

Policy Name:	Program/Department:	Last Updated: (month, year)
External Stakeholder Complaints and Appeals Policy and Procedure	Senior Management Team	November 2021

Purpose:

In accordance with MODC's Mission, Vision and Values, MODC welcomes feedback (general comments, compliments, concerns and complaints) from stakeholders and/or their representatives as a valuable mechanism for reflecting on the quality and performance of our services and organizational support functions.

MODC considers any customer that we interact with, as a Stakeholder; this includes, but is not limited to:

- Individuals receiving services
- Family members, friends and neighbours
- MODC Employees, MODC Volunteers
- Other Community Providers or Partners
- Landlords
- Vendors
- Donors
- Funders

Persons Affected:

This organizational policy is to be utilized by all business units across MODC, including Community Supportive Services, Employment Services, Community Programs & After Stroke, Communications & Public Relations, Finance, Corporate Services, Human Resources, Information Technology, Assistive Technology, and Philanthropy.

Definitions

Feedback – Feedback consists of opinions, comments and expressions of interest or concern, made directly or indirectly, explicitly, or implicitly, to or about MODC, our products, services or procedures, where a response is not expected or legally required.

Complaint – A complaint is an expression of dissatisfaction or unmet expectations about the quality of service, actions, or lack of action by MODC as an organization, by an employee, volunteer, or other representative acting on behalf of MODC.

Examples include, but are not limited to:

- Perceived failure to comply with MODC Consumer/Client Bill of Right
- Perceived failure to do something agreed upon
- Perceived failure to observe policies or procedures
- Perceived unacceptable delay
- Perceived employee error
- Perceived discourteous actions/statements by employee/volunteer

Certain funder agreements may have additional or distinctive prerequisites that may require a different process for managing and tracking stakeholder complaints. Such programs/services will be excluded from the processes outlined in this document.

Policy Directives:

POLICY

MODC values of respect, honesty, integrity, transparency, and accountability demand that MODC actively encourages feedback and/or complaints and informs stakeholders verbally and/or in writing of how to make a complaint.

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This policy outlines MODC's approach to providing a fair, consistent, and structured process for managing stakeholder complaints and aims to:

- Be open and transparent with stakeholders
- Maintain the privacy of all stakeholders when managing complaints
- Establish reasonable timeframes for Stakeholder Complaint Resolution
- Ensure Stakeholder Complaint Resolutions are handled justly and objectively
- Correspond with the client in their preferred language
- Set a standardized process to recording, analyzing, tracking, and reporting Stakeholder Complaint Resolution data
- Identify key performance indicators to which MODC will be accountable
- Use this data to continuously improve quality of services offered at MODC

MODC views feedback and/or complaints as a valuable opportunity to review policies, procedures, and practices, and to make changes where necessary.

Clients must be provided with written information on how to make a complaint during their Service Orientation and if they have a Service Agreement / Service Contract it must be included in this document as well. For all other stakeholders this information is posted on our website and made available upon request.

MODC staff involved with managing feedback and/or complaints must:

- Foster a service culture that encourages open and honest communication
- Encourage and make it easy for individuals to provide feedback
- Undertake activities to seek feedback from stakeholders and or their representatives
- Inform stakeholders about the standard of service they can expect
- Protect the right of stakeholders to provide feedback and to make complaints about service delivery
- Protect the privacy and confidentiality of individuals, accepting and actioning anonymous feedback
- Record and analyze information arising from feedback and/or complaints and use it to improve services
- Ensure that complainants' continuation of services and interactions with MODC are not interrupted or affected as a result of making a complaint, unless the stakeholder and or MODC have a valid reason to do so (i.e., protect the health, safety, and wellbeing of an individual or group of people)
- Provide stakeholders with an opportunity for appeal and welcome independent review if they are unhappy with any finding or outcome

Participant feedback and/or complaints are used as part of the MODC Quality Management System and provide our organization with the opportunity to:

- Understand the needs and expectations of stakeholders and the communities in which we work and support
- Identify opportunities for improvement to what we do and how we do it (decisions, processes, systems, trends, actions, behaviours, attitudes) and implement changes that will improve service and increase satisfaction of stakeholders
- Analyze and learn from identified trends and solutions to ensure MODC is proactive and relevant to the communities we serve across Canada
- Share improvement practices across the organization and collaborate to explore new solutions

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PROCEDURE

HOW STAKEHOLDERS SHARE FEEDBACK/COMPLAINTS WITH MODC

Stakeholders are welcome to provide feedback and/or complaints in any method they wish, including by letter, fax, email, in person, by telephone or by completing the feedback form on MODC's website. It is an expectation that MODC staff and stakeholders follow the Complaint Management Process and levels of resolution.

When a complaint is made by a stakeholder, a confirmation will be sent within 2 business days indicating that the complaint has been received by MODC. Every reasonable effort will be made to respond/resolve the complaint within an additional 5 business days.

MANAGEMENT PROCESS (INTERNAL)

MODC has established 4 levels within the organizational structure to support the needs of our stakeholders when dealing with feedback and/or complaints. An escalation path/process is established to best support feedback/complaints that have not been resolved. Stakeholders have the right to move through this escalation path if they feel that their feedback/complaint has not been resolved.

It is essential that all programs have clearly documented criteria for eligibility, admission, eligible services, quantity of services, service prioritization, program limitations and termination; and that these be made available to the consumer/client upon application or admission to the program. These criteria must also be available to MODC personnel and volunteers as a component of orientation and training. Programs that are operated under government legislation or contract must adhere to the criteria that are established by legislation, regulation, or contract.

MODC's Stakeholder Feedback/Complaint Management Process

Level 1: Complaints managed at the **local level**. If a stakeholder does not wish to speak directly to the person from whom they received service, the stakeholder should then be referred to the person's immediate supervisor. Resolution should be provided to the stakeholder within 5 business days if possible.

No escalation required if the stakeholder feels the resolution provided is acceptable.

Level 2: When a decision or response is not to the satisfaction of the stakeholder, the situation may be escalated to the **Regional Management level**. At this level, a review is completed, including discussions with the stakeholder who made the complaint, as well as the MODC staff. Upon completion of the review, the Regional Management level reviewer will either uphold the decision, provide a different solution, or determine if any other action is required. Every effort should be made to provide the stakeholder with a decision within 10 business days. The stakeholder should be provided with the final decision both verbally and with a written letter.

If the client is not satisfied, they are entitled to escalate to the next level.

Level 3: If a stakeholder is not satisfied with the decision made at the Regional Management level, then the complaint is escalated to the **Senior/Executive Level (Director/Designate)**. At this stage of the process, the Director/Designate will consult with the MODC staff person involved and their supervisor to gain further information. Separately the Director/Designate will also meet with the stakeholder to discuss the situation. Once all relevant information is gathered the Director/Designate

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will determine if the previous resolution should be upheld, if there is a different solution, or if any other action is required. The review process and resolution should be determined within 10 business days, if possible. The stakeholder will be provided with the final decision both verbally and with a written letter.

Should the stakeholder continue to be dissatisfied with the solution presented by the Director/Designate, and the decision is an appealable situation, the stakeholder will be notified in writing and provided with information on how to make an external appeal.

Level 4: If an issue brought forward by a stakeholder is in relation to a legal matter, the situation will be escalated to the **Vice President / President & CEO**.

Recording, ANALYZING AND TRACKING of Complaints

A record of a complaint, all elements of the review process, and the outcome must be kept and tracked in the centralized database that is separate from the individual’s records. Individuals will still have access to this through the provisions made by MODC for all to have access to records held about them. A standard tracking system will be used by each business unit to track all complaints. Tracking of complaints is a mandatory expectation from all MODC employees.

MONITORING AND REPORTING

The President & CEO will oversee escalated complaints received by the organization with delegation to each Vice President in applicable business units. Continued monitoring of complaints will take place within the organization and will form part of the compliance reviews. The Executive Leadership Team (ELT) will be provided with a quarterly report on key complaint metrics. The Board of Directors will receive the elevated complaints Key Performance Indicators (KPI) on an annual basis. MODC will also make information available regarding the number of complaints as part of its annual report, Funder requirements and its certification process with Imagine Canada.

The complaint management process will be the responsibility of each business unit to ensure that quality improvement is implemented. Trends and resolution timelines will be monitored to ensure that appropriate action has been taken. Procedures will be reviewed annually to ensure that any amendments necessary to services and procedures are implemented, and that the process is effective.

Through monitoring and reporting of the frequency and handling of complaints, the organization will constantly be looking for ways in which Complaints, Policies and Procedures can be improved. When such improvements are implemented, they will be shared with the Board of Directors and will become part of the quarterly compliance report. A standardized tracking system will be used in each business unit.

Complaints and tracking mechanisms are formally audited in 3 MODC business units. Where audits are not concluded it is the responsibility of each business unit to determine compliance of the processes. All formal complaints must be tracked in writing. Where the complainant is unable to put the formal complaint in writing, the MODC employee supporting the complainant is responsible for ensuring a record of the complaint is made and is signed by the complainant.

MONITORING AND REVIEW

The Senior Management Team (SMT) will be responsible for monitoring compliance with this policy. The policy will be reviewed every 3 years from implementation or last review date. As part of our quality improvement process, all business unit leads are responsible to reviewing the complaints received, on a monthly basis to identify any themes and to take action.

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MODC APPEALS PROCESS (External review)

AN APPEAL

An appeal is a formal review of a decision made by MODC personnel which is against the wishes of the stakeholder. The review is completed by an impartial and trained committee panel of 3 volunteers with a minimum of one person with a disability, if possible.

As the appeal process is accessed so infrequently, it is the responsibility of each individual business unit to make the necessary arrangements to assemble an Appeal Committee should they require one.

The appeal process is a mechanism that provides the stakeholder with a fair and just recourse to challenge the decision on a "level playing field". In an appeal there is a presentation of written documentation by both MODC personnel and the appellant (stakeholder) to the Appeal Panel. If a party requires accommodation, a verbal presentation can be made. In the appeal process the stakeholder must gather evidence to prove the decision made by MODC personnel was incorrect and should be overturned. In other words, the appellant (stakeholder) has the burden of proof.

While a MODC Appeals Panel has the power to uphold or reverse certain MODC decisions, it does not have the right to impose action beyond this, such as a panel in a competency or immigration hearing. Therefore, although the stakeholder has a right to an advocate, it is not assumed that either party will require legal counsel. While it is a quasi-legal procedure with decisions that are binding, it is not a court of law. Therefore, while an Appeals Panel will follow proper procedures, it will conduct the hearings in an informal and non-intimidating manner that meets the circumstances.

MODC's appeal process is outside of the provincial and federal judicial systems.

The role of an Appeals Panel is to inform the stakeholder of his/her rights beyond MODC's appeal process. This will vary depending on the source of referral, source of program funding and the regulations/legislation under which the program operates.

WHAT DECISIONS CAN BE APPEALED

A decision to terminate services to a stakeholder:

MODC may decide to terminate services when a stakeholder no longer meets the criteria for receipt of the services, or those services are no longer appropriate for the stakeholder, or the stakeholder violated the stakeholder/consumer/client agreement.

PURPOSE OF AN APPEAL

If a person wishes to appeal a decision, the Director/Regional Director/Associate Director or designate will ensure that it fits the criteria for an appealable decision and will take on the role of leading and coordinating the external appeals process with the stakeholder and the external appeals committee. They will also ensure that the stakeholder is aware, in writing, their right to appeal the decision externally. It is expected that during the complaint management process the Director/ Regional Director/Associate Director has thoroughly reviewed the decision and mitigated the concern. External appeals should be the exception.

The Appeals Process of MODC is established in accordance with the policies and practices of MODC, and within the relevant laws and regulations of each provincial jurisdiction and funder requirements.

Specific Government-funded programs, such as those operating under the Long-Term Care Act and the Ontario Disability Support Program Act have appeal requirements within their governing legislation and regulations.

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***Please NOTE:** Specific Funder Required Appeals – In addition to an external appeals committee a stakeholder who is not satisfied with the outcome of the external appeal can access an independent adjudicative and regulatory tribunal. Stakeholders must be informed that they have the right to appeal any decisions in writing prior to the resolution process commencing.

Stakeholders who are in programs operating under the Ministry of Health and Long-Term Care Appeal and Review Boards Act, 1998 have the right under the Act to appeal the termination of services to the Health Services Appeal and Review Board (HSARB). <http://www.hsarb.on.ca/scripts/english/>. This must be put in writing when services are terminated.

If a stakeholder decides to appeal under the Home Care and Community Services Act, 1994, they must write to the Health Services Appeal and Review Board that they wish to appeal. This must be done within 30 days of receiving a decision for appeal within the Home Care and Community Services Act, 1994. Stakeholders should include in their correspondence information about why they believe a decision was wrong, and include a copy of the decision.

If the stakeholder wants to appeal a decision but needs more time, they must write to the Board and ask for an extension of the 30-day time limit for making an appeal. Stakeholders must tell the Board the reasons why they are asking for an extension of the time limit.

Other government-funded programs (i.e., Ontario Disability Support Program Act) also have appeal requirements within their governing legislation and regulations.

STAKEHOLDER NOTICE TO APPEAL

The stakeholder has 30 calendar days, from the time they are notified of final decision, to appeal the decision. Requests for an extension of the 30 day period will be considered under extenuating circumstances. This may include, but is not limited to consumer/client is out of town, is ill, during holidays, or has been unable to confer with an advocate, etc. MODC personnel, however, are expected to adhere to these timelines.

THE APPEAL DATE

The date of the appeal will be determined by the Appeals Panel. All appeals should be held within 60 days of receipt of the notice of appeal. The date of the appeal shall be provided to the stakeholder (Appellant) in a timely manner.

APPEALS POLICY DIRECTIVES *(Please Note: For future development specific to the Community Support Services Department, individuals who have gone through an appeal process internally have the right to a HSARB Hearing. This must be provided to the Consumer/Client as an option and as part of the Appeals Process.)*

- 1) Notice of the Right to Appeal – Formal correspondence communicates ineligibility
- 2) Individual/Stakeholder Notice to Appeal – Timeframe for Individual/Stakeholder (Appellant) to appeal decision
- 3) Notify the Funder – Where applicable, inform Funders when an Appeal occurs in program that operates under their jurisdiction
- 4) Coordinating the Appeal Process – Follow steps outlined to coordinate Appeal
- 5) Limit of MODC Liability – MODC not responsible for any costs related to Individual/Stakeholder
- 6) The Appeal Date – Date of Appeal determined by Appeals Panel

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- 7) Assemble the Appeals Panel – Fair and impartial choice of volunteer panelists
- 8) Development of the Appeal Docket – Docket separate of Individual/Stakeholder File
- 9) Preparation for the Appellant – Appellant's right to provide evidence / challenge evidence provided by MODC
- 10) Preparation for MODC Personnel – Primary and other personnel clarify documentary evidence/may be requested to participate in Appeal
- 11) The Appeal Process – Chairperson/Other panelists initiate
- 12) The Decision – Confidential deliberations are entered and determine: 'Affirm'- 'Rescind'- 'Rescind the decision and substitute a new decision in its place'
- 13) Notification of Decision – Written Notification is simple, and Outcome is announced
- 14) Notification of Right of Appeal (where applicable) – Individual/Stakeholder who are in programs operating under the Long-Term Care Act have the right under the Act to appeal the termination of services to the Health Services Appeal and Review Board (HSARB)
- 15) Appeal Levels – Ensure that the Appellant is advised if there is another potential level of Appeal
- 16) Storage of Appeal Documentation – An Appeal Docket shall be produced for each Appeal. All Appeal Dockets containing the documented record and evidence pertaining to an Appeal shall be stored in a manner in line with the treatment of other confidential material and Case Files at MODC.

Debrief Staff – Program Directors must ensure that Staff involved are appropriately debriefed.

References and Documentation: (if applicable)

- Operations & Finance Manual - OF 02 02 Policies

In addition to our complaints process outlined in this policy MODC has the following mechanisms in place to support specific types of concerns brought forward from stakeholders:

- Workplace Harassment and Discrimination – HR 10 02
- Code of Business Conduct – HR 01 09
- Investigation Policy – HR 04 09
- Privacy concerns are reviewed by the MODC's Privacy Officer

Revision History New Revised Initial Release of Existing Policy

Date	Revision #	Drafted By	Modification Details
July 2021	1	Senior Management Team	Initial Release
Nov 3 2021	2	Sidra Chu	Stakeholder appeal timelines added

Approved for Distribution: Operational policies approved by ELT - Corporate policies approved by the Board

Director: (Name)	Title:	Date: (mm/dd/yy):	Board Approval: (mm/dd/yy)
Senior Management Team		June 2021	