



**City of Toronto**  
Toronto Paramedic Services

*Professional Standards Unit*  
*Complaint Investigation Policies and Procedures*

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## Introduction

Toronto Paramedic Services (TPS) is a public service, certified to operate under the authority of the *Ambulance Act* and the Ministry of Health and Long-Term Care (MOHLTC). In addition, Toronto Paramedic Services is an operating Division within the City of Toronto. The Division has the responsibility to provide the highest quality of out-of-hospital emergency medical care and transportation services to the residents and visitors of the City of Toronto. Toronto Paramedic Services has a responsibility to provide this service to all of its customers, whether they are individual patients or institutional clients, such as hospitals and nursing homes.

As a public service, we are also accountable to the public, to the Council of the City of Toronto and to the MOHLTC for the quality of the service we provide. The provision of such service should be effective, equitable and accessible to the City of Toronto and its diverse population. As healthcare professionals, the quality of the service provided reflects on us all.

All persons involved in the complaint investigation process (including complainants, witnesses and employees) will be treated with dignity, respect, confidentiality and with an equal opportunity to be heard without bias. Those wishing to file a complaint with Toronto Paramedic Services are entitled to fair, equitable and barrier-free access to the Division's complaints process. As part of having their complaint heard, each complainant will be appropriately accommodated, if required, in accordance with the requirements of the Ontario Human Rights Code (HRC) and the Accessibility for Ontarians with Disabilities Act (AODA). If the Division becomes aware that anyone involved in the complaint investigation process requires accommodation (e.g., as a result of physical, learning, hearing or vision disabilities, mental health challenges, dementia, etc.) under the HRC and/or AODA, the investigator must make every reasonable effort to accommodate those needs.

Furthermore, Toronto Paramedic Services will employ the values defined in the City's "[\*a Guide to Good Practice – Providing equitable service to individuals of all abilities.\*](#)" The Guide, published by the Equity, Diversity and Human Rights Division of the City Manager's Office, provides guidelines to ensure equitable access to services and to facilitate communication with people living with various physical and cognitive abilities such as dementia, diminished capacity, mental health issues, intellectual/developmental disabilities or learning variances. All staff will ensure that people within the entire spectrum of abilities are treated with dignity and respect and will:

- Focus on removing communications barriers, rather than focusing on any person's limitations
- Promote a helping and supportive environment by creating an atmosphere of advocacy for every person requesting help
- Use adaptable communication techniques that are effective for each circumstance

- o Use de-escalation strategies when situations appear to be unstable.

While we are all responsible for ensuring the highest quality of care and service, the Professional Standards Unit is responsible for receiving feedback and compliments from the public and for reviewing situations when the quality of care or service is questioned. PSU is responsible for responding to and investigating public and institutional complaints, and for recommending changes to procedures that will eliminate future problems and result in improved standards of care and service.

It is the responsibility of Toronto Paramedic Services to implement procedures within the Division to ensure full public accountability for the investigation of all complaints regarding any aspect of the delivery of ambulance service. As a public service, we are subject to scrutiny by a number of stakeholders and it is not enough to simply provide good service; we must also, at all times, be *seen* to provide good service. This scrutiny applies not only to the care and transportation that we provide, but also to the manner in which we address and respond to public and institutional complaints and concerns. These policies and procedures have been approved and are updated from time to time by the Chief of Toronto Paramedic Services and/or by the TPS Deputy Chiefs.

## **Professional Standards Unit Mandate**

The Professional Standards Unit (PSU) is responsible for ensuring that Toronto Paramedic Services investigation of any complaint or concern is thorough, objective and handled in a timely manner. Within the context and authority of this policy, PSU is responsible for:

- a) Receipt, acknowledgment, coordination, investigation and administration of all public and internal complaints received by TPS; a complaint may be received verbally (by telephone), in person, or in writing (received by hand delivery, mail, fax or electronically);
- b) Assuming the lead for investigating all complaints deemed to be major complaints as defined herein (See page 13);
- c) Assuming the lead for any investigation that may lead to a Coroner's Inquest or that may result in litigation;
- d) Assuming the lead for TPS on all investigations conducted by the MOHLTC's Emergency Health Services Branch (EHSB), Investigation Services, and providing them with any assistance, as requested;
- e) Assuming the lead for any investigation as directed by the Chief of Toronto Paramedic Services and/or by the Deputy Chief, Program Development and Service Quality;
- f) Initiation and quality assurance of all complaint investigations;
- g) Working in collaboration with TPS Management staff, the Toronto Paramedic Services' Medical Advisor, the MOHLTC and/or the Base Hospital in the investigation of complaints;

- h) Identifying any TPS Standard Operating Procedures (SOP), MOHLTC Patient Care Standards or pertinent legislation that may be related to the complaint;
- i) Making recommendations for improvement as a result of the findings of an investigation;
- j) Collection and control of all patient documentation as it relates to patient care; and
- k) Ensuring communication throughout the investigation with the complainant including closure, via a medium that is accessible to the complainant.

Furthermore, all investigations must comply with the legislated requirements of the *Ambulance Act* and must be administered with due regard for all legal, ethical and professional considerations.

This policy was designed to clarify the roles and responsibilities of Toronto Paramedic Services staff involved in the investigation of a complaint. The goal of this policy is to coordinate and standardize the processing of all complaints received by Toronto EMS, and to maintain related documentation in a consistent format. This process and documentation must withstand the scrutiny of our stakeholders, including the MOHLTC's Emergency Health Services Branch (EHSB). The process also helps ensure that all complaints are reviewed in a timely, fair and unbiased manner. If this policy is adhered to consistently, TPS will have an effective way to analyze the quality of service delivery, a quantifiable process for the measurement of Quality Assurance, and a high level of credibility and public trust.

## **Legislative Mandate**

In Ontario, all certified ambulance service operators, their vehicles, equipment and staff are regulated by the *Ambulance Act*, R.S.O. 1990, as amended, and are subject to the regulations made under the *Ambulance Act*. This includes the standards for patient care and service operations, as well as the reporting requirements and the manner in which complaints received by the service operator are to be investigated and reported.

Under the *Ambulance Act*, the MOHLTC may conduct investigations or request investigations to be conducted on its behalf. The Toronto Paramedic Services investigation process, as well as all related documentation, may be subject to review by the MOHLTC at any time, as set out in Part VI, Section 18 and 23(3) and (3.1) of the *Ambulance Act*.

### ***Ambulance Act of Ontario*** **Part VI – General – Section 18**

18. (1) *The Director (EHSB, MOHLTC) may appoint inspectors and investigators for the purposes of this Act and the regulations and such appointments shall be in writing.*

*(2) An inspector or investigator, upon the production of his or her appointment under subsection (1), may enter the business premises or conveyances of the operator at any time and may examine, extract information from and make copies of the operator's books, accounts and records pertaining to the ambulance service and may inspect the conveyances, supplies and equipment for the purpose of determining their compliance with the regulations.*

*(2.1) An inspector or investigator may upon entering premises under subsection (2) or at any other time, require an operator or the employee of an operator to provide any information relating to the inspection or investigation and to provide copies of any books, accounts or records as the inspector or investigator may specify.*

*(2.2) An operator or employee of an operator shall comply with a request for the provision of information or copies of any books, accounts or records as soon as practicable.*

## ***Ambulance Service Documentation Standards***

**Part III – Incident Reporting Requirements, Section 1(a) states:**

- 1) *Incident reports will be completed when:*
  - a) *A complaint relating to the operator's service is received by the operator or on the operator's behalf, or*
  - b) *An investigation is carried out by the operator or under the operator's authority relating to the operator's service.*

All such reports are subject to review by the MOHLTC's EHSB, Investigations Services. The reports are reviewed for timeliness, thoroughness and for the appropriateness of the outcome. The MOHLTC's EHSB, Investigations Services may, at its discretion, review the entire file on any complaint in detail, and may elect to conduct its own investigation of the complaint.

Additionally, since the service operator and its employees have a legal duty to prepare and retain these reports, they are admissible as evidence in legal proceedings, police and Coroner's investigations, and in civil suits. When Toronto Paramedic Services staff receive a subpoena to appear in court, such individuals may be required to bring with them any reports and/or records that have been prepared for or pertain to the issue before the court. In this context, all reports are subject to detailed scrutiny by lawyers representing a variety of interests. The party preparing the report may be subject to detailed questioning regarding the report's content, as well as how and when it was prepared, etc. Given the scrutiny to which such a report is subject, it is critical that the report be timely, credible, thorough and appropriate in content.

## **Ministry of Health & Long-Term Care (MOHLTC)**

The MOHLTC monitors the investigations conducted by ambulance operators in the course of normal operations indirectly through the Incident Reporting Standards contained in Part III of the Ambulance Service Documentation Standards.

The Documentation Standards require the service operator to file an "Incident Report" regarding each complaint and/or complaint investigation conducted by the service operator. PSU completes this report and forwards it to the MOHLTC. The MOHLTC has authority under the *Ambulance Act* to review these reports, inquire as to the specific details of an investigation and, where deemed necessary, conduct their own investigation(s) regarding a given complaint or issue.

In addition, the MOHLTC may also choose to refer the complaint to the service operator for investigation as it does not have the resources to investigate all complaints received by them and by ambulance operators.

## **Investigations Conducted by the MOHLTC's Emergency Health Services Branch (EHSB), Investigations Services**

If the Manager of EHSB, Investigation Services, has determined that the complaint should be investigated by Investigation Services, the Manager will:

- Notify Toronto EMS of the MOHLTC's intent to conduct the investigation; and
- Notify the appropriate EHSB Field Office.

While the MOHLTC is the overall lead in investigating such complaints, PSU will take the lead on these investigations on behalf of Toronto EMS and will assist EHSB, Investigation Services, as requested. PSU will open an internal file to track and monitor the investigation.

## **Investigations Conducted by Toronto Paramedic Services**

If the Manager of EHSB, Investigation Services, has determined that the complaint should be investigated by Toronto Paramedic Services, the EHSB Investigation Services Manager will:

- ensure that the complainant has provided consent to EHSB, Investigation Services for TPS to conduct the investigation;
- inform TPS of the nature of the complaint and provide the necessary information to conduct the investigation;
- request TPS provide a copy of the final investigation report to EHSB, Investigation Services; and
- assign an EHSB investigator and offer to provide any assistance that TPS may require to complete the investigation.

## **Overview of Investigations**

All investigations conducted by employees of Toronto Paramedic Services must identify and deal with all relevant issues. Investigations must be conducted thoroughly and within a reasonable timeframe, commensurate with the seriousness and complexity of the issues identified. The fact-finding process must be rigorous and defensible, and the analysis of the evidence and the conclusions made must be objective and based on facts.

All investigations that are undertaken by TPS must be conducted to the highest standards. Reputations, livelihoods and careers can be on the line; public confidence in ambulance services and ambulance dispatch can be threatened; the health and welfare of residents is at stake.

A good investigation can lead to the correction of unfairness or wrongdoing and provides TPS and the City of Toronto with credibility. A poor investigation or "rubber-



stamping” of a poor investigation done by someone else will bring the integrity of Toronto Paramedic Services into question.

Conducting a good investigation requires objectivity, determination and credibility. An investigator may encounter resistance, suspicion and even hostility. Being good at the job may mean people that the investigator thought of as friends are suddenly less welcoming. A good investigator remains impartial, even in the face of such pressures.

Regardless of the conclusions and the recommendations made as a result of an investigation, the report should be reasonably seen to be objective and thorough.

All potentially relevant issues must be identified and pursued. All relevant documentation and as necessary, physical evidence, must be identified, collected, reviewed and preserved. All relevant witnesses must be identified and thoroughly interviewed. And the analysis of all of the evidence gathered must be objective and the conclusions must be based solely on the facts.

The focus of any complaint investigation is providing effective customer service through the professional, appropriate and timely resolution of the issue with the complainant. Although many complaint investigations and the resulting internal resolution may take considerable time to complete, the Lead Investigator should ensure that the matter is resolved with the complainant at the earliest possible opportunity. The complainant must be kept informed of the process and also of any changes.

At Toronto Paramedic Services, there are many factors that complicate the proactive resolution of complaints. Shift schedules, shift changes, employee vacations or other absences are often barriers for the investigator to overcome in order to provide timely communication with a complainant. Furthermore, gathering information in the form of witness statements, dispatch audio recordings and Ambulance Call Reports, etc., can often be delayed because of these same factors.

In those situations where the EMS Superintendent or Commander (Operations or Communications) is a Lead Investigator, the PSU Superintendent can provide invaluable assistance in moving an investigation forward. The PSU Superintendent can, if necessary, interview complainants and/or witnesses, gather resource information, contact additional sources for information, and/or forward reports to the Lead Investigator so that a more timely resolution can be achieved. Toronto Paramedic Services' focus must remain on providing effective customer service. This can be achieved by communicating with complainants to resolve their concerns in a professional and timely manner.

## **Definition of Complaints**

An investigation is focused on a particular conduct or alleged misconduct, whether it involves a systemic problem or an isolated incident. The findings can have significant implications for Toronto Paramedic Services or any other persons involved.

The receipt of a complaint, which may be received verbally, in writing or by any other means, will likely require an investigation to be conducted, and may include the following:

- (a) a representation by anyone that Toronto Paramedic Services and/or its staff has acted in a manner inconsistent with, or failed to act in a manner consistent with, the proper provision of land ambulance services;
- (b) an inquiry by anyone about Toronto Paramedic Services that is reasonably likely to require an investigation to determine whether Toronto Paramedic Services and/or its staff have acted in a manner inconsistent with, or failed to act in a manner consistent with, the proper provision of land ambulance services; or
- (c) a determination by the MOHLTC, or an MOHLTC inspector during an inspection, that Toronto Paramedic Services and/or its staff have, or may have, acted in a manner inconsistent with, or failed to act in a manner consistent with, the proper provision of land ambulance services.

**NOTE: Any harassment (including sexual harassment) and discrimination complaints are to be directed to the Deputy Chief, Program Development and Service Quality and the Chief of Toronto Paramedic Services (See "Complaints of Harassment or Discrimination", page 27).**

## **Complaints Received by Toronto Paramedic Services Staff**

As front-line service providers, Toronto paramedics and Emergency Medical Dispatchers (EMDs) are in a position to mitigate some types of complaints in an effective and timely manner. Toronto Paramedic Services employees have an opportunity to explain or clarify operating policy and procedures, thereby clarifying customers' expectations, or to apologize for any minor inconveniences created during service delivery. If attempts to informally resolve a complaint are unsuccessful, the complainant should be advised that there is a formal complaint investigation process and be directed to contact PSU in person, by phone, electronically, mail or by any other means suitable and accessible to the complainant.

Where a Toronto Paramedic Services employee feels that an incident may potentially result in a formal complaint, the employee should immediately contact their Superintendent as well as complete an Incident Report. This will ensure that a complete and factual record of the incident will be on file should a future investigation be required. The Incident Report should be submitted to the employee's immediate Superintendent.

## **Complaints Received by Toronto Paramedic Services for another City Division**

When a resident or visitor contacts the City for assistance or with a complaint, rather than being transferred from Division to Division, the first City employee contacted must begin the resolution process. The public should not feel that they are getting the "run-around" when they contact the City for help.

When a staff member of Toronto Paramedic Services receives a complaint that concerns another City of Toronto Division, the following process will be followed:

- Obtain and record the details of the concern, the time and date of the incident, and the complainant's contact information, including their name, address and telephone number. Record the time and date that the complaint is received as well as the name of the person who received the complaint;
- Identify the appropriate City of Toronto Division to handle the complainant's specific matter and advise them that you will pass on their concerns to that Division (3-1-1 is a good resource for this purpose);
- Ensure that the complainant is provided with your contact information so that if they do not hear back from the appropriate City Division, the caller has someone to contact for further assistance;
- Contact the appropriate Division and forward them the complainant's concern(s) as well as the complainant's contact information. Document whom you contacted and when you passed on the complainant's concerns;
- Notify PSU that you have received a complaint for another City of Toronto Division. Provide all pertinent details of the matter to PSU. Contact PSU at 416-392-2222 or by email at EMS-PSU.

- PSU will open a file, under Category G-11, (Complaint for another City Division) in order to track the information. After ensuring that the caller's information has been passed on, PSU will close the file.
- If Toronto Paramedic Services is notified of a complaint via another City Division for any Toronto EMS matter, our normal complaint handling procedures are to be followed as contained herein.

## **Complaints Received by and/or Forwarded to Professional Standards**

The Professional Standards Unit (PSU) is responsible for receiving and acknowledging occurrences where an expression of dissatisfaction has been received concerning deficiencies in the delivery of ambulance service. This is achieved through a number of mechanisms as follows:

- Written notification from Toronto's Central Ambulance Communications Centre (CACC) via the Communications Incident Report.
- Receipt of a complaint from a source external to the Division (e.g. patient, third party, allied service, coroner) by the Professional Standards Unit.
- Notification from the Chief's Office.
- Notification from the Base Hospital Program.
- Notification from any Toronto Paramedics staff.
- Notification from the MOHLTC's EHSB, Investigations Services.
- Notification from another City Division.

If a verbal complaint is received by any representative of Toronto Paramedic Services, the complainant should be advised that there is a formal complaint investigation process and every attempt should be made to direct (or transfer) the complainant to PSU. The employee will provide the complainant with the PSU contact information. Where this is not possible, the employee should obtain the complainant's name, telephone number and the circumstances surrounding the complaint. This information is important for any subsequent follow-up. This information should be documented and immediately sent to PSU.

During non-business hours, where it is deemed that the matter cannot be deferred to the next business day, the employee will notify an on-duty Superintendent and/or Deputy Commander and provide all relevant details. The on-duty Superintendent and/or Deputy Commander must ensure that the details of the complaint are documented in the Communications Incident Report.

The PSU Superintendent will be responsible for contacting the complainant within two (2) business days to ensure that all relevant information has been received by Toronto Paramedic Services. Where possible, every effort will be made to resolve the complaint informally during the initial contact with the complainant. Based on the nature of the complaint, the PSU Superintendent may extend an apology or explanation to the complainant without admitting any wrongdoing. The apology will be offered to address

the customer's feeling of frustration or inconvenience from the perceived actions of Toronto Paramedic Services. Notwithstanding an informal resolution of the complaint, an investigation of the complaint will be conducted in accordance with this policy.

## **Complaint Types**

Upon receipt of a complaint, PSU will open a file and assign a unique file number. The type of complaint will be identified according to the following:

### **Paramedic Conduct**

Concerns generated by the perceived attitude or conduct of the paramedic.

### **Driving or Vehicle Operation**

Perceived inappropriate and/or unsafe use of a Divisional vehicle.

### **Patient Care**

Any concerns surrounding patient care. All concerns will be investigated in consideration of the Basic Life Support Patient Care Standards, Advanced Life Support Patient Care Standards, the Base Hospital Medical Directives and the Toronto EMS Standard Operating Procedures.

### **Delayed Response, EMS Operations**

Issues that arise from a perceived delay in response to an emergency or non-emergency call involving operational staff.

### **Billing**

Complaints regarding the fee for ambulance transportation services.

### **Delay, Emergency Call - Communications Centre**

Complaints concerning the timeliness of ambulance service regarding emergency calls, focused on dispatching activities.

### **Delay, Non-emergency Call - Communications Centre**

Complaints concerning the timeliness of ambulance service regarding non-emergency calls, focused on dispatching activities.

### **Hospital Destination Concerns**

Concerns generated regarding the destination decision by Operations or Communications.

### **Failure to Follow Established Protocol and/or Procedures**

Non-compliance with the Standard Operating Procedures established by Toronto EMS.

### **Emergency Medical Dispatcher Conduct**

Concerns generated by the perceived attitude or conduct of the EMD.

### **Outcome/Appeal**

A request from a complainant to appeal the final disposition of their complaint investigation.

### **Disability/AODA**

The customer felt he/she was not able to access divisional services & programmes, physical facilities, information & employment because his/her accessibility needs, as required under the Accessibility for Ontarians Disability Act, 2005, have not been met.

### **Access/Human Rights Concerns**

The customer found it difficult to find relevant, consistent, or accurate information about a service and/or had difficulty finding the right place to apply for a service or, was not able to access or receive a division's goods/services because he/she felt divisional practises pose barriers to access on human rights grounds.

### **Other**

Any issues not addressed in the above categories.

## **Definition – Major Complaint**

The Professional Standards Unit (PSU) will be responsible for conducting investigations of all major complaints. The PSU Commander will be responsible for determining if a complaint received by Toronto Paramedic Services will be defined as a major complaint in accordance with this policy. A PSU investigator will be designated as the Lead Investigator and will be responsible for conducting all aspects of the investigation including findings, conclusions and recommendations, which will then be provided to the Chief of Toronto Paramedic Services and to the Deputy Chief of Program Development and Service Quality in the Major Complaint Investigation Report.

A complaint received by Toronto Paramedic Services is defined as being a major complaint where it involves the following circumstances, including but not limited to:

- any allegation that the actions of Toronto Paramedic Services were negligent or contributed to the harm or death of a patient and/or member(s) of the public;
- a significant risk management or litigation matter involving Toronto Paramedic Services;
- any allegation that a Toronto Paramedic Services' employee has been involved in criminal wrongdoing(s);
- a Coroner's investigation or Inquest focusing on the provision of pre-hospital emergency care involving Toronto Paramedic Services;

- any investigation being led by the MOHLTC's EHSB, Investigations Services<sup>1</sup>; and/or
- as directed by the Toronto Paramedic Services Chief and/or Deputy Chief of Program Development and Service Quality.

Where a complaint is determined to be major complaint by the PSU Commander, the PSU Commander will:

- record the date that the complaint was received by PSU;
- notify the Deputy Chief, Program Development and Service Quality, Toronto EMS Chief and applicable Deputy Chief(s) of the complaint;
- ensure that a PSU investigation file has been opened and that a unique file number has been assigned to the file;
- assign a PSU Superintendent as the Lead Investigator;
- monitor the investigation to ensure it is being properly handled; and
- review the final Major Complaint Investigation Report prior to its release to the Deputy Chief of Program Development and Service Quality and the Chief of Toronto Paramedic Services.

## **Complaints Investigations Procedures**

All complaints will be forwarded to the PSU Commander who will review the complaint and determine if the complaint is to be investigated as a major complaint as defined herein. If the complaint is deemed to be a major complaint, PSU will assume the lead of the investigation, for which the PSU Commander will assign a Lead Investigator.

In all other situations, the PSU Commander, based on the nature and type of complaint, will assign the investigation as follows:

- a) Through a PSU Superintendent, directly to the appropriate Commander for investigation and resolution;
- b) Through a PSU Superintendent, to the appropriate Commander with continued direct involvement of PSU; or
- c) Retained by PSU.

If during the course of the investigation, a new issue is identified, the assigned Lead Investigator will update their immediate Toronto Paramedic Services Commander who will, in turn, update the PSU Commander of the new issue. Both Commanders will decide if additional resources will be required for the investigation or if PSU will assume the lead of the investigation.

If PSU is determined to be the lead of the investigation, the PSU Commander will notify the applicable Commander of the complaint along with relevant details.

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<sup>1</sup> Investigations Conducted by the MOHLTC's EHSB, Investigations Services, p. 8

The following criteria have been established regarding complaint investigations:

1. All complaints are to be thoroughly investigated. The fact-finding process must be rigorous and defensible. This involves identifying and interviewing witnesses, obtaining documents, seizing physical evidence, and ensuring that all information and facts are pursued to the greatest extent possible.
2. All complainants and witnesses must be contacted and interviewed at the outset of an investigation.
3. All complainants and witnesses are to be treated with dignity, respect, and with an equal opportunity to be heard without bias.
4. The investigator is required to record and keep accurate and detailed notes. This ensures accurate recollections for various purposes, including the preparation of reports as well as for providing testimony. All notes will include the date and times they were taken, persons spoken to, identification of all persons present at the interview, as well as the name and signature of the note-taker.
5. Under no circumstances will the investigator mark the original exhibit document. If, for the purposes of reviewing the document, the investigator needs to make notes on the document, he/she is to make a copy of the original document/ material and mark the copy as required. The marked copy will remain with the file as an exhibit.
6. The subject(s) of the investigation will be notified of the specific allegations made by the complainant.
7. The Lead Investigator must first determine if the subject(s) of the investigation should be interviewed and/or requested to complete an Incident Report. If it is determined that the subject(s) of the investigation should be interviewed first, interviews should be then completed individually and as soon as possible. After interviewing the subject(s) of the investigation, they may also be required to complete an Incident Report. If it is determined that the subject(s) of the investigation is required to complete an Incident Report, it is imperative that the involved employees complete separate incident reports as soon as possible. There must be no collaboration in writing these reports. Incident reports are confidential when completed (See "Requesting an Incident Report", page 22).
8. Explicit caution must be given to employee(s) and/or witnesses that all complaint information is confidential and may not be discussed with anyone except with the investigator(s) (unless union or legal representation is involved).
9. The investigator shall maintain confidentiality throughout the investigation, and shall not provide comments or opinions regarding the investigation until the Investigation Report has been finalized.



10. If, during the course of the investigation, any adverse or contrary information is identified, the employee(s) and/or complainant will be notified and will be provided with an opportunity to address such information.
11. All complaints are to be resolved with the complainant. Every effort will be made for complaints to be resolved with the complainant within forty-five (45) business days of the initial receipt of the complaint. Where such timeframe cannot be achieved, the Lead Investigator will notify the complainant and provide a revised completion date.

NOTE: *Resolution* of the complaint means all aspects pertaining to the investigation of the complaint including facts, findings and conclusions have been completed. It is recognized that issues related to corrective action and remedial training may not have been initiated when the investigation has been completed.

12. An Investigation Report will be completed by the Lead Investigator for each investigation and contain the following information:
  - a) Header information including: Date of Report, File Number, Date of Incident, Pick-up Location, Lead Investigator, Additional Investigators, Type of Incident (e.g., complaint, Coroner's investigation, litigation, etc.)
  - b) Identification of staff involved, including their Emergency Health Services (EHS) number, as well as the nature of the specific incident involved.
  - c) Introduction: Details the concerns that have resulted in the initiation of an investigation.
  - d) Specific Issues: Clear identification of the issues that require investigation.
  - e) Investigative Facts: A chronological record of factual incident details, interviews and/or research conducted in support of the investigation.
  - f) Investigative Findings: An analysis of the investigative facts, explaining how they relate to applicable policies, standards, legislation, Base Hospital medical directives, etc.
  - g) Conclusions: A summary of findings in relation to the specific complaint/ concern. A key component of the conclusion will be a clearly stated finding categorizing the outcome of the investigation and an explanation of the rationale for the conclusion. [See #14 below].
  - h) Recommendations: The recommendations, if any, of the Lead Investigator detailing any action required to ensure the situation is not repeated.

A Major Complaint Investigation Report will contain all of the information listed above as well as the following:

- i) Call Summary: A chronological record of the details of the entire ambulance call from start to conclusion. The call summary would not be required if the investigation is not related to Toronto Paramedic Services' response to an ambulance call.

13. Upon completion, the Lead Investigator will submit their Investigation Report to their immediate Commander for review. This report and any supporting documentation will then be submitted to the applicable PSU Superintendent.
14. The Lead Investigator, if not the PSU Superintendent, will make a recommendation regarding the outcome of the investigation using one of the following categories:
  - a) **Substantiated** -- Definition: The allegation(s) against the employee/service has been found to be accurate, the employee is at fault and corrective action is/was necessary. Such corrective action may include: interview, remedial training, written warning, suspension, up to and including dismissal *e.g., The complainant said the Paramedic was rude. The investigation found that the Paramedic was rude.*
  - b) **Within Policy and Procedures** – Definition: The facts described by the complainant have been found to be accurate, however, the employee/service acted in a manner consistent with Divisional policies and/or practices *e.g., The complainant wanted to go to Toronto Western Hospital but the crew transported to Mt. Sinai Hospital because Toronto Western Hospital wasn't accepting patients. The allegation was accurate but the crew was simply following policy.*
  - c) **Unsubstantiated** – Definition: The allegation(s) against the employee/ service has been found to be inaccurate and/or without merit *e.g., The complainant alleges that an employee stole some personal property and the investigative findings indicate that the property was actually taken by the Police for safekeeping.*
  - d) **Investigation Inconclusive** – Definition: The allegation(s) against the employee/service, subsequent to investigation, was found to be inconclusive. *e.g., The complainant's version of the events differs substantially from the employee's version, and there is no independent witness or other evidence to corroborate either version or to strongly question one party's credibility.*
  - e) **Other** – Definition: A “catch-all category” to accommodate those that aren't clearly identified above.
15. Every effort will be made to close the complaint file within sixty (60) business days of initial receipt of the complaint.

NOTE: *Closing* of the complaint file means that all aspects pertaining to the investigation of the complaint including investigative facts and findings, resolution with the complainant, conclusions, recommendations and the final investigation report have been completed. It is recognized that issues related to corrective

action and remedial training may not have been initiated when the investigation has been completed.

## **Conflicts of Interest**

A key factor when conducting an investigation is maintaining objectivity. When deciding whether or not a particular investigator can be involved in a given investigation, one must consider whether there is a perceived or real conflict of interest.<sup>2</sup> If there exists any actual or perceived conflict of interest (e.g., prior paramedic crew partnership; family, personal or social connections to anyone involved or impacted by the investigation) between an investigator and the involved employee(s), the assigned investigator(s) must immediately declare this conflict to their immediate Commander. This potential conflict will then be brought to the attention of the Deputy Chief, Program Development and Service Quality and to the Chief of Toronto Paramedic Services who will evaluate whether there is an actual or perceived conflict of interest. The Chief will then determine whether the investigator declaring the conflict can continue with the investigation or if another investigator needs to be assigned.

In the event that the conflict of interest involves the PSU Commander, he/she must declare this conflict to the Deputy Chief, Program Development and Service Quality and to the Chief of Toronto Paramedic Services who will determine if said Commander shall continue to be involved in the investigation. If the PSU Commander is deemed to be in conflict, the Deputy Chief, Program Development and Service Quality will assume the responsibilities of the PSU Commander for the investigation in question.

## **Lead Investigator**

A Lead Investigator is the specific individual who is assigned the authority and responsibility to co-ordinate and/or investigate a complaint and who, on the completion of an investigation, is responsible for submitting an Investigation Report. A Lead Investigator may draw on any Divisional resource or personnel to assist her/him in bringing each complaint investigation to a timely conclusion. In every instance, the Lead Investigator will ensure that the complainant is regularly updated on the status of a complaint investigation and that the resolution is thoroughly communicated.

Under normal circumstances, the Commander of the staff most directly implicated in the complaint allegation will assign a Lead Investigator. In those situations involving a multi-jurisdictional complaint, (e.g., paramedic from one district working with a paramedic from another district that includes a Communications component), the respective Commanders involved should collectively determine who the Lead Investigator will be. In these circumstances, it is imperative that only the Lead Investigator liaise with the complainant on behalf of all Divisional staff.

PSU will lead all Major Complaint investigations.

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<sup>2</sup> Conducting Administrative, Oversight & Ombudsman Investigations, Jones, 2009

## **Role of the Superintendent – Professional Standards Unit**

The Superintendent, Professional Standards Unit (PSU) will, in consultation with the PSU Commander, undertake all of the following steps:

1. Contact the complainant within two (2) business days of PSU's receipt of the complaint to ensure that all relevant information has been received by Toronto Paramedic Services;
2. Ensure that all complaints are thoroughly investigated and resolved;
3. Ensure that all complaints are assigned a unique File Number and tracked within the electronic PSU Program;
4. Acknowledge receipt of the complaint in writing, or by other means if required for accommodation purposes, to the complainant within three (3) business days of the initial receipt of the complaint;
5. Notify the EHSB Regional Manager of the complaint within three (3) business days of the initial receipt of the complaint via the MOHLTC Incident Report Form;
6. If the complaint is received from a Member of Council for the City of Toronto or appears to be of a high profile nature, the PSU Superintendent will immediately advise the PSU Commander of the complaint if he/she is not already aware of it;
7. Document all relevant and required areas of the investigation in the electronic PSU program;
8. Forward complaints to the applicable Commander via the PSU Action Request. The Action Request will be also copied to the applicable Deputy Chief and the PSU Commander;
9. Keep the PSU Commander apprised of the investigation's progress;
10. If the PSU Superintendent is the Lead Investigator, carry out the investigation process in accordance with the Complaints Investigation Procedures (see above);
11. If the PSU Superintendent is the Lead Investigator, keep the PSU Commander and the applicable Commander(s) of the subject staff member(s) apprised of the investigation's progress;
12. The Lead Investigator will provide thorough updates to the subject employee(s) immediate Superintendent and Commander at regular intervals to keep them fully apprised of all developments throughout the investigation;

13. If the PSU Superintendent is the Lead Investigator, record major complaint investigations in the Major Complaint Investigation Report and for all other investigations, use the Investigation Report;
14. Where the PSU Superintendent is not the Lead Investigator, ensure the Lead Investigator has resolved the complaint with the complainant;
15. Where the PSU Superintendent is not the Lead Investigator, review the submitted Investigation Report, including its findings, conclusions and recommendations to ensure that the concerns raised by the complainant have been thoroughly investigated. If the PSU Superintendent has determined that there are issues still to be investigated, he/she will contact the Lead Investigator to review and discuss the submitted report. If, after that discussion, there are still outstanding issues to be reviewed or investigated, the PSU Superintendent will bring those concerns to the attention of the PSU Commander;
16. Ensure that the Lead Investigator has made a recommendation on the outcome of the investigation, and that all required documentation has been submitted;
17. Record a summary of the investigation in the electronic PSU program, inclusive of all administrative fields, after receiving the Investigation Report from the Lead Investigator;
18. Notify the complainant in writing, or by other means if required for accommodation purposes, that the investigation has been completed;
19. The PSU Superintendent, when closing a complaint investigation file, will identify the outcome of the investigation using one of the following categories:
  - a) **Substantiated** -- Definition: The allegation(s) against the employee/service has been found to be accurate, the employee is at fault and corrective action is/was necessary. Such corrective action may include: interview, remedial training, written warning, suspension, up to and including dismissal *e.g., The complainant said the Paramedic was rude. Investigation found that the Paramedic was rude.*
  - b) **Within Policy and Procedures** – Definition: The facts described by the complainant have been found to be accurate, however, the employee/service acted in a manner consistent with Divisional policies and/or practices *e.g., The complainant wanted to go to Toronto Western Hospital but the crew transported to Mt. Sinai Hospital because Toronto Western Hospital wasn't accepting patients. The allegation was accurate but the crew was simply following policy.*

- c) **Unsubstantiated** – Definition: The allegation(s) against the employee/ service has been found to be inaccurate and/or without merit *e.g., The complainant alleges that an employee stole some personal property and the investigative findings indicate that the property was actually taken by the Police for safekeeping.*
  - d) **Investigation Inconclusive** – Definition: The allegation(s) against the employee/service, subsequent to investigation, was found to be inconclusive. *e.g., The complaint's version of the events differs substantially from the employee's version, and there is no independent witness or other evidence to corroborate either version or to strongly question one party's credibility.*
  - e) **Other** – Definition: A “catch-all category” to accommodate those that aren't clearly identified above.
- 20. Update the EHSB Regional Manager and the Manager, EHSB, Investigation Services of the investigative findings once the investigation has been completed; and
  - 21. Print the electronic PSU Program Report and return the investigation file, with all supporting documentation, to the PSU Commander when the investigation is concluded for his/her review.

In instances of a multi-jurisdictional investigation, the functional aspects of the investigation can be determined through discussion between the different sections of the Division affected by the investigation and the PSU. Different components of the investigation can be assumed by, for example, Operations, Communications, Paramedic Services Education and Development or by PSU in consultation with, or conducted collaboratively, depending on the nature of the complaint. PSU will coordinate all investigation activity in these cases.

In the event that more than one investigator is assigned to the complaint, the PSU Superintendent will assist the Lead Investigator in coordinating the investigation in order to ensure that duplication of effort does not occur.

In cases where the PSU Superintendent has been designated the Lead Investigator and thus, completed the Investigation Report or Major Complaint Investigation Report, the following procedures will apply:

- a) The Investigation Report, after being reviewed by the PSU Commander, will be forwarded to the Commander responsible for the staff involved. Said Commander will be given ten (10) working days to review the final report, including its conclusions and recommendations. Once the PSU Commander and the Commander responsible for the staff involved approve the Investigation Report, the applicable Commander will be responsible for developing an action plan to

address the findings and for implementing the recommendations. Documentation of any corrective action and results/outcomes will be the responsibility of the subject employee's immediate Commander and/or Superintendent.

- b) Where necessary a Disciplinary Review meeting may be held. In such cases, the Lead Investigator will prepare draft copies of the Investigation Report and provide such copies to the anticipated meeting participants in advance of the meeting. The Lead Investigator will work with staff to schedule the Disciplinary Review meeting and, as necessary, Chair the meeting to ensure a thorough review of all facts and issues are tabled prior to a disciplinary decision being reached.
- c) The Major Complaint Investigation Report, after being reviewed by the PSU Commander, will be forwarded to the Deputy Chief, Program Development and Service Quality and to the Chief of Toronto EMS for their review and approval. Once the Chief of Toronto Paramedic Services approves the Major Complaint Investigation Report, the report will be returned to the PSU Commander who will forward the report to the applicable Deputy Chief and Commander. It will be the responsibility of the applicable Commander for developing an action plan to address the findings and for implementing the recommendations. Documentation of any corrective action and results/outcomes will be the responsibility of the subject employee's immediate Commander and/or Superintendent.

## **Notification of Base Hospital Program or Medical Advisor and Paramedic Services Education & Development**

The PSU Superintendent will determine an appropriate course of consultation when assessing patient care complaints, per the following guidelines:

- In instances where the patient care complaint(s) involves Base Hospital Medical Directives, the PSU Superintendent will notify the Base Hospital Medical Director, Toronto Paramedic Services' Medical Advisor and the Paramedic Services Education & Development Unit.
- In instances where the patient care complaint(s) does not involve Medical Directives, the PSU Superintendent may elect to notify the Base Hospital Medical Director, Toronto Paramedic Services Medical Advisor and/or the Paramedic Services Education & Development unit.

Where the Base Hospital Medical Director, the Toronto Paramedic Services Medical Advisor and/or the Paramedic Services Education and Development Unit are notified, they will be requested to provide their comments and opinion on the alleged patient care concern(s). These comments and opinions will be included in the Final Investigation Report. The above-noted parties will be provided with an opportunity to review the draft Investigation Report before it is finalized.

If PSU is not leading the investigation, results of this consultation will also be copied to the Lead Investigator.

## **Requesting an Incident Report**

All Incident Reports will be completed as per the Ambulance Service Documentation Standards<sup>3</sup> and per Toronto Paramedic Services' Standard Operating Procedures.

### **Incident reports are confidential when completed.**

When an Incident Report is requested as a result of a complaint, the Lead Investigator will provide the involved employee(s) with the following:

- a) Description of the complaint, including the complainant's specific allegations, without identifying the complainant;
- b) Copy of the Ambulance Call Report (ACR) and dispatch records (with the patient's name removed) to assist in recollection of the call; and
- c) Blank Toronto Paramedic Services Incident Report(s) with direction to complete these report(s) prior to the end of their shift.

It is imperative that where there is more than one employee involved, such employees complete separate incident reports as soon as possible. If operational demands preclude the completion of the Incident Reports prior to the end of the shift, the investigator should make every effort to ensure that reports are completed by the end of the next scheduled shift. There must be no collaboration in writing these reports. Explicit caution must be given to employee(s) that all complaint information is confidential and may not be discussed with anyone except with the investigator(s).

When an employee is contacted for further information and statements, the investigation should be referred to as a "fact-finding session." If the employee asks about discipline, he/she is to be advised that disciplinary matters regarding the complaint cannot be discussed as the investigation is not complete.<sup>4</sup>

If the subject employee refuses to complete an incident report, the Superintendent or Commander has the authority and responsibility to direct the employee to provide any information, documentation or other item required for the purpose of completing of the investigation. The employee is to be cautioned that lack of co-operation or compliance with such request from the Superintendent or Commander may form the basis for disciplinary action. This caution should be documented, along with the date, time, location and identities of any other persons present.

The employee(s) will be instructed to contact their Paramedic Superintendent as soon as the Incident Report is completed. The Paramedic Superintendent will collect the incident report from the employee at their earliest opportunity. The Superintendent shall

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<sup>3</sup> Ambulance Documentation Standard – Part III – Incident Reporting Requirements – May 3, 2000

<sup>4</sup> Discipline is subject to the Collective Agreement.



review the Incident Report for completeness and objectivity, and then sign and date the Incident Report. The Superintendent will keep one copy of the Incident Report within their investigation file and the original (top copy) is to be forwarded to PSU in a sealed envelope, marked "CONFIDENTIAL", through inter-office mail. The Paramedic may **not** keep a copy of the Incident Report. The original copy of the Incident Report will be retained within the PSU investigation file. All incident reports, Ambulance Call Reports (ACRs), Electronic Patient Care Record (ePCR) reports and dispatch records must be returned to the Lead Investigator.

Where required, the Lead Investigator may meet with the employee(s) to clarify information contained within the Incident Report in order to ensure completeness. The Lead Investigator may enlist the assistance of the PSU Superintendent, where required, in order to meet this objective.

If it is not practical for the Superintendent to collect the Incident Reports, the employee(s) should be instructed to submit the Incident Reports in their Daily Vehicle Check Sheet Envelope.

## Potential of Criminal Wrongdoing

If a complaint is received involving an allegation of criminal wrongdoing by a Toronto Paramedic Services employee or during the course of an ongoing investigation, it is suspected that an employee may have committed a criminal offence, the following actions will be taken:

1. All complaints of this nature will be classified as a Major Complaint as defined in this policy.
2. PSU will be responsible for conducting all investigations involving allegations of Toronto Paramedic employee(s) being involved in criminal wrongdoing.
3. In the absence of specific direction from the police that a TPS investigation would interfere with a criminal proceeding, Toronto Paramedic Services must conduct and complete its own investigation of the matter, notwithstanding the outcome of any police investigation. This may mean that the TPS investigation and the police investigation would occur in tandem; therefore, ongoing communication with the investigating police officer is critical.
4. The PSU Commander or his/her designate will notify Senior Paramedic Services Management staff of all known details regarding the investigation.
5. The PSU Commander or his/her designate will also notify the appropriate Paramedic Commander of all known details regarding the investigation.
6. Pending the outcome of the investigation or based on the nature of the allegations, the Commander of the subject employee, in consultation with the applicable Deputy Chief and PSU Commander, may elect to:
  - a) Reassign the employee to administrative duties (i.e., remove the employee from duties involving direct patient/customer contact, if applicable); or
  - b) Suspend the employee from duty.
7. The Lead Investigator will ensure that the PSU Commander is kept apprised of all known details of the incident. The PSU Commander or his/her designate will be responsible for updating Senior Paramedic Services management staff regarding the status of the investigation.
8. Prior to notification of the police agency of the potential for criminal wrongdoing, the Lead Investigator will advise the complainant of Toronto Paramedic Services' intent to report the matter to the police. If the investigating police agency directs Toronto Paramedic Services to suspend its investigation, the Lead Investigator will notify the complainant accordingly. As soon as the police agency advises Toronto Paramedic Services that it can

resume its investigation, the Lead Investigator will advise the complainant that its investigation is resuming.

9. The PSU Commander or his/her designate will notify the appropriate police agency and, where so directed, will make arrangements to turn over copies of all relevant records.
10. The PSU Commander or his/her designate will also notify the EHSB Regional Manager and the Manager, EHSB, Investigation Services.
11. The PSU Commander or his/her designate shall immediately notify the Base Hospital Medical Director and the Toronto Paramedic Services Medical Advisor if the alleged criminal offence directly or indirectly involved patient care.
12. Regardless of the outcome of the police investigation, Toronto Paramedic Services must conduct its own investigation and base its findings, conclusions and any necessary actions on its own investigation.

## **Allegation of Serious Negligence or Improper Patient Care**

If, during the course of the investigation, it is suspected that an employee may be guilty of serious negligence or improper patient care, the following actions will be taken:

1. All complaints of this nature will be classified as a Major Complaint as defined in this policy.
2. PSU will be responsible for conducting all investigations where it is alleged or suspected that the actions of Toronto Paramedic Services may have contributed to the harm or death of a patient.
3. The PSU Commander or his/her designate will notify Senior Paramedic Management staff of all known details regarding the investigation.
4. The PSU Commander or his/her designate will also notify the appropriate Paramedic Commander of all known details regarding the investigation.
5. Pending the outcome of the investigation or based on the nature of the allegations, the Commander of the subject employee, in consultation with the applicable Deputy Chief and PSU Commander, may elect to:
  - a) Reassign the employee to administrative duties (i.e., remove the employee from duties involving direct patient/customer contact, if applicable); or
  - b) Suspend the employee from duty.

6. The Lead Investigator will ensure that the PSU Commander is kept apprised of all known details of the incident. The PSU Commander or his/her designate will be responsible for updating Senior Paramedic Management staff regarding the status of the investigation.
7. The PSU Commander or his/her designate will also notify the EHSB Regional Manager and the Manager, EHSB, Investigation Services.
8. The PSU Commander or his/her designate shall immediately notify the Base Hospital Medical Director and the Toronto Paramedic Services Medical Advisor.

## **Complaints of Harassment or Discrimination**

As stated earlier, all complaints that could be construed as harassment or discrimination, whether internal or external, will be immediately forwarded to the Deputy Chief, Program Development and Service Quality and to the Chief, Toronto Paramedic Services.

The City of Toronto's Human Rights Office (HRO) will be consulted to determine if the alleged incident constitutes discrimination or harassment under the Ontario Human Rights Code and/or under the City of Toronto's Human Rights and Anti-Harassment Policy. The result of this consultation will also determine whether Toronto EMS or the HRO will investigate the complaint. If it is determined that Toronto Paramedic Services will investigate the complaint, the Chief of Toronto Paramedic Services or designate will assign the investigation accordingly and the assigned investigator will adhere to this policy.

## **Unresolved Complaints or Dissatisfied Complainants**

If, after the Toronto Paramedic Services investigation has been concluded, the complainant is dissatisfied with the outcome of the investigation, the following will occur:

- The Lead Investigator, in discussions with the complainant, will obtain any additional information, if available, and will advise the complainant that the complaint will be investigated further. After further investigation is completed, the Lead Investigator will then re-contact the complainant and attempt to resolve the complaint. If this is unsuccessful, the Lead Investigator will advise the complainant that they will refer the complaint to PSU for additional review. The Lead Investigator will brief the PSU Superintendent.
- The PSU Superintendent will review the original investigation, investigate any outstanding issues, and then contact the complainant to attempt to resolve the complaint. If this is not successful, the PSU Superintendent will refer the complaint to the PSU Commander for further review. The Superintendent will brief the PSU Commander.

- If the PSU Superintendent was the Lead Investigator and they are unable to resolve the original complaint with the complainant, they will advise the complainant that the complaint will be investigated further. After further investigation is completed, the PSU Superintendent will then re-contact the complainant and attempt to resolve the complaint. If this is unsuccessful, the PSU Superintendent will advise the complainant that they will refer the complaint to the PSU Commander for additional review. The PSU Superintendent will brief the PSU Commander.
- The PSU Commander will review the original investigation, investigate any outstanding issues, and contact the complainant in an attempt to resolve the complaint. The PSU Commander will notify the Deputy Chief, Program Development and Service Quality if the complaint remains unresolved.
- If, during any of the above-noted steps, the complaint is successfully resolved with the complainant, the investigation file will be considered closed.
- If the complainant remains dissatisfied with the decision, the complainant is to be advised of the opportunity for external review by the Emergency Health Services Branch, Ministry of Health and Long-Term Care by phone at 1-800-461-6431 (toll free in Ontario only) or in writing to 5700 Yonge Street, 6<sup>th</sup> Floor, Toronto, ON, M2M 4K5, Attention: Complaint.