LONDON INTERCOMMUNITY HEALTH CENTRE

OPERATIONS MANUAL

Subject:	Client Complaints	Policy Number: OIII-60
Section:	Organizational	Page: 1 of 2
Implementation:	1990	Review: Nov 2004, Jan 2008, Jan 2012, Jan 2017
Revision: 2004, November	September 2001, November 2008, August 2010	Approved By: Executive Director

In the course of participating in Health Centre programs or receiving primary health care services, clients may wish to provide comments, offer criticism or feedback, or lodge a complaint. The London InterCommunity Health Centre is committed to providing mechanisms that allow clients to provide this important information and respond to and seek to resolve issues that are raised.

Health Centre staff will ensure that client complaints are heard and addressed properly and in a timely fashion. The Health Centre will facilitate a culturally and linguistically appropriate process of communication. Interpreters will be available if needed, and clients with low written literacy will be given the opportunity to provide feedback verbally.

All conversations, meetings and phone calls related to client complaints, comments and feedback will be documented, noting the time and date of interaction. All documentation related to the formal complaint procedure will be kept in a locked administrative file in the Executive Director's office. Documents will be kept for a period of five years.

Staff and volunteers will first encourage clients to speak to their immediate provider or program facilitator so that their issues can be dealt with in the context of that relationship.

Clients who are not comfortable with addressing issues with their immediate provider are encouraged to do one of two things: complete a comment card and place it in the provided comment boxes or communicate directly with a Team Lead or Director.

Information received both through client comment cards and through direct contact with a Team Lead or Director will be analyzed, organized by theme, and brought forward to the Management Team on a monthly basis or as required. A summary report will be presented to the Board of Directors annually by the Executive Director.

Procedure for Feedback Received Via Comment Cards

STEP 1: Comment cards are available in Health Centre reception areas. Comment cards, with envelopes, are also available through outreach staff and volunteers. These cards are available in 7 languages: English, French, Spanish, Polish, Arabic, Vietnamese and Cambodian. Staff will make every effort to provide assistance if the client has difficulty completing the comment card.

<u>STEP 2:</u> Completed comment cards are to be placed in a locked comment box located in the reception area. Cards completed at outreach sites are to be placed in an envelope and sealed by the client. These envelopes are to be given to the Executive Director.

STEP 3: Comment cards will be collected and reviewed regularly by the Leadership Team.

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<u>STEP 4:</u> As deemed appropriate, general comments regarding the Health Centre will be posted anonymously on a bulletin board in the reception area alongside a response from the appropriate Director. Comments received in other languages will receive a response in both English and the client's language.

<u>STEP 5:</u> As deemed appropriate, comments regarding a specific area of the Health Centre will be referred to the Director for discussion. For anonymous comments, a response will be posted in the reception area. For comments from a specified individual, a response will be provided in writing within two weeks.

Procedure for Feedback Received Directly by a Supervising Director or the Executive Director

Clients may choose to communicate their concerns with the appropriate Team Lead OR Director.

<u>STEP 1:</u> The Director, upon hearing the client's concern, informs the client of the process she/he will undertake. If the complaint relates to a specific staff person(s) the Director will attempt to arrange a meeting between the client and the staff person(s) involved, if required. Manager and client will also discuss issues of confidentiality, especially if information needs to be obtained from other sources.

<u>STEP 2</u>: The Executive Director will be informed that a formal complaint has been received, including the nature of the complaint.

<u>STEP 3</u>: When a resolution is reached, this information will be given to the Executive Director for review and approval. The resolution will then be implemented.

<u>STEP 5:</u> The Director communicates final decision to client by the mutually agreed upon date. All resolutions will be first communicated verbally to the client and the staff person(s) involved and then followed up in writing.

STEP 6: If a resolution cannot be worked out at the operational level and the complaint is within the Board's scope of responsibility, the client has the option to have the Executive Committee of the Board review the complaint and make a final decision. All parties would be informed in writing of the Committee's decision.

STEP 7: All documentation of client complaints whether formal, or informal are kept in a locked file in the Executive Director's office.

Cross Reference

OI-100 Client Rights and Responsibilities H&S III-60: Termination of Client Relationship