



Office of the
Confidential
Recipient

Confidential Recipient Annual Report

2022

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<https://www.hse.ie/eng/about/who/complaints/confidentialrecipient/>

<https://www2.hse.ie/complaints-feedback/report-a-concern-about-a-vulnerable-adult/>

Introduction

In 2014 arising from the Áras Attracta Abuse scandal the Health Service Executive (HSE) established the Office of the Confidential Recipient. The purpose of the role is to safeguard, act as an independent confidential voice and advocate for adults with a disability and for older persons who are in receipt of a Health Service Executive (HSE) funded service, in residential care, day services and or any community services or from organisations wholly or partially funded by the HSE and who wish to report a raised concern and or complaint for review to achieve resolution and outcome to the benefit of the vulnerable adult.

The Office of the Confidential Recipient is independent and confidential from the HSE in its role and function. In addition, the Confidential Recipient has the oversight and authority to ensure that raised concerns and or complaints are submitted to HSE Community Operations Chief Officers for robust review to achieve resolution and outcome to the benefit of the adult service user.

My name is Gráinne Cunningham O'Brien and I am the Confidential Recipient having commenced in post on the 7th November 2022. Leigh Gath, the former Confidential Recipient retired on the 11th November 2022. This office sincerely thanks Leigh for all her hard work in representing the most vulnerable in society and wish her well in her retirement.

I am a graduate of University of Galway and hold a Bachelor of Arts in Sociology, Political Science and English (2009). Also at University of Galway, I completed a Masters in Social Work (2011) and a Higher Diploma in Social Work Practice Teaching, Supervision and Management (2018) followed by a Diploma in Leadership and Quality in Healthcare from the Royal College of Physicians Ireland (2021). I am a registered Social Worker with the Health and Social Care Regulatory Body CORU; (SW000111).

I bring to the role many years of professional Social Work experience at professionally qualified, senior and managerial level in a number of different practice areas including child protection and fostering, safeguarding and protection of vulnerable adults at risk of abuse, adult mental health and intellectual disability, primary care, palliative care, older persons' services, children's disability services and acute public hospital services.

I am committed to working with the most vulnerable in society, speaking up and speaking out on their behalf. I am respectful and empathetic to the challenges, frustration and upset that adults at risk can experience when raising concerns and or complaints. Understanding the stressors for adults, I engage with individuals from a rights based perspective therapeutically and holistically hearing their voice, will and preference, valuing their opinion, listening to their situation, the impact on their quality of life, reassuring the individual of their right to raise a concern and or complaint, empowering the vulnerable adult to voice their concerns. I respect the adult's right to self-determination, dignity, self-worth and autonomy. I am committed to the principles of respect for human rights, a person centered approach to care and services, promotion of advocacy, respect for confidentiality, empowerment of individuals, and a collaborative approach.

I am an independent voice and an advocate to safeguard adults with a disability and older adults. I support and represent their views and rights throughout the process of achieving resolution and positive outcomes. The process can be lengthy and often requires frequent follow up with the vulnerable adult and the HSE Chief Officers. I support and reassure the adult at risk that the commitment of the office is steadfast to achieve resolution and positive outcomes that benefit their health and well-being.

In my role and function as Confidential Recipient, I have the oversight and authority to accept and submit referrals of reported raised concerns and or complaints for robust review to the HSE Chief Officer in the given Community Health Organisation (CHO 1-9) area. The HSE Chief Officer is responsible and accountable for having systems in place for thorough review of the submitted raised concern and or complaint within the agreed fifteen working day response time frame, and for any response or decision made to the Confidential Recipient. Communication and engagement on raised concerns and or complaints are between the Office of the Confidential Recipient and the Office of the HSE Chief Officers.

In the short time, I am in the role, the complex nature of the reported concerns and or complaints is evident. To begin with, a range of concerns have been reported from issues around home support and in particular staff shortages, staff not turning up at agreed times, no cancellation notice, and limited hours being provided. Adults at risk depend on their home support hours to assist them maintain their independent living. It can be most frightening and worrying for adults at risk and their families where

inconsistencies and insufficient home support hours are provided. Home support hours are fundamental to ensuring adults at risk can continue to live in their homes, enjoy family life, community involvement and continue autonomous quality of life.

In addition, concerns have been raised in relation to the quality of residential and day care placements, denial of service, respite, care planning and challenges in relation to obtaining an assessment of need for service users with a disability diagnosis, organizational abuse and dignity.

In addition, I have received complaints in relation to the placing of vulnerable adults with intellectual disabilities and or medical diagnosis in nursing home settings, where appropriate home and or residential care placement is not identified, provided or funded. The impact on every aspect of the vulnerable person's life is well documented in "Wasted Lives: Time for a better future for younger people in Nursing Homes" Ombudsman.ie.

Families who contact the office in relation to their loved ones are frustrated and feel there is nowhere else to turn. Some of the issues brought to my attention include older adults having their home support package cancelled when they go for extended respite in a nursing home. Trying to get back home becomes very difficult if not impossible and illustrates how rights can be disregarded.

Of equal worry are concerns and complaints that I have received where aging parents struggle to provide care and support to their adult children with a disability who require full time care. These parents are looking to plan ahead for their adult child, increase respite and secure a full time residential placement for their loved adult child. The reality is that often these aging parents have their own health issues to manage, have loved and cared for their adult child since birth and want to ensure that appropriate care planning for their adult child is in place to give them peace of mind. Waiting lists are incredibly long and it is almost impossible to secure a residential placement. This causes immeasurable suffering and worry for the aging parents who have given a life time of love and care to their children and now need the HSE to work in partnership with them to identify and develop appropriate long term care planning.

Concerns in relation to respite are also received into the Confidential Recipient Office. Families are exhausted and require regular respite for the loved ones they are caring for daily. They complain that respite is irregular and not structured. Examples of concerns pertain to aging parents needing to take care of their own health and attend appointments or inpatient care, and they cannot secure respite for their adult child creating stress and worry for the aging parent.

A reoccurring theme that emerges, is the worry families experience if they raise a concern and or complaint. They fear their loved one may not be safeguarded during the review of their concern.

I have also received anonymous raised concerns and complaints from staff who express concerns for residents in relation to the neglect of residents in HSE nursing homes including issues around personal care, dignity, privacy, medication, diet and staff engagement and management. These residents are amongst the most vulnerable in the care of the HSE. There is often fear from staff when they raise a concern they will be identified. The office ensures all anonymous referrers their information remains confidential. Anonymous referrals are also received from staff in residential placements for adults with a disability. Such concerns received include staff to service user ratio, fire safety, and other safeguarding concerns.

It is apparent that issues around accessing aids and equipment remain for many service users causing them undue stress at home. It is vital that the HSE support service users with the necessary aids and equipment to ensure they can retain their dignity and independent living.

I have also received representations from families on behalf of their loved ones. They have raised concerns and complaints in relation to ethical practice within the HSE and the manner in which vulnerable adults are treated and described. Families feel a culture of victim blaming emerges when they raise concerns and complaints. In particular concerns in relation to vulnerable adults being discharged from HSE services and families expressing dismay at the lack of appropriate service user care-planning and intervention to support them in the community. Adults at risk and their families have raised concerns and complaints in relation to informed consent. Indeed they query the legitimacy of how consent was acquired.

Raising a concern and complaint can be very stressful for vulnerable adults and families. I am finding that on some occasions the HSE does not wish to share its findings and insist on the vulnerable adult applying through Freedom of Information (FOI) to gain access to the report relating to the outcome of their complaint. This is most upsetting for adults who have a right to the report as it pertains to them and their complaint. The Office of the Confidential Recipient supports the adult at risk to complete the FOI application.

In my role as Confidential Recipient, I have also received concerns and complaints in respect of the HSE acute hospital setting, however this is outside of my remit. I ensure that the information is shared with the Hospital CEO for follow up. The complainant is also informed of the available pathways to raise concerns and complaints.

In addition, the office receives concerns pertaining to private nursing homes which this office does not have a remit in. I ensure that the complainant is provided with the necessary information on available pathways to raise their concerns. A reoccurring issue in relation to private nursing homes which are increasing in Ireland is that access for service users to HSE community services continues to be an obstacle and is causing service users in private nursing home financial stress having to pay for a service that the HSE will not provide. This is an injustice and a fundamental violation of the rights of adults at risk to HSE health care.

Concerns pertaining to nursing homes, HSE and private, are shared with HIQA as per required protocols, learning and to identify themes for service improvement.

The Office of the Confidential Recipient adheres to HSE National Consent Policy 2022, data protection regulations and in line with the Assisted Decision Making Act 2015, the will and preference of vulnerable adults.

Gráinne Cunningham O'Brien

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Confidential Recipient
CORU Registered: SW000111

The Confidential Recipient (CR) has oversight and authority to:

Advise and assist individuals on the appropriate course of action to take to raise matters of concern; assist with the referral process to ensure robust review of reported concerns; ensure that the reported concerns are appropriately addressed and responded to by the HSE Chief Officer (1-9):

- Receive raised concerns and or complaints from vulnerable adults/complainants/representatives.
- Screen and consider raised concerns and or complaints and determine the most appropriate pathway.
- Support, advise, advocate and represent vulnerable adults/complainants/representatives throughout the process of raising concerns and or complaints, submission to the Chief Office for thorough review to reach resolution and outcome for the benefit of the vulnerable adult.
- Represent, advocate and support the vulnerable/complainant/representative through engagement and collaborative working with the HSE Chief Officers in respect of raised concerns and or complaints to achieve resolution and outcome to the benefit of the vulnerable adult.
- Ensure that the voice of the vulnerable adult/complainant/representative is heard and acted upon in respect of their raised concern and or complaint to the benefit of the vulnerable adult.
- The CR with oversight and authority for the CR office will where necessary attend meetings, meet with vulnerable adults and their families, promote the function of the office, represent the CR office to ensure the rights of vulnerable adults who wish to raise concerns and or complaints are ensured their voice is heard through the confidentiality of the CR office.
- The CR has the authority to escalate raised concerns and or complaints within the HSE governance structure where resolution and outcome is not achieved to the benefit of the vulnerable adult.

Important

The Confidential Recipient Office is not an emergency service. If you think a vulnerable adult is at immediate risk and in danger, call 112 or 999 and you will be directed to the relevant emergency service.

Who can raise a concern and or complaint to the Confidential Recipient?

The vulnerable adult where possible should advocate on their own behalf their raised concern and or complaint to the Office of the Confidential Recipient (CR). Where the vulnerable adult is unable to report a raised concern and or complaint on their own behalf due to preference, age, capacity, illness or disability, the vulnerable adult can nominate a complainant/representative to do so. The vulnerable adult should be kept informed at every step of the process by their complainant/representative. For the benefit of the vulnerable adult, the people who can raise a concern and or make a complaint or do so on behalf of the vulnerable adult include:

- A close relative or carer.
- Friend.
- Neighbour.
- Staff member.
- Anyone appointed by law or the courts to take care of your affairs.
- A legal representative.
- Anyone else with your informed consent.
- Anyone who is appointed, as set out in the Regulations.
- Anonymous.

Informed Consent HSE National Consent Policy (2022).

The Office of the Confidential Recipient will endeavour to make contact with the vulnerable adult to obtain written informed consent on the consent form. Where raised concerns and or complaints are received and the vulnerable person cannot due to capacity, illness and or other give informed consent/verbal consent, the office will review to the benefit of the vulnerable adult on a case by case basis striving to advocate and uphold the rights of vulnerable adults. The CR office respects the right of the vulnerable adult to decline to provide informed consent.

The Office of the Confidential Recipient adheres to the Health Service Executive (HSE) National Consent Policy (2022) and obtains informed consent from the vulnerable adult/complainant/representative to support and represent the vulnerable adult in raising concerns and or complaints for review in relation to HSE-funded services. The informed consent includes that relevant personal information will need to be shared with professionals and where if nominated the vulnerable adult's representative. The informed consent further allows that to examine the raised concern and or complaint, it may be necessary for the Office of the Confidential Recipient to access and keep relevant personal information about the vulnerable person that is held by the HSE –funded service and or third parties, share such personal information with the representative and or with relevant third parties. The informed consent also covers that in reviewing the raised concern and or complaint that the HSE-funded service may need to access and review the vulnerable adult's case files.

Total Concerns by CHO Area (1-9) 2015 – 2022

CHO Area	2015	2016	2017	2018	2019	2020	2021	2022
CHO 1	9	15	17	17	8	9	10	9
CHO 2	16	34	20	12	13	21	10	12
CHO 3	8	16	17	20	11	11	16	8
CHO 4	13	46	28	38	23	20	20	19
CHO 5	9	25	18	20	22	22	28	13
CHO 6	9	26	11	19	8	11	6	6
CHO 7	26	20	30	31	14	20	23	19
CHO 8	19	18	29	25	36	25	23	16
CHO 9	10	20	26	24	20	26	19	7
Total	119	220	196	206	155	165	155	109

Separately an additional 30 acute hospitals concerns were received and were directed to the CEO of the HSE Hospital Group for follow up. 34 informal concerns were received, where information complaint pathways were provided. 6 concerns were received in private nursing homes. Information on complaint pathways were provided. HIQA was notified of the concerns in line with protocol.

Complainants contacting the Office of the Confidential Recipient were dissatisfied that the office does not have a remit in the HSE acute public hospitals and private nursing homes.

Formal Concerns			Total Formal	Hospital and Informal Concerns		Total Hospitals and Informal	Overall Total
Disability / Older Persons	Mental Health	Primary Care		Acute Hospitals	Informal		
93	15	1	109	30	34	64	173

Category	Type	2022
Issues of Care, Residential, Respite and Day Services	Care Placement / Planning	33
	Level of Staff to Support Client	09
	Access to Equipment	02
	Financial Charges	01
	Accommodation	01
	Respite	01
	Transfer from child to adult services	0
	Other	19
	Total	66

Category	Type	2022
Safeguarding	Alleged Abuse	08
	Safety of Care	02
	Staff behaviour	07
	Family Issues	07
	Covid	01
	Total	25

Timeline of Closing Concerns

The HSE Chief Officer or named delegate is responsible for ensuring the raised and complaint with the Confidential Recipient is thoroughly examined. In all cases, a written report outlining the interim or final outcome is required to be provided to the Confidential Recipient within 15 working days.

Year	0-7 days	8-15 days	16-31 days	1-3 months	>3 months	Total
2022	8	06	33	29	15	91

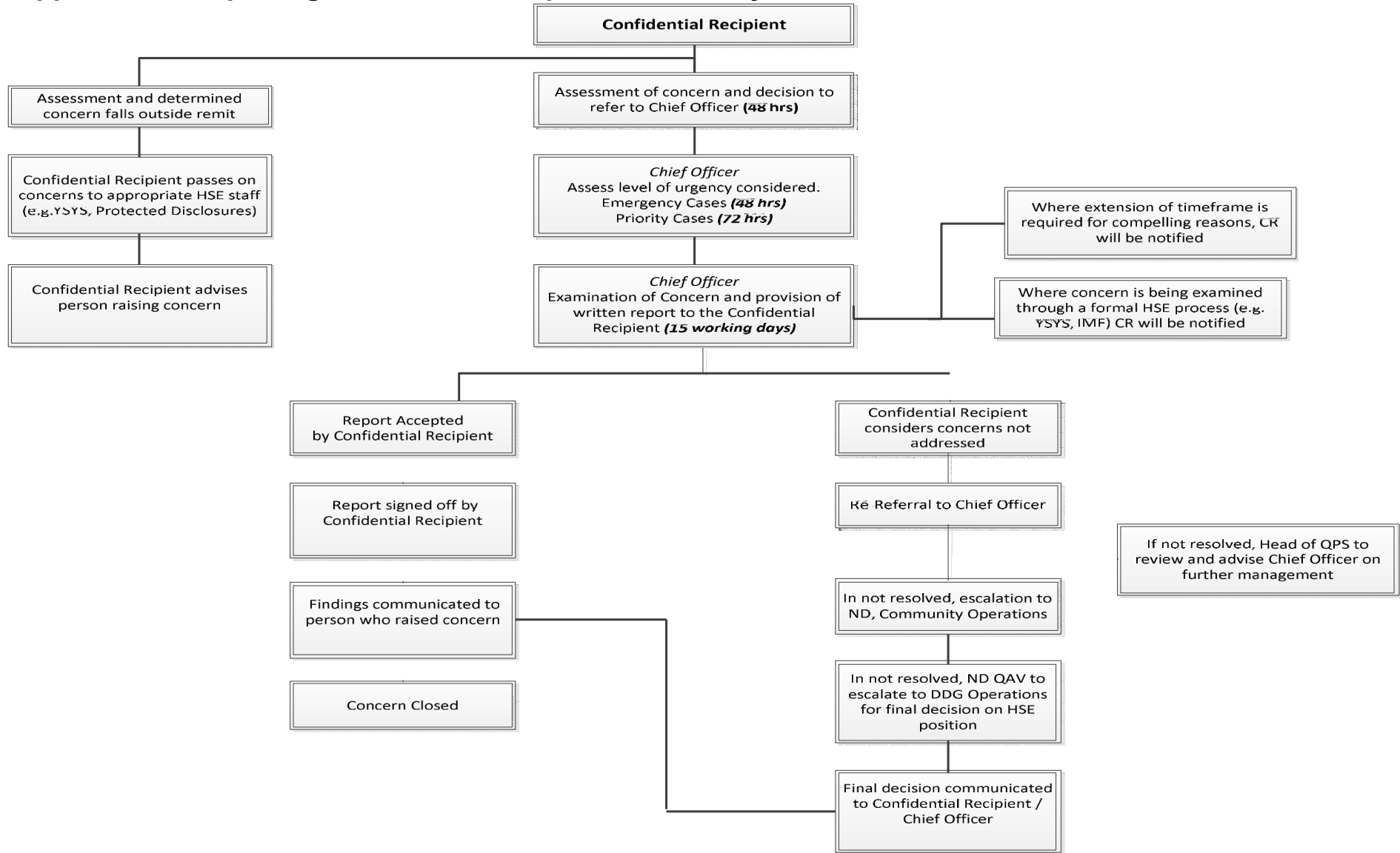
At the end of 2022 there remained 18 cases open for that year period. The Confidential Recipient continues to engage with the HSE Chief Officers to achieve outcomes relating to these cases. As detailed above, delays were experienced in some instances closing cases. This was directly related to the HSE being unable to resolve matters to the satisfaction of the complainant and Confidential Recipient.

Conclusion

As outlined in this report, I am a short period in the role of Confidential Recipient. I very much see the need for the role to expand and develop to ensure that I can speak up and speak out for vulnerable adults in a meaningful manner. I am a Social Worker by profession and I bring that skill-set to the role. I see the benefit of supporting vulnerable adults and their families through systemic and holistic assessment taking on board the value of the psycho-social assessment and intervention process to listen to the vulnerable adult and gather the relevant information to support succinct raised concerns and complaints that clearly identify the issues.

I am committed to advocating for the rights of vulnerable adults and staying the course to achieve a positive outcome for the benefit of the most vulnerable in society. I would encourage vulnerable adults to contact the Office of the Confidential Recipient to report their raised concerns and complaints.

Appendix 1 : Reporting a concern / complaint – Pathway





Office of the Confidential Recipient

Speak up!
Speak out!



Rights
don't
get old



Office of the Confidential Recipient

Gráinne Cunningham O'Brien

An independent voice and an advocate to safeguard vulnerable adults with a disability and older adults who wish to raise a concern and or make a complaint in relation to their HSE-funded services including residential services, day services, community services, mental health, older person and primary care services.



Get in touch


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For more information

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