

Section:	Services and Supports	Policy No.:	SS 3.80
Applicability:	BPACL Employees	Effective Date:	September 2013
Approval Authority:	Michele Bell, Chief Executive Officer		
Date of Last Review:	May 2024	Last Revision Date:	September 2024

POLICY

Bruce Peninsula Association for Community Living (BPACL) is committed to providing quality services and supports that respect each person's dignity and utilize available resources to meet the person's needs and preferences. BPACL recognizes the importance of transparent feedback and complaint processes to provide quality support that is responsive to people's needs and allows for continuous improvement in service delivery. BPACL welcomes all interested parties, including people receiving services, persons acting on their behalf, family members, and the general public, to provide feedback about our association and services. Feedback may be positive or negative, including general comments, thoughts, ideas for improvement, concerns, or complaints. BPACL will endeavor to understand the complaint and work towards a timely response and a mutually satisfactory resolution.

SCOPE

All services and supports provided by BPACL.

PROCEDURE

Guiding Principles

It is in the interest of all parties that complaints are dealt with promptly and resolved as quickly as possible. Complaints are used to assist in improving services, policies, and procedures.

It is intended that:

- The review of a complaint is fair, impartial, and respectful to all parties.
- The review is free of coercion, intimidation, or bias before, during, and after the review.
- The review is free from conflict of interest 'where personal interest or loyalty may conflict or appear to conflict with the best interest of the supported person or BPACL'.
- All information regarding the feedback/complaint will remain confidential, and will be shared on a need-to-know basis.
- Complainants are advised of their options to escalate their complaint to a more senior staff member if they are dissatisfied with treatment or outcome.
- Complainants are provided clear and understandable reasons for decisions relating to complaints.
- Where possible, BPACL shall make reasonable efforts to resolve or address the matter to the mutual satisfaction of both the person who has made the complaint and BPACL.

Feedback and Complaint Process

BPACL will provide a copy of this policy to all people supported/families/persons acting on behalf of the person supported upon entering a service relationship. The policy is available to anyone upon request and posted on the BPACL website. The Feedback and Complaint Policy/information on the feedback/complaint process will be provided in plain language to the person supported and/or the person acting on their behalf.

The Abuse Prevention and Reporting Policy will be followed if the concern is regarding abuse. All alleged, witnessed, or suspected abuse of an adult will be reported to the police to determine if the action(s) are criminal in nature. If the staff believes that the person is at imminent risk, the staff will immediately call 911 and request assistance from the police. Alleged, witnessed, or suspected abuse of a child must be reported to Bruce Grey Child and Family Services.

The staff of BPACL who are the subject of the complaint or named negatively in the complaint/feedback process will not manage the process of review or resolution of the complaint/feedback, or be involved in any part of the process where there is a perceived conflict of interest. The person may be requested to provide information to the person managing the review.

Based on the nature of the complaint/feedback, BPACL will submit a Serious Occurrence Report to the Ministry of Children, Community and Social Services (MCCSS).

Rights of the Person Bringing the Complaint or Feedback Forth:

- The person who submits the complaint or feedback is made aware that their services and supports will not be negatively impacted or withdrawn as a consequence of submitting the complaint or feedback,
- The person who brings their complaint forward can invite at any or all stages of the process a person they trust to support them through the process,
- All concerns will remain confidential during and after the process.

Procedure for Feedback and Complaints Received from Person Supported or Family/Person Acting on Behalf of the Person Supported or a Community Member

Feedback or complaints can be expressed via the following methods:

- In person
- Verbally via phone
- In writing
- Email
- Website

Feedback Process

Positive or negative feedback will be acknowledged by the Supervisor/Manager when received. Any follow-up required with the person providing the feedback will be provided promptly.

Complaint Process

Note: The AIMS system will notify the Tri Alliance Quality Assurance Manager (QA Manager) when a complaint has been documented. The QA Manager will monitor the complaint timelines to ensure resolution. If the complaint is about the QA Manager, access to the complaint will be locked by the Chief Operating Officer.

Step 1

The complainant may bring their complaint to an employee. The employee will receive the information respectfully. If the complaint is within their scope of responsibilities, they can try to resolve the issue. If the issue is beyond the employee's authority or ability to resolve, the employee will:

- Share with the person the process for submitting a formal complaint.
- Share the contact information of the appropriate Supervisor/Manager.
- Obtain contact information of the person expressing the complaint.
- Contact the Supervisor/Manager immediately with the person's contact information and provide details of the complaint.
- Complete the AIMS Complaint/Allegations
- Notify Manager to password protect the complaint on AIMS.

Step 2

Supervisor response:

- Within 24 hours of becoming aware of the complaint, inform the Manager that a concern exists.
- The Manager will notify the Senior Manager Supports and Services about the concern immediately.

In response to Step 1 the Supervisor will:

- Contact the person within one (1) business day if the person has not submitted the Complaint/Feedback Form.
- Set up a meeting to review the concern and work towards achieving resolution within five (5) business days.
- Provide communication regarding the status within five (5) business days. Note: some situations may require an extended period of time.
- Investigate and document findings in the AIMS Complaint/Allegations tab.
- Discuss with the Manager the findings from the investigation and possible resolution.
- Provide the person with verbal and written resolution within five (5) business days of being aware of the complaint.
- Implement any necessary action identified during the investigation within ten (10) days of the feedback/complaint.
- Refer the complaint to the Manager if the person issuing the complaint feels an agreement has yet to be reached.

Step 3

Manager response:

- Notify the Senior Manager Supports and Services regarding the unresolved complaint.
- Launch an investigation, possibly meeting with the concerned complainant in an attempt to resolve the concern to everyone's satisfaction.
- The Manager and Senior Manager Supports and Services will provide a written response within ten (10) days of receiving the complaint.
- Implement any necessary action identified during the investigation within thirty (30) days of the complaint.
- Document findings of the investigation and resolution in the AIMS Complaint/Allegations tab.
- The complaint will be referred to the Chief Operating Officer if the complainant feels the issue is unresolved.

Step 4

Chief Operating Officer response:

- Notify the Chief Executive Officer and discuss the complaint.
- Review investigation notes and resolutions offered.
- Invite the complainant to a meeting.
- The Chief Operating Officer may organize further investigation.
- Respond to the person in writing within ten (10) business days of receiving the complaint.
- Document investigation findings and resolution in the AIMS Compliant/Allegations tab.
- If the person issuing the complaint does not feel the issue is resolved, the complaint will be submitted to the President of the Board of Directors by the Chief Executive Officer.

Step 5

President of the Board response:

- Meet with the Chief Executive Officer and review the initial concern and the responses provided.
- Provide a written response to the complainant within thirty (30) days from the date of initial contact with the Board President.
- The Chief Executive Officer will document the response in the AIMS Complaint/Allegations tab.

Procedure for Feedback and Complaints Received Through the Website

Step 1

Feedback or Complaints received through the Website will be forwarded to the Supervisor/Manager responsible for the program involved.

Step 2

The Supervisor/Manager will respond within one (1) business day of receiving the notice. The Supervisor/Manager will arrange to discuss the complaint through a phone call or meet in person within two (2) business days from contact, Steps 2 through 6 of the above process will be followed.

Education and Training

People Supported: Education regarding this policy will be provided in plain language upon initiating service and annually at the person's Individual Support Plan meeting.

Staff: Policy training will be part of orientation and annually.

Review and Analysis

The Tri Alliance Quality Assurance Manager or designate will conduct an annual review of the feedback and complaints.

The annual review will consist of but not limited to:

- Evaluation of the effectiveness of its policies and procedures
- Consideration of the need to revise any other policies and procedures

The Tri Alliance Quality Assurance Manager will provide the annual review results to the Chief Operating Officer and the Chief Executive Officer. The annual review and analysis will be discussed and documented in the Leadership Operations Meeting.

Appropriate changes will be made to address any identified trends. These changes may include revising policies and procedures and providing training to employees and/or people supported.

The Chief Executive Officer will provide an annual report to the Board of Directors summarizing complaints made within this policy framework and their disposition.

BPACL will share information about complaints/feedback upon request by MCCSS as part of its risk assessment process.

DEFINITIONS

Feedback: may be positive, or negative and is related to the services and/or support provided by a service agency. Feedback may be solicited through a satisfaction survey or a comment through a website or unsolicited such as a letter from a person or family member about the services and supports the agency provides. Feedback may be formal or informal.

Complaint: this 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 supported who is receiving services and supports from the BPACL or a person acting on their behalf, or by the general public, regarding the services and supports that are provided by BPACL. A complaint may be made formally or informally. A complaint does not include feedback on matters unrelated to BPACL services and supports that it provides.

Formal Feedback/Complaint: through a written letter, survey or BPACL website.

Informal Feedback/Complaint: verbal expression to a staff person.

Complainant: The person submitting the complaint (who is not an agency employee):

- A person who receives services or supports in any of the agency programs.
- A person acting on behalf of the person to whom the agency provides services or supports.
- A member of the general public.

POLICY EVALUATION

Barring unforeseen developments, this policy will be reviewed in Q3 each year.

RELATED DOCUMENTS

SS. 15.00 Serious Occurrence Policy

SS. 2.00 Abuse Prevention and Reporting

MCCSS Policy Directive for Service Agencies – Updated: January 1, 2021

FORMS

Annual Feedback/Complaint Review