BOARD OF DIRECTORS

Health Sciences North / Horizon Santé-Nord

ISSUED BY:	Board of Directors		
AUTHORIZED BY:	Board of Directors	NUMBER:	III-3
ISSUE DATE:	November 9, 2004	REVISION DATE:	,
		REVIEW DATE:	May 25, 2021
CATEGORY:	Part III – Ensure Program Quality and Effectiveness	PAGE:	1 of 2
SUBJECT:	PATIENT RELATIONS PROCESS		

Through amendments to the *Excellent Care for All Act, 2010*, the government established a Patient Ombudsman in Ontario to help people with unresolved complaints about their care in Public Hospitals, Long-Term Care Homes and Community Care Access Corporations. The functions are:

- Respond to unresolved complaints from patients as well as their caregivers about their health care experience at a hospital
- Investigate a health sector organization
- Make recommendations to a health sector organization following the conclusion of an investigation
- Report to the Ministers of Health and Long-Term Care on his or her activities and recommendations annually and provide reports to Local Health Integration Networks as appropriate

From time to time, the Ombudsman may require any officer, director, to: provide information or produce any documents related to the matter under investigation or be summoned and examined under oath.

In accordance with the *Excellent Care for All Act, 2010*, the Board is accountable for ensuring that:

- There is an effective, impartial, easily accessible, confidential patient relations process;
- Information is publically available on how patients and their families can raise concerns about their experiences during care delivery and provide feedback;
- The patient relations process reflects the content of the Health Sciences North patient declaration of values.

The Quality Committee will monitor trends in the quality of patient's experience, to ensure that the organization is using this information to identify opportunities for process and system improvements that meet the needs and expectations of patients.

A complaint letter related to patient care that is received by either a member of the Board or any member of a Board committee will be managed using the following process.

- 1. The original complaint letter will be sent to the CEO and a copy to the Chair of the Board.
- 2. The Board Liaison Officer will send an acknowledgement letter from the Chair and a copy of the C.A.R.E. patient complaint pamphlet to the sender.
- 3. The original complaint letter and a copy of the acknowledgement letter will be sent immediately to Patient Relations.
- 4. The complaint will be managed from this point forward by Patient Relations. The Board will not review individual complaint letters.
- 5. The Quality Committee will report trends to the Board.

References and Related Documents

Excellent Care for All Act, 2010 Regulation 188/15, Patient Relations Process