



GLEN HILL TERRACE

A DURHAM CHRISTIAN HOMES COMMUNITY

SUBJECT:	Complaints – Response Guidelines	POLICY #:	XXIII-A-10.12
		PAGE:	1 of 3
MANUAL:	Quality Management	REFERENCES:	
ORIGINAL ISSUE:	January 2016	APPROV. AUTH:	CEO
PAST REVISIONS:	January 2017	RESPONSIBILITY:	Administrators
CURRENT REVISION:	April 2021, April 2022	DISTRIBUTION:	All Residences

POLICY:

Any complaint (verbal or written) from residents, families, visitors and staff shall be investigated and actions shall be taken for resolution.

Homes shall follow the requirements in the regulation governing long term care homes; Reporting and Complaints. 2010, and the Excellent Care for All Act c.26, s. 1.

With each complaint acknowledgement, provide the following information to the complainant:

- Ministry of Long-Term Care toll free number for making complaints: 1-866-434-0144 between 8:30 am and 7:00 pm, 7 days a week
- Director, Long Term Care Inspections Branch
Long Term Care Operations Division
119 King St. W. 11th Floor
Hamilton, ON
L8P 4Y7
- Office of the Patient Ombudsman: 1-888-321-0339 toll free

PROCEDURE:

The Administrator will:

1. Ensure all staff members are advised during orientation and annual education, that if they receive a complaint from a resident, substitute decision maker, or family member, they must report this to a departmental supervisor immediately;
2. Inform all residents and their families of complaint procedures through discussion at the time of admission, reminders at family information evenings, family council meetings and posting of the procedure on the family bulletin board;
3. Ensure departmental managers follow provincial policy and legislative and regulatory requirements; and,
4. All complaints shall be documented in the Homes complaint workbook.

NOTE: an immediate report shall be made to the Director under the Act using the CI reporting system (or, if after hours, at 1-888-999-6973) where a person has reasonable grounds to suspect harm or risk of harm to a resident due to improper or incompetent care, abuse or neglect or unlawful conduct and where there has been misuse or misappropriation of a resident's money or of funding provided to the licensee.

Written and verbal complaints regarding care of a resident or operation of the home

Follow these steps:

1. Immediately forward to the director a "written" complaint using the CI system
2. Contact complainant to obtain information about the concerns.
3. Provide an acknowledgement of receipt of complaint within 10 business days of the complaint, including the date by which the complainant can expect a resolution and follow up response;
4. Conduct and document an internal investigation;
5. Resolve and provide a response to the complainant within 10 business days of receipt to a written and verbal complaint;
6. Maintain communication with the complainant where the complaint cannot be resolved within 10 business days;
7. Once resolved, a response to the complaint will include: i) the ministry's toll-free number for making complaints about a LTC home and its hours of service as well as contact information for the patient ombudsman. ii). An explanation of what was done to resolve the complaint OR that the licensee believes the complaint to be unfounded together with the reasons for that belief. iii). Confirmation that, if written, the written complaint was immediately forwarded to the Director
8. Advise head office immediately whenever any written or serious verbal complaint is received;

Documented Record for Complaint Analysis:

For all written and verbal complaints (except for those verbal complaints resolved within 24 hours of receipt), keep a record in the home that includes:

- (a) the nature of each verbal or written complaint;
- (b) the date the complaint was received;
- (c) the type of action taken to resolve the complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
- (d) the final resolution, if any;
- (e) every date on which any response was provided to the complainant and a description of the response; and
- (f) any response made in turn by the complainant;

(g) maintain the privacy and confidentiality of the resident and complainant.

Conduct Analysis (leadership and quality committee):

- (a) Review the documented record and analyze for trends at least quarterly;
- (b) Determine what improvements are required in the home based on results of the quarterly review;
and
- (c) retain a written record of each quarterly review and of the improvements made as a result.
- (d) The leadership and quality committee may forward issues and analysis to other committees (e.g. Resident Safety, Health and Safety) for review and action, as required.