

	<b>Section:</b> 17 Quality and Risk Management	<b>Pages:</b> 2	<b>Policy Number:</b> 17-8
	<b>Subject:</b> Complaint Resolution- Client		

## POLICY STATEMENT

Banyan is committed to providing quality service to our clients and will ensure all complaints are investigated and responded to in a timely manner.

The complaint resolution process will have regard for the client's individual abilities and needs and will appreciate the significance of language barriers. No client will experience reprisals or duress as a result of a decision to access an internal or external complaints procedure.

## PURPOSE OF THE POLICY

To provide employees with a consistent format on how they are to handle client and/or family member concerns and complaints.

### A. DEFINITIONS:

- None for this policy.

### B. PROCEDURES:

1. Banyan has a wide range of services and as a result, the complaints resolution process differs depending on the program.
2. All Banyan clients will be advised on admission to service, and regularly thereafter, of their right to voice concerns or complaints regarding the services they are receiving. Each program will adhere to its own program specific procedures.

#### 3. Training

- 3.1. All new employees will receive training during orientation on program specific Client/Youth complaint procedures.

#### 4. Continuous Quality Improvement

- 4.1. All formal complaints will be entered on the Banyan Risk Database in accordance with **17-2 Incident Reporting & Investigation**. Following completion of the investigation and final update, all client complaints are to be assessed and assigned an Incident Severity Level. Any complaints that are designated Critical are reported immediately to the CEO and Board Chair.
- 4.2. Complaints will be tracked using the Balanced Scorecard.

4.3. Complaints will be a standing agenda item on the Quality and Risk Management Committee. The committee will be responsible for reviewing patterns and themes of the complaints and monitoring the outcomes each quarter.

4.4. A summary of the frequency and patterns of formal (written) complaints is included in the quarterly Quality and Risk Management Report to the Board of Directors.

**C. REFERENCE SOURCES:**

- None for this policy.

**D. CROSS REFERENCES:**

- 04-3 Internal Complaints and Reviews
- 04-4 External Complaints Mechanisms
- 17-10F SNAP Complaint Resolution Process
- 17-11F Grocer Ease Complaint Resolution Process
- 17-12F Clinical Program Complaint Resolution Process
- 17-13F Reintegration Complaint Resolution Process
- 17-14F Bridge Complaint Resolution Process
- 17-15F PAC Complaint Resolution Process

**E. REVIEW CYCLE:** This policy is to be reviewed every 3 years.

Approved By:	Senior Management Team
Effective Date:	September 2017
Revised Date:	January 2021 (formatting), May 2021, August 2021
Reviewed Date:	