

TITLE:	Complaints (Patient Care and Other)			
Manual/Policy#:	MRHA Boards of Directors # III-6	Entity:	AGH/ CPDMH	
Original Issue:	AGH: April 2014 CPDMH: December 2011	Issued by:	Allied Boards Chair and Allied Boards Secretary	
Previous Date Reviewed:	AGH: March 2020 CPDMH: January 2019	Approved by:	Allied Boards of Directors	
Last Date Reviewed:	January 2022	Cross Reference(s):		

1. POLICY STATEMENT:

It is important to patients, their families, and the community at large that all complaints are dealt with in a timely, impartial and confidential manner. Consistent with the Excellent Care for All Act (ECFAA), it is the policy of the Allied Boards to support and monitor the Almonte General Hospital Corporation and the Carleton Place & District Memorial Hospital Corporation ("the Corporations") patient relations process to ensure facilitation, mediation and resolution of complaints. The Allied Boards will not investigate, manage a follow up or receive anonymous information about complaints for the purpose of overseeing the quality of care, individual complaint letters or reports.

2. SCOPE:

This policy applies to complaints related to patient/resident care or other matters that is received by a Director of the Allied Boards or an Allied Boards committee.

3. GUIDING PRINCIPLES:

N/A

4. **DEFINITIONS**:

N/A

5. PROCEDURE:

The identification, investigation and management of individual patient/resident, family, staff, medical staff and/or volunteer feedback or concerns is undertaken by staff of the Corporations through a process for which the Integrated President & CEO (CEO) bears responsibility.

A written complaint related to patient/resident care or any other matter that is received by a Director of the Allied Boards or an Allied Boards committee will be sent to the Office of the CEO. The complaint will be managed from this point forward by the CEO's office (or designate).

This material has been prepared solely for use at the Almonte General Hospital (AGH), Carleton Place & District Memorial Hospital (CPDMH), Fairview Manor (FVM) and Lanark County Paramedic Service (LCPS). AGH/ CPDMH/ FVM / LCPS accepts no responsibility for use of this material by any person or organization not associated with AGH/ CPDMH/ FVM/ LCPS. NO part of this document may be reproduced in any form for publication without permission of AGH/ CPDMH/ FVM / LCPS.

Complaints (Patient Care and Other)	Policy # BD-III-6	Page 2 of 2

Should a concern be addressed to a Director of the Allied Boards or a committee member verbally, the Director should accept the feedback with thanks and, to avert the potential for unintended errors in message transmission by the member, encourage the complainant to forward it directly to the CEO whose responsibility it is to ensure that it is addressed.

If the complaint is about the CEO or about a Chief of Staff (or acting in their capacity as Chief of Staff), it will be given to the Allied Boards Chair on behalf of the Allied Boards Executive Committee. The Allied Boards Executive Committee will take responsibility for addressing the complaint and will report to the Allied Boards only those details necessary for their oversight of the CEO or Chiefs of Staff.

If the Corporation receives a complaint which is deemed to have a potential public relations risk, the CEO or designate will notify the Allied Boards of Directors as necessary.

6. REFERENCES:

N/A

7. APPENDICES:

N/A

Evaluation

This policy will be reviewed annually.

This material has been prepared solely for use at the Almonte General Hospital (AGH), Carleton Place & District Memorial Hospital (CPDMH), Fairview Manor (FVM) and Lanark County Paramedic Service (LCPS). AGH/ CPDMH/ FVM / LCPS accepts no responsibility for use of this material by any person or organization not associated with AGH/ CPDMH/ FVM/ LCPS. NO part of this document may be reproduced in any form for publication without permission of AGH/ CPDMH/ FVM / LCPS.