



# Complaints Policy

Victim Services of Durham Region shall provide and make accessible a process for resolution of complaints relating to the rights of victims, as well as VSDR representatives

(Board members, employees, students and volunteers). No victim shall be penalized or have their access to services affected by accessing the process.

VSDR representatives lodging a complaint about another VSDR representative shall follow the procedure outlined in the policy, and shall not be penalized when a complaint is in good faith and/ or in the interest of ensuring appropriate service to clients and for the betterment of VSDR.

All information concerning a complaint is confidential unless disclosures are required by relevant legislation. Only parties involved in resolving the complaint should have information. Documentation will be filed in the ED office, not in victim files. (Unless about the ED-to be held by the Board).

Where findings associated with a complaint investigation substantiate concerns relating to the action(s) of a VSDR representative, this policy shall be used with VSDR 1026- Progressive Discipline Policy.

Information about this policy should be widely accessible to all victims, impacted community members or service providers, and VSDR representatives. VSDR representatives shall assist complainants in completing the complaint where support is required.

# PROCEDURE

## Step 1

Victims, other community members, service providers and/or VSDR representatives who wish to complain about the actions (or lack thereof) of a VSDR representative should be encouraged to speak **directly with the person** only where the complaint is minor in nature, an isolated event and it can be appropriately resolved with direct communication (ie. a single call not returned promptly). Where the complaint is not minor in nature, not an isolated event, and/or there was a notable impact to another person or the reputation of VSDR, proceed directly to Step 2. Where the complaint is about the ED, proceed directly to Step 3.

Anonymous complaints can be made by mailing an unsigned letter or forwarding a message using the contact function on the website, or by contacting the main line via telephone. All anonymous complaints shall be immediately directed to the Clinical Director and/or Executive Director who will receive the complaint and determine the appropriate response. Anonymous complaints regarding the Clinical Director and/or Executive Director shall be immediately directed to the appropriate VSDR representative in accordance with this policy. Those investigating or responding to complaints shall ensure there is no conflict of interest with any involved party and where a conflict exists, will immediately relay the complaint to the Executive Director and/or Clinical Director to be re-directed as appropriate.

Any VSDR representative receiving a complaint shall acknowledge the complaint and where appropriate ask the complainant if they are willing to have the person involved contact them directly to attempt resolution. If the client does not wish to do so, expresses discomfort with this approach, or where the VSDR representative involved feels it would not be appropriate, the complaint is to be directed to the Clinical Director and/ or Executive Director as soon as practical.

Should the complainant report directly to the involved VSDR representative or are agreeable to speak directly with the person involved, the VSDR representative shall respond to the complaint as soon as possible, but no later than 5 business days after the complaint was made. Should the representative be unable to respond to the complaint within 5 business days, the complaint should be directed to the Clinical Director and/or Executive Director. Upon contacting the complainant, the responding VSDR representative is to acknowledge the complaint and avoid defensive statements that may exacerbate the situation. They shall advise the victim/complainant of any action(s) taken to investigate and address the complaint, and where appropriate, what will be done to avoid such situation(s) in future. The staff representative shall seek confirmation from the complainant that the matter was resolved to their satisfaction, and if confirmation is not obtained or is unclear, the complaint is to be directed to the Clinical Director and/or Executive Director as soon as practical.

Any victim/complainant lodging a complaint must be advised of their right to escalate the matter to a member of the leadership team (Clinical Director and/or Executive Director) should they feel the matter was not resolved adequately.

## **Step 2**

Complaints that are received by the Clinical Director and/or Executive Director shall be responded to as soon as possible and no later than 5 business days after the complaint was reported to them.

The Clinical Director or Executive Director shall attempt to obtain as much detail relating to the complaint as possible, including the date and time of the alleged occurrence(s), what occurred or did not occur that led to the complaint, the individual(s) involved, any impact to the client/other person(s), and what the complainant believes should have been done differently. Where possible, complaints should be submitted in writing, and signed/dated by the complainant.

Where not possible, or the complaint was received in an alternate format (ie. via telephone), the complaint will be documented by the Clinical Director or Executive Director receiving the complaint. The complainant shall be advised of an anticipated timeline for when a response to their complaint will be received and should occur as soon as possible.

The Clinical Director and/or Executive Director receiving and responding to the complaint shall investigate the complaint by:

- reviewing any and all relevant documentation or evidence (ie. client chart, voice mails, text messages, emails etc),
- interviewing any involved VSDR representative, and with consent of the victim(s) and only where appropriate, any other person(s) impacted or involved. No attempts to contact individual(s) outside the agency shall occur without the expressed and written consent from all involved victim(s).

Upon completion of the investigation and as soon as possible thereafter, the Clinical Director and/or ED shall document the findings, and any action(s) that were taken to resolve the matter or avoid future incidents. Attempts shall be made to communicate findings as soon as possible, but within 15 days to the complainant and where appropriate, shall be accompanied by a verbal summary of responsive action(s) taken, with consideration given to the involved person(s) right to privacy. Where findings or resolution extend beyond 15 days, complainants shall be notified as soon as possible of the delay, the anticipated timeframe, and shall document reasons for the delay. Documents shall be stored in a secure location for 7 years and thereafter destroyed. A written response to the complainant shall be provided only with ED approval.

Any complaint regarding the Clinical Director that is not minor in nature, an isolated incident and/or has impacted a victim or colleague shall be reported directly to the Executive Director, who will investigate and respond to the complaint using the procedure outlined in Step 2.

### Step 3

If the ED's response to any complaint is unsatisfactory, or if the complaint is about the ED, the complainant should be directed to the Executive of the Board of Directors. Contact information for member(s) receiving the complaint should be provided promptly.

Victims who wish to complain about the actions of a Board member should direct their complaint to the Executive of the Board of Directors. If the complaint concerns a member of the Executive, that member shall remove themselves from the Executive discussion of the complaint. The decision and proposed resolution of the Executive of the Board of Directors shall be final.

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