

Société Alzheimer Society

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Organization and Culture Policy

Policy: Comments, Compliments and Complaints	Number: ORG-CUL-05
Implementation Date: March 2023 Review Date: June 2023	Pages: 9

POLICY:

The Alzheimer Society (“the Society”) strives to create a quick and transparent process to respond respectfully and resolve comments, compliments, and complaints fairly. The Society will provide a written decision, where required.

Service users are informed about this policy through the Society website, Client Handbook and Programs Inventory Guide and at client orientation. A comment, compliment, or complaint may be submitted under this policy regarding one or more of the following concerns:

1. the eligibility for Society programs and services;
2. the quality of Society programs and services; and
3. the conduct of staff
4. client’s rights as set out in the Client Bill of Rights
5. other matters
6. Appeals

Providing assistance

The Alzheimer Society staff provides all reasonable assistance to those who need help communicating in relation to the complaint. Assistance may include, for example, access to an interpreter service or agreement to a personal interview during which the details of the complaint can be written down on the complainant’s behalf.

If accommodations are required, the service user should connect with a Society leadership and/or appropriate designate and state any accommodation required to make a comment, compliment, and complaint under this policy.

Compliments

Compliments are used to celebrate Society's morale, share good practices, and improve services. Any compliment received is shared with relevant Society members. Staff receiving the compliment will document the compliment in the *PS-HSW-01 Society Compliment Log*.

Comments and Complaints

To initiate a comment/complaint, a service user should notify the Society by:

1. informing a staff member in-person, or by e-mail
2. client survey
3. contact via the Society website,
4. meeting with appropriate Society designate(s) and/or the leadership

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Anonymous complaints versus registered complaints

Anonymous Complaints

While anonymous complaints are not encouraged, they are accepted. They may be lodged either in writing or accepted by an employee as an oral statement. Complainants are encouraged to provide as much information as possible which may be of assistance when assessing the complaint. It should, however, be noted that an anonymous complaint might be more difficult to investigate as, for example, further details of the circumstances relating to the complaint might be difficult to obtain, and it will be difficult to provide feedback on the complaint.

A complaint concerning:

- the eligibility for, and quality of Society programs and services; will be addressed by appropriate managers
- Client Bill of Right
- a staff member, will be addressed by their immediate Manager; incidents of serious professional misconduct will be reported to Human Resources and dealt with accordingly
- the Society Executive Director shall be referred to the Chair of the Board of Directors.
- other matter

The responsibility for handling comments, complaints, or allegations shall rest within the Society and/or supervisor, or appropriate designate(s). Details regarding the concerns should be elicited by the staff and may be documented using the *HR-HSW-01-Accident, Incident and Complaint Report Form*, and will be logged into the *ORG-CUL-05 Comment, Compliments, and Complaint Log*. Comments, complaints, or allegations will be acknowledged within a minimum of 2 business days, unless otherwise stated as per the priority level schedule. If the service user is unsatisfied, and the complaint remains unresolved, it may be brought to the appropriate designate(s) and/or Executive(s) of the Society.

The Executive will make every effort to resolve the matter to the satisfaction of the complainant by:

- notifying the appropriate staff involved that a complaint has been made;
- ensuring the concern is well documented in the client's file, as appropriate, i.e. a change in client care process;
- investigating the circumstances surrounding the complaint with every effort to involve appropriate staff and client in a resolution process;
- reporting to both the client and any staff involved within a reasonable time frame.
- determining if any follow up or further investigation is required, based on level of risk assessment, and notifying the appropriate college or agency as required.

If the complaint concerns the Executive, the complainant may bring the issue to the attention of the Board Chair or designate who will make every effort to resolve the matter to the satisfaction of the complainant by:

- notifying the Executive Director that a complaint has been made;
- investigating the circumstances surrounding the complaint;
- reporting to both the complainant and Executive Director a recommended course of action;
- completing the process within a reasonable time frame

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Clients who wish to appeal against an agency decision regarding the provision of services will be referred to the Chair of the Board of Directors who will address the matter at the next scheduled board meeting. An emergency board meeting may be called should the situation warrant such urgency. The Chair may provide a written response to the client following the meeting to inform them of the final decision.

When a client provides notice, oral or written, of an intention to commence a lawsuit against the Society or any of its staff, the Executive will be informed immediately. The Executive will provide written notice to the Society's insurer of the claim or possible claim. Other regulated professionals may be asked to contact the legal departments of their respective College Associations. All staff members shall cooperate fully in providing statements and any other information to the Society's insurer, its adjusters and its lawyers in respect of a claim.

A complaint involving the Board of Directors, or a member of the Board maybe Chair with respect to an ethical issue, or a potential conflict of interest may be made to the attention of the Chair. A complaint against the Board Chair, may be directed to the Vice-Chair and/or appropriate designate.

The Society will log and review all comments, compliments, and complaints received and reports both quarterly and annually to the Board of Directors, Executive, and/or appropriately designated AS-CUL-05 Comments, Compliments, and Complaints Log. Complaints will be confidential except as necessary for investigations. Complaints will be stored in a confidential space either in the office and/or in a locked electronic file in the Society's drive. As a matter of fairness, the staff who are the subject of the complaint will be informed of the complaint. Client r complaints may be documented in the client's electronic file. The log will track themes of the complaints, monitoring outcomes, and actions taken.

Record Keeping, Quality Improvement and Conclusion

- Key points about complaints will be reported to the Board of Directors by the Executive as deemed appropriate. Complaints which fall within the themes of:
 - Risk and Safety
 - Racism, Discrimination, and Harassment
 - Professional Misconduct (Allegations of Abuse, or others)
 - Financial
 - Whistleblower/confidential line
 - Privacy breaches
- Any complaints where action can be taken to avoid recurrences must be acted upon and raised with the appropriate Executive management personnel.
- Ensure documentation as appropriate within the client's record.
- All documented complaints will be held confidentially
- All comments, compliments and complaints will be logged and tracked
- Complaint reports will be reviewed quarterly by the Executive and/or other key designate(s) for ongoing quality improvements.

SCOPE:

The policy applies to all employees, clients, funders, volunteers, students, and board of directors.

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DEFINITION(S):

Comments: a remark, observation or criticism that may require immediate action but does not require a full investigation.

Compliments: any positive review about but is not limited to the organization, staff, culture and/or provisions of service.

Complaints: are registered complaints, written or verbally expressed concerns given to the Society about decisions, activities, and behaviors, concerning issues, which require an investigation.

PROCEDURE:

To address concerns and complaints the following steps will be taken:

Receive and Classify

Priority Level	Definition	Action Required
<u>All Complaints</u>	<i>Expression of a negative experience with the Society</i>	<ol style="list-style-type: none"> Staff member who receives the complaint will immediately: <ol style="list-style-type: none"> Acknowledge receipt of complaint to Complainant Notify department manager Manager will escalate to the Executive– if the complaint involves the Executive directly the complaint should be escalated to the Board. Manager and Executive will determine priority level of the complaint and next steps
<u>Level 1</u>	<p><i>Major issues that are a risk to safety, wellbeing, privacy or reputation</i></p> <p><i>Major issues that are a risk to negatively impact the Society's reputations.</i></p> <p><i>Ex. Risk and Safety; Racism; Code of Conduct (allegations of abuse); Financial; Whistleblower/ConfidenceLine; Privacy; Notice of Legal Action; Threats to public profile and/or service offerings; Imminent media outreach</i></p>	<ol style="list-style-type: none"> Once the complaint is deemed level 1 by managers and/or Executive. The complaint is to remain with the Executive The Executive will create an action plan and further investigate the complaint The Executive will issue an immediately acknowledge the complaint and then have proposed a resolution within <u>3 working days</u> All level 1 complaints are reported to Executive and the Chair of the Board of Directors <p><i>Complaints involving the Executive</i></p> <ol style="list-style-type: none"> All complaints that involve the Executive are considered level 1 complaints Complaints involving the Executive shall be given directly to the Chair of the Board of Directors to investigate. Complaint is to be acknowledged within <u>3 working days</u> <p>The Board of Directors will be notified of any complaints regarding the Executive and the matter will be discussed at the next scheduled board meeting</p>

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<u>Level 2</u>	<p><i>Risks that interfere with the care, service or support individuals receive from the Society.</i></p> <p><i>Lower impact to the organization, likely applicable for most complaints</i></p>	<ol style="list-style-type: none"> 1. Once manager and/or Executive determine that the complaint is level 2, complaint will be assigned to the responsible designate(s). 2. Designate(s) will determine appropriate next steps, including the investigation 3. Designate(s) will issue a response to the complainant within <u>2 working weeks</u>
<u>Level 3</u>	<p><i>Complaints or Comments that do not relate to the provision of care/service and/or lack sufficient detail to identify or assess risk.</i></p>	<ol style="list-style-type: none"> 1. Once manager and/or Executive determine that the complaint is level 3, complaint will be assigned to the responsible designate(s). 2. Designate(s) will determine appropriate next steps, including the investigation 3. Designate(s) will issue a response to the complainant within <u>2 working weeks</u>
<u>Society Exceptions:</u>	<p><i>Exceptions for not following the actions required for handling complaints</i></p>	<ol style="list-style-type: none"> 1. If any staff feels uncomfortable disclosing a complaint to their manager, Executive(s), Complaints shall be given directly to the Board of Directors to investigate. 2. This service allows employees to report impropriety without escalation to a manager, Executive(s), or Board of Directors 3. The whistleblower hotline should only be used in extreme scenarios
<u>Complaints involving Board Members</u>		<p>A complaint involving the Board of Directors, or a member of the Board may be Chair with respect to an ethical issue or a potential conflict of interest may be made to the attention of the Chair. A complaint against the Board Chair, may be directed to the Vice-Chair and/or appropriate designate.</p>

Acknowledge

All complainants, regardless of priority level, will receive an acknowledgement on the day of receipt by the person directly receiving the complaint in the way the complaint was received (phone, email, in writing). Beyond the initial acknowledgement by the staff who received the complaint, the complaint will be reported to the appropriate designate(s) and further investigated.

Investigation

- The person receiving the complaint will fill out the *HR-HSW-01-Accident, Incident and Complaint Report Form*
- All areas of interaction and communication should be established (who, what, when, where and why) and documented.
- Received complaints along with the *HR-HSW-01-Accident, Incident and Complaint Report Form* and any other related documents will be escalated to the appropriate designate(s) e.g. an email associated with the complaint
- Designates and/or Executives will determine the priority level of the complaint and next steps

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- The priority of the complaint will drive the timeframe for completion as well as who is in charge of acknowledging the complaint. *See Procedure Section 1. Receive and Classify*

Resolve and Confirm

- An action plan will be developed using the *HR-HSW-01-Accident, Incident and Complaint Report Form*.
- They will ensure that the proposed resolution does not prejudice the Society in any legal or financial manner.
- They will reflect on the proposed resolution from both a Society and complainant's viewpoint to ensure fairness and clarity.
- If approval is required, designates will document the proposed action, review, and seek approval appropriately.
- The review is to include recognition and documentation of any underlying issues that have contributed to the complaint and include recommendations for future quality improvement considerations.

Respond to Complainant

- A detailed account of findings and proposed resolution should be clearly explained (written or verbal) to the complainant – within the recommended timeframe.
- If this cannot be completed within the established timeframe, the complainant is to be informed of current standings and advised that further time will be required.
- While responding to the complainant, the complainant should have the opportunity to respond:
- Is the complainant satisfied with the response?
- Did they feel their complaint was properly and fairly handled?
- Negative responses to these questions should be referred to the Executive for action and direct follow-up with complainants.

Appeals Process

Appeals: Clients who wish to appeal against an agency decision regarding the provision of services will be referred to the Chair of the Board of Directors who will address the matter at the next scheduled board meeting. An emergency board meeting may be called should the situation warrant such urgency. The Chair will provide a written response to the client following the meeting to inform them of the final decision.

Health Services Appeal and Review Board: Clients who have complaints about Ministry of Health and Long-Term Care (MOHLTC) funded services may further appeal to the Health Services Appeal and Review Board (HSARB) if they are not satisfied with the decision made by the Alzheimer Society Board of Directors.

Contact information for the HSARB is as follows:

Health Services Appeal and Review Board

151 Bloor St. W., 9th Floor

Toronto, ON M5S 2T5

Telephone: 416-327-8512

Toll Free: 866-282-2179

Fax: 416-327-8524

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Email: hsarb@moh.gov.on.ca

Record Keeping, Quality Improvement and Conclusion

- Key points about complaints will be reported to the Board of Directors by the Executive as deemed appropriate.
 - Risk and safety
 - Racist
 - Code of conduct (Allegations of Abuse, or others)
 - Financial
 - Whistleblower/confidential line
 - Privacy breaches

- Any complaints where action can be taken to avoid recurrences must be acted upon and raised with the appropriate Executive management personnel.
- Ensure documentation as appropriate within the client's record.
- All documented complaints will be held confidentially
- All comments, compliments and complaints will be logged and tracked
- Complaint reports will be reviewed quarterly by the Executive and/or other key designate(s) for ongoing quality improvements.

POLICY REVIEW:

The most Senior Leader in the Society or their designate will review this Policy annually. If there are legislated changes required, these changes will be made as close as possible to the effective date of the legislative change.

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Appendix A: Public Facing Complaints Policy

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The Alzheimer Society (the “Society”) recognizes the importance of the role our clients, donors, and the public play in our work. While we strive for excellence in the pursuit of our mission, we recognize there may be instances where we have an opportunity for improvement. To ensure you receive the highest level of service, we have developed this policy and procedure to address and escalate any complaints you may have about the Society or that may arise in your interactions with the Society.

The Society is committed to excellence in all aspects of its work. A complaint about the Society is welcome if it is communicated respectfully. The Society is focused on complaints review process that is:

- (1) fair and impartial;
- (2) transparent in process and method;
- (3) respectful to all involved;
- (4) timely and efficient while balancing an appropriate allocation of resources.

Responses and action shall be proportionate to complaints raised. Complaints shall be escalated as appropriate. Outcomes and resolutions shall be communicated clearly to complainants.

This policy applies to all external Society stakeholders including donors, clients, and members of the public, that want to communicate with and register a complaint about the Society.

The complaints process is available to address dissatisfaction about the services, actions, lack of action, or interactions with Society staff and/or volunteers.

Any individual may bring a complaint forward in writing, either by e-mailing any Society staff member, by mail, by email at feedback@alzheimer-cornwall.ca or online: <https://alzheimer.ca/cornwall/en>

A complainant should include as much detail as possible about the issue or problem as well as a contact number and/or address where a response should be directed if they feel comfortable doing so. Where a complaint is of a confidential or sensitive nature, this should be included in the subject line of the correspondence and your complaint will be immediately directed to the most Senior Leader of the Society.

All complaints will be reviewed in a timely manner and escalated to the appropriate department or staff person for a response and action, if necessary. Complainants should expect to receive a response regarding their complaint within 5-10 business days, if not sooner. Where a complaint cannot be resolved within that time frame, the Society will notify the complainant of the steps being taken and the anticipated timeframe for resolution.

A response may not be provided in circumstances where a complaint is abusive or harassing in nature; where a complaint has no direct connection to the Society; where a complaint is illegible; where a complaint has clearly been sent as part of bulk mailing or email. Where an anonymous complaint is made, no response will be provided however, the Society will review the complaint in an effort to improve its services.

All complaints will be recorded on a complaints tracking worksheet, including a description of the complaint, who handled it, actions taken to resolve the complaint and the timeframe for resolution.

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Where the complaint cannot be immediately resolved, a name and contact information of the complainant may be recorded to ensure proper follow-up.