

Board Policy

Subject: Donor Complaint and/or Concerns	Policy No.: #200-3
Section: Donor Relations	
Approved by: Board of Directors	Date Approved: June 20, 2018 June 18, 2014
Reviewed by: Executive Committee	Date Reviewed: June 8, 2018 June 4, 2014

FOUNDATION VISION STATEMENT:

Our donors will have a personally fulfilling giving experience, confident they are improving the lives of the people touched by St. Joseph's care, teaching and research.

DEFINITION:

For the purposes of this policy, a complaint or concern is defined as an expression of dissatisfaction (communicated in writing or verbally) from Foundation supporters external to the organization (*i.e. donors, volunteers, and gift-in-kind supporters as appropriate*), about the service, actions, or lack of action, by St. Joseph's Health Care Foundation as an organization, or by a staff member and/or volunteer acting on behalf of the Foundation.

PURPOSE:

From time to time, the Foundation may receive concerns or complaints about the quality of service related to Foundation operations, about Foundation policies and/or procedures, or the conduct of or its representatives.

As an organization accredited in *Imagine Canada's Standards Program* (www.imaginecanada.ca/), St. Joseph's Health Care Foundation encourages and welcomes all stakeholder feedback.

The purpose of this policy is to create a timely, transparent, and effective process of receiving, responding to and resolving, concerns and complaints made by stakeholders, to ensure the integrity of the Foundation and the St. Joseph's brand.

Note: This policy does not apply to stakeholder concerns relative to clinical care or service of St. Joseph's Health Care London; such concerns should be made directly to Patient Relations, or to

PROCESS:

1. Communicating & Receiving Complaints/Concerns

- 1.1 Most concerns and complaints can be resolved quickly and easily, often at the time they arise, by speaking with a Foundation representative.
- 1.2 Complaints may be received by phone, email to an individual staff member or message to the main Foundation email address, Canada Post mail, or in person.
- 1.3 Complaints made to St. Joseph's Health Care Foundation will initially be handled by the staff person who receives the complaint, who will do their best to immediately respond to the concern raised. Should it be warranted, other Foundation staff, senior leadership or board members may also be involved in addressing, and/or resolving the complaint/concern.

All complaints will personally receive an initial response from the Senior Development Officer responsible for donor relations within one business day, of receiving the complaint/concern.

- 1.4 All complaints will be fully investigated; if further time is required to gather information, the complainant will be advised of the additional time required and when the next point of contact on the subject can be expected. Actions taken by the Foundation to resolve the complaint/concern will depend on the nature of the reported complaint/concern.
- 1.5 Each stakeholder complaint is unique, and the Foundation will handle each allegation reported pursuant to this policy with respect and discretion. If the facts warrant it, the Foundation will take corrective action or disciplinary action equal to the severity of the complaint.

2. Anonymous Complaints

- 2.1 Thorough investigation often relies on the ability to gather additional information. The Foundation encourages stakeholders to include their names and contact information on all complaints filed. The Foundation will explore anonymous complaints to the extent possible, but will weigh the prudence of continuing an investigation against the likelihood of confirming the alleged facts or circumstances from attributable sources.

3. Complaints Related to the Work of the Hospital

- 3.1 Complaints regarding St. Joseph's Health Care London, and/or any of its associated care programs will be directed to Patient Relations and/or Corporate Communications & Public Affairs at St. Joseph's Health Care London as appropriate, and addressed in compliance with established corporate policies and procedures.

4. Continuous Improvement

- 4.1 The Foundation will keep a record of all complaints received. Such data will be reviewed annually to determine whether there are recurring complaints of a similar type. If there are, a review will be initiated to determine if there are changes that need to be addressed to eliminate recurring incidences.

5. Report to the Board

- 5.1 As prescribed by Imagine Canada Standards, management shall report annually to the Board of Directors, the number and type of complaints/concerns received through the year, the steps taken to achieve resolution and to mitigate repetition.