

Patient Care Quality Review Board Act

s. 6(1)(a) Ministerial Directive – The form and manner in which the health authority is to make public the existence and role of its complaint office, including information that is to be provided by the health authority in that regard

A health authority must:

1. Promote the Patient Care Quality Office (PCQO) and promote public awareness of the PCQO in the following ways:
 - a. Through print materials, signage and other necessary communication materials:
 - i. Communication materials are to provide information on hours of operation, contact telephone and fax numbers, website address, location of the physical PCQO, the process for making complaints, and for issues that are not resolved, how to contact the appropriate Patient Care Quality Review Board;
 - ii. Signage is to be located in health authority facilities where health care services are provided to the public; and
 - iii. Print materials are to be made easily available to all health authority clients, including clients in facilities that are funded, contracted or licensed by health authorities.
 - b. Through a link on the health authority's website and the website of affiliated agencies, which will:
 - i. Show as an easily identifiable icon on the health authority's homepage with information available no more than one layer beneath the homepage.
 - ii. Include information on hours of operation, contact telephone and fax numbers, email address, location of the physical PCQO, the process for making complaints, and for issues that are not resolved, how to contact the appropriate Patient Care Quality Review Board;
 - c. Through other means such as:

- i. Provincially-provided standardized templates to be used for brochures and signage in health authority facilities and service areas;
- ii. Inclusion of the BC Logo and other provincially-required graphic contents on all PCQO print material; and
- iii. Provision of written communications material in the languages appropriate to the client population.

s. 6(1)(b) Ministerial Directive – The locations at which care quality complaints may be submitted to a complaint office and the hours during which those locations must be available for the submission of care quality complaints

A health authority must:

1. Ensure that all current functions and personnel that address client complaints as their primary function are identified as Patient Care Quality Offices and Patient Care Quality personnel.
2. Establish one physical location for a Patient Care Quality Office (PCQO), which is capable of receiving complaints in person, by telephone, fax, mail and electronically.
3. Provide the means by which a PCQO is staffed and able to receive and respond to complaints at least 7 hours per day, Monday to Friday, excluding statutory holidays.
4. Report to the minister the locations of any regional offices supporting the PCQO.

s. 6(1)(c) Ministerial Directive - The means by which care quality complaints may be submitted to a complaint office, including submission in writing or by telephone, electronic mail, fax and internet, and the steps that must be taken and the facilities that must be provided by a complaint office to facilitate the submission of care quality complaints by those means

A health authority must ensure its Patient Care Quality Office (PCQO):

1. Provides the means to receive written complaints by mail, fax and electronically;

2. Provides the means to receive verbal complaints in person and by telephone, including via a toll-free telephone number and after-hours voicemail;
3. Provides reasonable assistance to complainants needing help with the submission of a written or verbal complaint; and
4. In the case of a complainant who intends to submit a written complaint, but is unable to do so, the PCQO must be reasonably available to record the complaint on the complainant's behalf and forward the required information to the PCQO.

s. 6(1)(d) Ministerial Directive - The manner in which care quality complaints are to be processed by a complaint office and the period within which the care quality complaint process or any step in that process is to occur

A health authority Patient Care Quality Office (PCQO) must:

1. Respond to the complainant that they have received their care quality complaint and inform on the next steps of the process within two business days following receipt of the complaint;
2. As soon as possible determine whether the care quality complaint is outside jurisdiction, or external, and inform the complainant at the earliest opportunity;
3. If the care quality complaint is determined not to be external, record the steps of the investigation or complaint management process, including relevant documents that are part of the process, and engage the complainant and other affected parties as required;
4. Complete the investigation or complaints management process within 30 business days, or such greater time that is agreed to by the complainant and the PCQO.
5. Where an extension is agreed to, or the complaint relates to a licensed facility under the *Community Care and Assisted Living Act* and will require additional time to resolve, the PCQO must keep complainants updated on the progress of the complaints management process no less than once every 20 business days. Updates may be given verbally, or in writing, and must be documented.
6. Inform the complainant of the results of the process.

s. 6(1)(f) Ministerial Directive – The circumstances and manner in which a complaint office is to refer, to another entity, a care quality complaint received by the complaint office and the persons to whom and the period within which those care quality complaints are to be referred

A health authority must ensure its Patient Care Quality Office (PCQO):

1. Communicates with complainants in a timely way to ensure that they are engaged with the appropriate entity;
2. If a care quality complaint is determined to be external, inform the complainant as soon as practicable so that the complainant is able to pursue another means of resolution in a timely way.

s. 6(1)(g) Ministerial Directive – The information about each care quality complaint received by a complaint office that is to be recorded by a complaint office, including, without limitation,

- (i) **the nature of the care quality complaint**
- (ii) **the date the care quality complaint was received by the complaint office**
- (iii) **if the care quality complaint was processed by the complaint office the process undertaken, the results of that process, the date on which those results were communicated to the complainant and, if different, the individual who submitted the care quality complaint on the complainant's behalf, and the manner and content of that communication, and**
- (iv) **if the care quality complaint was referred to another entity by the complaint office, the date of that referral, the entity to which it was referred and any information about the resolution of the care quality complaint provided to the complaint office by the entity or the complainant**

A health authority must ensure its Patient Care Quality Office (PCQO) records the following:

A. As soon as possible, and no later than December 31, 2008, the type of complaint received by patient care quality personnel according to whether the PCQO determines a complaint to be:

1. a complaint that is not a care quality complaint.
2. an "external complaint" in accordance with s. 4 of the Act;
3. a complaint that the PCQO processes in accordance with sections 6 and 7 of the Act; and

4. a complaint addressed by a Quality Assurance Committee under section 51 of the *Evidence Act*.

B. For all care quality complaints that a PCQO records in accordance with sections 4 and 6 of the Act:

1. Name and contact information of the complainant, and if applicable, the patient, if different from the complainant;
2. The date the care quality complaint was received by the PCQO; and
3. The nature of the care quality complaint.

C. For care quality complaints that a PCQO categorizes as "external complaints" in accordance with s. 4 of the Act:

1. The date when a complainant was notified that the PCQO would not process the complaint;
2. Whether the complaint was referred, and if referred, to whom; and
3. The grounds on which the PCQO's decision to refer the complaint was taken.

D. For care quality complaints processed by the PCQO pursuant to s. 6(1)(g) and s.7 of the Act:

1. The nature of the care quality complaint, including:
 - (a) The health care or service relating to health care to which the care quality complaint relates;
 - (b) The location the health care or service relating to health care that is the subject of the care quality complaint was provided, or not provided;
 - (c) The name of any individual service providers involved in the health care or service relating to health care that is the subject-matter of the care quality complaint, and the individual service provider(s) area of practise;
 - (d) The date the health care or service relating to health care that gave rise to the care quality complaint occurred; and
 - (e) The category of the complaint.
2. Any action taken by the health authority in response to the care quality complaint, including action taken to resolve the complaint;

4. a complaint addressed by a Quality Assurance Committee under section 51 of the *Evidence Act*.

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 - (a) The health care or service relating to health care to which the care quality complaint relates;
 - (b) The location the health care or service relating to health care that is the subject of the care quality complaint was provided, or not provided;
 - (c) The name of any individual service providers involved in the health care or service relating to health care that is the subject-matter of the care quality complaint, and the individual service provider(s) area of practise;
 - (d) The date the health care or service relating to health care that gave rise to the care quality complaint occurred; and
 - (e) The category of the complaint.
2. Any action taken by the health authority in response to the care quality complaint, including action taken to resolve the complaint;

3. If known, whether the care quality complaint has been lodged with any other entity or authority; and
4. If known, the outcome the complainant is seeking.

s. 6(1)(h) Ministerial Order – The information about care quality complaints and the complaint process that is to be maintained by a health authority and made accessible

- (i) the applicable review board
- (ii) in the case of a care quality complaint that has been made public, including by the complainant disclosing the care quality complaint to any person, to the minister for the purposes of
 - (A) his or her powers and duties under section 13 or 15, or
 - (B) allowing him or her to assess the extent to which any information about the care quality complaint should and can be disclosed under section 19, and
- (iii) in the case of any other care quality complaint, to the minister, in a manner that does not disclose the complainant's identity, for the purposes of the minister's powers and duties under section 13 or 15

A health authority must ensure its Patient Care Quality Office (PCQO):

1. Collects and retains complaints management information including:
 - (a) Any applicable policies/ procedures related to the complaint;
 - (b) Any recommendations or decision related to the complaint under management or investigation as well as a health authority's response, if any; and
2. At the minister's or review board's request, make that information available to the minister or review board within the timeframe required, and update the minister or review board on the status of the complaint under management or investigation.

s. 6(1)(i) Ministerial Directive – Information and reports to be provided by a complaint office to a complainant and, if different, the individual who submitted the care quality complaint on the complainant's behalf, including the information to be provided and the form and timing of those reports

A health authority must ensure its Patient Care Quality Office (PCQO):

1. Upon completion of its investigation or complaints management process, provides a response to the complainant within 10 business days; and

2. Maintains a record of the response.

s. 6(1)(j) Ministerial Directive – The reports and recommendations that may or must be provided by a complaint office to one or both of the applicable review board and the minister, including the information to be provided and the form and timing of those reports and recommendations

A health authority must ensure its Patient Care Quality Office (PCQO):

1. Provides reports on a quarterly basis to the applicable review board and minister;
2. Submits quarterly reports to the board and Minister through the board Secretariat no later than 30 business days following the end of the quarter;
3. Ensures each report contains information that includes:
 - a. The number and types of complaints determined to not be care quality complaints;
 - b. The number and types of complaints received but determined to be external;
 - c. The number of external complaints referred directly or indirectly through the complainant, to another body; and
4. Ensures each report is submitted in the format prescribed by the boards.

A health authority must:

5. Provide the Minister and review board with a written response to the review board's recommendations, which includes the action taken or proposed to be taken in response to the recommendations.
6. Provide that response within 30 business days of the review board issuing its recommendations; and
7. Communicate with the complainant following receipt of the review board's recommendations.