



External Complaints Policy

Scope

Covered persons include all staff and volunteers, including contracted positions and Board members.

Purpose

Complaints from our clients, participants, family members, community members or partners are welcomed and are used to assist our ongoing efforts to improve services, policies and procedures. This policy is intended to ensure that CMHA-NWV's response to complaints is prompt, consistent, impartial and respectful to all parties.

Definition

A *complaint* is the expression of dissatisfaction about the service, actions, or lack of action by CMHA-NWV as an organization or by a staff person or volunteer acting on behalf of CMHA-NWV.

This policy does not apply to feedback that may be in disagreement with CMHA-NWV's mission and activities and decisions undertaken by us to carry out our mission. In these instances, feedback shall be acknowledged and shared within CMHA-NWV, as the Board deems appropriate.

Examples of complaints include, but are not limited to:

- Perceived failure to do something agreed upon; or
- Failure to observe policy or procedures; or
- Error or omission by a staff member/volunteer; or
- Lack of access to information or services (i.e. language or disability barriers); or
- Unacceptable delay; or
- Discourteous actions or statements by a staff member/volunteer.

POLICY APPLICATION AND PROCEDURES

1. Receipt of Complaints

Complaints may be received in writing (by mail, fax, email) or verbally (by phone or in person). Where feasible, CMHA-NWV encourages complainants to submit their complaint *in writing*, especially if it involves a complex or serious matter. (Complaint Forms are available at all CMHA-NWV worksites and online via CMHA-NWV's website.

2. Timeframes

Every effort should be made to resolve received complaints in a timely fashion. Where possible, complaints received in writing should be acknowledged within 2 business days and staff should attempt to resolve the matter within 10 business days and, if escalated, within an additional 10 business days, so that all complaints are resolved within a month of having been received. The said time may be extended by mutual consent. Complainants shall be kept informed of the status of their complaint if it cannot be resolved within 10 working days.

Note: We are unable to respond to complaints if there is insufficient information to allow for follow-up or clarification, e.g. an unsolicited, anonymous letter missing complainant's name or contact information.

3. Resolving Complaints

Volunteers who receive a complaint shall add a time stamp and either transfer the complaint to the most appropriate staff person or follow up with their Supervisor for direction.

Staff persons receiving a complaint shall first determine if the nature of the complaint is *within the scope of their role* and department. If not within their role, they shall immediately transfer the complaint to the most appropriate staff person. The recipient must then acknowledge to the transferor that they have received it and will act on it.

- Sealed complaints shall be transferred to the Executive Director;
- Complaints about the actions of a Board member or the Executive Director shall be transferred to the Board President.
- Complaints about the Board President shall be transferred to the Board Vice-President.
- The Executive Director is the final authority in all other matters related to external complaints.

The person resolving the complaint shall take all appropriate actions, as needed:

- a. Enquire and offer assistance to articulate or clarify a complaint, including referral to an advocate.
- b. Attempt to resolve the complaint immediately;
- c. If unable to address immediately, acknowledge to the complainant that the complaint has been received and will be acted on;
- d. Investigate as quickly and thoroughly as their role and resources will allow;
- e. If attempts to resolve the complaint are unsuccessful, refer the complaint to their own Supervisor; and
- f. Advise complainant of their options to escalate their complaint if they are dissatisfied with treatment or outcome.

4. Ensuring Confidentiality

Subject to CMHA-NWV's Privacy Policy, personal information of anyone submitting a complaint will be handled sensitively and disclosed only to those appropriate individuals at CMHA-NWV, on a need-to-know basis, for the purposes of responding to and resolving the complaint.

5. Documenting the Complaint

If the complainant is making a verbal complaint, the complainant's name, and contact information should be noted, along with complaint details. In situations which involve a dispute over money, as well as any complaint that cannot be resolved immediately (on the same day it is received), the staff person must keep a record of what steps were taken, and enter this information, along with the timeframe and outcome, in the *External Complaints Tracking* worksheet.

If the complaint is withdrawn, it shall be stricken from the record. A complaint that has been resolved to the mutual satisfaction of both parties shall be filed in the personnel file of the staff/volunteer, if applicable, and is to be treated as a confidential record.

6. Tracking Complaints

A summary report, including the number, type and disposition of complaints received will be made by the Executive Director to CMHA-NWV's Board of Directors, as part of the organization's annual review of policies and procedures.

The ED will also alert the Board of emergent situations that may require their immediate attention.

Related Forms

Complaint Form

External Complaints Tracking Sheet