



# COMPLAINT FORM

O/Ref.:

USER IDENTIFICATION		IDENTIFICATION OF THE ORIGINATOR OF THE COMPLAINT (if other than the user)	
Name:		Name:	
Medical file #:		Link with user:	
Date of birth:		Legal representative:	yes <input type="checkbox"/> no <input type="checkbox"/>
Adress:		Adress:	
Postal code:		Postal code:	
Telephone (residence):		Telephone (residence):	
Telephone (other):		Telephone (other):	
email:		email:	
Correspondence Transmission Preference: <input type="checkbox"/> email <input type="checkbox"/> mail			

DETAILS OF EVENT	
Event's date and hour:	Location:
N° of room:	Name and job title of the employee concerned:

NATURE OF THE COMPLAINT (add a sheet in appendix if insufficient space)

EXPECTED RESULTS

Signature of the user

Signature the originator of the complaint

Date

# Improving the quality of services is our constant concern!

*Filing a complaint is a constructive gesture when it comes to ensuring the rights of users and helping to improve the quality of health services and social services.*

## All users have the right:

- to be informed about available services and how to obtain them;
- to receive continuous, adequate personalized and safe services;
- to choose the professional or the establishment that will provide the services;
- to receive care in case of an emergency;
- to be informed about their health status and available solutions and their impacts before agreeing to a care protocol;
- to be informed, as soon as possible, about any incident or accident that occurred during the provision of services;
- to be treated with courtesy, fairness and understanding, and with respect for their dignity, autonomy, needs and safety in every intervention;
- to accept or refuse care in a free and informed manner, by themselves or through their representative;
- to access their medical record, which is confidential;
- to participate in the decisions that concern them;
- to be accompanied or assisted by a person of their choice when they obtain information on services;
- to file complaints, without reprisal, to be informed of the complaints procedure and to be accompanied or assisted in all stages of the proceedings;
- to be represented with respect to all their rights in the event of a temporary or permanent incapacity to give consent;
- to English-language services for English-speaking users, according to the government access program.

## Who can file a complaint?

Any person may file a complaint regarding:

- Health or social services;
- Services within the health and social;
- Research activities.

## How to file a complaint?

A complaint can be filled verbally or in writing (mail, email, fax) and submitted to the office of the Commissioner. You can use the attached form.

## All users, visitors or relatives have the responsibility to:

- to remain respectful of interveners and other users;
- to collaborate to care and services that concern them according to their abilities;
- to provide all the information required to properly provide treatment;
- to be respectful of the rules and policies of the establishment.

## If you feel your rights were violated

You can first discuss the situation with the person responsible for the sector concerned, his/her replacement or the physician. The majority of problems are resolved at this level. **If you remain dissatisfied** and wish to file a complaint, please contact the office of the Commissioner.

## To contact us:

### Centre intégré de santé et de services sociaux (CISSS) de la Côte-Nord

[www.ciasss-cotenord.gouv.qc.ca](http://www.ciasss-cotenord.gouv.qc.ca)

Service Quality and Complaints Commissioner

405, avenue Brochu

Sept-Îles (Québec) G4R 2W9

☎ : 418 962-2572, ext. 414122

☎ : 1 833 677-6243

✉ : [plaintes.09ciasss@ssss.gouv.qc.ca](mailto:plaintes.09ciasss@ssss.gouv.qc.ca)

## For assistance or support:

### Users' Committee of the establishment

The Users' Committee is an important resource which has full knowledge of your rights. Its mission is to help you and support you, if needed.

☎ : 418 589-2038 / 1 866 545-2038, ext. 342763

### Centre d'assistance et d'accompagnement aux plaintes (CAAP)

[www.caap-cn.org](http://www.caap-cn.org)

The CAAP is a community-based organization mandated by the *Ministère de la Santé et des Services Sociaux* to assist and support users who wish to file a complaint. It helps users to formulate and write their complaints. CAAP's services are free and confidential.

☎ 1 877 767-2227

À Baie-Comeau: 1800, Boul. Laflèche

À Sept-Îles: 690, Boul. Laure

☎ : 418 295-2779

☎ : 418 968-2779