



Donegal
Rape Crisis Centre

**Donegal Sexual Abuse and Rape Crisis Centre
Client Complaints Policy**

1. Introduction:

Donegal Sexual Abuse and Rape Crisis Centre (DSARCC) is committed to providing the highest quality of service to all survivors of sexual violence and their supporters who are in contact with the Centre. However, should a client or their relative, with their consent, be dissatisfied with the quality of service provided in relation to counselling, advocacy or support, we recognise her/his entitlement to make a complaint.

2. Purpose:

The purpose of this policy is to provide a Complaints Procedure as a means of addressing client complaints. (1) In terms of this policy, any survivor or supporter in contact with DSARCC is designated as a client.

Complaints:

“A complaint made about any action of the Centre that, it is claimed, does not accord with fair or sound practice, and adversely affects the person by whom, or on whose behalf, the complaint is made” (adapted from the definition provided by the Health Act 2004). Guidance is provided by the RCNI Member Code of Ethics and Practice.

DSARCC will respond to all complaints in a confidential, sensitive, fair and effective manner without undue delay, while also ensuring that cognisance is taken of the complexity of the factors involved. No client will in any way be disadvantaged as a result of making a complaint pursuant to this policy. It is the guiding principle of this Complaints Policy that, where possible or appropriate, an amicable solution will be sought.

A client may choose to complain for any of the following reasons:

- An enquiry has not been handled appropriately.
- The ethical standards of competence, integrity, confidentiality and responsibility are not adhered to.

4. Procedures:

DSARCC aims at all times to maintain good communication channels, to ensure that issues or misunderstandings can be resolved at an early stage. We will appoint a senior staff member to handle complaints. That designated staff member will be appointed by the Executive Director. If that staff member is directly involved in the complaint, another senior staff member will handle the complaint. We will ensure that information about how to complain is readily available for anyone using our services. There are four possible stages to the Complaints Procedure, with every effort made to resolve the grievance at each stage:

4.1 Informal Complaint Procedure

While in no way diminishing the issue or the effects on individuals, an informal approach can often resolve matters. Where a client has a complaint, she/he should in the first instance seek to resolve the issue directly with the relevant member of staff/volunteer or, if preferable, with the designated person. The objective of this approach is to resolve the difficulty with the minimum of conflict and stress for the individuals involved.

4.2 Verbal or Written Complaint Procedure

If an informal approach is inappropriate or the issue has not been resolved to the client's satisfaction, we will inform the client about how to invoke the following procedures. In order to allow us to fully and fairly handle a complaint, we will advise the client to make us aware of the cause of the grievance within 3 months of the issue arising. A complaint must be lodged within 12 months of the grievance arising, unless special circumstances apply, for example if the client is ill or bereaved. If a time extension is granted, we will notify the client within 5 working days of the decision being made. (2)

- a) A written and signed complaint should be submitted to the appropriate person(s) designated to deal with such complaints, with receipt acknowledged within 5 working days. Where this is not possible due to, for example language, literacy levels or disabilities, a verbal complaint may be made. A written record will be taken by the designated person(s) and the complaint will be acknowledged immediately, or within 24 hours. Anonymous complaints are not accepted as valid and will be destroyed.
- b) Once the complaint is verified as valid, written/verbal (with record made) authorisation from the client will be sought to copy the complaint letter to the individual whom it is alleged to have acted improperly. (3)
- c) Should the client request the letter not be shown to the individual involved, she/he will be notified in writing/verbally (with record made) by the designated person(s) that there will not be any further investigation until the individual is made aware of the complaint against her/him verbally (with record made) or in writing.
- d) If the client does not respond within 2 months, the designated person(s) will write by registered post/meet with the client (with record made) to ascertain if she/he wishes to pursue the complaint further. If there is no response after an additional 2 weeks, the client will be informed in writing/person (with record made) that the complaint will not be considered further.

- e) Once authorisation has been received in writing/person (with record made), the designated person(s) will then meet with the client, ascertain the nature of the complaint and offer the person a full hearing. Meeting minutes, dated and signed by both parties and outlining the specific details of the complaint, dates and names of the people involved, will be drawn up.
- f) All people named in the complaint and the designated person(s) will receive a copy of these minutes. The people named will also be interviewed by the latter, and a subsequent report will be drawn up and signed by all parties.
- g) The client will then be informed of the response in a second meeting with the designated person(s). At this stage it may be possible to resolve the complaint informally by clarifying misunderstandings or by acknowledging the wrong and apologising verbally. If the client is satisfied, the other involved parties will be informed by the designated person(s).
- h) We will complete these procedures within 30 working days. Should the process take longer, we will update the client every 10 working days on the reasons for the delay.
- i) If the client is dissatisfied with the final result and fails to respond in writing or in person (with record made) within 2 months, the designated person(s) will write by registered post or meet with the client (with record made) to ascertain if she/he wishes to pursue the complaint further. If, after an additional 2 weeks, there is no response the client will be informed in writing or in person (with record made) that the complaint will not be considered further.

4.3 Formal Investigation Procedure

- a) If a client, or another person involved in the complaint is dissatisfied with the outcome, and authorisation is received in writing/person (with record made), a formal investigation of the complaint will be necessary.
- b) A complaint Sub-Committee (members to be designated by the Centre, to include the Executive Director and an independent, external representative and excluding anyone connected with the allegation in any way) will be called to inspect the reports of all meetings, with both sides and the designated person(s) heard again. A staff member/volunteer may be accompanied by another person of their choosing and the client may be accompanied by an advocate of their choosing. If further information is required from the client, she/he will be requested in writing/person (with record made) to respond within 10 working days. If necessary, this time limit may be extended by a further 10 working days. Consent must be received from the client in relation to accessing any of her/his confidential information.
- c) When the complaint has been fully investigated, this Committee will write a report in which they will put forward their conclusions and recommendations to the Centre's

Board of Directors. The Board will then make a final decision on how to proceed.(4) The committee may find that no breach of the RCNI RCC Member Code of Ethics and Practice has occurred, and no action need be taken, in addition to assurance that the staff member's reputation or future prospects will not be adversely affected. In the event of the complaint being upheld, the employee/volunteer will be subject to Disciplinary procedures as outlined in the Employment Policy or Volunteer Policy. In relation to a complaint against a counsellor, we will inform the client of the complaint procedures for the counsellor's accrediting body.

- d) Where possible, a formal investigation of a complaint will be completed within 30 working days. However, if this is not possible, the client will be informed of a delay and updated every 20 days, with the process taking no longer than 6 months.
- e) We will monitor complaints with a view to evaluating this policy and its effectiveness.

Note: A complaint may be withdrawn at any time, and on advice of such withdrawal, a review or investigation may cease, unless reasonable grounds for believing that the public interest would best be served by its continuation exist. Accordingly, the matter will be referred to the Centre Manager and Board of Directors for a decision.

4.4 Independent Review

If the client remains dissatisfied, we will advise her/him to seek a review by the Office of the Ombudsman /Ombudsman for Children.

Signed _____ Date _____

Review Date _____

1. This policy has the equivalent of all of the components of Tusla TELL US.
2. This is in accordance with Section 47, Part 9, of the Health Act 2004.
3. This is in accordance with section 50 of the Health Act 2004.
4. We will inform relevant funders of any significant matters likely to affect service delivery. We will also provide non-identifying information related to client complaints to relevant funders on request.