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Introduction

Health care organizations across Ontario are on a journey to improve the quality of care that they deliver. Ontario's *Patients First Act, 2016,* illustrates a commitment to putting patients' and residents' needs at the centre of care delivered across sectors.¹

There are many regulations that shape and guide the delivery of care in long-term care homes, and homes already have well-developed and prescribed complaints processes in place. However, there is an opportunity to apply a proactive quality improvement lens to complaints processes in the long-term care sector.

There is a movement across all sectors, including long-term care, toward improving transparency, accountability, and quality of care through a more rigorous complaints process involving consistent data collection, reporting, and action based on complaints data. The purpose of this guide is to act as a resource for homes as they build on the strengths they already have to improve their complaints processes. Homes can compare their own processes with the best practices described in this guide, and consider whether there are any changes that they could make to improve their processes and further strengthen their use of resident and family engagement. Improving the complaints process will help long-term care homes to:

- Establish trusting relationships between residents, their families, and staff
- Address resident and family concerns in a timely and transparent manner, preventing issues from escalating
- Foster a culture committed to continuous quality improvement
- Support an environment that enables safe and open dialogue
- Track and identify key trends and opportunities for improvement
- Generate ideas for annual Quality Improvement Plans
- Assist in meeting accreditation standards
- Achieve regulatory compliance
- Drive other quality initiatives³

Long-Term Care Homes' Legislated Responsibilities

In the long-term care sector, homes' responsibilities with regard to the complaints process are outlined in the *Long-Term Care Homes Act, 2007*, including Ontario Regulation 79/10. Ontario long-term care homes had complaints processes in place before the *Long-Term Care Homes Act, 2007* was enacted. For example, the Resident Bill of Rights was first proclaimed in the early 1980s, and with the Long-Term Care Homes Act, 2007, these rights are now enforceable by residents. The *Long-Term Care Homes Act, 2007* also includes over 32 specific "duties" of operators, including the duty to consult with the Residents' Council and Family Council.

Improving Beyond Legislated Requirements

Apart from fulfilling the legislative requirements for their complaints processes, we anticipated that homes across Ontario would likely show variation in practices related to how they manage their complaints processes. In 2015, Health Quality Ontario conducted a survey of long-term care homes to learn about their current practices related to the complaints process. This survey identified a few key areas for improvement and opportunities to reduce variation among the complaints processes currently in use across Ontario's long-term care homes.

This survey revealed generally positive results, with 80–89% of homes indicating that they are analyzing their complaints data, recognizing organizational changes based on complaints, and coaching staff to improve quality based on feedback. However, homes also identified areas where they believed they could improve their complaints processes. The most commonly cited areas for improvement were collecting data on complaints and using feedback to improve service quality, with 47% of homes noting that they believed there was room for improvement.

A note on terminology

Ontario's Ministry of Health and Long-Term Care uses the term "patient relations" to describe the concerns and complaints process in a variety of settings, including the hospital and home and community care sectors.² Long-term care homes are distinct in that they do not define "patient/ resident relations" by the complaints process alone. Long-term care homes provide all aspects of care (social, physical, mental, spiritual, emotional), usually for several years. Thus, a very different relationship exists between the home operator/staff and residents than what typically occurs in the hospital or home and community care sectors, which provide more episodic care. For this reason, "resident relations" in long-term care is defined more broadly to incorporate notions of hospitality and customer service, whereas "complaints process" specifically relates to managing complaints.

Other identified priorities for improvement included:

- Making the process more efficient
- Supporting both complainant and staff
- Reducing fear of reprisal among residents

This survey clearly demonstrated that there are opportunities for long-term care homes to go above and beyond legislative requirements to truly optimize their complaints process for residents. With this guide, we hope to support homes to improve the care of residents and their families by enhancing their complaints systems and processes. We will discuss the findings from our survey of longterm care homes and strategies for improvement arising from these findings.

Resources for engaging Residents' Councils and Family Councils

Residents' Councils and Family Councils can play a crucial role in the complaints process by reviewing trends in complaints and helping to identify and plan improvements. The Ontario Association of Residents' Councils, and Family Councils Ontario, and the Change Foundation have developed a number of resources to support councils and engagement of residents and their families. Visit the resource hubs of each of these organizations below.

- Family Councils Ontario resources
- Ontario Association of Residents'
 <u>Councils resources</u>
- The Change Foundation resources

The role of the Patient Ombudsman

Since its launch in September 2016, the Office of the Patient Ombudsman is part of the overall complaints process continuum for long-term care homes. If the long-term care home could not resolve a complaint with the resident/family internally (which is the ideal scenario), then they have the option of referring the resident/family to the Patient Ombudsman. The Patient Ombudsman can look into complaints, such as perception of poor communication, lack of continuity of care, and restrictions on visitation.

The Patient Ombudsman's office will not be able to help if the complaint is about, for example, a regulated health care professional, such as a physician, nurse, or physiotherapist, or about a retirement home or if the complaint is part of a court proceeding; however, they will, when possible, act as a navigator and point people to the right organization or individual who can help. Staff will take the time to listen closely to all experiences and perspectives, without taking sides.

Further information on what people can expect from Ontario's Patient Ombudsman can be found on their website: <u>https://patientombudsman.ca/</u>. The Patient Ombudsman's office has also released their first <u>annual report</u> reflecting on their first year of operations.

Guiding Principles for Improving Complaints Processes in Long-Term Care

These guiding principles for long-term care complaints processes (shown in Figure 1) are designed to help long-term care homes improve their complaints processes. They were developed for the purpose of this guide in consultation with the Ontario Long Term Care Association, AdvantAge Ontario (formerly the Ontario Association of Non-Profit Homes and Services for Seniors), Family Councils Ontario, the Ontario Association of Residents' Councils, and Health Quality Ontario's Patient Relations Advisory Group.

The guiding principles summarize three core components of the complaints process: fostering a culture of openness; having a clear and timely process; and working in collaboration with residents and their families for improvement. These components are essential to a good complaints process and resident experience.

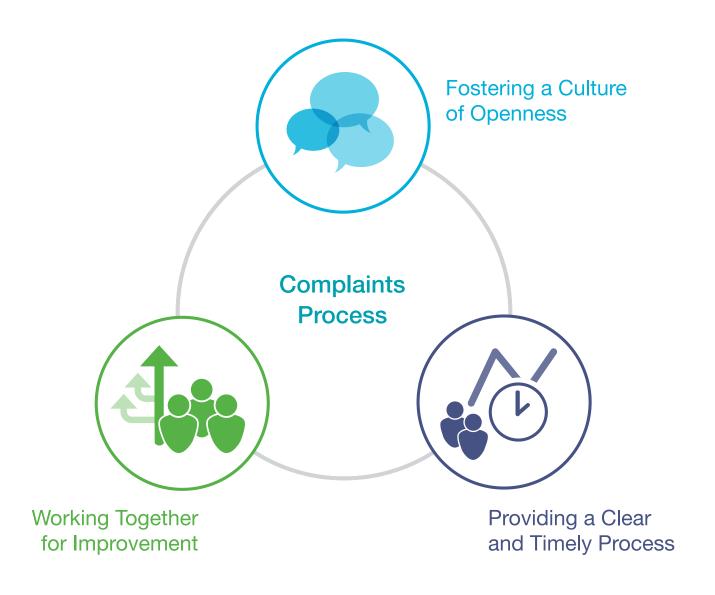


Figure 1. Guiding principles for improving complaints processes in long-term care homes



Fostering a Culture of Openness

The long-term care facility is the home of the resident and should be operated as such, as outlined in the Fundamental Principle of the *Long-Term Care Homes Act, 2007:*

"The fundamental principle to be applied in the interpretation of this Act and anything required or permitted under this Act is that a long-term care home is primarily the home of its residents and is to be operated so that it is a place where they may live with dignity and in security, safety and comfort and have their physical, psychological, social, spiritual and cultural needs adequately met." When a facility becomes "home", staff at all levels should be receptive to the ideas and perspectives of residents and families, and maintain an environment that empowers residents and their families to raise concerns freely and contribute to making the home a better place to live. In addition to empowered residents, the home's culture needs support empowered staff as well – to address issues on the spot, not necessarily work through a hierarchy of process and people to address and resolve a resident's or family's issues.

With a culture of openness, the resident and their family members will be more comfortable with identifying themselves as they make a complaints, which can facilitate dialogue and resolution to a greater degree than when complaints are anonymous.

Long-Term Care Homes Act, 2007, c. 8, s. 1.



Providing a Clear and Timely Process

Having a simple and responsive process, supported by staff and leaders, allows residents to voice complaints and be kept informed of the progress of complaints through to resolution. A well-communicated process that is easy to follow and results in timely responses to concerns is essential to a successful complaints process. The *Long-Term Care Homes Act, 2007* and Ontario Regulation 79/10 outline some specific requirements for homes (e.g., timelines) with regard to having a clear and timely process. A triage system to classify the complaints received to ensure that serious or critical complaints are addressed as soon as possible may be necessary.



Working Together for Improvement

Staff at all levels must view residents and family as potential partners and collaborators, rather than potential complainants and critics. Staff engage residents and their families in multiple ways to drive improvements in processing complaints, concerns, and compliments.

The complaints process is often a *reactive* process, with staff responding to resident complaints as they arise. In addition to responding to these complaints, it is important for homes to work *proactively* to engage residents and their families in improving their care. Such engagement can lead to issues being identified and improved upon before they result in complaints. This includes using advanced engagement methods that shift the staff/resident relationship from one characterized by one-way consultation to one characterized by partnership, shared leadership, and decision-making.

Resident experience and quality of life in a home are enhanced through the collection and use of key standardized data on complaints. Feedback is collected, monitored, analyzed, and used to drive improvements. The complaints process is resident-centred, responsive to feedback from both residents and their families, and used to guide enhancements to care. Through measurement and public reporting, the complaints process is enhanced and long-term care providers share best practices within and among health care sectors.

Management teams in long-term care homes are mandated to work with Residents' Councils and Family Councils in specific ways. Investing time and providing opportunities for the respective Councils to become as strong, effective, and representative as possible is to the advantage of management teams so that the decisions that come through Councils are valid, reliable, and truly represent the collective voice. Management could consider providing training opportunities for Residents' Council Assistants, protecting several hours of their schedule each month to invest in assisting the Residents' Council. While Councils are independent of the home, most require substantial assistance from a skilled, committed, invested Residents' Council Assistant who is appointed by the Administrator.

Continuous Improvement in Complaints Processes

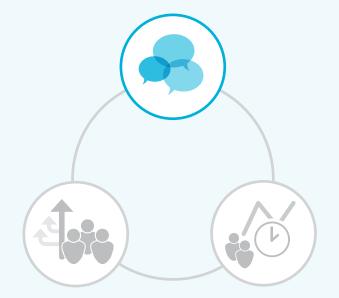
Using results from the complaints process and applying data and lessons learned helps to integrate the complaints process into the overall quality improvement goals of the home. These goals may then be incorporated into the home's annual Quality Improvement Plan.

For each of the three components of a successful complaints process, we discuss three points:

- The current state*4
- Identified improvement opportunities
- Strategies for improvement

The strategies for improvement sections were informed by a literature review of best practices as well as discussions with the long-term care associations in Ontario. Homes should implement the strategies that address gaps in their current state and lead to a more robust process. Standard quality improvement methods, such as the <u>Model for</u> <u>Improvement</u>,⁵ and applying and testing evidence-based change ideas to the local environment complete the cycle.

This survey was conducted by R.A. Malatest and Associates on behalf of Health Quality Ontario in the fall of 2015 for the purpose of identifying opportunities for improvement in the complaints process. The survey was conducted with input and support from the Ontario Long Term Care Association and the Ontario Association of Non-Profit Homes and Services for Seniors (now AdvantAge Ontario), and involved 92 licensed Ontario long-term care homes. A representative sample of for-profit and non-profit homes as well as small (160 beds or fewer) and large (more than 160 beds) homes was used.



Fostering a Culture of Openness

To ensure fair and accountable processes, it is essential that residents and their families are able to express their concerns and recommendations for improvement freely, without fear of reprisal, undue influence, or discrimination. A successful complaints process is resident-centred, outcome-oriented, considerate of the complaints resolution preferences of residents, and driven by a desire to improve quality of care. Responding to complaints and concerns both meets and goes beyond regulatory requirements.

Key strategies include the following:

- Ensure senior leadership support
- Formally assign a delegate for complaints
- Ensure the process is resident-centred
- Engage residents and staff
- Promote the complaints policy
- Provide staff education



Formal complaints policy and roles

All long-term care homes surveyed have a formal policy in place for handling complaints. Almost all homes have a person or team responsible for handling complaints; however, only half have formally assigned this role. This role is combined with other responsibilities (i.e., no homes have staff exclusively delegated to this role).

Receiving complaints and feedback

Technological methods such as use of a specific email address for complaints and electronic forms for complaints are not widely used; for example, 39% of homes post information about the complaints process on their websites.

Responding to complaints

The specific practices employed by homes as they respond to complaints differ.

- Approximately half of long-term care homes inform complainants of other avenues for redress
- Less than 50% of homes always provide complainants with an opportunity to provide feedback on the complaints process, and 7% of homes never do so⁴



More work could be done to build a culture of openness where residents and families feel comfortable providing feedback. Forty-one percent of homes believe that both complainant and staff support can be improved. Other areas for improvement identified by homes included:

- Reducing complainant fear of reprisal (39%)
- Encouraging complaints to be brought forward (35%)
- Being transparent to both complainants and staff (34%)⁴



Variation exists in current practices among long-term care homes, although many homes agree that this process can be improved. Organizations can compare what they are currently doing with the following best practices and make improvements required to create a culture of openness.

Ensure senior leadership support

Leadership from those in authority is the most influential factor in changing attitudes and culture in an organization.⁶ To build a culture of openness, organizational senior leadership and the governing board must:

- Support front-line staff by fostering a culture of quality and encouraging feedback from residents⁷
- Commit to supporting the complaints process top-down and acknowledge the right of residents to voice complaints when dissatisfied
- Drive the development and promotion of practices that support a culture of accountability and transparency
- Support Residents'/Family Council staff liaisons with specialized training, e.g., facilitation methods, de-escalation techniques, empathetic communication, and tips on dealing with compassion fatigue
- Demonstrate that complaints data is used to drive organizational improvements
- Ensure that complaints policies are consistent with strategic goals, operational plans, performance standards, code of conduct (i.e., respect for complainants), and quality improvement and risk management programs⁸

Formally assign a delegate for complaints

Good complaints management requires someone with the specific responsibility of making it work.⁶ When possible, long-term care homes should:

• Formally assign a delegate responsible for the complaint handling process and procedures

- Have hiring practices and training to ensure the delegate has the appropriate skills, competencies, and education to appropriately deal with complaints
- Allocate the appropriate resources and budget required to effectively manage the process
- Make the delegate contact information widely available to residents and their families to forward complaints to and ensure complaints are appropriately directed⁷

An effective delegate needs to:

- Be impartial, ethical, fair, and maintain confidentiality
- Establish a good working relationship with residents who voice complaints⁹
- · Acknowledge complaints within a set timeframe
- Help manage the expectations of residents, families, their respective councils and long-term care home staff with regard to the complaints management process and their roles within it
- Emphasize the restoration of broken trust and harmed relationships for residents who voice complaints e.g., speak first about how to repair harm that was done, rather than speak about discipline or punitive measures
- Have sufficient authority to address the issues brought forward through the complaints process
- Report to senior executive(s) who have the authority to follow up on significant issues
- Be accessible to residents and their families e.g., promote drop-in hours for in-person discussion, use anonymous drop-boxes
- Be linked to quality improvement, risk management and compliance within the organization

Ensure the process is resident-centred

The complaints process should:

- Acknowledge and respect residents' rights to voice complaints and welcome feedback from residents and family members
- Accept complaints in a variety of formats e.g., anonymous complaints in suggestion boxes, online forms, emails
- Demonstrate the organization's commitment to resolving concerns and complaints
- Listen to and respect the opinions of residents, and communicate with empathy, patience, and respect to enhance the ongoing relationship between staff and residents
- Provide an opportunity for complainants to provide feedback on the home's response to the complaint
- Inform the complainants of alternate avenues for redress
- Value and take action on feedback as part of the home's commitment to continuous improvement

Engage residents and staff

Involving, consulting, and partnering with residents, families, and staff is critical to the development of an open culture and should include:

- Raising the overall awareness of the formal complaints policy and procedures that outline what is expected of staff⁶
- Incorporating resident, family, and staff storytelling as a creative way to identify and share key concerns and complaints
- Investing in the ability of Residents' Councils to be the best collective voice of residents as possible (provide opportunities for training, education, and relationship building between all residents so that residents who cannot speak for themselves are represented well by residents who are capable of participating in meetings)

- Engaging residents and staff in the development and review of the complaint process – e.g., one-on-one debriefs, surveys, discussions with Residents'/Family Councils³, town halls, and focus groups
- Involving physicians, nurses, and allied health professionals in the complaints process to the extent that they consider it a component of their role⁷
- Notifying staff who are the subject of the complaint
- Improving internal and external communication to both residents and staff regarding the complaints process
- Implementing a post-complaint survey to gather feedback on the process and level of satisfaction
- Leadership that champions or acts as a catalyst for openness by listening to concerns from residents and families

Promote the complaints policy

Welcoming feedback and comments regarding the quality of service and care can help reduce the reluctance many residents and families feel toward making complaints. To do this, consider:

- Actively promoting the message through policy that the organization values and utilizes feedback for improvement and marketing a culture of openness through posters, websites and social media.
- Sharing positive experiences through resident relation stories from the Residents' Council and case studies to demonstrate an effective resolution process

Provide staff education

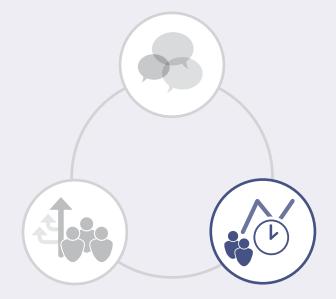
Staff are the backbone of an effective complaints management system. The environment around receiving complaints can be improved through staff education on:

- How to receive feedback and manage resident complaints in a friendly and non-defensive manner
- Training regarding a complaint-friendly culture that encourages a positive attitude towards complaints
- Providing reassurance to residents and families that they will not be treated differently for making a complaint
- Principles and practices for meaningful resident and family engagement
- Health equity and cultural sensitivity, characteristics of diversity, health literacy, and clear communication

Spotlights from the 2017/18 Quality Improvement Plans

Craiglee Nursing Home described doing an evaluation and analysis of trends on surveys and complaints, focusing on areas that arise most frequently. Minutes from resident council and family info night meeting will reflect discussion of trends in the home as presented by management. The minutes will indicate issues and actions that were discussed, and will be posted on general information boards and Residents Council board. The goal is for residents and families to be aware of the trends of complaints in the home.

West Park Long-Term Care Centre offers disclosure meetings with residents and their families for all written complaints or verbal reports of serious concerns. This involves face-to-face meetings or teleconferences as check points along the path during the investigation, provision of a disclosure letter, and checking in with family shortly after to ensure the matter is resolved and there are no unforeseen fall outs from the matter.



Having a Clear and Timely Process

Long-term care homes should have processes in place for receiving, reviewing, and attempting to resolve resident and caregiver complaints in a clear and timely fashion.

Key strategies for improvement include the following:

- Follow an appropriate process for resolution
- Strive for a timely process
- Educate and empower staff
- Support the complainant
- Use standard definitions and categories
- Use standardized metrics to track performance



Complaints management practices

All long-term care homes have a formal complaints policy in place and are consistent in their approach to handling complaints, thus meeting and often going beyond legislative requirements. There is variation among homes with regard to the practices that underlie their policies. Most homes provide counselling to staff who are the subject of a complaint (74%) and train staff on the complaints handling process (79%).

Data collection

Homes collect a large amount of data as per legislation. Data collected includes the number of complaints by origin, nature of concern and department, and staff training counts.

Training

- Nearly all homes are providing training on how complaints are filed, addressed, and investigated to all care and administrative staff. This training is provided in orientation and reinforced during staff meetings and in-person sessions. Only one-third of physicians working on contract are trained in the complaints process.
- 96% of homes train staff on how to deal with complaints at the point of origin, and 92% of homes train staff on how employees and complainants are protected from reprisal for raising concerns

- The majority of homes provide staff training beyond legislation, such as:
 - When to encourage a resident or family to launch a complaint (64%)
 - Advising residents of other avenues available for redress (62%)
 - Staff rights when complaints are filed (60%)
- 36% train on how to accommodate those with special needs⁴



Having a process that is clear, simple and easy to follow is imperative to an effective and expeditious complaints process. The following best practices support quality improvement in the complaints process in long-term care homes and help create standards and practices that are more consistent across organizations.

Follow an appropriate process for resolution

- Complaints should be assessed to determine the most appropriate and effective resolution. Consider the following criteria:¹¹
 - Seriousness of the issues
 - The complainant's unique wishes and preferences
 - Relevant legislation pertaining to the concern

- Applicable law, regulations, standards of practice/guidelines
- Current system challenges and constraints
- Fair outcomes should be provided with a range of possible solutions offered to the complainant.¹¹ Listening, explaining, and providing an apology as appropriate may resolve issues in many circumstances.⁶
- It may be that not all complaints can be resolved to the satisfaction of the complainant (for example, for issues that are beyond the control of the home); however, it's important to ensure that the process and investigation are impartial and complete, and that documentation reflects this
- An explanation of the resolution/outcome, reason for the decision and processes followed should be provided¹¹
- Escalation criteria should be clearly defined¹¹

Strive for a timely process

It is important to take action in a timely manner when acknowledging, responding to, and resolving complaints.

- Staff should be empowered to resolve complaints at the first point of contact¹¹
- Important steps in the complaints management process are: listen, resolve, record, analyze, and improve⁶
- Unnecessary delays in the complaints process should be identified and mitigated as they lead to resident dissatisfaction and inhibit the improvement cycle¹¹

- The home should establish targets and communicate timelines to acknowledge, respond to, and resolve complaints.⁷ A triage system to classify the complaints received to ensure that serious or critical complaints are addressed as soon as possible may be necessary
- Acknowledgment of complaints should occur within a targeted timeframe and complainants should be kept informed of the progress of the investigation, which includes:⁷
 - Acknowledging complaints in writing within a targeted timeframe – e.g., two days, five days, 10 days
 - Collecting pertinent facts during the first meeting, outlining the process that will follow, and making suggestions for resolution
 - Developing a process for updating the complainant and making accommodations for residents who cannot receive written replies
 - Providing regular opportunities for the complainant to communicate with the delegate and ask questions

Educate and empower staff

Long-term care homes should ensure staff have the appropriate skills, competencies and supporting education to appropriately manage complaints, which include:

- Training in effective communication, decision making, complaint handling, and dispute management to appropriately address complaints at the point of care
- Flexibility in the process while maintaining consistency with regard to fairness and communication⁷

- Adaptability that takes the individual needs of residents into consideration
- Training on the escalation process as required

Support the complainant

Information on how to initiate a complaint and the process used to investigate a complaint should be clear, open, and easily understood.

- The process must be simple to follow, presented in plain language and readily available¹¹
- Information should be presented and available in a variety of formats, e.g., written brochures in various languages, videos, web sites and signage¹¹
- Staff must be able to assist complainants in lodging their concern as required¹¹
- Consideration must be given to residents who have accessibility needs related to literacy and language skills, linguistic backgrounds, and physical, mental, cognitive, and sensory abilities
- Representatives supporting complainants should be welcome as they can help reduce stress and anxiety for the resident when making a complaint
- Complainants must be kept informed and aware of the status of their complaint throughout the investigation⁷

Use standardized metrics to track performance

Standardized metrics should be introduced to track performance. Health Quality Ontario has developed a set of indicators for monitoring and improving the complaints process (Box 1).

Use standard definitions and categories to collect data

A clear and timely complaints process can be developed by using standardized definitions and categories for complaints, which provide a simpler and more structured process and support benchmarking, process efficiency and consistency. Categories for classifying complaints as well as actions taken in response have been developed by Health Quality Ontario (Box 1).

1. Indicators and categories for monitoring and improving the complaints process

Health Quality Ontario's Patient Relations Advisory Group has recently identified four patient relations/complaints process performance indicators (Table 1), as well as a set of standard categories for classifying complaints and the actions taken in response to the complaints.

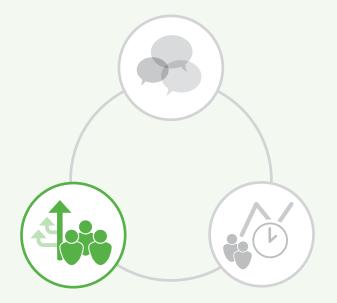
These draft indicators and categories have been pilot tested in homes across Ontario, and are meant to standardize complaints data collection among long-term care homes and across the health system. We encourage homes to align their data collection and reporting with these indicators and categories in order to support improved performance. One of these indicators (#2 – time to complaints acknowledgment) has been added as an additional indicator to the 2018/19 Quality Improvement Plans. The four indicators are presented in the table below.

For more information

- The <u>indicator specifications</u> provide full details on the indicator definitions and categories
- Our <u>information sheet</u> summarizes the results of the pilot testing of these new indicators, how these indicators have been developed, and how they will be used in the future

Framework Component	Indicator	Description
Fostering a culture of openness and transparency	Indicator 1: Complaints received	 Rate of complaints received per 1000 residents Percentage of complaint issues received by complaint category
Having a clear and timely process	Indicator 2: Time to complaints acknowledgement	 Percent of complaints acknowledged to the person who made the complaint within two, five, and 10 business days
	Indicator 3: Complaints closed	 Percentage of complaints closed within 30 calendar days and 60 calendar days
Working together for improvement	Indicator 4: Action taken in response to a complaint	 Percent of actions taken by a provider in response to a complaint by action category

Complaints process indicators



Working Together for Improvement

Continuous improvement is an essential part of an effective complaints management system and requires staff and residents to be involved in the process. Long-term care homes recognize the need to better use resident complaints, concerns and general feedback to drive improvement. A major limitation to understanding all resident concerns, however, is the high and increasing rate of cognitive impairment among residents of long-term care homes.

Key strategies to improve include the following:

- Engage residents and Residents' Councils
- Engage families and Family Councils
- Improve data collection and storage
- Track performance using standard indicators
- Discuss complaints data to support quality improvement
- Foster an environment of quality improvement and continuous learning



Reporting on complaints

- Ontario Regulation 79/10 under the *Long-Term Care Homes Act,* 2007 requires that homes review and analyze complaint data for trends on a quarterly basis
- There is variation among homes in their involvement of quality and risk committees in their complaints process
- Among homes with formal complaint resources, most have these formal complaint resources report to administration (63%) and/or a quality or risk committee (63%)⁴

Managing data

- Homes do not collect complaint data consistently, which impacts the ability to measure performance and drive quality improvement across the long-term care sector
- Homes vary considerably in how complaints data is stored

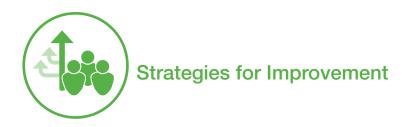
Analyzing data and tracking performance

 As per legislation, most homes are collecting large amounts of data; however, much of the complaints data that is collected is not being used to track performance. Just over half of homes actively track metrics such as origin, nature of concern, department, and staff training counts to measure their performance

- 37% of homes track complainant satisfaction with the complaints process
- Less than a quarter of homes (21%) are tracking the number of organizational changes that result from complaints
- A key issue effecting a home's ability to track all complaints is that some complaints are made directly to the Ministry of Health and Long-Term Care via the Long-Term Care ACTION Line and Independent Complaints Facilitator. Homes are not notified of all complaints data received by the Ministry of Health and Long-Term Care. Therefore, a home may not be aware of the total number of complaints made by residents⁴

Staff training

- Approximately two-thirds of homes (65%) train staff on how complaints are tracked
- 41% of homes train staff on how complaints lead to organizational changes
- 32% train staff on how complaints information is stored, accessed, and deleted⁴



Engage residents and Residents' Councils

Through ongoing engagement with residents aimed at understanding their needs, long-term care home staff can work to reduce, anticipate, and avoid events that lead to complaints. Staff should strive to:

- Include the voices of residents on *all* committees that will make decisions that materially impact the resident experience. To ensure resident perspectives are fairly represented, include two or more resident advisors at all times
- Schedule routine meetings with Residents' Council members to identify and discuss challenges, barriers or problem areas as they arise – e.g., town halls, focus groups, one-on-one interviews, anonymous surveys, or drop-boxes
- Attend Residents' Council meetings, as requested or agreed upon, to share a list of recent complaints. Work with council members to identify root causes and trends that lead to complaints, and co-design interventions
- Involve the Residents' Council in quality improvement initiatives
 e.g., menu design, falls prevention, laundry policies

Engage families and Family Councils

Complaints processes should not just involve residents. Family members and Family Councils should play an important role in mediating and helping to avoid complaints. Staff should strive to:

- Check in with families who request or require more support. This will help staff build open lines of communication with family members with more complex needs
- Understand the limits of family roles and responsibilities as they relate to substitute decision making or power of attorney requirements
- Encourage family members who are more experienced to share their insights and expertise with those with less experience through co-leading site tours, taking part in admission processes, or leading peer-to-peer mentorship
- Partner with Family Council members on quality improvement initiatives
- Understand the limits of families and Family Councils so as not to overburden them or cause them to think it is their responsibility to fix or resolve complaints in the home

Improve data collection and storage

Methods should be employed to record, monitor, and analyze data in a way that makes reviewing trends in complaints data efficient.

- The system employed must be able to collect, track, and report complaint information, outcomes, progress timelines, actions taken, and recommendations¹¹
- Standardized tools/processes (e.g., incident management systems) could be used to collect data on defined indicators
- Adopting electronic data collection and storage would allow homes to quickly determine the status of each complaint, track milestones in the process and analyze trends.
 Databases can increase reliability and enable more advanced performance tracking

• Regular reports can be created and reviewed by staff and management to identify what is working well as well as areas for improvement

Tracking performance using standard indicators

A standardized tool or process should be considered to collect data on defined indicators related to the complaints process. Indicators developed by Health Quality Ontario are presented on page 21.

Discuss complaints data to support quality improvement

Providing structured information to staff and management is a catalyst that generates discussion and supports quality improvement.

- Complaints data should be reported to a quality committee responsible for organizational improvements and the development of the home's <u>Quality Improvement Plan</u>
- Complaints and incidents can be a standing item on management agendas for discussion⁶
- Complaints and incidents should be shared with Residents' Councils
- Reports can include data such as: number and type of complaints and in what area; trends; complaints identifying systemic problems; risk ratings; time to resolve complaints; outcomes achieved; and recommended improvements⁶

Providing updates and information to the public on improvements made as a result of the complaints process can encourage residents to share feedback and concerns more readily.

Foster an environment of quality improvement and continuous learning

As long-term care homes manage their complaints process, they should utilize complaints feedback and trends and combine this with a culture of quality improvement to improve service delivery and quality of care.

- Use data gathered from the complaints process to identify one-time, recurring, and system trends to guide quality improvement and risk management initiatives within long-term care homes
- Use information from complaint investigations for organizational planning and to inform training and professional development¹²
- Monitor the performance of the complaints process against the complaints resolution policy¹¹
- Share recommendations from complaint investigations with appropriate parties for learning, dissemination of best practices, and improvement opportunities¹¹
- Share changes made to care delivery as a result of the complaints process, demonstrating a commitment to accountability and transparency¹¹

Conclusion

This guide was produced to present best practices and provide long-term care homes with effective strategies for enhancing their existing complaints process to further improve resident experience and quality of care. It summarizes opportunities and strategies for improvement in the three core components of the complaints process (fostering a culture of openness, having a clear and timely process in place, and working in collaboration with residents and their families for improvement). As homes work to evolve their complaints processes, we encourage them to utilize these strategies for improvement as well as the indicators developed by Health Quality Ontario's Patient Relations Advisory Group.

There is opportunity for shared learning as homes reflect on their complaints processes; we encourage homes to report on their work to enhance their complaints processes in their Quality Improvement Plans, and consider sharing their work on <u>Quorum</u>, Ontario's online community of practice for quality improvement. Through collaboration among long-term care homes, residents, families, and associations, we can continue to support the improvement of complaints processes in long-term care homes across Ontario.

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