POLICY AND PROCEDURES
DISTRIBUTION: All Staff
Effective Date: January 1, 2011

SUBJECT: MANAGING and REPORTING
COMPLAINTS

Revised: April 11, 2022

Executive Director

By Authority of the Board of Directors

#### **COMPLAINT POLICY Dom Lipa Long Term Care and Retirement Home**

Dom Lipa is committed to ensure that every written or verbal complaint made to the licensee or a staff member concerning the care of a resident or operation of the home requires an investigation and resolution where possible. Complaints shall be dealt with as follows-

- The complaint shall be investigated and resolved where possible, and a response provided within
   10 business days of the receipt of the complaint and where the complaint alleges harm or risk of
   harm including, but not limited to, physical harm, to one or more residents, the investigation shall
   be commenced immediately and immediately forward the complaint to the Director, Long Term
   Care or Registrar of the Retirement Homes Regulatory Authority
- For those complaints that cannot be investigated and resolved within 10 business days, an
  acknowledgement of receipt of the complaint shall be provided within 10 business days of receipt
  of the complaint including the date by which the complainant can reasonably expect a resolution,
  and a follow-up response to be provided as soon as possible in the circumstances that includes
  providing the person who made the complaint with the information listed below-
  - 1. <u>Ministry of Long-Term Care toll-free telephone number</u> for making complaints about homes and its hours of service and <u>contact information for the patient ombudsman</u> under the *Excellent Care for All Act, 2010.*

#### OR

Retirement Homes Regulatory Authority contact information.

- An explanation of what the licensee has done to resolve the complaint or that the
  licensee believes the complaint to be unfounded, together with the reasons for the belief
  and if the licensee was required to immediately forward the complaint to the MOHLTC or
  RHRA confirmation that the licensee did so.
- 3. The licensee shall ensure that a documented record is kept in the home with <u>details of</u> the complaint to include nature of each verbal or written complaint, the date the complaint was received, the type of action taken to resolve the complaint, including the date of action, time frames for actions to be taken and any follow-up action required, the final resolution if any, every date on which any response was provided to the complainant and a description of the response; and any response made in turn by the complainant.
- 4. The Slovenian Linden Foundation Dom Lipa Concern Log (document on page 8) is the documented record kept in the home with details of the complaint.

The licensee shall ensure that the documented record is reviewed and analyzed for trends at least quarterly, the results reviewed, and analysis are taken into account in determining what improvements are required in the home and a written record is kept of each review and of the improvements made in response.

#### **PROCEDURE**

#### Initiating

Anyone can register a complaint, including a resident, family member, person acting on the residents' behalf, visitor, volunteer or staff.

Where appropriate, the staff member receiving a verbal complaint should try to resolve the complaint using personal means such as face to face or telephone communication. If front line staff are unable to

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resolve a verbal complaint at the unit level within 24 hours, staff must report it to their immediate manager or designate who will enter the information on the Slovenian Linden Foundation Dom Lipa Concern Log and investigate the complaint.

Dom Lipa's process for a person to initiate a complaint and a copy of the Managing and Reporting Complaints Policy are posted on the Posting Boards by the Chapel Long Term Care and the Retirement Home. The Suggestions, Concerns, Complaint Form is available at the Nursing Stations.

Complaints received that fall under the mandatory reporting requirements under clause 26 contained in the Fixing Long Term Care Act,2021(FLTCA) such as:   Abuse of a resident by anyone or neglect of a resident that resulted in harm or a risk of harm to the resident.
☐ Unlawful conduct that resulted in harm or a risk of harm to a resident.
☐ Misuse or misappropriation of a resident's money.
☐ Misuse or misappropriation of funding provided to a home by the MOHLTC.
Shall immediately be reported to the Ministry of Health Long Term Care in a form or manner acceptable to the Director and during the Ministry's normal business hours to the Director or the Directors' delegate or outside normal business hours, using the Ministry's after hours emergency contact method. or the Registrar of the Retirement Home Regulatory Authority (RHRA) under the mandatory reporting requirements. The Executive Director and/or Director of Care must be immediately advised of complaints that require mandatory reporting.
OR
OR
OR  Complaints received that fall under the mandatory reporting requirements contained in the
OR
OR  Complaints received that fall under the mandatory reporting requirements contained in the Retirement Homes Act,2010 (RHA) such as:  Improper or incompetent treatment or care of a tenant that resulted in harm or a risk of harm to the
OR  Complaints received that fall under the mandatory reporting requirements contained in the Retirement Homes Act,2010 (RHA) such as:  Improper or incompetent treatment or care of a tenant that resulted in harm or a risk of harm to the tenant.  Abuse of a tenant by anyone or neglect of a tenant by the home or staff of the home that resulted in
OR  Complaints received that fall under the mandatory reporting requirements contained in the Retirement Homes Act,2010 (RHA) such as:  Improper or incompetent treatment or care of a tenant that resulted in harm or a risk of harm to the tenant.  Abuse of a tenant by anyone or neglect of a tenant by the home or staff of the home that resulted in harm or a risk of harm to the tenant.  Contravention of a requirement under the RHA, or other unlawful conduct, that resulted in harm or a

Shall immediately be reported to the Registrar of the Retirement Home Regulatory Authority.

Staff members and volunteers who witness or suspect abuse of a resident, or receive complaints of abuse, are required to report the matter immediately to the Executive Director and/or Director of Care.

Any person who reports anything to the MOHLTC/Registrar RHRA will be protected against retaliation as per Fixing Long Term Care Act, 2021 section 30 (1-9) and RHA 2010 section 115.

## Reporting

Where appropriate, the staff member receiving a verbal complaint should try to resolve the complaint using personal means such as face to face or telephone communications within 24 hours.

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If front-line staff are unable to resolve a verbal complaint at the unit level within 24 hours, staff must report the complaint to their immediate manager/designate who will internally report details on the Slovenian Linden Foundation Dom Lipa Concern Log and investigate as required.

Note: For clarity's sake, verbal complaints that are resolved within 24 hours do not require documentation unless the nature of the complaint relates to other sections of the FLTCA or its Regulation or the RHA or its regulation, such as a verbal complaint about abuse/neglect).

The most responsible manager/designate, upon receipt of a written complaint, shall initiate the complaint investigation and follow-up process by completing the Suggestions, Concerns, Complaint Form Appendix B.

#### Investigating/Resolution

The Manager/designate ensures that:

- a) Receipt of the complaint has been acknowledged to the person making the complaint including the date by which the complainant can reasonably expect a resolution.
- b) The investigation is completed within ten (10) business days unless there are unusual circumstances.
- c) The person making the complaint receives a response to the complaint within ten (10) business days outlining what has been done to resolve the complaint or if the complaint is deemed to be unfounded and the reason for that belief.
- d) If the complaint cannot be investigated and resolved within ten (10) business days, communicate this to the person making the complaint including the date by which the complainant can reasonably expect a resolution, and a follow-up response.

e) Actions taken to resolve the complaint and correspondence with the person making the complaint are documented including;
□ the nature of each verbal or written complaint;
☐ the date the complaint was received;
$\Box$ 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;
□ the final resolution, if any;
$\hfill \Box$ every date on which any response was provided to the complainant and a description of the response and
□ any response made in turn by the complainant.

## Tracking/Trending/Actions taken to prevent Reoccurrence.

Planning and documenting corrective actions and areas for improvement arising from the complaint to prevent recurrence including;

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□ Reviewing and analysing the documented record for trends in types of complaints and resulting actions, at least quarterly.
□ Using the results of the review and analysis in determining what improvements are required or further preventative measures can be taken in the home; and
□ Keeping a written record of each review and of the improvements made in response.
□ Maintaining Complaint documentation that is kept in the Complaints Binder in the Executive Director's office and is discussed as a standing item on the Manager's CQI agenda.

SUBJECT: MANAGING and REPORTING

**COMPLAINTS** 

## **Orientation and Training**

All staff must receive training regarding written procedures for handling complaints and the different roles of front line and management staff in dealing with complaints during orientation and annually.

Appendix Attachments Appendix A Managing Complaints Decision Tree LTC (page 5)

Appendix B Suggestions, Concerns, Complaint Form (page 6)

Do you have a concern or Complaint about a Long- Term Care Home or Retirement Home? If you do, act, and help improve care for residents.

## Follow the home's complaint process.

Homes are required to have a written complaint procedure and post it where people can see it. They are also required to respond to concerns and complaints.

#### OR

## Contact the Ministry of Health and Long-Term Care

The ministry is responsible for ensuring long- term care homes comply with the Fixing Long Term Care Act, 2021

Call the ministry's toll-free, confidential Long-Term Care ACTION Line: 1-866-434-0144

(7 days a week 8:30 a.m. -7:00 p.m.)

or send a letter to: Director

Long-Term Care Inspections Branch Long-Term Care Operations Division Ministry of Long-Term Care 438 University Avenue, 8<sup>th</sup> Floor Toronto, ON M7A 1N3

The Fixing Long Term Care Act, 2021 provides protection for people who report concerns to the ministry. People making complaints do not have to give their name or contact information. If you do provide your name, you can ask that it be kept confidential. Information about complaints is only disclosed if the law requires or allows the ministry to disclose it. If you or someone else is treated unfairly because you complained, contact the ministry.

If you have already contacted the home directly and the Long-Term Care Family Support and Action Line

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(toll-free at 1-866-434-0144) and were not able to reach a satisfactory resolution, you can contact the Patient Ombudsman:

- Online
- by calling 1-888-321-0339 (toll-free) or 416-597-0339 (in Toronto)
- TTY:416-597-5371

The Patient Ombudsman strives to achieve a level of fairness in the resolution process for everyone involved as they review complaints. English and French service is available. We are also happy to arrange a language interpretation service if you speak another language.

OR

## Contact the Registrar of the Retirement Homes Regulatory Authority

The authority is responsible for ensuring retirement homes comply with the Retirement Homes Act, 2010

1-855-ASK-RHRA (1-855-275-7472) or write to the RHRA at: <a href="mailto:info@rhra.ca">info@rhra.ca</a> or 160 Eglinton Avenue East, 5<sup>th</sup> Floor, Toronto, ON M4P 3B5

### DOM LIPA Slovenian Linden Foundation

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By Authority of the Board of Directors

## SUBJECT: MANAGING and REPORTING **COMPLAINTS**

				_
uggest	ions, Conce	rns, Com	plaint Form	DOM LIPA
ATE:				SLOVENIAN LINDEN FOUNDATIO
: This is a:	Suggestion	Concern	□ Complaint □	
Suggestic		laint is related	I to: (if unsure continue and o	complete Section C\
			g Care; b. Personal Care; c. Saf	
1) Qu	lailty of Resident Ca	re: 🗀 (a. Nursin	g Care; b. Personal Care; c. Sai	ety)
2) Sta	aff: 🗌 (a. Nurse; b. P	SW; c. Manageme	ent; d. Housekeeping; e. Other	•)
3) Ot	her Resident(s): $\square$	4) Facility: $\square$	(a. Cleanliness; Safety; etc.)	5) Infection Control:□
			It: (please print & use addition WHO, WHAT, WHEN, WHERE,	
D. Have	vou voiced these s	uggestions co	ncerns, complaints to an	y staff members? If so, please
			ave had. Please include names	
(If you ho	ave any documents to	support your sug	gestion/concern/complaint, p	lease attach them with this form)
E. Your	details (please pri	nt)		
esident  ime (Reside	Substitute Decision	on Maker 🗆	Family Member  Room:	OtherWing/Floor:
ine (reside	in.j.		Room:	wing/rioor;
me (Non-Re	esident):			
w shall we	contact you? Phone□		Email 🗆	In Person 🗆
nature:				
refer to re	emain anonymous:	By remainir	ng anonymous, I understand th	nat no one can reply to my complaint.

#### FOR ADMINISTRATION ONLY

Date Received: Time received:		Is complaint required to be sent to Ministry? Yes  No **  *All complaints regarding care are mandated to be sent to Ministry
	High ☐ Moderate ☐ Lov	Printed Name & Signature of Sender:
Printed Name 8	& Signature of Receiver:	Date copy sent to Ministry (as per LTCA):
b) If home c) If comp • Da	d within 10 days outlining believes there is no caus laint cannot be investiga ate/time of initial reply to	what has been done to resolve the complaint for the complaint explain why d/resolved within ten days, communicate this to the complainant omplainant: (d/m/y)
		en, Who?) (Attach any necessary documentation)
# Action/Tir	ne Required/Resolution:	What/Why/How/When) Date/Time Print Name/Signature (Who)
1		
2		
3		
•		(Document all communications made by respondent & sender. Include date, time, descriptio plan of action/expected resolution date)  cription of Response: (or attach written correspondence)
1		
2		
3		
Signature of Ex	ecutive Director:	ble for managing the complaint:d  d in complaint binder   Specify Date (d/m/y)

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# SLOVENIAN LINDEN FOUNDATION DOM LIPA LONG TERM CARE CONCERN LOG

Nr.	Date	Verbal or Written	Nature of Complaint Name who delivered Name of residents involved	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	the final resolution if any	every date on which any response was provided to the complainant and a description of the response	any response made in turn by the complainant		
1									
2									
3									
4									
5									

### DOM LIPA Slovenian Linden Foundation

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SUBJECT: MANAGING and REPORTING **COMPLAINTS** 

# SLOVENIAN LINDEN FOUNDATION DOM LIPA RETIREMENT CONCERN LOG

Nr.	Date	Verbal or Written	Nature of Complaint Name who delivered Name of residents involved	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	the final resolution if any	every date on which any response was provided to the complainant and a description of the response	any response made in turn by the complainant
1							
2							
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