Grey County Logo Committee Report

# Report LTCR-CM-18-17

**To**: Chair Burley and Members of the Long Term Care Committee of Management

**From**: Lynne Johnson, Director of Long Term Care

**Meeting Date:** September 12, 2017

**Subject: Complaint Management Program**

**Status**: Recommendation adopted by Committee of Management as presented per Resolution CM09-17; Endorsed by Committee of the Whole September 28, 2017 per Resolution CW212-17; Endorsed by County Council October 12, 2017 per Resolution CC55-17;

## Recommendation

1. **That report LTCR-CM-18-18 summarizing the Complaint Management Program be received for information.**

## Background

Grey County long term care homes have a complaint management program in place as required by the *Long Term Care Homes Act, 2010* and *Ontario Regulation 79/10.* The requirements for addressing every written or verbal complaint concerning the care of a resident or the operation of the home include:

* investigation,
* resolution where possible and
* response within a set time frame.

### Verbal and Written Complaints

Each staff member is responsible to receive a complaint and report it immediately to their supervisor. Staff are provided with training on the complaint process during orientation and it is reinforced with annual training, memos and during team meetings.

Residents and families are provided with information on admission and the process is posted in a highly visible area within the home.

The management of a complaint depends on the nature and format in which it is received. Any allegation of harm or risk of harm to one or more residents requires an investigation to be immediately initiated and the process for verbal and written complaints is slightly different.

1. Verbal Complaint- If the complaint can be resolved, including follow up with the complainant, within 24 hours no further action is required. If the issue cannot be resolved within 24 hours, acknowledgement of receipt of the complaint including the date of expected resolution is required within 10 days.
2. Written Complaint- A written response needs to be provided within 10 business days, including the date in which a resolution and follow up response is expected. At the conclusion of the investigation, the Ministry must be provided with a copy of the complaint letter and response.

### Complaints from Resident and/or Family Council

Resident Council and Family Council play a key role in the sharing of information, identification of challenges and successes and opportunities for improvement. Both Councils meet on a regular basis, use a standing agenda and take minutes that are posted within the home. An important aspect of each Council is the opportunity to bring forward ideas and concerns.

A structured system is in place to ensure that council feedback is documented and provided to the appropriate team member for review and follow up. There is a legislated requirement that a written response must be provided within 10 days from receipt of advice, complaints, and concerns from the Resident Council and/or Family Council.

### We’re Listening

“We’re Listening” is the method in which the homes seek feedback on services. Residents, visitors and staff are encouraged to submit suggestions, identify areas for improvement, and provide compliments. The information is used by the Leadership Team to further evaluate service and support improvements.

### Health Quality Ontario

Effective in 2018, Health Quality Ontario will be responsible to measure and report on patient relation in hospitals, home and community care and long-term care homes.

A multi-sector survey was completed in 2016 that identified existing practices and areas for improvement and a provincial advisory group tested pilot indicators and provided feedback. As a result of the survey and feedback from the advisory group, the following indicators for data collection and public reporting have been recommended.

* Rate of complaints
* Percentage of complaints by complaint category
* Percentage of complaints acknowledged within two, five and 10 business days
* Percentage of complaints closed within 30 days and 60 days
* Percentage of actions taken in response to a complaint by type of action

Organizations will be responsible to categorized complaints based on specific criteria including:

* Care/ Treatment
* Safety
* Attitude
* Communication
* Confidentiality
* Privacy/Resident Rights
* Timing
* Access
* Facility Issues/ Environment
* Resident Property
* Administration

Links to the survey results and Health Quality Ontario indicator data information are included with this document for further information.

### Home Data

Each home tracks complaints, from Residents, Families, Visitors and Staff, based on the Ministry of Health and Long Term Care legislative requirements. Resolution to complaints over the past year has involved items such as:

* Staff education/retraining
* Revising communication methods
* Review of staff routines

Despite having an internal process, some complaints are forwarded directly to the Ministry and they are obligated to complete an investigation.

## Financial/Staffing/Legal/Information Technology Considerations

Long term care homes are legislated in the management, response and evaluation of complaints. All staff are trained to respectfully receive complaints with a focus on resolution and Colouring It to support a customer service approach. All complaints are reviewed on a quarterly basis at the home level and analyzed for trends. The results are used to determine required improvements.

We are now preparing for the change in requirements to meet Health Quality Ontario reporting guidelines. An education plan for the leadership team, front line staff and volunteers will be developed and implemented and information will be provided to residents and family members.

The time commitment to implement and sustain the required changes is currently unknown. This is being assessed and will be brought forward in a future report.

## Link to Strategic Goals/Priorities

Goal 3- Deliver Excellence in Governance and Service

## Attachments and Background Information

[Health Quality Ontario Indicator Information](https://docs.grey.ca/share/s/nbFNOVpqQCighN_D6fnzYw)

[Health Quality Ontario Survey- Resident Relations](https://docs.grey.ca/share/s/9TERwzTFQQOzbIFqpIKwkQ)

Respectfully submitted by,

Lynne Johnson  
Director of Long Term Care