

Yee Hong Centre for Geriatric Care

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Effective Date: July 2004	Subject Name: Privacy - Complaint Process		Approval: CEO
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PURPOSE

In keeping with the provisions of the Yee Hong Privacy Policy, CGA-III-14, this policy sets out the mechanism for resolving potential and actual disputes regarding the protection of personal health information collected, used, disclosed, and retained by and for the Yee Hong Centre for Geriatric Care (the Centre).

POLICY

1. The Centre works in partnership with clients, families, significant others, and volunteers to resolve privacy complaints in a fair and equitable manner, within the context of available resources.
2. The Centre will investigate all complaints promptly.
3. If a complaint is found to be justified, the Centre will take appropriate remedial measures, including amending its policies and practices.

PROCEDURES

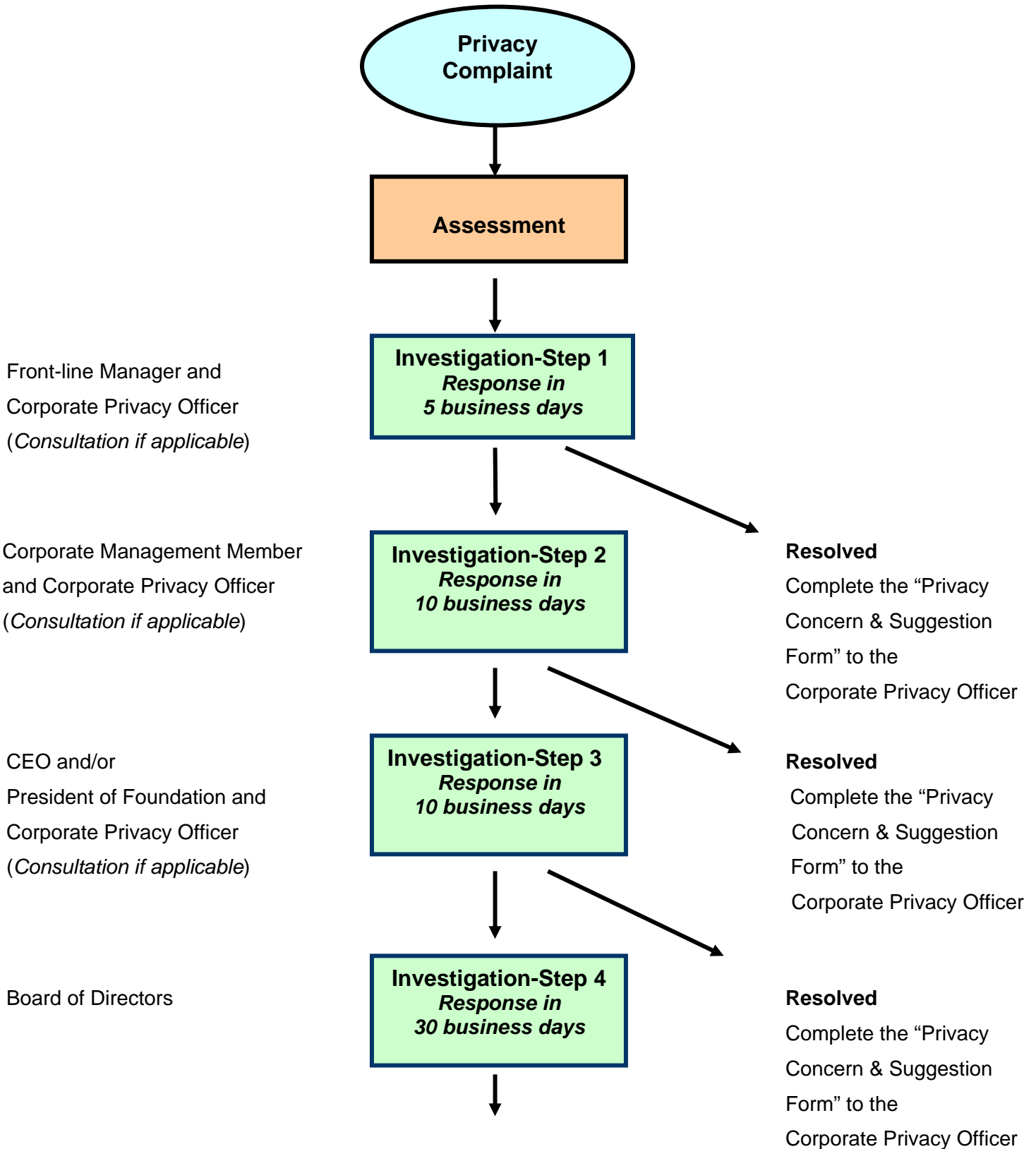
1. Individual(s) who make inquiries or lodge complaints of the privacy practice shall be informed of the existence of complaint procedures provided for under this policy.
2. All complaints from clients, family members or volunteers will be addressed initially by the front-line manager of the department/division, who will serve as the investigator.
3. All complaints must be dealt with in a courteous and respectful manner. The investigator makes every effort to resolve the concern by:
 - 3.1 Meeting with the complainant and/or participant to discuss all details pertaining to the privacy complaint.
 - 3.2 Allowing the complainant and/or participant to express his/her concerns prior to giving a response.
 - 3.3 Documenting all concerns and potential solutions in the "Privacy Concern and Suggestion" form (see attachment).
 - 3.4 Conducting a thorough review and investigation of all aspects of the privacy complaint with other parties who may have been involved.
 - 3.5 Consulting with the departmental/divisional privacy leader or the Corporate Privacy Officer and or the immediate supervisor to explore the feasibility of any other solutions.

4. Client, family, significant other or volunteer who has a complaint concerning the Centre's privacy practice should follow these sequential steps:
 - 4.1 Step 1 – Addressing with Frontline Supervisor/Manager

Bring complaint to the attention of the frontline manager of the department/division

 - 4.1.1 Complaints at this step will be addressed promptly within 10 working days after the complaint is received. If unable to complete the investigation within the time frame, the investigator shall inform the complainant and all others involved in the process of the delay and the expected time of completion.
 - 4.2 Step 2 – Addressing with Division Head
 - 4.2.1 If a satisfactory solution cannot be achieved, the complainant may contact directly by phone or in writing, and request a personal meeting with the Executive Director concerned or the Director of Social Services (members of the Corporate Management Team).
 - 4.2.2 During Step 2 of the investigational process, the Executive Director concerned, or Director of Social Services, meets with the client and/or responds in writing within 10 working days.
 - 4.3 Step 3 – Addressing with the CEO and/or Foundation President
 - 4.3.1 Complaints that cannot be resolved at Step 2 will be referred to the Chief Executive Officer (CEO), and/or President of the Yee Hong Community Wellness Foundation.
 - 4.3.2 In Step 3 of the investigational process, the CEO and/or Foundation President, in consultation with the Corporate Privacy Officer, meets with the client and/or responds in writing within 10 working days.
 - 4.4 Step 4 – Addressing with the Yee Hong Centre Board of Directors
 - 4.4.1 If Step 3 of the process does not yield a satisfactory solution the complainant may contact the Chair of the Board of Directors in writing.
 - 4.4.2 The Chair of the Board of Directors may refuse to deal with the issue if the previous steps have not been followed.
 - 4.4.3 If all the previous steps have been followed and the issue has not been satisfactorily resolved, a meeting may be held with the Board Chair, the Executive Director of the Centre concerned or Director of Social Services, the Corporate Privacy Officer, and the client.
 - 4.4.4 The decision rendered by the Board Chair on behalf of the Board will be final.
5. All privacy complaints from staff will be addressed initially by the Director of Human Resources with the Executive Director concerned or Director of Social Services.
 - 5.1 Complaints that cannot be resolved will be referred to the CEO in consultation with the Corporate Privacy Officer (if applicable).
6. All complaints, including discussions involved in the resolution process, and documentation will be treated as confidential.
7. Whenever a privacy complaint is resolved, a "Privacy Concern and Suggestion Form" is to be completed by the most senior supervisor/manager involved and submitted to the Corporate Privacy Officer for record purposes and inform policy review where necessary.
8. For more information about the Ontario provincial privacy complaint process, a concerned individual or organization can contact the Information and Privacy Commissioner (IPC) of Ontario at 416-326-3333 or 1-800-387-0073 or visit their Web site at www.ipc.on.ca

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Communication to the Ontario Information and Privacy Commission