

# St. Andrew's Residence, Chatham

## Operations Manual/Board



SUBJECT: Complaints	SECTION: Administration/Corporate Admin	
POLICY NO: A42/SPP CA1.06	RHA REGULATION: 59	IC STANDARD: A14
EFFECTIVE: April 29, 2021	REVIEWED/REVISED: April 20, 2021	

### 1. Policy

1.1. St. Andrew's Residence (STAR) believes that if a resident, family member, client, donor, funder or other stakeholder wishes to make a complaint or register a concern they should find it easy to do so. It is STAR's policy to welcome complaints and look upon them as an opportunity to learn, adapt, improve and provide better services. This policy is intended to ensure that complaints are dealt with properly and that all complaints or comments are taken seriously.

**This Residence will support any person (resident, family member, staff person and / or visitor) in their report of suspected resident abuse and / or neglect to the Authorities and they will remain free from disciplinary actions, reprisals or retribution from any other person.**

### 2. Purpose

2.1 The purpose of this Policy and Procedure is to ensure complaints are addressed in a timely, fair, respectful and accountable manner.

### 3. Scope

3.1. This statement of Policy and Procedure applies to all employees and volunteers of St. Andrew's Residence.

### 4. Procedure

4.1. St. Andrew's Residence shall ensure that every written or verbal complaint is dealt with in a timely manner. Acknowledgement of receipt of a complaint will be made to the complainant within 24 hours of receipt or no later than the next business day. St. Andrew's Residence shall ensure that every written or verbal complaint made to the home concerning the care of a resident or operation of the home is dealt with as follows:

#### Complaint Investigation/Complaint Resolution:

4.1.1. The complaint shall be investigated. If the complaint alleges harm or risk of harm to one or more residents, the investigation shall be commenced immediately in accordance with the Zero Tolerance of Abuse and Neglect Policy-RS-RC41.

4.1.2. Front line staff who receive a complaint should seek to resolve the problem immediately if possible, using the BLAST method:

- **B – Believe** – it is important to understand that the complainant believes that the organization has wronged them.
- **L – Listen** - Stop and listen to the stakeholder's complaint. Take a second, relax, and listen. On occasion a complainant will be rude, angry, and use vulgar language, stay the course and remain calm and level headed.  
When the stakeholder is done venting; in a calm, non-judgmental tone, repeat their problem. By repeating the problem at hand, you've demonstrated your ability to the complainant that you heard and understood their problem.
- **A- Apologize** - Always apologize even if you did nothing wrong. From your stakeholders' perspective, they have a legitimate complaint, and they expect an apology. There is an exception to this rule though, in the case of a critical complaint, such as food poisoning, don't apologize, it may be construed as an

- acceptance of guilt, instead refer to the organization's procedures for such events.
- S – **Satisfy** - Make it right. Ask the complainant "What can I do to make this right for you"? Be the judge of what is fair of course, but allow them the opportunity to feel empowered over the situation.
  - T – **Thank** - At the beginning, at the end, in the middle; it doesn't matter, thank the stakeholder for bringing forward their complaint. Why? With the simple act of complaining, the complainant is telling you "I care about your business and your success". They are giving you the opportunity to fix the problem. Thank them for giving you that second chance, for letting you know that something didn't work like it normally does, for giving you the chance to make it right, and for the opportunity not to damage your reputation!
- 4.1.3.If a Front Line Staff member is able to resolve the complaint, a written record of the complaint and resolution (Appendix A) should be provided to their department manager within 24 hours.
- 4.1.4.If Front Line Staff member is unable to resolve the complaint, a written record of the complaint (Appendix A) should be forwarded to the Department Manager/Supervisor no later than the next business day.
- 4.1.5.The Manager/Supervisor will investigate the concerns and could take the following action depending on the nature of the complaint:
- Verbally discuss with resident/family member face to face or by telephone
  - Meet with involved disciplines to develop a written action plan
  - Set Up Team and Family/Resident meeting to resolve the concern
  - Document concerns/resolutions in resident's chart
  - Report to the Management Designate
  - Report to the Executive Director and at the discretion of the Executive Director, the Chair of the Board of Directors may be contacted.
- 4.1.6.If the Manager/Supervisor is able to resolve the complaint, a written record of the complaint and resolution (Appendix B) should be provided to the Management Designate within 1 week.
- 4.1.7.If the Manager/Supervisor is unable to resolve the complaint, the written record of the complaint with the actions taken should be forwarded to the Management Designate no later than the next business day.
- 4.1.8.The Management Designate will investigate the concerns, attempted resolutions and could take the following action depending on the nature of the complaint:
- Verbally discuss with resident/family member face to face or by telephone
  - Meet with involved disciplines to develop a written action plan
  - Set Up Team and Family/Resident meeting to resolve the concern
  - Document concerns/resolutions in resident's chart
  - Report to the Executive Director and at the discretion of the Executive Director, the Chair of the Board of Directors may be contacted.

### Complaint Response

- 4.1.9.The complaint shall be resolved, if possible, and the Management Designate shall provide a response within 10 business days of the receipt of the complaint indicating,
- What STAR has done to resolve the complaint, or
  - That STAR believes the complaint to be unfounded and the reasons for the belief.
- 4.1.10. For those complaints that cannot be investigated and resolved within 10 business days, the Management Designate will prepare an acknowledgement of receipt of the complaint (Appendix B) indicating the date by which the complainant can reasonably expect a resolution. A follow-up response that complies with paragraph 5.1.9 shall also be provided by the Management Designate as soon as

possible in the circumstances.

### Written Record of Complaints

4.1.11. The Management Designate shall ensure that a written record is kept in the retirement home that includes:

- The nature of each written or verbal complaint;
- The date that the complaint was received;
- The type of action taken to resolve the complaint, including the date of the action time frames for actions to be taken and any follow-up action required;
- The final resolution, if any, of the complaint;
- Every date on which any response was provided to the complainant and a description of the response; and
- Any response made in turn by the complainant

4.1.12. The Management Designate shall ensure that:

- The written record is reviewed and analysed for trends at least quarterly
- The results of the review and analysis are taken into account in determining what improvements are required at STAR; and
- A written record is kept of each review and the improvement made in response.  
(Appendix C)
- The Board of Directors receives a written report at least quarterly.

## 5. Reference and Related Statement of Policy and Procedure

- 5.1. Imagine Canada Standard A14
- 5.2. Retirement Homes Act
- 5.3. A3-Privacy Collection, Use and Disclosure
- 5.4. A25 Code of Conduct-Guiding Principles
- 5.5. E-S7 - Workplace Violence and Harassment Prevention Policy and Program
- 5.6. RS-RC41-Zero Tolerance of Abuse and Neglect Policy
- 5.7. Care Home Information Package

## 6. Appendices

- 6.1. Appendix A- Complaint Acknowledgement
- 6.2. Appendix B-Manager/Supervisor Response/Resolution
- 6.3. Appendix C-Analysis & Evaluation Documentation

## 7. Revision Table

Date	Revision	Effective
March 2, 2015	Development of Policy	Mar. 20, 2015
Aug. 7, 2015	Added acknowledgement of receipt of complaint given to complainant within 24 hours at 6.1 added written report to go to Board of Directors at least quarterly at 6.1.12- Updated Appendices to be more efficient.	Sept. 18, 2015
Nov. 3, 2015	Added Acknowledgement to Appendix A title, Added Complaint Received by, and requirement of signature to Appendix A, removed the need to use Appendix B Acknowledgement Receipt of Complaint & C Review and Improvements	Nov. 10, 2015
Jan. 14, 2019	Policy reviewed. Reference and Related Policy & Procedure moved to 6. Director of Operations changes throughout to Management Designate	Jan. 28, 2019



# St. Andrew's Residence, Chatham

## Operations Manual/Board



	Added no later than the next business day to 5.1.	
Apr. 8, 2021`	Policy reviewed. Recommendation to simplify Appendix A of the complaint report for staff to use in place of pieces of paper. Updated Appendix references throughout to match the new appendices. Reference added to the new Analysis & Evaluation Documentation. Updated References	Apr. 29, 2021

### 8. Approval

Recommended By:  Approved By: 

Title: Christine Elliott  
Director of Administration

Title: Jessica Smith  
Executive Director

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**Appendix A: Complaint Acknowledgment**

**Date:** \_\_\_\_\_

**Complainant Name:** \_\_\_\_\_

**Room # if applicable:** \_\_\_\_\_

**Complaint Received by:** \_\_\_\_\_

**Type of Complaint:**

1. Resident Well Being    2. Resident Safety    3. Kitchen/Dietary  
 4. Dining Room    5. Maintenance    6. Housekeeping  
 7. Laundry    8. Activities    9. Nursing/Direct Care    10. Other

*Date complaint was received if different from above:* \_\_\_\_\_

*Nature of the Complaint: (Please give a brief description of the incident witnessed or complaint received. If able to resolve quickly (24 hrs), please document the resolution as well.)* \_\_\_\_\_  
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Please submit this page to your Manager/Supervisor

**Appendix B: Manager/Supervisor Response/Resolution**

***This page is to be completed by the Manager Assigned Accountable dependent on the type of complaint. Please attach any other documentation required to reach a resolution.***

**Manager Name:** \_\_\_\_\_

**Expected resolution date for complaint :** ( Refer to policy for required time of resolution): \_\_\_\_\_

Was complaint resolved    YES                      NO

Action taken to resolve the complaint:

<b>Date action was taken:</b>
<b>Time frame for actions being taken:</b>
Type of Action Taken:
<b>Follow –up Action Required</b>

*Final resolution and follow-up, if any, of the complaint:* \_\_\_\_\_

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***Please document any response that was provided to the complaint and a description of the response and any additional response made by the complaint after the response.***

<b><i>Date</i></b>	<b><i>Description of Response</i></b>

***\*\*\* A follow-up response will be provided as soon as possible in the circumstance***

\_\_\_\_\_  
*Manager/Supervisor Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Retirement Home Designate*

\_\_\_\_\_  
*Date*

***\*\*A copy of the completed and signed form to be provided to the complainant***