Complaints Policy

Department	Governance	Policy No.	GOV-14
Category	Data Management	New	November 22, 2022
Reviewed by	Management Team	Date Reviewed	April 8, 2026
Reviewed by	Governance and Nominating Committee	Date Reviewed	(X) November 22, 2022 (X) May 6, 2026
Reviewed by	Board of Directors	Date Approved	(X) December 7, 2022 (X) June 3, 2026

1.0 Policy Statement:

For Lakeridge Health Foundation (the "**Foundation**") to maintain the highest standard of public trust and integrity, it is expected that all staff and volunteers carry out their duties honestly, responsibly and in full accordance with the highest ethical and legal standards. We recognize that from time to time there may be concerns or complaints about the Foundation and we believe our public stakeholders have a right to share such concerns or complaints with us. We further believe that the process for resolving concerns and complaints should be timely, fair and respectful. Furthermore, complaints are a good source of data for continuous improvement.

2.0 Purpose:

The purpose of this Policy is to create a transparent and fair method of receiving and responding to external complaints.

3.0 Scope and Application:

This policy applies to the Foundation's external public stakeholders, such as donors and community volunteers, who have complaints relating to the Foundation (e.g. complaints about the quality of service of the Foundation's policies and procedures; the application or non-compliance by the Foundation of its policies and procedures; the conduct of the Foundation or its representatives).

Internal complaints by employees should be reported through management as appropriate.

Complaints related to Lakeridge Health should be directed to Lakeridge Health's Patient Experience, patientexperience@lh.ca.

4.0 Important Points about the Policy:

The Foundation will respond to a complaint and make every reasonable effort to investigate it as soon as possible. Complaints will be addressed in a fair and consistent manner. However, some complaints may require more effort to address. Dissatisfaction with the outcome of a decision should not form the basis for a subsequent complaint under this policy.

5.0 Process for Raising a Concern:

Many problems can be resolved easily and quickly, often at the time they arise. An individual with a compliant should contact such individual's Foundation Relationship Manager or contact the Foundation's general inquiries line at (905) 433-4339.

If a problem cannot be resolved in this way or if a member of the public wishes to make a formal complaint, a written complaint, which should contain details of the issue, should be submitted directly to our Privacy Officer at lhfprivacy@lh.ca or at Lakeridge Health Foundation, 1 Hospital Court, Oshawa, ON, L1G 2B9. Although a complainant is not expected to prove the truth of the allegations made in a complaint, a complainant should be able to provide enough information in the complaint to enable the Foundation to investigate.

Complaints made to Lakeridge Health Foundation will initially be handled by the Privacy Officer. As determined by the Foundation, another staff member and/or or a Board member may be assigned to handle the complaint.

Within three (3) business days of receiving a written complaint, the Foundation will contact the complainant to confirm receipt of the complaint.

The Foundation will then investigate the complaint and may seek further information from appropriate individuals (e.g., any officer, director, employee, contractor, volunteer, or stakeholder of the Foundation). The Foundation may also ask the complainant for additional information. The actions taken by the Foundation with respect to a particular allegation will depend on the nature of the reported violation.

Each case is unique, but the Foundation will handle any allegation reported pursuant to this Policy respectfully and with discretion. If the facts warrant it, the Foundation will take corrective action or disciplinary action equal to the severity of the complaint. The complainant will not be involved in the determination of the appropriate corrective or disciplinary action.

6.0 Reporting Back:

The Foundation will update a complainant as soon as possible after the matter has been reviewed and a determination has been reached. The complainant will be advised of the results of the review.

7.0 Anonymous Allegations:

Thorough investigation often depends on an ability to gather additional information. The Foundation encourages complainants to put their names to their inquiries. However, the Foundation understands that, at times, a complainant may not be comfortable being identified. The Foundation is committed to exploring anonymous inquiries to the furthest extent possible. In each investigation, the Foundation will weigh the prudence of continuing the investigation against the likelihood of confirming the alleged facts or circumstances from attributable sources;

without the ability to obtain further information from the complainant, the Foundation is less likely to be able to successfully investigate the matter.

8.0 Continuous Improvement:

The Foundation will keep a database of complaints received. The data will be reviewed to determine whether there are frequently recurring complaints of a similar type. If there are, an investigation will be initiated to determine whether there are systemic process issues within the Foundation that need to be addressed to eliminate reoccurring instances.

9.0 Report to the Board:

The Foundation's CEO shall inform the Board Chair as part of their regularly scheduled meetings of any new complaints. The CEO will then inform the Board of Directors at the next scheduled Board meeting of the number, type, and disposition of complaints received.

10.0 Policy Review:

This Policy will be reviewed every three (3) years by the Board of Directors or earlier if requested by the Foundation's CEO.

APPENDIX: Complaints Management Form

This is a public document in the 'Accountable to You' section of the Foundation's website.

APPENDIX: Complaints Management Form

COMPLAINTS MANAGEMENT

Your Name: Date: Time:

Name:		Phone Number:
RE #:		
Date of Complaint:	Time:	

Relationship to the Foundation:

☒ Donor ☐ Community ☐ Patient ☐ Hospital Leadership

☐ Politician ☐ Hospital Staff ☐ Other Charity ☐ Other

Level of Risk:

☐ **Negligible** ☒ **Minor** ☐ **Moderate** ☐ **Major** ☐ **Extreme**

Defined:

LEVEL	DEFINITION	RESPONSIBILITY
Negligible	no impact or risk to the Foundation	All Staff
Minor	resolved at point of contact	All Staff
Moderate	issue may require consultation with Foundation management for further assessment of complaint	Manager and CEO
Major	significant issue causing lasting detriment that requires investigation	Manager to CEO CEO and Board
Extreme	issues about serious adverse events, long term damage that requires investigation	CEO and Board

Stages:

- Acknowledgement of receipt of complaint within 72 hours
- Complaint assessment
- Complaint response
- Communicating the decision
- Complaint closed

Complaints data recorded and analyzed will lead to:

- Organizational improvement;
- Enhanced corporate governance;
- Better stakeholder relationships.