

Intermountain Forensics

ADM-114

03

Revision #

SOP #

Forensic DNA Technical Leader Approval

Issue Date 03/06/2023

A. E. Walley

Complaints

1. Purpose

Details the process of receiving, evaluating, and addressing complaints.

2. Summary

The laboratory is committed to ensure that customers are satisfied with the service provided to them. When satisfaction is not achieved, the laboratory welcomes feedback and criticism to achieve its objective of continuous improvement. This policy describes the mechanism to receive, evaluate, and make decisions on complaints.

3. Procedure

2.

1. Receipt of a Complaint

a.

- A verbal complaint received by any staff member:
 - i. The staff member must inform the DNA Technical Leader.
 - ii. The staff member can inform the individual (either internal or external) that they may issue a formal complaint by either:
 - 1. Contacting the DNA Technical Leader via phone.
 - 2. Sending an e-mail to Info@intermountainforensics.com (preferred)
- b. A written complaint received by any staff member:
 - i. The staff member must forward the complaint to the DNA Technical Leader
- 1. . Documentation of the complaint
 - a. The complaint will be entered into the complaint log by the DNA Technical Leader and any written communication will be saved.
 - i. The complaint will be given a unique number assigned sequentially in the complaint log and an
 - electronic file will be created for that complaint number to document communication, response etc.
- 3. Internal notification of the complaint
 - Appropriate members of management will be notified of the complaint if they have not already been informed.
 - i. Documentation of the notification will be saved in the electronic file.
- 4. Investigation

a.

- a. The DNA Technical Leader (or designee) is responsible for gathering and verifying all necessary information to validate the complaint.
 - i. This can include:
 - 1. Discussion with employees, customers, etc.
 - 2. Review of casework, e-mails, documents etc.
 - ii. Staff feedback is encouraged during this process.
- b. When enough information is available the DNA Technical Leader (or designee) will then decide as to the severity of the complaint and the response that is necessary
 - i. A "critical" complaint that requires the use of the Corrective Action policy to alleviate.
 - ii. A "feedback" complaint requires, at minimum, the use of the Preventative Action policy to alleviate.
 - 1. Corrective action may be pursued, in place of the preventative action policy, where appropriate.
 - iii. A "specific" complaint requires no use of formal continuous improvement.
 - 1. Corrective action may be pursued, in place of the preventative action policy, where appropriate.
 - 2. A specific response is still required and should be documented within the complaint log and the associated complaint electronic file.
 - 3. This response is directed by the Director of Laboratory Development or the Director of Laboratory Operations.
 - a. If technical in nature the DNA Technical Leader should be consulted
 - iv. An "unfounded" complaint requires not use of formal continuous improvement, but preventative action may be pursued to avoid similar complaints in the future.
- 5. Communication to the Customer
 - a. In all instances, feedback to the customer is required.



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- i. The Director of Laboratory Development or the Director of Laboratory Operations (or designee) will
- The Director of Laboratory Development or the Director of Laboratory Operations (or designee) wi provide response, updates, and communication to the customer.
 - 1. These will be documented in the electronic complaint electronic folder.
- ii. If technical in nature, the Forensic DNA Technical Leader should be included in the customer feedback.
- iii. The individual associated with the complaint will not be involved in providing the response to the customer on the process or outcome of the complaint.

6. Transparency

- a. The laboratory will be as transparent as possible in the complaint process.
- b. This includes:
 - i. Prompt acknowledgement of the receipt of the complaint
 - ii. Updates to the complainant when milestones have been reached.
 - iii. Update to the complainant when a response is complete.
- 7. Management Review
 - a. Complaints will be reviewed, at minimum, at the annual management review as a part of the Corrective/Preventative action review.
 - i. Complaints, Corrective and Preventative actions are to be viewed as opportunities to continually improve all laboratory processes.

4.	References
N/A	

Definitions

N/A