



HOMES AND SENIORS SERVICES

POLICY & PROCEDURE NUMBER: 2.3

DEPARTMENT: Administration

SUBJECT: Requests and Concerns

APPROVAL DATE: April 2004

REVISED DATE: March 2015

APPROVAL DATE: Sept. 2011

REVISED DATE: March 2011

REVISED DATE: March 2016; March 2017; Oct. 2019; Mar. 2022; April 2022; Nov. 2022

REVIEW DATE: Dec. 2020

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PURPOSE:

To provide an effective process to receive and address requests/concerns ensuring a prompt response, follow-up and accountability.

PROCEDURE:

Resident/Personal Representative and Staff Awareness:

1. On admission a resident/personal representative will be informed as to the formal requests/concern process.
2. A copy of the request/concern policy is kept in the Public Information binder. Copies of the procedure are available upon request.
3. Staff shall receive instruction on the process for a request/concern brought forward by a resident/personal representative/visitor, upon hire and annually thereafter.

Informal Requests/Concerns:

1. Requests/concerns should be taken to the Registered Staff on Duty and/or Department Manager for immediate response and resolution. Should the resolution be unsatisfactory, residents/personal representatives are asked to move to the next step in the Complaint/Request Resolution Process (Form Adm #2.3b)

Staff Responsibility and Accountability:

1. Should staff receive a verbal request/concern that cannot be immediately resolved, the information should be documented on the "Request/Concern Response Form" (Form Adm #2.3a) and forwarded to the respective Department Manager.

The Request/Concern Response Form is for Interdepartmental Use Only and is completed only by staff. Use of this form does not constitute receipt of a written complaint.



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2. The request/concern shall be responded to within 10 days of receipt to include a possible plan of action.
3. All actions shall be documented including dates, follow-up and timeframes, final resolution, complainant response and date of feedback provided to resident/personal representative/visitor.
4. The documented record of the verbal requests/concern is reviewed and analyzed for trends at least quarterly;
 - a. request/concern forms are taken to the Continuous Quality Improvement Team meetings for review and analysis and determine action as appropriate,
 - b. the results of the review and analysis are taken into account in determining what improvements are required in the home; and incorporated in to the annual Quality Improvement Plan (QIP),
 - c. a written record is kept of each review and of the improvements made in response,
 - d. Subsection (2) of section 26 of the Fixing Long-Term Care Act, 2021 does not apply with respect to verbal complaints that the home is able to resolve within 24 hours of the request/concern being received.

Resident/Personal Representative/Visitor:

1. Residents/Personal Representatives/Visitors are encouraged to follow the Request/Concern Procedure however may reach out to the Patient Ombudsman's office or forward a concern/complaint to the Ministry of Long-Term Care at any point in the complaint process.
2. All formal written requests/concerns (and required documentation provided for in ON. Reg. 246/22) received from the resident/personal representative/visitor concerning the care of a resident or the operation of the long-term care home shall be immediately submitted electronically via the Ministry of Long-Term Care Critical Incident Reporting system (during Ministry normal business hours, or outside of normal business hours, using the Ministry's after hours emergency contact method); investigated, resolved where



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possible, and response provided to the complainant and MLTC within 10 business days of the receipt of the complaint.

3. For those complaints that cannot be investigated and resolved within 10 business days of receipt of the complaint, an acknowledgement of receipt of the complaint including the date by which the complainant can reasonably expect a resolution, and a follow up response that complies with shall be provided as soon as possible in the circumstances.
4. The response provided to a person who made a complaint shall include:
 - The MLTC toll-free telephone number for making complaints about homes and its hours of service and contact information for the patient ombudsman under the Excellent Care for All Act, 2010
 - And, 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 Director under clause 26 (1) (c) of the FLTCA, confirmation that the licensee did so.

References:

Fixing Long-Term Care Act, 2021
Ontario Regulation, 246/22



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REQUEST AND CONCERN PROCEDURE

Our goal is to provide optimum care at all times to every resident. We want to know how we are doing and appreciate your feedback.

If you have a request or concern, please do not hesitate to come to us. This chart is only a guide of who you might go to first in order to have your request/concerns answered.

Resident/Personal Representative and/or Visitor has a Request/Concern

Inform the Registered Nurse on duty. If the concern is not resolved to your satisfaction, please continue to the next step.

Manager
Of
Resident
Care/Resident Care
Coordinator

Administrator/
Manager
Of
Support
Services

Manager of
Program &
Therapy
Services

Administrator
Director Homes & Senior Services
County Chief Administrative Office
Elgin County Council Warden

Ministry of Health (Toronto)
Long-Term Care Division (416) 327-8952
Long-Term Care **ACTION** Line 1-866-434-0144
Patient Ombudsman 1-888-321-0339