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## CLGS – Complaints & Feedback Policy

Revised – 2014-10

### 1. Introduction:

- a. The Ministry of Community and Social Services [**MCSS**] has published undated “Policy Directives For Service Agencies” [the **“Policy Directives”**] under the authority of the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008.
- b. The Policy Directives require Community Living Greater Sudbury [**CLGS**] to “*... have written policies and procedures regarding the process for receiving and addressing feedback and complaints about the services and supports that it provides...*”
- c. The Policy Directives provide an outline of the content expected in the policies and procedures, but leave the wording of such to the individual agency to craft.
- d. In accordance with the Policy Directives, CLGS has adopted the following Policy and Procedure statements with the intent and belief that such constitute compliance with the Policy Directives.
- e. Where the following is considered not to be in compliance with the Policy Directives, CLGS is committed to amendment of its policies, procedures and processes so that it does comply with the Policy Directives.

### CLGS Policies & Procedures Manual Particulars

<b>Policy Book:</b>		<b>Policy # &amp; Version</b>		<b>Policy Name:</b>	Complaints & Feedback
<b>Review Body:</b>	Admin. Team	<b>Approval Date:</b>	2014-10-08	<b>Approval Body:</b>	Board of Directors Resolution 2014-10-08-3
<b>Review Required</b>	Annually	<b>Next Review</b>	2015-10		
<b>Forms Attached:</b>	No	<b>Form #(s):</b>		<b>Form Name(s):</b>	<a href="#">Complaints &amp; Feedback Log CLGS</a>
<b>Statutory References</b>	MCSS Policy Directives under Services & Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008 [SSPSIPDDA, 2008]				
<b>Other References</b>	<a href="#">MCSS Policy Directives</a>				
<b>Digital File Location</b>	M:\Policy\Complaints\CLGS Complaints And Feedback Policy 2014-10.Docx <a href="#">CLGS Complaints and Feedback Policy 2014-10.docx</a>				

- f. CLGS is committed to continuous quality improvement in service delivery and therefore welcomes feedback, both positive and negative, pertaining to its' programs and services and the supports that it provides.
- g. The following Complaints/Feedback Policy is intended to elicit feedback and to set out the way in which CLGS will provide a response to any complaint/feedback it receives in as timely a fashion as circumstances and the resources provided to it by MCSS allow.
- h. CLGS welcomes and encourages input from the persons it serves and supports, persons acting on their behalf and the general public.
- i. For the purposes of this Policy, CLGS adopts the definitions of "Feedback" and "Complaints" as set out in the MCSS Policy Directives as follows:
  - i. "'Feedback" may be positive or negative (including complaints) and is related to the services and/or supports that are provided by a service agency. Feedback may be solicited (such as information and comments collected through a satisfaction survey or a comment box) or unsolicited (such as a letter from a person or family member about the services and supports that the agency provides). Feedback may be formal (like the survey or letter noted above) or informal (such as a verbal complaint expressed to a staff person).
  - ii. "Complaint" is an expression of dissatisfaction related to the services and/or supports that are provided by a service agency. A complaint may be expressed by a person with a developmental disability who is receiving services and supports from the service agency, or a person acting on their behalf, or by the general public, regarding the services and supports that are provided by the service agency. A complaint may be made formally (such as a letter written to the agency) or informally (such as a verbal complaint expressed to a staff person). A complaint does not include feedback on matters unrelated to the agency and the services and supports that it provides."
- j. Where Feedback is solicited by CLGS, then it will be dealt with in accordance with the terms of the solicitation and not by this Policy.
- k. A Complaint is by its nature, unsolicited and will always be dealt with under this Policy.
- l. This Policy does not apply to complaints or grievances originated by employees or staff members of CLGS. These matters are dealt with under other policies, procedures and agreements.

**2. Policy Distribution:**

- a. A copy of this Policy is freely available to all those who wish to submit a complaint or provide feedback and request that a copy be provided.
- b. This Policy is to be explained to all individuals with a developmental disability when they first come into service with CLGS [the CLGS "Client/s"], and/or a

person acting on their behalf [where applicable], but subject to other government imposed requirements of confidentiality and protection of privacy.

- c. Reminders about this Policy are to be given as a part of the Client's annual Life Plan review.
- d. It is the responsibility of the Client's primary support workers/case workers or case manager to ensure that Clients understand the Feedback/Complaints Policy and procedure.
- e. Members of the general public have the right receive a copy of the Complaints/Feedback Policy and are invited to make submissions to CLGS under this Policy.
- f. A copy of this Policy will be made available on the CLGS internal and external websites.

### 3. Information Gathering and Analysis:

- a. A Feedback/Complaints Officer will be appointed by the Executive Director to have carriage of and responsibility for all aspects of this Policy not otherwise directed elsewhere.
- b. If a Feedback/Complaints Officer is not officially designated, then that role will be filled by the Manager of Human Resources or the Manager's designate in such Manager's absence.
- c. The Feedback/Complaints Officer will document all matters pertaining to this Policy in such manner as the Officer determines appropriate to the circumstances.
- d. When Feedback has been solicited by CLGS, then the fact of such shall be recorded in the Feedback/Complaints Log, but particulars of the Feedback received will be dealt with under the terms of the solicitation.
- e. An unsolicited Feedback or Complaint [in either case, a "**Submission**"] may be submitted to any CLGS staff member orally/verbally, in writing, or utilizing an alternate form of communication that is comfortable for the person submitting the complaint/feedback information.
- f. Any CLGS staff member who receives a Submission is responsible for forwarding such to the Feedback/Complaints Officer.
- g. The Feedback/Complaints Officer will review each Submission and:
  - i. enter data in the Feedback/Complaints Log  
[\[M:\Complaints&Feedback\Complaints & Feedback Log.xlsx \]](#);
  - ii. where appropriate, ask the Submitting Person whether the Submission is to be considered either a "Complaint" or "Feedback";

- iii. direct the Submitting Person to the appropriate CLGS policy where it is considered that another policy or process might be more appropriate given the nature of the Submission;
- iv. assist the Submitting Person in understanding the different policies or processes that might apply;
- v. ask the Submitting Person whether they wish to adopt such other process;
- vi. make a record of the Submitting Person's responses;
- vii. assist the Submitting Person in invoking the process adopted, it being understood always that the Feedback/Complaints Officer is not to be used or understood to be an advocate for the Submitting Person;
- viii. If the Submission is categorized as either "Complaint" or "Feedback":
  - (1) Immediately provide the Submitting Person with written acknowledgement of receipt of the Submission;
  - (2) ask whether the Submitting Person requires a response to the Submission and if so during what time frame;
  - (3) ask if there is any desired outcome;
  - (4) forward the Submission to the Executive Director for analysis and further action;
  - (5) if a desired outcome or time frame are requested by the Submitting Person, continue communicating with the Submitting Person, progress on the matter, at least once every 30 days until the matter is fully dealt with;
- ix. if the Submission is categorized as a "Complaint", commence the "Complaint Handling Procedure" set out later in this document.
- h. The ability of CLGS to respond to a Submission may be impaired by the absence of particulars provided by the person submitting such complaint/feedback [the "**Submitting Person**"] and CLGS reserves the right and has the responsibility to make such inquiries of the Submitting Person and to carry out such investigations as it deems appropriate in the circumstances to assess or respond to the Submission.
- i. If, in the opinion of the Feedback/Complaints Officer, sufficient particulars are not provided in a timely fashion after such have been requested, then CLGS will have no responsibility to respond or otherwise deal with the Submission.
- j. Where the Submission is being made in writing, such may be made using a form provided for that purpose on the CLGS website or otherwise made available, but no specific format is required.
- k. Where the Submitting Person desires to provide the Submission in a format other than in writing, the CLGS staff person to whom the Submission is being given will record in writing the substance of the submission being made and deliver such to the Feedback/Complaints Officer within 24 hours of receipt.

- I. Information gathered by CLGS under this Policy will undergo analysis by CLGS staff with a view to assisting in continuous quality improvement of its services and supports.
- m. The CLGS Executive Director will bring to the Board of Directors, issues identified as being of a policy nature.
- n. Program and service delivery issues are the responsibility of the Executive Director and identified program staff.

4. **Complaint Handling Procedure:**

- a. If the Submission is categorized as a “Complaint”, the Feedback/Complaints Officer will guide the parties to the Complaint through the following “Steps” towards resolution.
- b. **Step 1 – Direct Communication:**
  - i. The Submitting Person will be invited to communicate the nature of the complaint directly with the person(s) involved, [the “**Responding Party**”] either orally or in writing, stating the issue(s) clearly, honestly and respectfully;
  - ii. If the Submission has been made in writing and delivered to the Responding Party, the Responding Party will be required to respond in writing within 15 days of receipt of the Submission, again stating the response clearly, honestly and respectfully;
  - iii. If either party seeks it, an informal meeting will be held at the convenience of the parties for the purpose of attempting resolution amicably without further investigation or findings; Such a meeting should normally be held within 10 days of receiving the Responding Party’s response
  - iv. Any resolution or outcomes will be recorded in writing by the Feedback/Complaints Officer.
  - v. It is anticipated that such a resolution would occur within 30 days of receiving the Complaint.
  - vi. If resolution is not achieved within 30 days, then the matter will automatically move to Step 2, unless the parties mutually agree that it remain at Step 1 for a further defined period of time.
- c. **Step 2 – Investigation & Mediation:**
  - i. The Feedback/Complaints Officer will conduct an investigation into the subject matters identified in the Submission and the Responding Party’s response.
  - ii. The investigation phase shall be conducted during the 4 – 6 week period after the matter moves to Step 2. It is recognized that this phase may need to be shortened or extended depending upon the nature and seriousness of the matter, vacations, statutory holidays, illness and other contingencies. In this regard, the Feedback/Complaints Officer will endeavor to keep the parties informed of the anticipated time frame for completion of this phase.

- iii. The Feedback/Complaints Officer may make such inquiries as deemed appropriate to the nature of the matter and is not required to interview everyone named by the parties as having knowledge of the matter.
  - iv. Where interviews are conducted, the substance of the interview will be recorded in writing and shared with the parties except where the person interviewed requests anonymity, in which case any information obtained shall not be used in resolution of the matter.
  - v. After conducting such investigation as considered necessary, the Feedback/Complaints officer will convene a meeting of the parties with a view to resolution. The officer may meet with the parties individually or together and on more than one occasion and may share information obtained from either party in an attempt to achieve resolution.
  - vi. Any resolution or outcomes will be recorded in writing by the Feedback/Complaints Officer.
  - vii. It is anticipated that such a resolution would occur within 60 days of receiving the Complaint.
  - viii. If resolution is not achieved within 60 days or such longer period as the parties mutually agree to:
    - (1) the matter will automatically move to Step 3;
    - (2) the Feedback/Complaints Officer will prepare a report for the Executive Director within 10 days.
- d. **Step 3 – Hearing of Unresolved Complaint:**
- i. Upon receipt of the Feedback/Complaints Officer’s report at the end of Step 2, the Executive Director [the “ED”] will direct such further inquiries and review to be made as the ED considers appropriate.
  - ii. The parties to the Complaint will be asked to attend a meeting with the ED for the purpose of presenting the Complaint and Response and such further facts as may be considered by them to be relevant to the matter.
  - iii. The Ed will endeavor to conduct this meeting within 2-4 weeks of the matter being referred to the ED, subject to contingencies, scheduling issues, vacations etc.
  - iv. After hearing from both sides, and within 10 days, the ED will issue a written decision as to resolution, with reasons for so deciding.
  - v. A decision of the ED relating to facts and circumstances unique to the Complaint will be final; subject to whatever legal recourse a party may have through outside tribunals or courts.
  - vi. A decision of the ED about the wisdom of a policy or absence of such and having general application to the organization may be brought to the Board of Directors in Step 4.
- e. **Step 4 – Board of Directors:**
- i. After exhausting the process steps outlined above, if a party to a Complaint believes that issues involved relate to the existence of absence of certain policy or how an existing policy is to be applied, such party may bring that issue alone to the Board of Directors by filing a letter addressed to the Board seeking such a review.
  - ii. At its next regularly scheduled meeting the Board will address the matter by allowing the parties to briefly state the issue and arguments in favour of their positions.
  - iii. The Board may ask questions of the parties, but is not required to do so.

- iv. Thereafter the Board shall issue a decision in writing relating to the policy and advise the parties as to such.
- v. In this regard, the meeting with the Board is not hearing of the Complaint in total, but rather only in relation to policy issues have been identified during the resolution process.

5. **Policy Guidelines:**

- a. Every complaint/feedback will be taken seriously and moved through the resolution process as efficiently at time and resources permit.
- b. Documents relating to a Submission will be subject to CLGS document retention policies.
- c. All written resolution documents will be retained by CLGS in digital format for at least 7 years.
- d. CLGS does not recognize a duty to submit to the resolution process any complaints that are considered to be frivolous, vexatious, made in bad faith or out of malice or of a retaliatory nature.
- e. **This policy does not apply to:**
  - i. **Complaints that fall within MCSS Serious Occurrence directives which are to be handled utilizing the MCSS Serious Occurrence Reporting policies and procedures.**
  - ii. Relations between staff members or between staff and CLGS management, which issues are to be dealt with through the procedures set out in the Collective Agreement between CLGS and OPSEU.
  - iii. Issues between non-union staff and CLGS which issues are dealt with under the CLGS Personnel Policy For Non-Unionized Employees
- f. This Policy applies only to matters brought forward by persons other than staff of CLGS.
- g. Investigation and resolution of Complaints will be performed by staff members who do not have a conflict of interest or bias in relation to the matter or issues arising. However, where a conflict is of general application to all or most staff of CLGS, then such perceived conflict shall not be used to frustrate or paralyze the Complaint Resolution process from being followed. Where a party believes there to be conflict of interest, the onus is on such party to bring forward facts supporting the conclusion that such a conflict exists. This issue may be determined by the ED at any stage.
- h. Where a party to a Complaint believes that the matter cannot be fairly resolved due to a conflict of interest or bias then such party may ask that the matter be referred to an outside third party, if but only if such party is prepared to pay the full cost of such.

- i. Parties who make allegations or assertions against the interest of another, must do so only on the basis of facts which support such allegations or assertions. A Submission which is general in nature and presented without supporting facts and particulars will be recorded by CLGS, but may be rejected for want of particulars or held in abeyance pending submission of such particulars.
- j. All those who invoke the processes set out in this Policy will be treated with respect by CLGS staff regardless of the nature of the Submission.
- k. CLGS staff may not retaliate for anything done by another under this Policy before, during or after this Policy having been invoked and will be subject to discipline if they do.
- l. A person who submits a complaint or provides feedback to CLGS is not to be at risk of having his/her services and supports negatively impacted or withdrawn, as a consequence of submitting the complaint/feedback.
- m. Where necessary, CLGS will:
  - i. report to the police (i.e., as in the case of alleged, suspected or witnessed abuse that may constitute a criminal offence, as required by Ontario Regulation 299/10 regarding quality assurance measures made under the Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008); and/or
  - ii. report to MCSS a serious occurrence through the Ministry's Serious Occurrence Reporting Process (based on the nature of the complaint/feedback).
- n. In order to promote continuous quality improvement, CLGS will:
  - i. on an annual basis conduct a review and analysis of the complaints and feedback received to evaluate the effectiveness of its policies and procedures.
  - ii. conduct a review and analysis of the complaints and feedback received to consider the need to revise any other policies and procedures that the agency may have in place.
  - iii. share information about its complaints/feedback process, and/or about complaints/feedback, as part of MCSS's risk assessment process, upon request by the Ministry.