

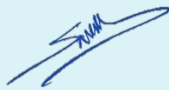




BIOGENIX

POLICY PROCEDURE FOR COMPLAINT MANAGEMENT

	NAME	DESIGNATION	SIGNATURE	DATE
Prepared by	MS. PREETY RAHEJA	QUALITY MANAGER		30/06/2020
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VERSION: 1.0

DATE OF EFFECTIVITY:
01/07/2020

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2. REVISION HISTORY

#	Version	Date	Changes Made by	Reason for Changes	Clause Changed
1	1.0				





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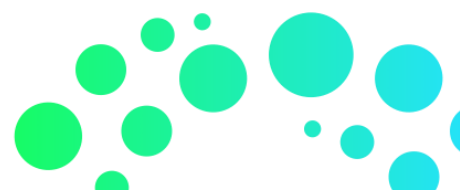
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4. POLICY STATEMENT

Complaint management is done as per this policy and procedure.

5. PURPOSE

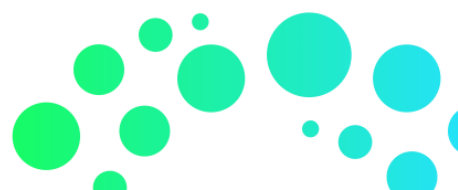
- 5.1. The purpose of this procedure is to identify the process /procedure for complaint management at BIOGENIX which leads to customer satisfaction through the feedback from customer, as complains are considered as improvement tool in BIOGENIX laboratory.
- 5.2. To provide a fair and effective quality improvement focused mechanism for addressing patient complaints.
- 5.3. To centralize, unify and handle complaints in controlled uniform manners. The procedure is in accordance with clause 4.8 of ISO 15189:2012 Medical Laboratories –Requirement for Quality and Competence

6. SCOPE

- 6.1. The scope of this procedure is to cover all kinds of complaints that are related to staff or clients.
- 6.2. The procedure is applicable to the suppliers, clients (doctors, clinics etc) and staff of Biogenix.
- 6.3. **Target Audience:**
 - 6.3.1. **Biogenix Management**
 - 6.3.2. **Biogenix Staff**

7. DEFINITIONS

Complainant:	Any person contacting the BIOGENIX staff with a complaint or grievance in respect to the center staff, facilities and/or services. They could be the patient, staff, the patient's relatives or friends or any party dealing with the center and requiring a service.
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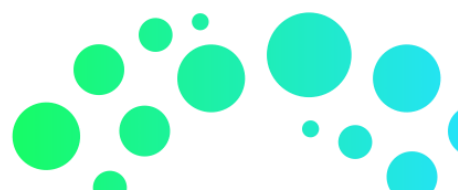
Complaint officer	The person responsible for coordination and resolving customers complains in the BIOGENIX. The lab director takes the role of complaint officer.
Third Party:	Any entity acting on behalf of the patient.
Feedback	The opinion about the services provided, that provides an overview whether it is successful or liked .It includes suggestion, appreciation and complaint.
Suggestion	An idea or a thought provided for the improvement of the services
Appreciation	The expression of gratitude for the services provided
Concerns	An expression of dissatisfaction raised by individual regarding any aspect of the services provided
Satisfied	The raised complain is resolved and the complainant is satisfied with the response and corrective measures
Corrective actions	Steps taken to resolve the complains/concerns

8. ACRONYMS

- 8.1. DOH: Department of health Abu Dhabi

9. RESPONSIBILITIES

- 9.1. All **BIOGENIX staff** is responsible to resolve the verbal complaint or report and direct patient complaints to the laboratory director/ Finance and Administration Manager. All staffs are aware of the Complaints Procedure and how to cooperate with complaint investigations and respond openly.
- 9.2. The **Lab Director** plays the role of complaint officer and is responsible to meet the complainant and try to resolve the complaint.





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- 9.3. **Quality Manager:** Monthly Complaint Review for action Plan for improvement in the system.

10. PROCEDURE

10.1. Receiving of Complaint:

- 10.1.1. Complaint received by any member of LMC staff by phone, in person or in writing (complaint box) is forwarded to the Lab. Director.
- 10.1.2. The receiver of the complaint gives Lab. Director the complainant's necessary data (name and contact details) and identifies if the complaint is in person, by phone or in writing. Then the complaint is analyzed that whether it is substantial or non-substantial and then proceed accordingly with nature of the complaint by contacting specific department.
- 10.1.3. The Lab director/ staff deputed by lab. director is contacting the complainant within 24 hours to acknowledge.
- 10.1.4. If the complaint is submitted in writing the Lab. Director is contacting the complainant within 24 hours with the initial action taken, resolution and/or anticipated time frame for action.

10.2. Complaints can either be verbal or written.

10.2.1. Verbal Complaints

- 10.2.1.1. If solving the complaint is within the receiver's authority, then they immediately take action to resolve the complaint and fill the Complaint Record Form.
- 10.2.1.2. The staff makes all possible efforts to resolve verbal concerns by taking proactive approach and report to the Lab. Director.
- 10.2.1.3. The Quality Manager maintains the log for all verbal complaints along with measures for correction for the record purposes.
- 10.2.1.4. If for any reason the concerns are unresolved and /or appear as sensitive in nature, then they call the complainant to discuss further and to resolve the complaints.
- 10.2.1.5. The Quality Manager introduces himself to complainant and encourages the complainant to relate his/her complaint in detail.





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10.2.1.6. The Quality Manager tries to resolve the concerns and if needed the complaints is changed in to written form.

10.2.1.7. The complaint officer explains the complainant about the procedure for written complains and feedback on the corrective action.

10.2.2. Written complains

10.2.2.1. The Complainants can lodge their complaints in writing by filling the Patient Complaint form

10.2.2.2. The written complaints can be dropped in the **complaint box** available in the reception area.

10.2.2.3. The _____ is responsible to open the complaint boxes on daily basis.

10.2.2.4. The Lab director does the initial analysis of the complaint and marks the complaint as substantial, non-substantial, sensitive or non-sensitive and assigns the reference accordingly.

10.2.2.5. If the complaint belongs to any BIOGENIX department and it needs detail investigation, then they refers to the concerned department. It is the responsibility of the section to respond back to the complainant within two working days.

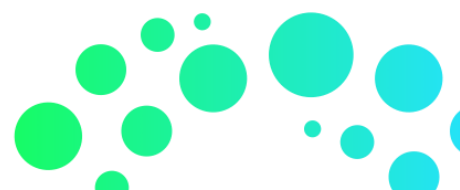
10.2.2.6. The Lab director reviews the feedback of the complaint received from staff and informs the complainant about the results or decisions taken.

10.2.2.7. The Lab director /staff deputed calls the complainant and asks for the feedback on the action taken. If the complainant is satisfied by the action taken, then the complaint is considered closed.

10.2.2.8. If the complainant is still not satisfied and wants further investigation, the complaint is referred to the higher management.

10.2.2.9. The Quality Manager is responsible to maintained all the record of complaint and if not confidential than it can be discussed with the staff for corrective, preventive actions.

10.2.2.10. The Lab director investigates the complaint and reports are considered as a confidential.





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- 10.3. **Time Limit for making complaint:** As per DOH guidelines time limits apply to the initiation of a complaint. A formal complaint should normally be made within 6 months of the incident that caused the problem, or within 6 months of the discovery of the problem, provided that this falls within a 12 month period of the incident.

11. CROSS REFERENCE

- 11.1. Complaint Management Policy: Health Authority of Abu Dhabi. Policy No. HAAD/CMHF/SD/1.2, version.1.2
- 11.2. ISO 15189:2012 Medical Laboratories –Requirement for Quality and Competence

12. RELEVANT DOCUMENTS & RECORDS

- 12.1. [BG/REC/GEN/049 Complain Form-written](#)
- 12.2. BG/REC/GEN/050 Complain Forms- verbal

