

MIDDLESEX-LONDON BOARD OF HEALTH

REPORT NO. 85-24

TO: Chair and Members of the Board of Health

FROM: Emily Williams, Chief Executive Officer
Dr. Alexander Summers, Medical Officer of Health

DATE: 2024 December 12

CLIENT RELATIONS PROCESS

Recommendation

It is recommended that the Board of Health receive Report No. 85-24 re: "Client Relations Process" for information.

Report Highlights

- The client relations policy and framework will ensure MLHU is responsive to client feedback in accordance with the *Excellent Care for All Act* (ECFAA).
- The process ensures all client interactions are managed effectively, transparently, and consistently.
- This framework applies to all leaders, employees, and healthcare providers at MLHU.
- Aggregate client relations data will be reported to the BOH twice a year at a minimum.

Background

The *Excellent Care for All Act* (ECFAA), 2010, Sec 6 (1) states, every health care organization shall have a patient/client relations process and shall make information about that process available to the public.

Upholding the commitment to client-centered care and to meet legislative requirements, MLHU has developed a client relations policy and framework designed to streamline the management of client feedback. It outlines clear processes for intake, investigation, and resolution of client concerns, fostering accountability and promoting continuous improvement and serves as a foundation for tracking performance and ensuring quality service delivery.

The client relations framework defines feedback as any input, concern, complaint, suggestion, or compliment expressed by clients regarding their experiences and interactions with the agency.

The Process

Client feedback is received through various methods – in-person, telephone, e-mail, letter and MLHU website.

The MLHU client relations process contains five (5) distinct steps, ensuring clients who provide feedback receive optimal service from intake to resolution.

1. **Intake and Documentation** – when feedback is received, resolution in the moment is the desired outcome. If a resolution is achieved, a notification is sent to the Client Relations team for tracking. If a resolution is not achieved, the feedback is escalated, and steps 2-5 of the framework are initiated.
2. **Triage and Initial Response** – feedback is categorized by urgency and complexity. An acknowledgement of receipt is sent within two business days.
3. **Communication and Investigation** – responsibility for the feedback is assigned, and a root cause analysis is conducted.
4. **Resolution and Follow-up** – a resolution plan that addresses the client's concerns is developed and promptly implemented. Investigation findings are shared with the relevant team, and a final resolution conversation is held with the client.
5. **Documentation and Reporting** – the outcomes of the investigation and resolution process are documented in the Client Relations database. Aggregate client relations data will be shared with the Senior Leadership Team and the Board of Health twice a year at a minimum.

Where feedback is received directly by the BOH, CEO, and/or MOH, this will be shared with the Manager responsible for Client Relations who will lead the Client Relations process identified above. Generally, the initial response and resolution will be under the signature of the Manager responsible for Client Relations, facilitating further escalation within the agency if required.

Next Steps

The MLHU client relations policy and framework will be integrated into daily practice. Initial education for teams will begin December 13, with ongoing training in effective communication, and service recovery skills to follow. The online client feedback form will be promoted, encouraging clients to share their experience as feedback enables reflection and improvement.

MLHU will evaluate and refine the framework to ensure it remains responsive to client needs. Key performance indicators, such as response times, resolution rates, and client satisfaction, will be tracked and reviewed to ensure both compliance and effectiveness.

This report was written by the Associate Director, Operations/Privacy Officer in the Corporate Services Division.



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This report refers to the following principle(s) set out in Policy G-490, Appendix A:

- The Good Governance and Practices standard as outlined in the [Ontario Public Health Standards: Requirements for Programs, Services and Accountability](#).
- The *Excellent Care for All Act*, 2010, Section 6 (1)

This topic has been reviewed to be in alignment with goals under the Middlesex-London Health Unit's [Anti-Black Racism Plan](#) and [Taking Action for Reconciliation](#), specifically recommendation Governance.