

PATIENT COMPLAINT PROCESS

CCMSU Medical Imaging is committed to providing the patients and referring physicians with excellent customer service and high-quality medical imaging and we understand that customer service is an important component of the culture we are striving to create.

The purpose of this patient complaint is to create a transparent method of responding to patients, physicians and other external complaints in a fair manner that leads to a fast resolution of all complaints, grievances, and other issues to the best of our abilities. Patients and their legal representatives have the right to express concerns about the quality of care or service received at CCMSU Medical Imaging by presenting a complaint. We encourage the resolution of concerns by speaking directly with a designated staff member.

CCMSU Medical Imaging will perform an investigation of the grievance/complaint and within seven (7) calendar days, the patient or their representative will receive a written notification from our office that their grievance/complaint was resolved, or that CCMSU Medical Imaging has done their best to resolve the issues.

The investigation process includes, but is not limited to:

- a) Informing the patient/s or their legal representative that the investigation process has begun;
- b) Speaking with the patient or their legal representative, in a confidential setting, to better understand the concerns;
- c) Reviewing all necessary EMRs connected to the patient/visitor that has the complaint/grievance;
- d) Collaborating with the patient on a possible solution

Information that is required for the investigation process:

- a) Name of the person filing the complaint or, if they have a legal representative the full name, email address, mailing address and relationship to the patient. Proof of legal representation must be shown at the time of inquiry.
- b) Description of the event/incident
- c) How you became aware of the situation (if you were not directly involved or witnessed the situation firsthand)
- d) All facts related directly to the incident.
- e) Did you speak to someone at the facility or, did someone at CCMSU Medical Imaging assist at the time when the incident occurred?

What to expect from the investigation process:

- a. CCMSU Medical Imaging will send an email or letter to the patient/legal representative with an update on the complaint/grievance status.
- b. Once the investigation process is completed, we will send an email/letter to the patient/legal representative with the outcome of the investigation.
- c. If a resolution is reached, we will inform the patient/legal representative.
- d. If a resolution is not reached, we will provide the patient/legal representative with instructions on the next steps.
- e. If it is impossible to resolve the issue, we will provide the patient/legal representative with the contact information of the ICHSC's governing bodies.

Please note that CCMSU Medical Imaging keeps all information confidential and adheres to the Information Protection Act and PHIPPA unless required to be released by law. Please note, that there are situations where access to records can be prohibited. For more information on this visit: <https://www.ipc.on.ca/health-individuals/accessing-or-correcting-your-personal-health-information/>.

If you are not satisfied with the outcome/response you receive, you can contact the Patient Ombudsman under the Excellent Care for All Act, 2010 (<https://www.ontario.ca/laws/statute/10e14>) for a review of your complaint after the organization has responded.

For more information, please visit <https://patientombudsman.ca/>.

Patient Ombudsman Toronto

Office Hours: Monday to Friday 9:00 am to 4:00 pm

Telephone Numbers: 416-597-0339; 1-888-321-0339; Fax: 416-597-5372

Mailing address:

Box 130 - 77 Wellesley Street West

Toronto, ON, M7A 1N3

Patient Complaint officer at CCMSU Medical Imaging is:

CCMSU MEDICAL IMAGING COMPLAINT FORM

At CCMSU Medical Imaging, we are strongly committed to providing exceptional service to all of our patients and referring community while delivering medical imaging services. We take all complaints seriously and aim to ensure that every aspect of our clinic's operations meets the highest standards.

If you have any concerns regarding the service you received, an experience with CCMSU Medical Imaging, or any other issue related to our clinic's operations, please don't hesitate to contact us. Simply send an email to info@ccmsu.com to connect with our Patient Complaint Representative who will address your concerns.

We guarantee to acknowledge and respond to all complaints, whether written or verbal, within seven (7) calendar days. If the complaint alleges any harm or risk of harm, we will take immediate and appropriate action to address the issue.

We appreciate your choice of CCMSU Medical Imaging, where we strive for excellence in every aspect of our service delivery.

First Name:

Last Name:

Email Address:

Telephone Number:

Type of complaint:

Please describe your complaint. Please use additional page if necessary.

Date:

Describe your relationship to the patient: