

HOW TO IMPROVE OUR SERVICES OR FILE A COMPLAINT

HAVE YOU SPOKEN ABOUT YOUR ISSUE TO THE PERSON WHO SERVED YOU?

Stard by talking to the person or to her/his superior. They will work with you to try to remedy the situation or find a solution to your problem.

3 OR CONTACT THE SERVICE QUALITY AND COMPLAINTS COMMISSIONER:

- You will be treated courteously and equitably, with understanding and without discrimination.
- After reviewing your complaint, the Commissioner will inform you of the actions that will be taken or the recommendations that will be made to the relevant authorities.

www.ciusss-estmtl.gouv.qc.ca
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IF THE SITUATION PERSISTS

and you need help with filing a complaint, or another form of support, contact:

- the Centre d'assistance et d'accompagnement aux plaintes de Montréal at 514 861-5998.
- or the institution's Users' Residents' Committee.

The Centre or the Committee will also provide you with information on your rights.

FOR INFORMATION, CALL: +1-877-343-3007

E-MAIL US AT:

commissaireauxplaintes.cemtl@ssss.gouv.qc.ca

TO FILE A COMPLAINT:

- Fill out the form on the reverse side of this page.
- Mail the form to :

Commissaire aux plaintes et à la qualité des services 3095, rue Sherbrooke Est, bureau C-311 Montréal (Québec) H1W 1B4

or

- Scan the form and attach it to your e-mail
- Fax your form to: 514 252-3589.

COMPLAINT FORM

IDENTIFICATION OF USER

Family name and first name:	Full address :
Phone number (home):	
Phone number (work) :	Doctol and a
E-mail:	Postal code:
Date of birth :	Medical file number:
DENTIFICATION OF USER'S REPRESENTATIVE (if applicable)	
Family name and first name:	
Phone number:	Relationship with user:
OMPLAINT: State the facts and the reason fo	or the complaint. Provide a description of the event
Name of institution:	
EXPECTED OUTCOME OF THE COMPLAINT:	
AFECTED GOTCOME OF THE COMFEAUNT.	
Signature:	Date :

Centre intégré universitaire de santé et de services sociaux de l'Est-de-l'Île-de-Montréal

