

GENERAL ADMINISTRATIVE

ISSUED BY: CEO

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CONCERN PROCESS Applies To: All Staff, Residents & Families

PREAMBLE

Feedback presents us with an opportunity to examine what we are doing and often gives us an opportunity for improvement. All feedback whether a concern, complaint, an issue or a compliment shall be taken seriously and shall be addressed in a consistent manner.

POLICY

As a facility that values compassion, accountability, respect, excellence, and safety we will solicit feedback, concerns, and suggestions for improvement on a regular basis. Regular feedback will be gathered through Family Council, family surveys and staff surveys. All feedback, concerns, complaints and issues identified by staff, residents, family and the public shall be addressed sincerely, promptly and with as much confidentiality as possible, regardless of the type of concern. All persons submitting feedback shall receive a response in a timely manner and the response will be discussed with them.

If a concern is related to potential abuse, the Protection of Persons in Care Act of the Province of Nova Scotia compels anyone (staff, family, visitor or resident) who has a reasonable basis to believe that a resident is, or is likely to be, abused shall promptly report the belief, and the information on which it is based, to the Minister or the Minister's delegate.

PROCEDURE forResident/Family Feedback

- 1. At initial contact with person providing feedback, staff need to express understanding, recognition and consolation When feedback is brought to your attention, apologize for the discomfort or inconvenience caused by the incident.
- 2. If the staff member is able to competently address and resolve the concern at the time it is made, they will do so, preferably in the presence of the person expressing the concern.
- **3.** If after taking action the person remains concerned, or if the staff is unable to take action, or if the person wanting to provide the feedback is uncomfortable with presenting the feedback directly to those involved, the concern is to be documented using the FEEDBACK DOCUMENTATION FORM (Appendix A)

Appendix A

- 4. The completed FEEDBACK DOCUMENTATION FORM is to be forwarded to the Administrative Assistant who will ensure that the concern form is delivered to the appropriate Director or designate
- 5. Within 2 working days of receipt of the form, the Director/Designate will respond to the person providing the feedback, indicating that the feedback has been received and that they will be the contact person during the feedback process. The Director/Designate will inform the parties involved that follow-up conversations will be held weekly to keep everyone informed as to the progress of the investigation
- 6. To fully understand the scope of the problem, The Director/Designate will conduct interviews with all persons involved, starting with the person identifying the concern. These interviews are non-punitive in nature and are intended to assist in identifying the root cause of the concern.
- 7. Respecting confidentiality, when a resolution has been determined, inform the resident/family &staff as soon as possible.
- **8.** Follow up on all resolutions to verify that the resolution is satisfactory to the concerned person.
- **9.** If concerns cannot be addressed or resolved at the departmental level or if a resident/family member requests, the concern and follow-up process can be forwarded to the CEO for processing.
- 10. If a Director, supervisor or the CEO is a party in the concern, the FEEDBACK PROCESS FORM shall be forwarded to the Human Resources Coordinator for investigation and management. As per the Disclosure of Wrong Doing Policy, (Policy #) the Human Resource Coordinator can forward these concerns to the Board of Directors.
- **11.** To mitigate risk, a summary of all feedback received and the resolution of same shall be discussed at the next leadership meeting.

PROCEDURE FOR STAFF FEEDBACK

- 1. Staff are to direct their feedback to their immediate supervisor
- 2. If the immediate supervisor is able to competently address and resolve the concern at the time it is made, they will do so, preferably in the presence of the staff person expressing the concern.
- **3.** If after action has been taken, the staff person remains concerned, or if the supervisor is unable to take action, the staff shall implement the Feedback Process
- 4. All concerns must be systematically documented using the FEEDBACK DOCUMENTATION FORM
- **5.** The completed FEEDBACK DOCUMENTATION FORM is to be forwarded to the appropriate Director or designate
- 6. Within 2 working days of receipt of the form, the Director/Designate will respond to the staff person who provided the feedback, indicating that the feedback has been received and that they will be the contact person during the Feedback Process. The Director/Designate will inform the parties involved that follow-up conversations will be held weekly to keep everyone informed as to the progress of the investigation
- 7. To fully understand the scope of the problem, The Director/Designate will conduct interviews with all persons involved, starting with the person identifying the concern.

These interviews are non-punitive in nature and are intended to assist in identify the root cause of the concern.

- 8. Respecting confidentiality, when a resolution has been determined, inform the staff as soon as possible.
- **9.** Follow up on all resolutions to verify that the resolution is satisfactory to the concerned person.
- **10.** If concerns cannot be addressed or resolved at the departmental level, the concern can be forwarded to the CEO for processing.
- 11. If a Director, supervisor or the CEO is a party in the concern, the FEEDBACK PROCESS FORM shall be forwarded to the Human Resources Coordinator for investigation and management. As per the Disclosure of Wrong Doing Policy (Policy #, the Human Resource Coordinator can forward these concerns to the Board of Directors.

	Ap	pendix A
Feedback Form		
Person providing feedback	Date	
Residents Name	Room #	
How do we contact you?		
Address		
Day Phone	Evening Phone	
Feedback/concern		
	<u> </u>	<u> </u>
What is your desired outcome for this situ		
What is your desired outcome for this situ		
Referred to:	Dept	
Date of Referral		

Findings:			
Actions Taken:			
Is concern reportable to an outside agency?	\Box Yes	\Box No	
If yes ,was this reported?	\Box Yes		
To Whom How were the investigation findings reported to	Date		
		edback?	
□ In-person □ In writing □ Telephon	e		
То			
Whom	_Date		
Notes			
Was the person voicing concerns satisfied with	findings and action?	□ Yes	□ No
Person Completing the Inquiry	Date		
NOTE: This form is not to be copied or filed in Completed form to be forwarded to CEO or HI			