

Red Lake Family Health Team

Document # 001	Title: Patient Complaint Procedure	Print Date: June 20, 2017
Revision # 1	Prepared by: ORTH	Date prepared: June 17, 2017
Effective Date: June 20, 2017	Reviewed by: Pat Delf	Date reviewed: June 20, 2017
Standard:	Approved by: Vic Aniol	Date approved: June 20, 2017

Purpose:

Provincial legislation (*The Excellent Care for All Act*) mandates a patient complaint policy for those providers that it regulates. While Family Health Teams are not included, the FHT Branch of the Ministry of Health and Long Term Care strongly encourages Family Health Teams to develop and implement such a policy. This is an emerging best practice in health care delivery, and the FHT will use this policy as a quality improvement tool for the programs and services it delivers.

Scope: All FHT and affiliated staff, including physicians, nurses, nurse practitioners, and office staff

Procedure:

1. All staff who receive a complaint shall be empowered to resolve the complaint immediately and informally as they are able.
2. If a formal complaint is made, staff are to let patient know that we have a procedure that we follow to ensure complaints are reviewed and acted upon by appropriate personnel in a timely manner. It is preferable that we receive complaints in writing (either on paper or by email to rlma@redlakehospital.ca) and staff will recommend this to patients. If only a verbal complaint is made staff are encouraged to write the details down and these may be reviewed.
3. If a complaint is received in paper format, this is put in a sealed envelope immediately with the following identifiers on the envelope: who the complainant is, date and time of receipt, who the complaint was handed to, and address to "Patient Safety and Quality Improvement Committee". This is then hand delivered to the FHT Executive Director.
4. If a complaint is received in email format, it is printed and signed and dated on the date of initial receipt and review.
5. Within 5 days of receiving a written complaint, an email or telephone call is made to the complainant acknowledging receipt of the complaint and informing them that the

- complaint will be reviewed within the next 2 weeks by a physician and the FHT Executive Director and a response will be made within 30 days of reviewing the complaint.
6. The "Patient Safety and Quality Improvement Committee" will convene once every 14 days to review complaints. The committee is comprised of the FHT Executive Director and a physician.
 7. After review of the complaint a decision will be made to either respond in writing, if appropriate, or to offer an in-person meeting with the complainant and the committee members.
 8. All written complaints will be kept in a separate paper filing in the FHT Executive Director's office. The complaints will not be filed in the patient's EMR/chart.

Effectiveness criteria:

The Executive Director shall prepare a report annually for the Board of Directors summarizing the number and nature of patient complaints.

References:

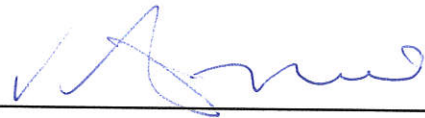
Excellent Care for All Act, Ontario Legislation

<http://health.gov.on.ca/en/pro/programs/ecfa/legislation/act.aspx>



Red Lake Family Health Team
Executive Director

June 20, 2017



Red Lake Family Health Team Physician
Lead