

1A STANDARDS**1-A-14 Client / Community Incident & Complaints**

Effective Date: March 2005

Next Review Date: August 2021

Approved by: Board of Directors

Date: October 30, 2018

Applies to: Clients and Community
Members

Reviewed/Revised: August 2018

Policy

It is the Policy of Gateway Community Health Centre (GCHC) that all Client and/or Community complaints or issues of concern, shall be addressed in a professional and thorough manner to ensure satisfactory and timely resolution. We respect and value our Clients and/or Community and will endeavor to meet or exceed the requirements of the Client Bill of Rights.

Purpose

To ensure our Clients and/or Community are satisfied with the services and personnel of the Centre, and that any complaints or issues of concern with such, are addressed immediately. It is the responsibility of all staff with the Executive Director or designate (i.e. Primary Health Care Manager, Manager of Human Resources and Operations) to resolve Client and/or Community identified issues in a professional and timely manner.

Procedure

Clients shall be informed of our Complaints Policy and Process when registering with the Centre as well as information posted within the waiting room area.

The Community shall be informed of our Complaints Policy and Process through information posted within the Centre.

Clients and/or the Community have the right to have their complaint reviewed and addressed without fear of embarrassment or reprisal.

Respondents have the right to be informed of allegations and afforded the opportunity to respond to them.

Client and/or Community complaints or issues of concern may be received verbally, by email, by facsimile and/or by mail. These may be initiated by:

- a) the Client,
- b) Client Representative (i.e. family member or friend),
- c) Community Resident/ Group
- d) Centre employee.

All Client and/or Community complaints or issues of Concern received shall be recorded on an Occurrence Report. Refer to policy 1-A- 9 Incident and Occurrence Reporting and Recording.

If the complaint or issue of concern has been telephoned in, the Receptionist will forward the call to the Executive Director/designate and/or a member of the Administration Team i.e.

Administrative Assistant, Manager, Human Resources and Operations, or Finance Manager. In the absence of the Executive Director and/or Administration Team the Receptionist shall record the information on the Occurrence Report and forward to the Executive Director for resolution. Verbal complaints or issues of concern communicated directly to staff will be documented by the staff member on the Occurrence Report and forwarded to the Executive Director/designate.

If the complaint or issue of concern has been received by facsimile or letter, it will be forwarded to the Executive Director/designate. The Executive Director/designate or Administrative Assistant/ Manager, Human Resources and Operations will complete the Occurrence Report form using the facsimile or letter as a source of input. The facsimile or letter will be attached to the form.

If the complaint or issue of concern has been expressed by an employee, the employee will meet with the Executive Director/designate. The Executive Director/designate will complete the Occurrence Report form with input from the employee.

The Executive Director/designate will acquire the specific details of the complaint or issue of concern and will take appropriate action to resolve the complaint or issue. The client and/or community member may expect a response from the Executive Director/designate within ten (10) business days. Accommodation will be made to ensure that clients/community members with a disability receive a response in a manner that takes into account their disability.

The processing of Client and/or Community complaints or issues of concern will be reviewed, analyzed and summarized quarterly. The findings and recommendations of the Occurrence Reports will be forwarded to the Quality Council for formulating continuous improvement efforts. The Board of Directors shall be provided quarterly with a report identifying in summary the nature of complaints, trends and recommendations for improvement. Recommendations which require the addition, deletion or revision to policy shall be forwarded to the Board of Directors for consideration and approval.