PATIENT COMPLAINT POLICY

Our facility is dedicated to providing high-quality medical imaging services and exceptional customer care. Recognizing the importance of addressing concerns transparently and fairly, we have implemented a comprehensive Patient Complaint Policy to ensure that all complaints from patients, their representatives, or referring physicians are handled promptly and professionally. This process supports a culture of continuous improvement and patient-centered care.

Purpose: The Patient Complaint Policy establishes a structured approach to addressing concerns related to the quality of care or service received. The goal is to resolve complaints efficiently while fostering open communication and maintaining trust with patients and their representatives.

Process Overview

Patients or their legal representatives have the right to raise concerns about care or services. Complaints may be submitted verbally or in writing to a designated staff member, who will document the issue and initiate the investigation process. The process is confidential and designed to address concerns respectfully and in compliance with privacy legislation.
Upon receipt of a complaint, an acknowledgment will be provided within five business days, and efforts will be made to resolve the matter promptly. In cases where a resolution is expected within ten business days, the complainant will receive a written response detailing the resolution and any actions taken. The complainant will be updated with an estimated resolution date for more complex issues requiring additional time.

Investigation Process
The investigation begins by notifying the complainant that their concern is being reviewed. Staff will gather all relevant details, including:

- The complainant's name or that of their legal representative, along with proof of representation if applicable.
- A description of the incident or concern, including all related facts.
- Information on whether the complainant previously discussed the issue with staff.

The process involves reviewing necessary medical records, interviewing involved parties, and collaborating with the complainant to explore possible solutions. The facility will maintain accurate documentation of all actions taken during the investigation.

Resolution and Follow-Up
Once the investigation is complete, the complainant will receive a written outcome. If a resolution is reached, the actions taken will be communicated clearly. If the issue cannot be resolved, instructions on further steps, including contact information for external governing bodies such as the Patient Ombudsman, will be provided.

Confidentiality and Record Keeping

All complaints are handled in strict confidentiality, adhering to the Personal Health Information

Protection Act (PHIPA). Records of complaints, investigations, and resolutions are retained for a minimum of three years and are accessible for regulatory inspection.

Continuous Improvement
The complaints process is regularly reviewed, with a quarterly analysis conducted to identify trends and areas for improvement. Staff are provided with training sessions to ensure they remain knowledgeable about the policy and procedures, promoting consistent and effective complaint handling.

For further assistance or to file a complaint, please get in touch with the designated Patient Complaint Officer.

If you are unsatisfied with the outcome, you may reach out to the Patient Ombudsman as per the Excellent Care for All Act, 2010, for additional review at the following information:
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