check with them whether or not they wish to have this complaint investigated and what their preferences are in relations to communication.

I have written to *[insert name of service user]* seeking *his/her* consent to proceed with the investigation and their permission to liaise with you as their advocate.

If it is the wish of *[insert name of service user]* not to have this complaint investigated, I will close the request and notify you. It is also open to *[insert name of service user]* to raise any complaints he/she has directly with the *[insert name of service provider]* if they wish.

If you have any queries, please do not hesitate to contact me *[insert contact details].*

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*[Insert name]*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter requesting consent to investigate a complaint where the complaint is made by a third party

*[Insert HSE reference number]*

*[Insert date]*

**Private and confidential**

*[Insert patient/service user name and address]*

Dear *[Insert patient/service user title and name]*

I wish to advise you that *[insert name of person who submitted the complaint]* has contacted the HSE on your behalf.

*[Insert name of person who submitted the complaint]* has made a complaint on your behalf regarding *[insert summary of request].*

As this request is about your *[care and treatment],* I must check whether or not you consent to an investigation taking place. I will also need your consent to access, where needed, your personal information as part of the investigation. Please note the **only** records I may need to access are those that relate specifically to the issues identified within the complaint.

I would also need your permission to liaise with *[insert name of person who submitted the complaint]* *as* your advocate. This means that I would write to *[insert name of person who submitted the complaint]* directly about your care and try to answer any questions *[he/she]* raises.

If you do not want an investigation to take place, I will close the request and notify *[insert name of person who submitted the complaint]* It is also open to you to raise any complaints you have directly with the *[insert name of service provider]* if you wish.

I am enclosing a consent form. Please read carefully and I would be grateful if you would complete this and return to me at the above address by *[insert date to cover 10 working days].*

If I do not hear from you by this date, I will take this as confirmation that you are **not happy** for this complaint to be investigated*.* If you have any questions or you would like to discuss any part of this letter, please do not hesitate to contact me. My contact details are *[insert telephone number / email address]*.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*[Insert name]*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

PRINT ON HEADED PAPER

**HSE Consent Form**

*[Insert HSE reference number]*

*[Insert name and address of service user]*

**Please tick to show what you would like to happen.**

|  |
| --- |
| I *[Insert name of service user],*agree to *[insert name of advocate]* acting as my advocate. **⬜**  This means that I**,** *[Insert name of service user],*grant permission to *[insert name of advocate]* to submit this complaint on my behalf.  I**,** *[Insert name of service user],* **grant** **⬜ do not grant ⬜**  permission to *[insert name of complaints officer]* to access my personal patient confidential information for the purpose of investigation of the complaint.  **I grant** **⬜ do not grant ⬜** *[insert name of complaints officer]* permission to send correspondence to and receive correspondence from *[insert name of person who submitted the complaint]* on my behalf.  I wish to be copied on all correspondence sent to my Advocate. **⬜**  I wish to be the **only** person to be sent correspondence on this complaint**.** **⬜**  Please issue correspondence to me at (insert postal or email address):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **OR**  I *[Insert name of service user],* **do not agree** to *[insert name of advocate]* acting as my advocate. **⬜**  This means that I**,** *[Insert name of service user],* **do not** grant permission to *[insert name of advocate]* to submit this complaint on my behalf.  **I do not give my consent for this complaint investigation to proceed. ⬜** |

Telephone number: ⬜⬜⬜⬜⬜⬜⬜⬜⬜⬜

|  |  |  |  |
| --- | --- | --- | --- |
| Signed: |  | Date: |  |
|  | *[Signed by Service User ]* |  |  |

# Letter notifying delay or further delay (to be issued before the expiration of the 30 working days and every 20 working days thereafter)

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

I refer to your letter of complaint dated *(insert date)* and acknowledged by me on *(insert date)*.

I wish to notify you that there will be a delay *(or further delay)* in responding to your complaint by *(insert original response date)* as stated in my *(acknowledgement / delay notification letter)* to you dated (insert date).

This delay is due to *(insert reason for delay)*.

You can now expect a response by *(insert date)*.

I apologise for this *(delay / further delay)* and for any inconvenience or upset caused to you as a result.

If you have any queries in relation to this matter, please do not hesitate to contact me *(insert telephone/email)*.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter from Complaints Officer advising a line manager of receipt of a complaint against a named staff member

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

Dear *(Insert Title & name)*

I wish to inform you that I have been appointed as the Complaints Officer for a complaint which was submitted to the HSE on *[insert date]* in relation to *[insert detail]*. The complaint involves a member of your staff, *[insert name*].

As outlined in the Your Service Your Say Feedback Policy 2017, the principals of natural justice and fairness require that any persons directly affected by a complaint be;

1. Informed of the complaint,
2. Provided with an opportunity to respond
3. Informed of the conclusions reached following investigation of the complaint and of the findings which informed these conclusions, and
4. Afforded the opportunity to respond to any adverse findings.

Can you please advise *[insert name of staff member]* of this complaint received and that I will be in direct contact with them? Can you also please advise them of the various supports available to assist them through this process?

I will inform you of any adverse findings following my investigation should any follow up action be required.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter from Complaints Officer to named staff member advising of receipt of a complaint against them, what is required from them and what their rights are

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

Dear *(Insert Title & name)*

Please find attached *(insert as appropriate a complaint letter or an extract from a complaints letter)* where you have been named as part of a complaint. *(Only include elements of the complaint directly related to the named person)*

Please note that I have been assigned as Complaints Officer to examine this matter.

As outlined in the Your Service Your Say Feedback Policy 2017, the principals of natural justice and fairness require that any persons directly affected by a complaint be;

1. Informed of the complaint,
2. Provided with an opportunity to respond
3. Informed of the conclusions reached following investigation of the complaint and of the findings which informed these conclusions, and
4. Afforded the opportunity to respond to any adverse findings.

Can you please provide me with a detailed account of events from your perspective by *[insert date),* (10 working days)

OR

I would like to arrange a meeting with you to discuss the complaint. Can you please advise by [insert date] if you are available on *[insert date and time)?* Please know that you are entitled to bring a representative with you to the meeting.

If any adverse findings or conclusions are reached *in relation to you or directly affecting you* during the course of the complaint investigation, I will provide you with an extract of the draft report regarding these. You will have a further opportunity to provide additional comment which I will consider.

I will then issue you the extract from the final report that relates to your involvement within the complaint.

If you remain dissatisfied with the findings, please note that you can discuss these with your Line Manager who will advise you of your right to progress this through the HSE’s Grievance and Disciplinary Procedures.

Please know that your Line Manager can advise you of the various supports available to you during this process.

If you have any questions, please do not hesitate to contact me directly.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter from Complaints Officer to Staff Member re adverse findings

**Follow up phone call required to ensure receipt of letter**

*[Insert complaint officer’s address]*

*[Insert HSE reference number]*

*[Insert date]*

**Private and confidential**

**Strictly for the attention of the addressee only**

*[Insert staff member’s name and address]*

Dear*[Insert staff member’s name and title]*

Further to my investigation, please find attached an extract of my draft report into a complaint made by (insert name of complainant / insert name of complainant made on behalf of [inset name]].

During the course of my investigation I have also made a number of draft adverse findings. In accordance with the principles of natural justice and the legislation, I am sending you the draft findings relevant to you, for your consideration and response if desired.

I would be grateful if you would examine the extracts from the draft report and if you have any comments which you would like me to take into account as part of my final deliberations, please forward these to me within 10 working days *[insert date].*

If you have any queries in relation to this matter, please do not hesitate to contact me on *[insert telephone number/email].*

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*[Insert name]*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Letter to be sent to complainant who has withdrawn their complaint

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

Further to your recent contact by *(phone/email/letter)* I note that you no longer wish to pursue your complaint.

I now consider this complaint withdrawn and closed.

If I can be of any further assistance in the future, please do not hesitate to contact me *(insert phone number/email).*

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

# Cover letter for final report

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert name and complainant’s address)*

Dear *(Insert complainant’s title and name)*

I wish to inform you that I have completed my investigation into your complaint dated *(insert date),* which I received on the *(insert date).* I now attach for your information a copy of my report outlining the investigation process and my findings and recommendations.

If you wish to have any matter or issue clarified, please do not hesitate to contact me on *(insert contact number)* or e-mail me at *(insert e-mail)*.

Please note that each of the recommendations outlined within my report will be sent to the Accountable Officer, *(insert name & title)* who will within 30 working days of receiving this report, notify you in writing of the steps being taken to implement the recommendations made. If, for any reason, the Accountable Officer decides to amend/reject any of these recommendations, *he/she* must set out clearly in writing the reasons for doing so.

Again I would like to sincerely apologise for *(insert reason).* I can assure you that this is not the level of service we would wish to provide.

If you are dissatisfied with my recommendation(s) you are entitled to seek a HSE Internal Complaint Review of same by writing, within 30 working days of the date of the signed report, setting out in writing the reasons for your dissatisfaction with my recommendations to the HSE Complaints Manager (details below) who will assign a Review Officer to your case, or you can seek an Independent Review by referring your complaint to the Office of the Ombudsman */ Ombudsman for Children*.

The Ombudsman is fair, independent, and free to use. The Ombudsman will ask you for details of your complaint and a copy of our final response to your complaint.

To request a **HSE internal complaint review**, please contact:

Complaints Manager:

Address:

Email:

Tel:

To request an **independent review**:

The best way to contact the Office of the Ombudsman is by:

* ***Clicking on the ‘Make a Complaint’ link at*** [***www.ombudsman.ie***](http://www.ombudsman.ie)
* Writing to: Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773
* Calling the Ombudsman on 01 639 5600 if you have any queries

*(OR, as appropriate)*

Office of the Ombudsman for Children

Millennium House

*52-56 Great Strand Street*

*Dublin 1*

D01 F5P8

Tel: +353-1-8656800   
LoCall: 1-890-654654(from outside 01 area)   
E-mail: [oco@oco.ie](mailto:oco@oco.ie)

INSERT BELOW PARAGRAPH AS APPROPORIATE

Please note that you will also find attached a separate clinical judgment response report in Appendix *(insert number)* from *(insert Clinical person name & title)* in relation to *(her/his)* investigation around the clinical element of your complaint i.e. *(outline clinical issue(s))*. Any further queries around this element of your complaint should be directed to the *(insert clinical person’s name and contact details)*.

INSERT BELOW PARAGRAPH AS APPROPORIATE

As part of our quality assurance process I would appreciate if you could complete the enclosed survey; ***Complaints Handling – Service User Feedback Form***, regarding the complaints management process and return this to *(insert name and contact details for Complaints Manager)*

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

*cc Accountable Officer*

*Enc Complaints Officer Report*

For further information on the HSE’s complaint’s process please visit <http://www.hse.ie/yoursay>

**Private and confidential**

# Complaints Officer Report and Recommendations



Reference number (Insert Number)

Table of contents

1. Summary of the complaint

2 Informally Resolved Matters (Remove as appropriate)

3 Clinical Issues (Remove as appropriate)

4 The investigative process

5 Findings & Recommendations

6 Learning

7 Recommendation summary

8 Appendices

1. Summary of the Complaint

In this section give a brief summary of the complaint *(****Who*** *made the complaint?* ***What*** *is the complaint about?* ***Where*** *did the issue giving rise to the complaint happen?* ***When*** *did it happen?)* *and the key issues to be examined: For Example:*

*(Insert service user’s name)* wrote to the HSE on *(insert date),* regarding *his/her* complaint. The complaint was received by the HSE on the *(insert date).*

The key issues of concern outlined by the service user were:

*(Insert detail as appropriate)*

(Remove the following if no specific questions asked)The service user has raised specific questions in relation to these issues:

*(Insert detail as appropriate)*

The above issues have been summarised as follows for the rest of this report:

List and number the issues outlined within the complaint and align these to the various complaint classification headings such as Access; Dignity and Respect; Safe and Effective Care; Communication and Information; Participation; Privacy; Improving Health or Accountability). If you can insert the sub category also; e.g. dignity and respect (delivery of care)

Issue 1: Access (Appointment delays): *insert detail*

Issue 2: Communication and Information (Communication Skills) – *insert detail*

Issue 3: Safe and Effective Care (Discharge) – *insert detail*

Issue 4: Improving Health (Catering) – *insert detail*

Issue 5: Privacy (Hospital Facilities) – *insert detail*

1. Informally Resolved Matters (Remove this heading if not appropriate

Issue number: *(Insert number) (insert detail)*: As outlined in the Acknowledgment letter, a *(phone call/meeting)* was made to service user on the *(insert date),* where this issue was discussed and resolved informally. *(Insert detail of any apologies provided and any agreed actions to prevent a recurrence of the issue as a result of meeting/phone call)* The service user has been informed in previous correspondence of their right to request a further investigation of these informally resolved matters if they so wish.

1. Clinical Issues (Remove this heading if not appropriate)

The Health Act 2004 defines clinical judgement as:

*‘a decision made or opinion formed in connection with the diagnosis, care or treatment of a patient’.*

**Issue number:** *(Insert number) (insert detail)*:

This issue, which is a clinical judgment issue and cannot be investigated by a Complaints Officer under Part 9 of the Health Act 2004, was referred to *(Insert name and title of clinical person)* for follow up and investigation as appropriate.

*A separate response, Clinical Judgment Response Report is included with this report See Appendix 1.*

4. The Investigative Process

List complaint issues below (for example)

Issue 1: Access (Appointment delays): *insert detail*

Issue 2: Communication and Information (Communication Skills) – *insert detail*

Issue 3: Safe and Effective Care (Discharge) – *insert detail*

Issue 4: Improving Health (Catering) – *insert detail*

*Insert a description of the investigation process*

***Issue 1****: (insert detail) – Investigation of this issue encompassed the following:*

*(insert detail)*

***Issue 2:*** *- (insert detail) Investigation of this issue encompassed the following:*

*(insert detail)*

***Issue 3:*** *- (insert detail) Investigation of this issue encompassed the following:*

*(insert detail)*

***Issue 4:*** *- (insert detail) Investigation of this issue encompassed the following:*

*(insert detail)*

5. Findings & Recommendations

* Outline the findings of your investigation / give a summary of the outcome of the investigation. Where relevant, answer the following questions:
  + How did the incident happen?
  + Why did it happen?
* State whether you acknowledge any fault on behalf of the HSE – apologise where the HSE is at fault**.**

***Considering providing an apology or expressing regret for the Service User’s experience.***

**Issue 1: *(****insert detail) – Investigation of this issue encompassed (insert detail****)***

**Finding:**

Below is an example of wording that could be used in a situation where you are unable to uphold a complaint due to lack of evidence to support the complaint:

*Example ‘I am unable to uphold your complaint in relation to this specific issue as I am unable to reach a determination one way or the other on the matter.  I would like to emphasise however that this does not mean that I do not accept your version of events, merely that it is not possible to reach a conclusion on this issue.’*

**Finding*:***

This complaint is ***upheld/not upheld****.*

**Recommendation**: *(insert recommendations)*

**Issue 2:** *(insert detail) – Investigation of this issue encompassed (insert detail)*

**Finding*: (****insert detail)*

This complaint is ***upheld/not upheld***

**Recommendation: *(****insert recommendations)*

6. Learning *(insert detail on any learning identified as a result of complaint)*

*For example:*

*I would like to take this opportunity to thank you again for taking the time to contact us with your concerns. I want to assure you that the investigation and recommendations outlined above has resulted in important learning for the Centre and subsequently will lead to service improvement.*

7. Recommendation Summary

**List detail of all recommendations below:**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Complaints Officer

8. Appendices

*Appendix 1 Clinical Judgment Response Report*

# Service User feedback form (optional form which can be sent with final report)

***The HSE Complaints Management Process - Service User Feedback Form can be included with the final report going out to the Complainant. Please ensure your local Complaint Managers details are inserted at the bottom of this form***.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Complaint Handling: Service User Feedback Form** | | | | | | |  | | | |
| **Name of Complaints Officer (in block capitals): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | |  | | | |
|  |  | | | | | | **Yes** | | **No** | |
| **1.** | **Was your complaint handled within the required complaint investigation timeframes, as follows:** | | | | | |  | |  | |
|  | 1. Was your initial contact with your Complaints Officer within 48hrs/two working days? | | | | | |  | |  | |
|  | 1. Did you receive an acknowledgement of your complaint within five working days? | | | | | |  | |  | |
|  | 1. Did the acknowledgement set out the issues to be investigated and provide you with your review rights? | | | | | |  | |  | |
|  | 1. Was the investigation into your complaint completed within 30 working days? | | | | | |  | |  | |
| **2.** | **If applicable, were you advised of a delay to the investigation** (*that it would take longer than 30 working days*) **and any ongoing delay?**  *(target is every 20 working days, after delayed investigation deadline)* | | | | | |  | |  | |
| **3.** | **Were you pleased with the quality of communication with the HSE** (Complaints Officer) **during the complaints process?** | | | | | |  | |  | |
| **4.** | **Did you receive an investigation report that set out the issues investigated, how there were examined, the findings and the recommendations?** | | | | | |  | |  | |
|  |  | | | | | |  | |  | |
|  | *Additional remarks and comments:* | | | | | |  | |  | |
|  |  | | | | | |  | |  | |
| **6.** | **Were you made aware of your rights to request an HSE Internal Review of your complaint, and/or Independent Review** *(e.g. Office of the Ombudsman, etc.)?* | | | | | |  | |  | |
|  |  | | | | | |  | |  | |
| **7.** | Overall, how satisfied are you with the handling of your complaint? | | | | | |  | |  | |
|  | Tick ***one*** as appropriate: | | |  |  | |  | |  | |
|  | Excellent |  | Adequate |  |  |  | |  | |
|  | Good |  | Poor |  |  |  | |  | |
|  | Satisfactory |  | Unsatisfactory |  |  |  | |  | |
|  |  | | | | | |  | |  | |
|  | *Additional remarks and comments:* | | | | | |  | |  | |

**Thank you for taking the time to complete this evaluation.**

**Please return the form to the Complaints Manager.**

Complaint Manager Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Letter to Accountable Officer outlining recommendations made

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert - Re: (complainant name))*

*(Insert date)*

*(Insert name and Address of accountable officer)*

Dear *(Insert accountable officer’s name)*

In line with Your Service Your Say Feedback Policy 2017, I recently undertook an investigation into a complaint made by the above named service user. As a result, I have made a number of recommendations regarding your service area.

Please find enclosed [a copy of the final report / the relevant portion of the investigation report], including recommendations made.

In accordance with Your Service Your Say Feedback Policy 2017, you are required to notify the Complainant / Service User and me of your intention to accept or reject these recommendations. If you are accepting these recommendations, you must complete and enclose the attached action plan template for each recommendation listed with your communication.

If you reject any of the recommendations, you must outline reasons for same.

If you propose to amend any of the recommendations, you must outline the proposed amendment and your reasons for same.

The final report went to the Complainant on *(insert date),* therefore your Recommendation Action Plan is due 30 working days from this date. Enclosed is the Action Plan template which should be completed.

If you have any queries, please don’t hesitate to contact me.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

## Recommendation Action Plan Template

The Action Plan will set out what recommendations have been accepted, or rejected and why, by the Accountable Officer. The plan will also set out where a recommendation has been amended, and why, and include the revised text for the recommendation. In addition the Accountable Officer will advise by when the recommendations should be implemented. For updates on the implementation of recommendations please contact your Complaints Officer.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Action Plan Template** | | | | |  |  |
| **Insert Complaint Reference Number** | | | | |  |  |
| **No.** | **Recommendation** | **Accountable Officer** | **Approved or Rejected or Amended** | **Outline Reason for Rejection / Amendment** | **Text of amended recommendation (if applicable)** | **Date of Implementation of Recommendation** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
|  |  |  |  |  |  |  |



HSE Your Service Your Say Anonymised Learning Notification Form

**Complaint Investigation  Review**

**Completed: Q1  Q2  Q3  Q4**

**Location: CHO and Service Area**

**Hospital and Directorate**

**National Service**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Complaint Category** |  | **Sub Category** |  | **Issue** |  |
| **Complaint Category** |  | **Sub Category** |  | **Issue** |  |
| **Complaint Category** |  | **Sub Category** |  | **Issue** |  |

**Complaint Status: Upheld  Partially Upheld  Not Upheld**

|  |  |  |  |
| --- | --- | --- | --- |
| **Background to Complaint** | | | |
|  | | | |
| **Investigation** | | | |
|  | | | |
| **Outcome and Learning** | | | |
|  | | | |
| **Please forward the Anonymised Learning Notification Form to your Complaints Manager** | | | |
| **Name:** | **Complaints Officer** | | **Review Officer** |
| **Email:** | | **Tel/Mobile:** | |
| **Occurrence or Reference Number:** | | | |
| **Complaints Manager Name:** | | **Date: DD/MM/YYYY** | |

# Response to correspondence received after a complaint has been closed

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert date)*

*(Insert complainant’s address)*

Dear *(Insert complainant’s title and name)*

Thank you for your *(letter/email)* dated *(insert date),* which was received on *(insert date)*.

*Due to the new information provided it will be necessary to refer the complaint for a new investigation. A Complaints Officer will be assigned to your complaint and will be in touch to discuss this further with you.*

OR

This complaint has already been investigated and a response was issued on *(insert date)*. As your correspondence raises no new issues, I am, therefore, not in a position to carry out any further investigation of this matter.

If you are dissatisfied with the recommendation*(s)* in my investigation report issued to you on *(insert date)* you are entitled to seek a HSE Internal Complaint Review of same, within 30 working days of the date of the signed report, setting out in writing the reasons for your dissatisfaction with my recommendations to the HSE Complaints Manager (details below) who will assign a Review Officer to your complaint, or you can seek an Independent Review by referring your complaint to the Office of the Ombudsman */ Ombudsman for Children*.

The Ombudsman is fair, independent, and free to use. The Ombudsman will ask you for details of your complaint and a copy of our final response to your complaint.

To request a **HSE internal complaint review**, please contact:

Complaints Manager:

Address:

Email:

Tel:

To request an **independent review**:

The best way to contact the Office of the Ombudsman is by:

* ***Clicking on the ‘Make a Complaint’ link at*** [***www.ombudsman.ie***](http://www.ombudsman.ie)
* Writing to: Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773
* Calling the Ombudsman on 01 639 5600 if you have any queries

*(OR, as appropriate)*

Office of the Ombudsman for Children

Millennium House

*52-56 Great Strand Street*

*Dublin 1*

D01 F5P8

Tel: +353-1-8656800

LoCall: 1-890-654654(from outside 01 area)

E-mail: [oco@oco.ie](mailto:oco@oco.ie)

*(Please personalise as appropriate. Ombudsman for Children to be used in cases where complainant is under 18 years or an adult wishes to make a complaint on behalf of a child under 18 years.)*

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

# letter to accountable officer seeking update on implementation of recommendations made

*(Insert complaints officer’s address)*

*(Insert HSE reference number)*

*(Insert - Re: (complainant name))*

*(Insert date)*

*(Insert name and Address of accountable officer)*

Dear *(Insert accountable officer’s name)*

In line with Your Service Your Say Feedback Policy 2017, I undertook an investigation into a complaint made by the above named service user following which I made a number of recommendations regarding your service area.

As per policy you contacted both myself and insert name of Complainant / Service User on insert date to advise that you were accepting insert ‘all’ or specify the number of the recommendations and issued a Recommendation Action Plan.

In accordance with Your Service Your Say Feedback Policy 2017, can you please update the Recommendation Action Plan Update template enclosed/attached and specify for each recommendation listed if this is implemented, in-progress, partially implemented or delayed and the reasons.

Can you please return your completed Recommendation Action Plan Update to me within **10 working days** of the date of this request?

If you have any queries please don’t hesitate to contact me.

Yours sincerely

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name)*

Complaints Officer

## Recommendation Action Plan Update Template

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Recommendation Action Plan Update Template** | | | | | | | |
| **Insert Complaint Reference** | | | | | | | |
| **No.** | **Detail of Approved Recommendation** | **Accountable Officer** | **Date for Implementation advised post Complaint investigation.** | **Status of implementation (Implemented / In-progress / Partially Implemented / Delayed)** | **Comment**  **(*please provide explanation regarding partial, in-progress or delayed implementation*)** | **Revised date of implementation** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
|  |  |  |  |  |  |  |