

# CATEGORY: ADMINISTRATI VE/OPERATIONAL | ISSUE DATE: MARCH 12, 1997

# **AUTHORIZED BY:**

# **REVISION DATE: SEPTEMBER 5, 2018**

**CHIEF EXECUTIVE OFFICER** 

# SUBJECT: CONCERNS, COMPLAINTS, COMPLIMENTS AND RECOMMENDATIONS

### PURPOSE

The Perley and Rideau Veterans' Health Centre (Perley Rideau) believes that receiving feedback, whether positive or negative, is one of the best ways to improve the quality of care and services we offer our residents. All residents/representatives of residents are encouraged to bring forward any complaints, compliments, concerns and recommendations.

The purpose of this policy is to:

- Provide a method for residents/representatives of residents to bring forward and receive feedback for complaints, compliments, concerns and recommendations regarding the facility and its services.
- Outline the procedure for staff to follow upon receipt of a complaint/concern, compliment or recommendation.

### POLICY

- All concerns about resident care and home operations are treated seriously, investigated and addressed for the purpose of resolving them.
- On admission, all residents/representatives of residents will receive the home's policy and procedure for bringing forward complaints, compliments, concerns and recommendations. If required, the content of the policy and procedure will be reviewed with the resident or their representative.
- In an effort to avoid escalation of day-to-day interactions to the level of a formal complaint, all staff and management are expected to assist residents/representatives of residents with any concerns.
- If however, a person files a complaint about the home or its operation, the complaint will be dealt with in the manner set out in this policy / procedure including the appropriate reporting to the Ministry of Health and Long Term Care (MOHLTC).
- Staff must follow all of the steps for initiating and dealing with feedback including: reporting, investigating, resolving where possible, tracking, trending and completing any corrective actions taken or improvements made to prevent reoccurrence.



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### **APPLICABILITY/SCOPE**

This policy applies to Perley Rideau's Long-Term Care Home.

Anyone can register a concern, complaint, compliment or recommendation including a staff, resident, family member or person acting on the resident's behalf, or visitor to the home.

# DEFINITIONS

**Concern:** Written or spoken statement in which someone states that they are not completely satisfied with certain aspects of resident care and/or services provided in the home. Concerns are generally easily resolved and addressed internally and are not as serious as a formal complaint. This reflects the trend towards use of electronic communications and social media for casual communication within the home in place of more formal, written communications. Note: the recipient of the written or verbal concern will be required to discuss with the sender the intent and nature of the communication.

**Complaint:** Written or spoken statement, allegation of non-compliance with a requirement under the Long Term Care Homes Act (LTCHA), 2007 or O.Reg 79.10 (Regulation) including, but not limited to, concerns related to the care of a resident or the operation of a home.

**Compliment:** Written or spoken expression of esteem/thanks. Can be provided for all aspects of resident care and services provided by the home, as well as for individual staff members.

**Recommendation:** Written or spoken statement in which someone suggests changes regarding care, services and the physical facility.

**Representative of resident:** Any person, including but not limited to the following: family member, substitute decision-maker (SDM), power of attorney (POA), personal caregiver, staff member, volunteer, Resident Council and Family and Friends Council of the home.

# PROCEDURES

The required steps in the process of managing and reporting complaints are as follows:

- 1. <u>Initiation and Reporting of a concern, complaint, compliment or recommendation</u>
  - a. A concern, complaint, compliment or recommendation may be initiated by anyone.



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- b. The Perley Rideau will post the home's process for a person to initiate feedback on the family communication boards in the home using 16 pt font and provide the name, title and contact information of the CEO and how to submit feedback and to whom.
- c. Residents/residents representatives may share feedback in the following ways:
  - Verbally (in person or by telephone) discussing the issue with appropriate supervisory staff member/manager/supervisor/resident care liaison.
  - o Email or letter directed to supervisory staff member/manager/supervisor/resident care liaison.
  - Completing the Resident Feedback Form (Appendix A) located in a folder on the family communication boards and submitting to supervisory staff member/manager/supervisor/resident care liaison.
  - Bringing the issue to the Residents' and/or Family and Friends Councils 0
    - Friends and Family Council will direct the person to speak to the correct staff or  $\cap$ manager for action.
  - Call the Ministry of Health and Long-Term Care's toll-free Long-Term Care ACTION Line at 1-866-434-0144. (Appendix B – Submitting a Complaint Directly to the MOHLTC)
- d. Any staff member who receives feedback including: written complaints, verbal complaints, concerns, compliments or recommendations will report the feedback to their manager or supervisor.
- e. The Manager or designate will be responsible for documentation and follow-up. (reference Appendix A)
- 2. Managing concerns, complaints, compliments and recommendations:
- a. If a concern is raised, the staff member should try to resolve the concern by discussing the concerns with the resident/representative of the resident.
- b. In order to prevent escalation of day-to-day concerns, the staff are expected to assist residents and representatives of the resident to resolve problems or seek the involvement of a supervisor or manager to respond to questions/comments raised by resident/visitors/others.
- c. Proactive and open communication by staff can prevent situations from becoming a formal complaint.
- d. Any manager who receives a concern or complaint will deal with it in the following way:



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- Acknowledge the person providing feedback including the date by which the person can i) reasonably expect a resolution;
- Complete the investigation within ten (10) business days unless there are unusual ii) circumstances;
- Provide feedback within ten (10) business days outlining what has been done to resolve the iii) concern or complaint, or, if the concern or complaint is deemed to be unfounded, the reason for the belief:
- iv) NOTE: If the concern or complaint cannot be investigated and resolved within ten (10) business days a communication back to the person providing feedback must occur within those 10 business days, including:
  - 1. The date by which the person can reasonably expect a resolution and a follow-up response.
  - 2. The response, at the time when it is provided, when provided, will outline what has been done to resolve the concern or complaint or if the concern or complaint is deemed to be unfounded, the reason for that belief.
- e. Staff who receive compliments are also encouraged to notify the Manager or appropriate member of the management team, who will initiate the Resident Feedback Follow-Up Sheet and record information in the Feedback Log.
- f. The Manager will share relevant information with appropriate staff and management.
- g. The Manager will also consider if there is an opportunity to improve practice elsewhere in the home based on the positive feedback received.
- 3. Documenting concerns, complaints, compliments and recommendations
  - a. A record of all verbal and written concerns and complaints, will be documented using the Resident Feedback Follow-Up Sheet (Appendix C) or the Response to Resident Council Form (Appendix D) (for feedback raised during Council meetings). Verbal concerns and complaints that are resolved within 24 hrs do not need to be documented.
  - b. The Manager or delegate will maintain the original copy of the completed Feedback Follow-Up Sheet and other supporting documentation.
  - c. Actions taken to resolve the concern or complaint and correspondence with the person providing feedback are documented, including:



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- i. Completion of the Resident Feedback Follow-up Sheet/Response to Resident Council Sheet
- ii. The nature of each verbal or written concern or complaint;
- iii. The date the concern or complaint was received;
- iv. The type of action taken to resolve the concern or complaint, including the date of the action, time frames for actions to be taken and any follow-up action required;
- v. The final resolution, if any;
- vi. Every date on which any response was provided to the person making the complaint or registering a concern and a description of the response; and
- vii. Any response made in turn by the person providing feedback.
- viii. Reports made (eg. to MOHLTC, Centralized Intake Assessment Triage Team (CIATT) or Veterans Affairs)
- d. The Manager responsible will also record all feedback received in the Feedback Log, available on the U drive. Verbal concerns and complaints resolved within 24 hours do not need to be recorded.
- 4. <u>Reviewing and Analyzing concerns, complaints, compliments and recommendations</u>
  - a) The Operational Management Quality and Safety Committee will review and analyze the Feedback Log at least quarterly to determine if there are any trends and what improvements may be required in the home.
  - b) A written record (Committee minutes) will be kept of each review and the improvements made.
  - c) Results of the review will be communicated to staff and reported to the Quality of Life and Safety Committee of the Board according to the annual reporting schedule.
- 5. Protection against retaliation
  - a) Feedback will be addressed in a manner which respects the privacy of the person providing feedback.
  - b) There will be no retaliation of any form against anyone who brings forward a complaint, concern and or recommendation regarding the home and its services.



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### REFERENCES

N/A

# **APPENDICES**

- A Resident Feedback Form (including description of type of Feedback and Where to Report on page 2)
- B Submitting a Complaint Directly to the MOHLTC
- C Resident Feedback Follow-Up Sheet (2 pages)
- D-Response to Resident Council
- E Decision Tree



□ Complaint

**POLICY & PROCEDURE** 

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# APPENDIX A (page 1 of 2)

 $\Box$  Concern

# **Resident Feedback Form**

# (available on the Family Communication Boards on Each Unit)

To be completed by the resident, a representative of the resident, or a staff member (on behalf of

□ Recommendation

resident/family) What type of feedback are you submitting? (Please select one):

□ Compliment

Resident's Name:	Veteran (Yes/No):
Unit:	Room number:
Person submitting feedback (if not resident):	
Relationship to resident:	
Phone number:	

I wish to make the following concern/complaint/recommendation/compliment:

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

\*\* Please forward completed form to supervisory staff or directly to manager/supervisor \*\*



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Type of feedback	Where to report
Concerns	Manager / Supervisor/Resident Care Liaison
Verbal complaints	Manager / Supervisor/Resident Care Liaison
Written complaints	Manager / Supervisor/Resident Care Liaison
	Perley Rideau Director
	Perley Rideau Chief Executive Officer (CEO)
	Centralized Intake Assessment Triage Team (CIATT) at the MOHLTC (PICB) via fax
	Veterans Affairs (for Veterans only)
Compliments	Manager / Supervisor/Resident Care Liaison
Recommendations	Manager / Supervisor/Resident Care Liaison
Feedback of any kind related to s. 24 of the	Manager / Supervisor/ Resident Care Liaison
LTCHA:	Perley Rideau Director and Perley Rideau CEO
◦ Improper or incompetent treatment or care	Report to the MOHLTC (PICB) which includes a final
of a resident that resulted in harm or a risk of harm to the resident.	report once the investigation is complete
• Abuse of resident by anyone or neglect of a	CIATT including a written report documenting the
resident by the home or staff that resulted in	response the home made to the report to complainant.
harm or a risk of harm to the resident.	
• Unlawful conduct that resulted in harm or a risk of harm to a resident.	
<ul> <li>Misuse or misappropriation of a resident's money.</li> </ul>	
• Misuse or misappropriation of funding	
provided to the home under the LTCHA or	
the Local Health System Integration Act, 2006.	

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# **APPENDIX B**

# Submitting a Complaint Directly to the Ministry of Health and Long-Term Care

Complaints are submitted to the Ministry of Health by calling the:

# Ministry of Health and Long-Term Care's toll-free Long-Term Care

# ACTION Line at 1-866-434-0144.

The person answering the ACTION Line will take down your information, ask you some questions, assess the problem, and give the information to an inspector for follow-up.

The Ministry of Health and Long-Term Care's Long-Term Care ACTION Line is available five days a week, from 8:30 a.m. to 4:30 p.m.



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# **APPENDIX C (1 of 2)**

# **Resident Feedback Follow-Up Sheet**

	To be initiated by staff	member/manager upon recei	pt of feedback		
Date Received:	ate Received: Staff member:				
Resident's Name:		Veteran (Yes/N	Veteran (Yes/No):		
Unit:		Room number:			
Person submittin	ng feedback (if not resident	:):			
Relationship to resident:					
SDM informed	(if applicable): □ Yes □	No □ N/A			
What type of fe	edback was submitted?				
□ Concern	□ Complaint	□ Recommendation	□ Compliment		
□ Written	□ Verbal				
Affected area (select all that apply):					
□ Dietary	□ Finance	□ Housekeeping	□ Laundry		
□ Plant	$\Box$ Rec & Creative Arts	□ Resident Care	□ Resident Services		
Nature of the feedback (summary):					

For negative or critical feedback, is the intent and nature of the communication a formal complaint or a concern? If a formal complaint, inform complainant that a copy will be forwarded to CEO and the MOHLTC)  $\Box$  YES  $\Box$  NO  $\Box$  N/A

Date sent to MOHLTC (if applicable):

Date sent to VAC (if applicable):

Date sent to CEO (if applicable):\_\_\_\_\_



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### Appendix C (2 of 2)

What are the expectations for follow-up from the complainant?

Results of follow-up and action plan (attach additional pages if required):

Action taken/referrals made and to whom (if related to care, document in Point Click Care):

Date(s) of follow-up with resident/representative:

Staff perception of resident/representative satisfaction at end of discussion(s):

Recommendations to prevent further occurrences/lessons learned:

Signature: \_\_\_\_\_

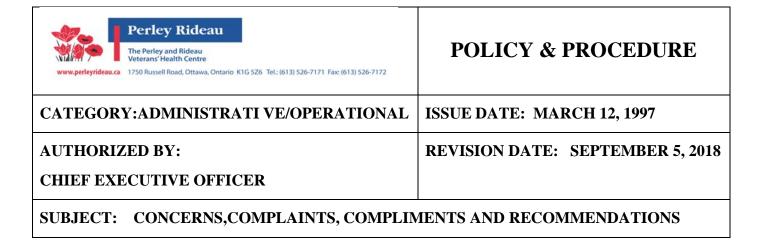
Date Closed: \_\_\_\_\_

www.perleyrideau.ca	Perley Rideau The Perley and Rideau Veterans' Health Centre 1750 Russell Road, Ottawa, Ontario K1G 5Z6 Tel.: (613) 526-7171 Fax: (613) 526-7172	POLICY & PROCEDURE		
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# **APPENDIX D**

**RESPONSE TO RESIDENT COUNCIL** 

Date of Meeting: Date of Next Meeting: Date Submitted to Department Head: Concern:		
– Resident Council President Signature: Manager Response:		
Manager Signature:	Date Completed:	
Chief Operating Officer Signature:	Date Completed:	



# **APPENDIX E: Managing Concerns and Complaints Decision Tree**

