

Reference/Standard: Complaints Process	Number: HW.4.30	Effective Date: November 2005 Revision Date: March 2008/ September 2008/April 2010
	Approval: Chief Executive Officer	

COMPLAINTS PROCESS

Standard Statement:

The Sioux Lookout Meno Ya Win Health Centre (SLMHC) is committed to ensure that all complaints related to its services and programs be investigated in a fair, equitable and timely manner. Where an internal investigative process has been determined, it should not restrict or hinder the complainant's right to satisfactory resolution of the problem. Complainants are welcome to challenge the process at any point and have the option to request a third party involvement through the process.

Procedure:

1. If a patient or visitor at SLMHC would like to file a complaint, they will be asked to do so in writing. If the individual is unable to do so in writing, they can do so via email at vphealthservices@slmhc.on.ca, telephone 737-3030 or in-person with any SLMHC employee. Staff will be made available to assist the person with a disability with providing feedback as required. Interpreters may be called upon to help with translation. The complaint form can be found on the SLMHC's intranet, website www.slmhc.on.ca and at the main admitting desks. Complaints made on behalf of patients should be made with the patient's consent. Exceptions are if the patient is:
 - A minor
 - Incapacitated
 - Deceased
2. Once the form is completed, it can be mailed to the address on the form, or given to a SLMHC employee and forwarded to the VP of Health Services' office.
3. If a complaint is received via e-mail, telephone or in-person, the employee receiving the complaint will fill out the complaint form and forward it to the VP of Health Services' office immediately.
4. All complaint forms will be received by the VP of Health Services' office. Once received, the VP of Health Services' office will number the complaint form.

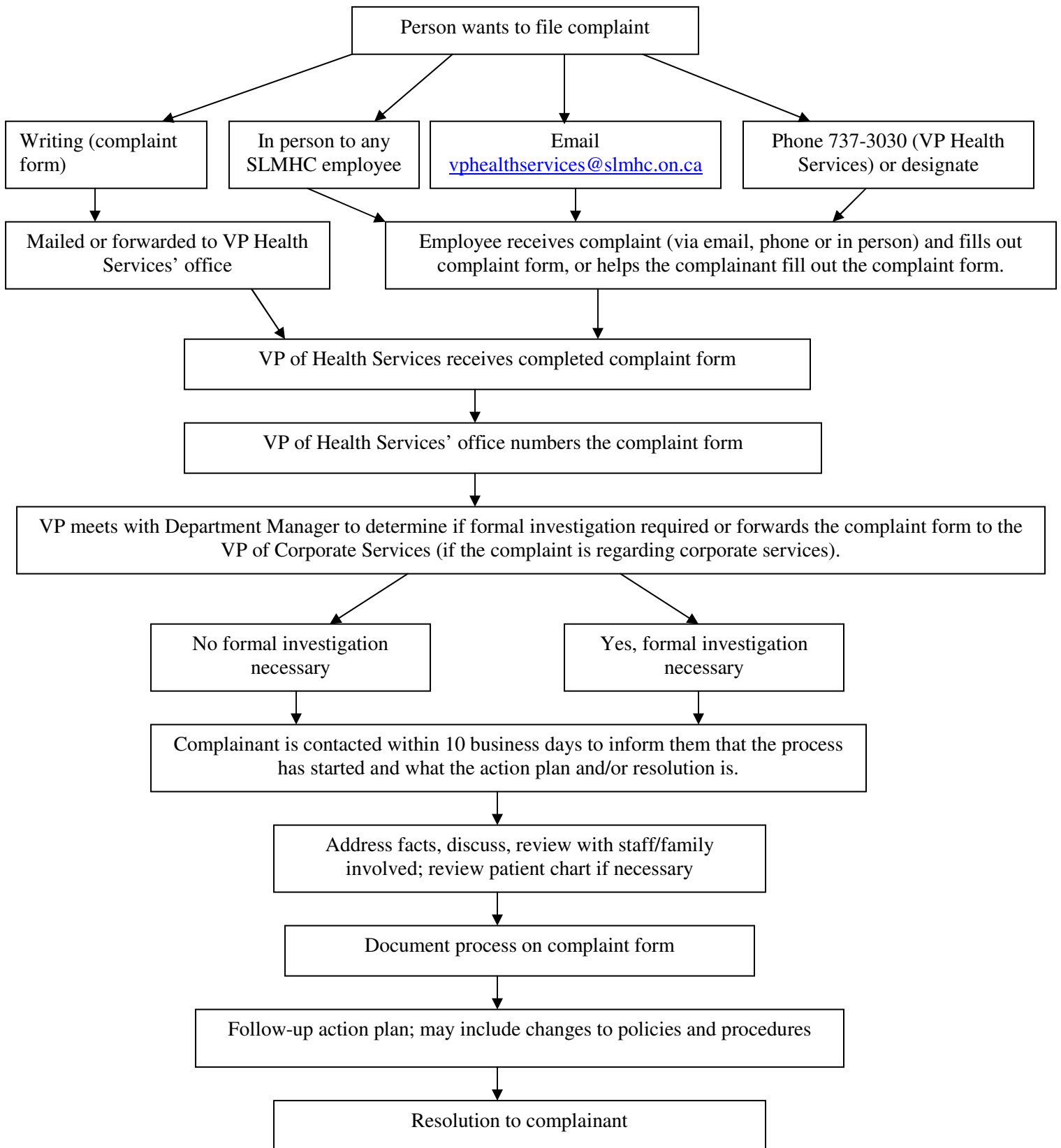
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5. The VP of Health Services, in consultation with the Department Manager who is responsible for the area that the complaint was directed to, will determine if a formal investigation should be initiated. All privacy related complaints will be directed to the SLMHC Privacy Officer. All complaints received regarding corporate services, will be directed to the VP of Corporate Services, as per the VP of Health Services decision.
6. Within 10 business days of receiving the complaint form, the Department Manager, Privacy Officer, VP of Health Services or VP of Corporate Services (as determined by the nature of the complaint) will contact the complainant to clarify concerns and inform the complainant that an investigation has been initiated. This meeting may be conducted via telephone, e-mail or mail and must be documented on the complaint form. Subsequent to this meeting, the Department Manager, Privacy Officer, VP of Health Services or VP of Corporate Services (whoever is responsible for the investigation) will develop an action plan to proceed with the investigation in attempt to resolve the issue.
7. The investigative process will be conducted, including all affected parties and may include:
 - Obtaining facts and reviewing findings from employee/complainant
 - Interview(s) with other person(s) to obtain factual data
 - Review of the patient/client/resident's chart
 - Documented process (in detail) on the complaint form
 - Follow-up as required
8. Completing an action plan including recommendations will be a result of the investigation and may include:
 - Revisions to hospital policies/procedures
 - Further education for staff and patients/clients/residents or public
 - Employee discipline and notification of appropriate professional regulatory body
 - Other recommendations to improve quality of service and provide lessons learned
9. Resolution of the complaint will result in:
 - When a formal investigation has been conducted, a courtesy phone call regarding the resolution of the complaint will be made to the complainant. As well, a formal letter will be sent to the complainant advising them of the outcome of the investigation and the action(s) taken. The phone call and letter must be documented on the complaint form.
 - If a complaint does not result in a formal investigation, the complainant will have received a phone call regarding their complaint and the resolution (this can be done in step #6). All correspondence will be documented.
 - Quarterly summary reports will be compiled by Health Services and forwarded to senior management, Quality Council and the Board to reflect numbers received and quality of follow-up.

10. Complaints should be made as soon as possible after the events. SLMHC will initiate the complaint investigation within 10 business days of receiving the complaint. All investigations are expected to be completed within 30 days. The VP of Health Services has the right to extend this timeline on an individual basis.
11. Complainants who remain dissatisfied with the response they receive as a result of the health centre investigation, may request an independent review of their continuing concerns and be referred to the VP of Health Services for further follow-up.

APPENDIX A

Complaint Process policy #HW.4.30



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