

Manual:	Administration	Reference No.:	004100.00
Section:	Communication		
Subject:	Response to Complaints		

POLICY:

It is the policy of APANS Health Services that complaints (written or verbal) from residents, families, visitors and staff are investigated and actions are taken for resolution. A response will be made to all complaints within 10 days. If the complaint cannot be resolved within 10 days the complaint will be acknowledged and a date for resolution of the complaint will be given to the complainant. When the complaint alleges harm or risk of harm to a resident the investigation will begin immediately.

References

Regulation 79/10; (100-103); Long Term Care Act, 2007: (21-23).

MOHLTC Memo from Rachael Kampus Re: Central Intake Assessment Triage Team, of October 23, 2012.

Apology Act, 2009: Note that this act states that an apology made in connection with any matter does not constitute an admission of fault or liability. An apology is not admissible in any civil proceeding or arbitration. The exception to this is if a person makes an apology while testifying at civil proceeding or out of court examination. Refer to copy of Apology Act –*weblink linked to this policy.*

PROCEDURE:

The Executive Director will:

- Ensure that all staff members are advised during orientation and annually thereafter, that if they receive a complaint from a resident, substitute decision maker, or family member they must report this to a departmental director immediately.
- Inform all residents and their families of Complaint procedures through discussion and written information at the time of move in; reminders at Resident/Family Councils or Family Meetings and posting of the procedure in the Information Binder posted at the entrance to the home.
- Ensure that departmental directors report and follow up on verbal complaints from staff, family, residents, visitors within their departments.

Procedure

If the complaint is believed to be unfounded the ED shall respond to the complainant indicating the reason for this belief.

- The ED will ensure any complaint is investigated and the complainant will be notified of how the complaint will be resolved. Respond to a written/verbal complaint by contacting the griever to obtain the information about the areas of concern and conduct an internal investigation within 10 days of receipt. Arrange a follow-up meeting to discuss the findings and solutions.
- Advise the Head Office, CEO immediately whenever a serious incident occurs or a serious complaint is received. A copy of all written complaints must be forward to the Head Office.

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- The MOHLTC shall be notified via the critical incident online reporting system of any written complaints. Note: A complaint received via Email is considered a written complaint, unless the family member routinely communicates via email. If this is the person's usual way of communicating it will be considered a verbal complaint initially and the procedure for verbal complaint should be followed.
- Drafts the response to the complaint and send to CEO & V.P's with a summary of the investigation. Once approved, the Executive Director is to update the critical incident reporting system appropriately.
- Document the complaint on the Dispute Resolution Form (Resident/Family)

A record of the above will be filed and kept in the home.

The record including the Action Plan should be documented in MOHLTC critical incident reporting system for all written complaints.

- Communicate all complaints to the appropriate committee for review. All complaints should be analyzed by the ED quarterly for trends. The analysis and trending is recorded on the Complaint Analysis form. Evaluation and improvements should be documented on the form.
- If a verbal complaint can be resolved within 24 hours the above process is not required. An internal report will be filed by the ED for our internal quality management program.

Reporting Complaints to Director-MOHLTC

The following complaints require immediate notification of the Director:

(These are considered mandatory reporting/critical incidents and you will refer to the CIS/Mandatory reporting procedure)

- Misuse/misappropriation of resident that results in harm or risk to a resident
- Misuse/misappropriation of resident money
- Unlawful conduct that resulted in harm/risk of harm to resident
- Abuse/neglect
- Misuse/misappropriation of funding provided to a licensee

For all of these complaints the Director shall be notified immediately by completing a MCIS form. Follow procedure for MCIS reporting. See after-hours process etc.

If you do not have all of the information requested in completion of the form the report should be filed with the available information. Form should be completed for the full investigation and outcome within 10 days. If this is not possible confirm with the Director a specified time for completion of the report.

Attachments

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004100.00(a) Dispute Resolution Tracking Tool (Resident/Family)
004100.00(b) Dispute Resolution Form (Resident/Family)
004100.00(c) Complaints Letter and Tips