**POLICY**

1.01 Every person accessing services from Community Living Chatham-Kent, and/or the person’s advocate have the right to make a complaint.

1.02 A complaint can be made to any CLC-K employee, verbally or in writing. The person making the complaint may have the assistance of a family member, advocate or an Advocacy and Protective Services worker (APS) worker.

1.03 In order to ensure the integrity of the complaint and resolution process, no person named in the complaint shall be a part of the investigation, and any conflict of interest between any of the parties shall be disclosed.

1.04 Any complaint made shall not have a negative impact on the person accessing services, and shall not result in repercussions or retaliation before, during or after the review and resolve of the complaint.

1.05 Every effort shall be made to maintain confidentiality of all parties, to the extent possible during the investigation and resolution process.

1.06 Where necessary, Abuse Reporting procedures and Serious Occurrence procedures shall apply.

**2 PURPOSE**

2.01 This policy outlines the process for making, investigating, and resolving internal complaints.

**3 SCOPE**

3.01 This statement of policy and procedure applies to people who access services and their families, employees, volunteers and students on placement.

**4 RESPONSIBILITY**

4.01 It is the responsibility of all agency employees, volunteers and students on placement to ensure this policy is adhered to.

**5 DEFINITIONS**

None

**6 REFERENCES AND RELATED STATEMENTS OF POLICY AND PROCEDURE**

6.01 Personal Information Collection, Use, Disclosure, Storage, Access and Disposal Policy and Procedure.

6.02 Your Rights (Section 17 of Policy and Procedures)

6.03 Preventing and Managing Abuse of People Supported Policy and Procedure.

6.04 Serious Occurrence Reporting Policy and Procedure

**7 PROCEDURES**

7.01 For each complaint, consideration shall be given to a person accessing services being part of the complaint and/or feedback process.

7.02 A complaint may be made to any Direct Support Professional (DSP). The person making the complaint should inform the DSP what they would like him/her to follow up with.

7.03 The DSP must provide a verbal response within three (3) days of receiving the complaint.

7.04 In the case of a child or young person, their parent(s) or any other person representing them, shall receive acknowledgment of receiving the complaint within twenty-four (24) hours, and it will be determined if any action can be taken to help the child or young person while the complaint is being investigated. This shall occur in all cases where the complainant is known. A complete record of the complaint shall be kept in the child or young person’s file.

7.05 If the person making the complaint is not satisfied with the response from the DSP, he/she can file the complaint in writing with the Manager. The Manager will have four (4) days to investigate the complaint before responding in writing. The Manager may consult with DSPs and other people accessing services to gather information.

7.06 If the person making the complaint is not satisfied with the response from the Manager, he/she can file the complaint, in writing to the Executive Director. The Executive Director will have five (5) days to investigate the complaint before responding in writing.

7.07 If the person making the complaint is not satisfied with the response from the Executive Director, he/she can file the complaint in writing with the Executive Committee of the Board of Directors. The Committee has five (5) days after their initial meeting to respond in writing.

7.08 If the initial concern remains after the response of the Executive Committee, the person making the complaint may take the complaint to the Ministry of Children, Community and Social Service (MCCSS). Contact for the appropriate MCCSS representative shall be provided by the Executive Committee.

7.09 If the person making the complaint believes their rights have been violated, they have the right to file a complaint with the Behaviour Support/Rights Review Committee, through the Support Resources Manager. (see Rights Procedures)

7.10 If the complaint is related to the collection, use, disclosure, access or storage of personal information, the complaint should be filed in writing to CLC-K’s Privacy Officer.

7.11 Every person involved in the complaint shall be updated upon request, and at least every thirty (30) days until the complaint is resolved. Results of the investigation and resolve are provided to the complainant in writing.

7.12 All internal complaints are reviewed and actions and resolve are discussed at a minimum of two (2) times per year by the Violence Threat Assessment Team (VTAT), and noted in the minutes.

7.13 The Quality Assurance and Planning Manager shall review and summarize all complaints annually. A summary report shall be provided to the Senior Management Team and the Violence Threat Assessment Team (VTAT). The annual report will outline the source of the complaint, complaint details, and actions taken to resolve the complaint.

7.14 Ultimately, if a person making a complaint is still unsatisfied at the end of the complaint process, they may wish to terminate their involvement with CLC-K.

**8 ATTACHMENTS**

Internal/External Complaint Form – available in English and French