



PATHWAYS HEALTH CENTRE FOR CHILDREN

POLICY AND PROCEDURE MANUAL

Policy:	COMPLAINTS
Category:	HEALTH, SAFETY & RISK
Last Review:	2021/10/07
Approved by:	Chief Executive Director
Effective:	2021/10/07

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+ 0 Attachments

PREAMBLE

Part of the Centre's quality management process includes identifying and acting upon opportunities to continually improve on the care of clients, the services we provide and staff satisfaction. An activity that contributes to this process is the timely, appropriate and effective handling of all complaints.

POLICY

The Centre takes complaints about our programs, services, staff or volunteers seriously through whatever medium they are communicated. Complaints will be dealt with promptly and resolved as quickly as possible in a fair, impartial and respectful manner to all parties. Complaints are used to assist in improving services, policies and procedures.

PROCEDURE

A Family Engagement Coordinator is available, as required, to provide support to parents regarding the complaint process at Pathways and will explain all options to the parent regarding their individual situation. A Family Engagement Coordinator can be contacted through Pathways' reception.

Complaint Receipt and Handling

A complaint may be received verbally (by phone or in person) or in writing (by letter, fax, email or website).

1. Staff or volunteers who receive a complaint should first determine the proper person to handle it. This will generally be the person who has the primary relationship with the complainant or has the specific knowledge that is needed to resolve the problem. It is the responsibility of the person who receives the complaint to either resolve it immediately or transfer it to another person who can resolve it immediately. Basic contact information including name, phone number and email address should immediately be recorded if a follow-up is requested. If the complaint is transferred, the recipient must acknowledge to the transferor that they have received it and will act on it.
2. If the Chief Executive Director receives a complaint, they will immediately acknowledge to the complainant that the complaint has been received and will act on it or forward it to the appropriate staff member, supervisor or director.
3. If the complaint is about the Chief Executive Director, it will be handled by the Chair of the Board.
4. Complainants should be kept informed of the status of their complaint. Every attempt should be made to resolve escalated complaints immediately.
5. Complainants must be provided with clear and understandable reasons for decisions regarding their complaint.
6. If a complaint regarding an employee escalates, see Policy – [Corrective Action](#) for further details.



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Formal Complaints

1. Where a complaint cannot be easily resolved, or the complainant is not satisfied with the results, the Chief Executive Director will invite them to complete a formal complaint. A formal complaint is completed in writing and includes basic contact information including name, phone number and email address.
2. When a Formal Complaint is received by the Chief Executive Director, this will prompt:
 - a. the completion of an Incident Report (See Policy – [Incidents](#) for details.); and
 - b. documentation in the Senior Leadership Complaints spreadsheet for regular review and action by Senior Leadership
3. Formal Complaints will be reported to the Board through the Quality Committee of the Board.

REFERENCES:

Policy - [Service Appeals](#)

Policy - [Equity, Diversity and Inclusion](#)