

# **PART 16: CLIENT COMPLAINT POLICY AND PROCEDURES**

<b>Approved by: Board of Directors</b>
<b>Application: Board, Staff, Volunteers, Independent Contractors, Clients, Students,</b>
<b>Contact: Executive Director</b>
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# **POLICY**

## **Preamble**

Planned Parenthood Toronto (PPT) strives to deliver high quality services to all of its clients. Service delivery is to be consistent and subject to continual assessment, review and on-going improvement. PPT is committed to the development of innovative methods and practices that enhance the quality of services.

The Client Complaint Policy ensures that proper procedures are in place to address every client complaint PPT receives in a timely and fair manner. It also ensures that all client complaints are communicated to the appropriate personnel.

## **Definitions**

For the purposes this policy,

Client is defined as any individual or organization who is the recipient of any PPT services including, but not limited to: one-on-one client care, workshop activities, support group activities delivered on or off-site.

Complaint is defined as a formal expression of client concern or dissatisfaction with an aspect of PPT's service delivery and can apply to staff, volunteers, students, independent contractors, consultants and purchase service providers.

## **Policy**

We ensure proper procedures are in place to address every client complaint PPT receives in a timely and fair manner. We ensure that all client complaints are communicated to the appropriate personnel.

Only the complaints where the complainant has identified her/himself are covered by this policy. Anonymous complaints are not within the terms of this policy, although it is expected that PPT will assess the validity of such complaints and, where appropriate, take further action.

# **PROCEDURES**

## **Notification**

All PPT clients accessing health services will be advised by staff and volunteers of their right to submit a complaint when initiating service activities. In addition to this process and for clients who do not access health services PPT will ensure that this policy and procedure is shared at minimum in three locations/formats (for example, downloadable off our website). Clients must be assured that complaints will be handled in a timely manner in accordance with this policy.

The Client Complaint Reporting Form (see: Appendix A) must be made easily accessible to all clients and provided upon request. A short summary (1 page document) of how to make a complaint should be available in addition to this procedure and posted throughout the clinic (see Appendix B). A verbal complaint may be expressed to any PPT staff person or Manager in person or by telephone; a written complaint (including the form) can be mailed or hand delivered to PPT.

The Executive Director must be notified immediately of all formal client complaints. The Executive Director is responsible for investigating all client complaints. The Executive Director may request the consultation of the appropriate PPT Manager or may delegate the investigation to another party or manager. If the complaint involves the Executive Director, the Chair of the Board of Directors must be notified immediately and is responsible for investigating the complaint.

Any PPT party involved in a client complaint will be notified by the Executive Director or the Chair of the Board as part of the investigation and will be provided an opportunity to address the concerns raised in the complaint. All matters relating to the complaint will be kept confidential, thoroughly documented, and filed with the Executive Director.

## **Informal Complaints**

If a client does not wish to document or formally record their complaint, they may still have their concern addressed informally. An informal complaint may be mediated between the client and a PPT Manager, staff person, student or volunteer, if required, in an attempt to facilitate an immediate and informal resolution. Informal complaints could be received verbally, via social media or via a client feedback form (see Health Services Manual: Client Input). Should this informal process not result in a satisfactory resolution, the client may proceed further by initiating a formal complaint and completing the Client Complaint Reporting Form.

In some instances, an informal process may satisfactorily resolve the client's complaint. However, if at any time the complainant wishes to make a formal complaint and seeks a formal resolution the formal complaints procedures must be followed.

## **Formal Complaints**

A formal complaint must be documented on PPT's Client Complaint Reporting Form. If the complaint is given verbally over the phone, in-person, or should the complainant wish to make a formal complaint but does not wish to complete the form, it can be suggested that an objective third party complete the form on their behalf. It is to be recorded that a third

party is completing the form, including their name and title, and the notes must reflect the complainant's version of events only.

The completed Client Complaint Reporting Form is to be forwarded immediately to the attention of the Executive Director for follow-up. Written complaints (e.g. letter of complaint) are to be forwarded directly to the Executive Director and attached to a Client Complaint Reporting Form. If the complaint involves the Executive Director, the completed form is forwarded to the attention of the Chair of the Board for follow-up. The Chair of the Board is responsible for all complaints involving the Executive Director.

The Executive Director (or Chair of the Board) ensures that all client complaints are investigated and a resolution reached or a plan of action is developed. The Executive Director may delegate responsibility for handling the complaint to a Manager. The client is to be informed of the process and all matters related to the complaint must be documented thoroughly on the Client Complaint Reporting Form. All complaints should be dealt with fairly and promptly and any response or action, if required, should address the complainant's concerns in a detailed and appropriate manner.

If a complaint received by the Executive Director is not resolved to the satisfaction of the complainant, the complaint may be appealed to the Board of Directors. The Board will decide if it is able to resolve the complaint or involve a third-party mediator to assist in the resolution of the complaint. Any resolution made by the Board of Directors is considered to be the final decision under this policy.

All documentation related to client complaints is to be maintained by the Executive Director. If a client complaint results in disciplinary action against a staff member, volunteer or service provider, additional documentation may be filed in that person's personnel file.

The Executive Director is responsible for reviewing the nature and volume of complaints on a semi-annual basis and will complete an annual summary. The summary will be presented at a Board of Directors meeting. This review will help PPT improve the quality of programming and services we provide. In matters involving potential legal or liability matters, the Executive Director is required to report to the Chair of the Board and/or Board of Directors immediately.

## Professional Misconduct, Incompetence or Incapacity

If the investigation of a client complaint results in sufficient evidence to indicate possible professional misconduct, incompetence, or incapacity on the part of a staff member, volunteer, student, independent contractors, consultants and purchase service providers, the Executive Director will proceed as follows:

Ask the staff member, volunteer, student, independent contractor, consultant or purchase service provider to prepare a written response to the particular incident;

1. Inform the individual of his or her right to legal advice;
2. Inform the Chair of the Board of the alleged incident and steps which have been undertaken;
3. Following legal advice, Executive Director will decide how to proceed with further investigation of the allegation.

If the matter involves the Executive Director, the same procedures apply and are led by the Board of Directors.

During the investigation, the Executive Director may suspend a staff member, with or without pay. In the case of a volunteer, student or external partner, their duties may be suspended during the period of investigation.

Upon completion of all investigative procedures, the Executive Director will make a determination as to the validity of the claim and recommend a course of action for implementation. The outcome of an investigation may include disciplinary action, including termination. In cases involving volunteers, students or external partner(s), the outcome of an investigation may include termination of the volunteer relationship or student's or external partner's contract.

## Regulated Health Care Professionals

If the outcome of an investigation involves termination of a staff member governed under a regulatory health care body (e.g. physician, nurse practitioner, etc.), the Executive Director shall prepare a report and forward it within thirty days to the appropriate professional college or association.

The following is an overview of applicable regulated health care bodies:

College of Physicians and Surgeons of Ontario, the College of Nurses of Ontario: Through their Complaints Committees, the Colleges investigate specific complaints about doctors, R.N.s, R.N.A.s, R.N.-E.C.s. The Committees are guided by the Regulated Health Professionals Act. In addition, the Ontario College of Social Workers and Social Service Workers exercises some disciplinary authority over its members.

Health Professionals Appeals and Review Board: This is a government appointed body which has a review process available both to complainants and those health professionals governed by the *Regulated Health Professionals Act*.

Civil Courts: Issues of negligence and malpractice are the responsibility of the civil courts when lawsuits are commenced. Civil courts may award damages. Generally speaking, the liability insurer for the particular health centre employing the health professional who is sued would appoint and instruct legal counsel to defend the lawsuit, and would pay for any settlement or judgment.

## Litigation and Insurance Coverage

Where the client provides notice, oral or written, of an intention to commence a lawsuit against PPT or any of its employees, the Executive Director shall be immediately informed. The Executive Director is required to notify the Chair of the Board and/or Board of Directors immediately.

Upon receipt of such information, the Executive Director shall, as soon as is practical, provide written notice to PPT's legal counsel and insurance provider of a claim or potential claim.

A physician who is a member of the Canadian Medical Protective Association shall likewise contact that Association. A nurse practitioner who is covered by an external policy will contact their insurer.

All staff members shall cooperate fully in providing statements and any other information to PPT's legal counsel and insurance provider in respect of any claim.

## **HARASSMENT, SOLICITATION AND DISCRIMINATION**

Planned Parenthood Toronto is committed to providing an environment in which all individuals are treated with respect and dignity.

Planned Parenthood Toronto will not tolerate harassment, solicitation or discrimination in the workplace perpetrated by or against clients. Everyone at PPT must be dedicated to preventing client harassment, solicitation and discrimination.

This applies to all of PPT's locations, permanent and temporary. Temporary locations include, but are not limited to, areas where the following activities occur; PPT-sponsored outreach, fundraising, education, training, informational health events, social activities, etc.

### **Harassment**

Harassment means engaging in a course of vexatious comment or conduct against clients – comment or conduct that is known or ought reasonably to be known to be unwelcome. Examples include, but are not limited to:

- Making gestures that imitate any person's physical disability
- Making derogatory remarks about a person's physical appearance, manner of dress/cultural expression, shape, size, etc.
- Making fun by words or conduct about another person's colour, race, origin, culture, costume, food, accent, etc.
- Making disparaging remarks about how people become HIV-positive
- Making disparaging remarks about a religion
- Making negative remarks about a person's sexuality or sexual orientation or a person's gender identity
- Inappropriate jokes, innuendos and teasing
- Insulting gestures and practical jokes which result in embarrassment
- Spreading rumours that damage one's reputation

Harassment may also relate to a form of discrimination as set out in the Ontario Human Rights Code, but it does not have to.

### **Solicitation**

At PPT, the word "solicitation" includes sexual solicitation, sexual advances and/or reprisals for rejection of unwanted sexual attention. In the context of PPT as an organization providing services relating to safe sex, sexuality, birth control, sexual health, etc., this part of the document has special importance. Reprisal may include denial of a procedure or treatment that was sought.

Solicitation in the Human Rights Code is limited to situations where the alleged perpetrator is "a person in a position to confer, grant or deny a benefit or advancement to..."<sup>1</sup> another person. Under the Code, a perpetrator may be any staff, student or volunteer member where solicitation is made to a client. Seeking a service.

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<sup>1</sup> Ontario Human Rights Code (1990) Part I 7(3)a

Examples of “tit for tat” (*quid pro quo*) solicitation include, but are not limited to:

- Client access to basic services, additional or extra services, receipt of services not entitled to, etc.

## **Discrimination**

Discrimination is treating a person or group differently, to their disadvantage and without valid reason, on the basis of grounds called “protected characteristics.”

Protected characteristics as outlined under the Ontario Human Rights Code include: citizenship, race, place of origin, ethnic origin, colour, ancestry, disability, age, creed, sex, pregnancy, family status, marital status, sexual orientation, gender identity, gender expression, receipt of public assistance and record of offence. As per PPT’s Equity and Access Policy, we acknowledge that this is not an exhaustive list of all people experiencing oppression and confirm that other equity-seeking groups are implicitly included in this policy. Therefore, in addition to these listed characteristics, discrimination that is based on other group stereotypes rather than on individual merit or that otherwise disadvantages members of equity-seeking groups is also prohibited at Planned Parenthood Toronto.

Discrimination can result from action or inaction. Discrimination may be intentional, unintentional and/or systemic. Intentional discriminatory treatment is deliberately designed to produce a disadvantageous result to a group or person based on protected grounds as outlined in this document. Unintentional discrimination describes an action (or inaction) which has a discriminatory impact that was unintended by the person who committed the act. A person’s intention is irrelevant in deciding whether or not an act amounts to discrimination. It is sufficient to objectively demonstrate a discriminatory impact.

Systemic discriminatory treatment results from the application of a seemingly neutral rule that disadvantages persons or groups identified by prohibited grounds. The test for discriminatory treatment is whether a group or person in that group has had a disadvantageous result arising from intentional actions or the apparently neutral application of a rule.

Discrimination also includes:

- Intersecting grounds - treating people differently on more than one protected characteristic;
- Because of association - treating people differently because a friend or family member identifies with a protected characteristic;
- Perceived grounds - treating people differently because of a belief that they identify with a protected characteristic, when in fact, they do not.

Examples of discrimination include, but are not limited to:

- assumptions made about clients’ needs based on stereotypical group characteristics that have a disadvantageous result

- negative, discourteous treatment of a client/volunteer/student/employee on protected characteristics outlined in this document.

Individuals are encouraged to report any incidents of harassment, solicitation or discrimination using the client complaint reporting form. PPT recognizes that individuals may find it difficult to come forward with a complaint under this policy because of concerns of confidentiality. All complaints concerning harassment, solicitation or discrimination, as well as the names of the parties involved, shall be treated as confidential. While the investigation into a complaint may require limited disclosure, no record of the complaint will be maintained in the clinical chart of the complainant.