

London InterCommunity Health Centre
OPERATIONS MANUAL

Subject: Client Complaints	Policy Number: OIII-060
Section: Organizational	Page 1 of 3
Implementation: 1990	Review: Nov 2004, Jan 2008, Jan 2012, Jan 2017, Sept 2020
Revision: September 2001, November 2004, November 2008, August 2010, Sept 2020, August 2024	Approved By: Executive Director

In the course of participating in Health Centre programs or receiving primary health care services, clients may wish to provide comments, offer criticism or feedback, or lodge a complaint. The London InterCommunity Health Centre is committed to providing mechanisms that allow clients to provide this important information and respond to and seek to resolve issues that are raised.

Health Centre staff will ensure that client complaints are heard and addressed properly and in a timely fashion. The Health Centre will facilitate a culturally and linguistically appropriate process of communication. Interpreters will be available if needed, and clients with low written literacy will be given the opportunity to provide feedback verbally.

All conversations, meetings and phone calls related to client complaints, comments and feedback will be documented, noting the time and date of interaction. Documents will be kept for a period of five years.

Clients will be encouraged to first speak directly to the involved staff member(s) so that their issues can be dealt with in the context of that relationship.

Clients who are not comfortable with addressing issues with their immediate provider are encouraged to fill out a client feedback form or request to speak directly with a Manager.

Information received both through client feedback forms and through direct contact with a Manager will be analyzed, organized by theme, and trends will be brought forward to the Leadership Team on a monthly basis or as required.

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Procedure for Feedback Received Via Client Feedback Form

Step 1: Client feedback forms are available electronically, with links on our website as well as QR codes in the waiting areas. Paper copies are also available for clients in reception areas. If the client has difficulty completing the form, or requires interpretation, staff will provide assistance. Clients are also able to speak directly with a manager who can fill out the form during the discussion.

Step 2: Completed forms will be reviewed by the manager responsible for the area or program. Any feedback that is not clearly attached to a site will be reviewed by a member of the leadership team and directed to the most appropriate manager.

Step 3: The manager will follow up with the client within 2 weeks to gather further information as appropriate. The manager will inform the client of the process they will undertake. The manager and client will also discuss issues of confidentiality, especially if information needs to be obtained from other sources. Notes are to be documented in the feedback resolution form. If the form was submitted anonymously, follow up internally will be carried out as appropriate.

Step 4: The manager will follow up with any staff member, provider, or volunteer involved to further gather information. This information will also be documented in the feedback resolution form.

Step 5: The manager will then determine a resolution plan and communicate it to both the client and staff. The first step of resolution should typically be a direct discussion between the client and staff to attempt to re-establish a therapeutic relationship (where appropriate).

Step 6: If the nature of the complaint is serious (such as a breach of privacy, harassment/discrimination, harm), appropriate subject matter experts will be engaged. If there is potential for organizational risk, the Executive Director will be involved, and the Board Chair will be notified within 3 days.

Step 7: Trends will be monitored by a member of the Leadership Team and reported monthly at Leadership meetings. Continuous process improvement will be implemented to mitigate potential for future risks identified. Trends, themes of complaints, and outcomes will also be reported annually to the Board of Directors.

Step 8: If a resolution cannot be worked out at the operational level and the complaint is within the Board's scope of responsibility, the client has the option to have the Executive Committee of the Board review the complaint and make a final decision. All parties would be informed in writing of the Committee's decision.

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Cross Reference

OI-100 Client Rights and Responsibilities

HIII-060: Termination of Client Relationship