Policies and Procedures of Baby Friendly Health Initiative in Ireland (BFHI)

Principle 3. Being transparent and accountable. (Principle number relates to the Governance Code)

3.2 Responding to stakeholders’ questions or views about the work of our organisation and how we run it.
(b) Having a clear system in place for dealing with correspondence, feedback and complaints to the organisation.

Complaints Policy and Procedure

This complaints policy and procedure will be reviewed on a 3-yearly basis, unless an earlier review is necessitated for a specific reason.

Review Date: May 2019

Policy:

a) The BFHI National Committee views comments and complaints about the BFHI service as an opportunity to continuously improve the quality of service provided and to learn for the future. There is a procedure in place for dealing with all complaints.

b) The BFHI committee members, contractors, assessment team, employees or volunteers are not expected to have any need for access to a child or a vulnerable adult in the participating health facility in the course of the BFHI activities. No BFHI committee members, contractors, assessment team, employees or volunteers will be in any contact with a child unless the child’s parent or health facility staff member responsible for the child is also present and any contact will only be on health facility premises. The BFHI committee members, contractors, assessment team, employees or volunteers are expected to comply with the national child protection guidance, e.g. Children First, DYCA.

c) The “participant” in activities of the Baby Friendly Health Initiative in Ireland (BFHI) is deemed to be the health facility (as the entity) and not the service users of the health facility. Complaints received from users of the health facility services will be informed of the appropriate complaint channels of the individual health facility and HSE “Your Service, Your Say” and other similar channels that may be in place. Complaints received from service users will be kept in the file for the specific health facility to inform monitoring and assessment teams of possible areas or patterns of complaints to give specific attention to.

d) Correspondence other than complaints is dealt with by the national BFHI coordinator with items of particular interest reported in the coordinator’s quarterly reports. If needed, correspondence is discussed with the Chairperson.

Procedures:

If a health facility has any complaint about the action or omission of the BFHI in Ireland staff, assessment team, contractors, employees, committee members, or volunteers acting in a capacity as an official representative or acting on behalf of the BFHI in Ireland, in relation to that health facility, that it is claimed, does not accord with fair and sound administrative practice or adequate health and safety practice, and adversely affects the health facility by whom the complaint is made, there is a complaint procedure:

1. A formal complaint may be made in writing or by email to the BFHI Coordinator, to the Chairperson of the BFHI National Committee, or to any Committee member for transmission to the Chairperson. A complaint must include the name of the complainant, contact details and their position within the health facility as well as the nature of the complaint and relevant evidence of the action or omission that is the subject of the complaint. A complaint referring to the decision of an assessment must be signed by a member of the facility’s senior management team.
2. A complaint must be lodged within 6 months of the incident unless the complaint refers to the decision of an assessment in which case the complaint must be lodged within 20 business days of the notification of the assessment results.

3. A written trail will be kept of the investigation process.

4. Within five working days of receipt of the complaint, the Chairperson, other designated Committee member, or Coordinator will acknowledge receipt of the complaint to the complainant.

5. The BFHI National Committee will not investigate complaints that are a matter that is or has been the subject of legal proceedings before a court or tribunal, or a matter that could prejudice an investigation being undertaken by the Garda Síochána.

6. At least two Committee members will be assigned by the Chairperson to review the complaint to determine the validity of the complaint within the scope of the BFHI.

7. The Committee members’ assigned the responsibility for pre-investigation and full investigation of a complaint shall have no conflict of interest in the matter.

8. The pre-investigation team will submit a written report to the Chairperson of the validity of the complaint within 14 days of being assigned the pre-investigation task. The complainant will be informed by email or post if the complaint is deemed valid and going for investigation or not deemed valid (with the reason) within 5 working days of making the determination.

9. If the complaint is deemed not valid for investigation:
   a. The complainant will be provided with the reason the complaint was deemed not valid for investigation. These reasons may include (list is for example, not exhaustive): no evidence provided by the complainant that indicated an adverse action or omission in due care or in procedures by the BFHI in Ireland staff, contractors, employees or volunteers acting in a capacity as an official representative or acting on behalf of the BFHI in Ireland; complaint related to a matter that could easily be dealt with without a formal complaint process; the action or omission referred to by complaint did not refer to the BFHI in Ireland staff, contractors, employees or volunteers acting in a capacity as an official representative or acting on behalf of the BFHI in Ireland.
   b. The complainant will be informed that no further investigation is taking place in relation to their complaint.

10. If the complaint is deemed valid for investigation:
    a. Specific Terms of Reference (TOR) for the complaint including a timeframe, methods and resources required will be determined by the Chairperson.
    b. Investigation will be undertaken by at least two assigned Committee members who will advise all parties involved that a formal investigation is being carried out to determine the sequence of events leading to the complaint and the root causes of the complaint.
    c. The assigned members will gather information from those involved in the health facility, within BFHI staff, contractors, assessment team, employees or volunteers, and from other sources deemed relevant. The BFHI National Committee is not responsible for travel or any other expenses incurred by the complainant or their representative at any stage of the complaint.
    d. The BFHI staff, contractors, employees or volunteers may be taken off activity of a similar nature while the complaint is being investigated.
    e. Unless the TOR states otherwise, a written report will be provided to the Chairperson within 30 days, and if the investigation extends longer, every 30 days until resolution. The BFHI National Committee will be informed of the complaint and its progress through routine Committee notifications or at routine committee meetings, unless the complaint is considered as a possible major or catastrophic complaint, in which case the Committee will be informed within 48 hours of the complaint.
f. The investigation team will not make a finding or a criticism in their report adverse to an individual person or an entity without having afforded the person/entity concerned the opportunity to consider the proposed findings or criticism and to make representations in relation to it.

g. The investigation team will prepare and submit a written report (signed and dated) to the BFHI National Committee which will include their findings, any recommendations they consider appropriate to redress the complaint, actions to be taken to prevent reoccurrence of the cause of the complaint, and include the evidence/reasons for such findings and recommendations. The investigation team may need to consider anonymising parts of the report to protect the identity of the complainant or the staff member when deemed appropriate by the investigation team.

h. When the BFHI National Committee is in agreement with the report, the report will be forwarded to the complainant and to any BFHI staff, contractors, assessment team member, employees or volunteers, against whom the complaint was made, sent by a recorded delivery method (including email with delivery receipt).

11. *If the complainant appeals the decision of the investigation:*
   
a. If the health facility and/or the involved BFHI staff, contractors, assessment team member, employees or volunteers are dissatisfied with the decision of the complaint investigation, or to the decision that the complaint did not show grounds for investigation, an appeal may be requested on the grounds of the conduct of the original investigation or relevant evidence not considered by the investigation.

b. A written request for an appeal should be sent to the Chairperson of the BFHI National Committee within 21 calendar days of the decision not to investigate or the report of the investigation being sent to the complainant or BFHI staff, contractor, employee, assessment team member, or volunteer against whom the complaint was made, being sent the report of the investigation of the complaint. The request should state the grounds for the appeal and provide any evidence relevant to the complaint not previously furnished.

c. At least two Committee members who were not involved in the first investigation will be assigned to conduct the appeal of the complaint and its investigation process. The process of the review will be similar to the process of the original investigation; gathering additional evidence, examining existing and any new evidence, examining process, providing a written report to Committee, Committee discussion and communicating with the complainant or BFHI staff, contractor, assessment team member, employee or volunteer against whom the complaint was made.

d. When an appeal process has been conducted as above and found no new evidence to support a change in the initial decision, the BFHI complaint process will be deemed completed and the complainant notified of such.

12. A complainant may, at any time, withdraw a complaint made or an appeal and, on advice of such withdrawal, the investigation team may cease to investigate or review the complaint. However, where the investigation team has reasonable grounds for believing that public interest would best be served by the continuation of the investigation or review, they must refer the matter to the BFHI National Committee for a decision on the matter.

13. If the complainant chooses to take their complaint, initially or after a decision they do not accept, to another duly authorised body or to the BFHI funder(s), the BFHI National Committee will respond to requests from that other body for general information on the process followed in regards to the complaint. Written permission to share any specific details of the complaint and specific responses from the BFHI National Committee reports will be obtained from the complainant, except where such request is made in accordance with law. No information specific
to a complaint will be provided or discussed with the media, or with any organisation or individual unrelated to the complaint.

14. The BFHI will keep records of any complaints received from a health facility and the action taken. These records will be stored electronically for a minimum of 5 years from the date of resolution of the complaint. The record of the process followed for a complaint will be available to the major funder(s) of the BFHI on request. Any reporting of complaints in any public document, such as the BFHI Annual Report, will not identify the health facility or individuals involved.

15. All BFHI committee members, staff, contractors, assessment team members, employees or volunteers will cooperate with any complaint investigation, and will participate in any improvements to the service if deemed to be needed. The BFHI National Committee commits to safeguard the rights and dignity of the BFHI staff, contractors, assessment team members, employees or volunteers in implementation of this policy and procedure.

16. In the event of any employee, committee member, assessment team member, volunteer or agent of the BFHI in Ireland found to have behaved illegally, wrongfully or inappropriately or in breach of the BFHI’s applicable policies and procedures, whether by act or omission, in respect of a participant, or the BFHI National Committee becoming aware of any allegation or complaint that any such person has behaved in such a manner in respect of a participant health facility, the BFHI National Committee shall take all necessary actions (including disciplinary action if appropriate) in respect of such person to ensure safety and protection of the participant and participants generally and report the matter to all relevant authorities.

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