

## Complaints Policy

The Dental Health Foundation (DHF) is committed to providing a high-quality service to all who engage with us. However, we recognise that there may be occasions when a person may wish to express dissatisfaction with our work.

### 1. Definition of a complaint.

A complaint is any expression of dissatisfaction about any aspect of our service, including the actions or behaviour of our staff.

As per the Health Act 2004 a “complaint” means a complaint made about any action of a service provider that—

- (a) it is claimed, does not accord with fair or sound administrative practice, and
- (b) adversely affects the person by whom or on whose behalf the complaint is made.

### 2. Purpose of our complaints policy.

The Purpose of this policy is to:

- Provide a clear and transparent process for clients to raise complaints.
- Ensure complaints are handled in a timely, fair, and respectful manner.
- Ensure that we learn from complaints, use them to improve, and monitor them at Board level.

### 3. Who can make a complaint.

This policy applies to any member of the public, our supporters, and all who engage with us, who wish to make a complaint about the services provided by the DHF.

A complaint can be made about any action of the DHF that-

- (a) it is claimed, does not accord with fair and sound administrative practice, and
- (b) adversely affects or affected that person.

### 4. How complaints can be made.

Complaints can be made verbally, in writing, or electronically.

**By Phone:** 0 2136112

**In Writing:** Dental Health Foundation, 1<sup>st</sup> Floor, Unit 5, Block A, Leopardstown Office Park, Leopardstown, Dublin 18. D18 X3X7

**Email:** [info@dentalhealth.ie](mailto:info@dentalhealth.ie)

## 5. Acknowledgements.

If a complaint is in person or over the phone, we will try to resolve the issue there and then.

If a complaint is received by email or in writing, we will acknowledge receipt of the complaint within 5 days.

The acknowledgment will include the name and contact details of the person handling the complaint and will outline the steps that he or she proposes to take in investigating the complaint and the time limits for the completion of the investigation.

## 6. Advocacy.

All complainants have the right to appoint an advocate who, if a person is unable to make a complaint themselves, can assist them in making the complaint.

## 7. The stages of the complaints management process.

### **Stage 1: Point of contact resolution**

These are straightforward complaints that can potentially be resolved quickly and to the satisfaction of the service user at the initial point of contact.

### **Stage 2: Formal investigation**

Unresolved complaints at Stage 1 may require further review. More serious or complex matters may be given immediate attention under Stage 2, necessitating a thorough investigation and appropriate actions. In the first instance, these complaints will be dealt with by our Administrator (Complaints Officer).

The Complaints Officer must evaluate whether it is feasible, given the nature and circumstances of the complaint, to seek the consent of both the complainant and any other involved parties to pursue an informal resolution of the complaint among those concerned.

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

The Complaints Officer is responsible for carrying out the formal investigation of the complaint at Stage 2 but may consult with other staff as needed. Staff have an obligation to participate and support the investigation of any complaint where requested.

Following a thorough investigation, a full response to the complaint will be provided within 21 working days of receipt. If the investigation cannot be completed within this timeframe, the complainant will be informed of the delay and the expected completion date.

The response will outline the findings of the investigation and any actions taken to resolve the complaint. A copy of the findings will be given to the CEO.

### **Stage 3: Internal review**

If a complainant is not satisfied with the outcome of the initial investigation, they can request a review within 30 working days of receiving the response. The review will be conducted by the CEO. If a complainant is still not satisfied with the outcome, they are invited to contact the

Chairperson of the Board who will ensure the appeal is considered at Board level. S/he will respond within two weeks of this consideration by Board members.

#### Stage 4: External review

If the complainant remains dissatisfied after the internal review, they can escalate the complaint to an external body:

Correspondence for the Office of the Ombudsman can be sent by post to, **Office of the Ombudsman, 6 Earlsfort Terrace, Dublin 2, D02 W773** or you can email to [complaints@ombudsman.ie](mailto:complaints@ombudsman.ie)

## 8. Managing complaints.

Timeframes	
To make a complaint	12 months
Acknowledgement letter	5 days after receipt
Withdraw complaint	At any stage
Request a review of a complaint	30 working days after receipt of full response to complaint
Refer complaint to the Ombudsman	At any stage
Point of contact resolution	Immediate/ <48 hours if possible
Full response to complaint	21 days after receipt
Notify complainant of decision to extend investigation	21 days after receipt
Response following internal review	21 days after receipt of request to review
Response following review at Board level	2 weeks

## 9. Time limits for making a complaint.

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

- A complaint must be made within 12 months of the date of the action giving rise to the complaint or within 12 months of the complainant becoming aware of the action giving rise to the complaint.

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

- If the complainant is ill or bereaved
- If the new relevant, significant and verifiable information relating to the action becomes available to the complainant
- If it is considered in the public interest to investigate the complaint
- If the complaint concerns an issue of such seriousness that it cannot be ignored
- Diminished capacity of the service user at the time of the experience e.g. mental health, critical/ long-term illness
- Where extensive support was required to make the complaint, and this took longer than 12 months
- A Complaints Officer must notify the complainant of decision to extend / not extend time limits within 5 working days.

## 10. Principles Governing the Investigation Process.

All investigations will be conducted thoroughly and objectively with due respect for the rights of the complainant and the rights of the service/staff members to be treated in accordance with the principles of natural justice.

All complaints will be handled with the utmost confidentiality. Information will only be shared with those directly involved in the investigation and resolution of the complaint.

A record of all complaints, including details of investigations and outcomes, will be maintained for a period of seven years.

The DHF is committed to continuous improvement. Complaints will be analysed regularly to identify trends and areas for improvement. Findings from this analysis will be used to inform staff training and service development.

## 11. Matters excluded (As per Part 9 of the Health Act).

Section 48.—

(1) A person is not entitled to make a complaint about any of the following matters:

- a) a matter that is or has been the subject of legal proceedings before a court or tribunal;
- b) a matter relating to the recruitment or appointment of an employee;
- c) a matter relating to or affecting the terms or conditions of a contract of employment;
- d) a matter that could prejudice an investigation being undertaken by the Garda Síochána;
- e) a matter relating solely to the exercise of clinical judgment by a person acting on behalf of The DHF;
- f) a matter that has been brought before any other complaints procedure established under an enactment.

(2) Subsection (1)(i) does not prevent a complaints officer from dealing with a complaint that was made to the Ombudsman or the Ombudsman for Children and that is referred by him or her to a complaints officer.

## 12. Refusal to investigate or further investigate complaints.

Section 50.—

(1) A complaints officer shall not investigate a complaint if—

- a. the person who made the complaint is not entitled under *section 46* to do so either on the person's own behalf or on behalf of another,
- b. the complaint is made after the expiry of the period specified in *section 47(2)* or any extension of that period allowed under *section 47(3)*.

(2) A Complaints Officer may decide not to investigate or further investigate an action to which a complaint relates if, after carrying out a preliminary investigation into the action or after proceeding to investigate such action, that officer—

(a) is of the opinion that—

1. the complaint does not disclose a ground of complaint provided for in *section 46*,
2. the subject-matter of the complaint is excluded by *section 48*,
3. the subject-matter of the complaint is trivial, or
4. the complaint is vexatious or not made in good faith,

or

(b) is satisfied that the complaint has been resolved.

(3) A Complaints Officer shall, as soon as practicable after determining that he or she is prohibited by *subsection (1)* from investigating a complaint or after deciding under *subsection (2)* not to investigate or further investigate a complaint, inform the complainant in writing of the determination or decision and the reasons for it.

## 13. Unreasonable complainant behaviour.

The DHF is committed to addressing all complaints fairly and impartially. However, there are instances where complaints may be deemed vexatious. A vexatious complaint is one that is made with the intention to harass, cause inconvenience, or without any serious purpose or value. This section outlines the approach to handling such complaints.

A complaint may be considered vexatious if it meets any of the following criteria:

- The complaint is persistently made, with the intent to annoy or harass.
- The complaint lacks any basis in fact or is unsupported by any evidence.
- The complaint is part of a pattern of making complaints that are trivial or lack seriousness.

- The complainant refuses to cooperate with the complaints process or demands actions that are unrealistic or disproportionate to the issue.
- The complainant changes the basis of the complaint or introduces new information while the complaint is being addressed, making it difficult to resolve.
- The complainant repeatedly raises issues that have already been addressed or resolved.

### **13.1 Identifying Vexatious Complaints**

Staff members handling complaints should be vigilant for signs that a complaint may be vexatious. Indicators include:

- Frequent, repetitive contact by the complainant.
- Unreasonable demands or expectations by the complainant.
- A history of numerous complaints without resolution or satisfaction.

### **13.2 Procedure for Managing Vexatious Complaints**

#### **Assessment**

The Complaints Officer will review the complaint to determine if it meets the criteria for being vexatious.

The assessment will involve evaluating the nature of the complaint, the complainant's history, and any supporting evidence.

#### **Decision**

If a complaint is deemed vexatious, the Complaints Officer will document the reasons for this decision.

The complainant will be informed in writing of the decision, including a clear explanation of why the complaint is considered vexatious.

#### **Response**

The DHF will provide a final response to the complainant, outlining the reasons for the decision and informing them that no further correspondence will be entered into regarding the complaint.

The complainant will be advised of their right to escalate the complaint to an external body, such as the Office of the Ombudsman, if they disagree with the decision.

#### **Monitoring and Review**

All decisions to classify a complaint as vexatious will be reviewed by the CEO to ensure fairness and consistency.

Records of vexatious complaints will be maintained and reviewed periodically to identify any patterns and to ensure that the policy is applied appropriately.

## Safeguards

This policy will not be used to stifle valid complaints. All complaints will be initially assessed on their merits, and only those that clearly meet the criteria for being vexatious will be classified as such.

The DHF is committed to ensuring that complainants are treated with respect and that their concerns are addressed seriously and transparently.

By following this policy, the Dental Health Foundation aims to ensure that all complaints are managed effectively while protecting our staff and resources from being unduly consumed by vexatious complaints.

## 14. Redress.

The DHF is committed to providing appropriate redress when a complaint is upheld. This section outlines the types of redress that may be offered to complainants and the process for determining suitable remedies.

### 14.1 Types of Redress

Once a complaint is upheld, the Complaints Officer will assess the appropriate form of redress in consultation with the CEO.

Redress may include, but is not limited to, the following:

- **Apology:** A sincere expression of regret for any harm or inconvenience caused.
- **Explanation:** A detailed explanation of what went wrong and why.
- **Correction of Records:** Amending any incorrect or incomplete records.
- **Service Improvement:** Implementing changes to prevent recurrence of the issue.

The complainant will be informed in writing of the outcome of their complaint and the redress being offered. This communication will include:

- A detailed explanation of the findings.
- The specific actions being taken as redress.
- A timeframe for the implementation of any actions.

By providing appropriate redress, the Dental Health Foundation aims to acknowledge mistakes, restore trust, and improve the quality of our services.

## 15. Review of Policy

This complaints policy will be reviewed annually by the Board of Trustees to ensure it remains compliant with HSE guidelines and continues to meet the needs of our clients.

**DENTAL HEALTH FOUNDATION – COMPLAINTS REGISTER**

<b>Date</b>	<b>Complainant's name and Organisation</b>	<b>Contact No.</b>	<b>Email/address</b>	<b>Nature/details of complaint</b>	<b>Comments and follow-up action (Include name of employee responsible for follow-up)</b>	<b>Feedback from complainant Status/Date finalised</b>