Complaints		
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Complaints

1 Guiding Principles and Scope

1.1 Complaints can provide valuable information about problems with the management system or insight into potential improvements. Complaints have varying degrees of seriousness. The Department of Forensic Biology endeavors to respond to complaints to a degree commensurate with the magnitude and urgency of the complaint.

1.2 This procedure describes how the Department of Forensic Biology deals with complaints against laboratory activities it is responsible for received from customers, other parties, and employees. Any complaints made by Forensic Biology employees not related to laboratory activities should be brought to the attention of the OCME Human Resources Department.

1.3 If a laboratory related activities complaint is made against a specific Forensic Biology staff member, that staff member will not perform or review the resulting investigation performed by the Department of Forensic Biology.

2 Procedure

2.1 Complaints may be received verbally or in writing by any member of staff.

2.2 The recipient evaluates the complaint and directs it to an appropriate staff member for follow-up. For example:

2.2.1 General concerns and complaints or those relating to a specific function of the laboratory, case acceptance criteria, or evidence and reporting policies should be directed to a Criminalist IV Supervisor, the Quality Assurance Manager (QAM), a Technical Leader, or a Manager.

2.2.2 Evidence intake issues should be directed to a Sign-In specialist.

2.2.3 Specific case issues or personnel performance issues should be directed to the supervisor of the scientist assigned to the case.

2.2.4 External customer complaints (i.e. NYPD or DAO) should be directed to the Chief of Laboratories, the Director, a Deputy Director, an Assistant Director or the QA Manager.

2.2.5 Internal customer complaints (i.e. OCME staff) should be directed to the Chief of Laboratories, the Director, a Deputy Director, an Assistant Director, a supervisor or the QA Manager.

2.3 The staff member evaluates the complaint.

2.3.1 As needed, the staff member contacts the complainant to discuss the specifics of the issue. If the staff member is able to resolve the issue during this discussion, and the issue was not related to non-compliance with the laboratory's management system, no further action is necessary.

2.3.1.1 Case related contacts are documented in the case communication log.

2.4 If the evaluation indicates that the complaint is due to a specific non-conformance with Forensic Biology guiding principles, procedures, or quality system, the staff member determines whether the CONTROL OF NON-CONFORMING WORK and/or QUALITY INCIDENT REVIEW procedures are applicable

2.4.1 The staff member may consult with the QAM and/or an appropriate Technical Leader to assist in making the determination.

2.4.2 To avoid duplication of effort, complaints investigated and documented as quality issues are not required to be investigated via the RECORD OF COMPLAINT FORM.

2.5 If the staff member is unable to resolve an issue, and the issue does not fall under the requirements for investigation as non-conforming work or a quality incident review, the issue rises to the level of a formal complaint.

3 Formal Complaint Process

3.1 The staff member conducting the initial follow-up of the complaint (the "Forensic Biology Reporter") completes Page 1 of the RECORD OF COMPLAINT FORM and submits the form to the QAM.

3.1.1 Written complaints are attached to the form.

3.2 The QAM,, either independently or after discussion with the Director or designee, assigns someone to conduct additional investigation with respect to the validity of the complaint. The investigator can be the same as the "Forensic Biology Reporter". Page 2 of the RECORD OF COMPLAINT FORM is used to record the details of the investigation and the investigator's conclusion.

3.3 The investigator returns the form to the QAM for review.

3.3.1 If the QAM disagrees with the investigator's conclusion, he/she may request additional investigation or may change the "Investigation Status" on the form.

3.4 When the investigation is complete to the satisfaction of the QAM, the appropriate box on Page 3

is completed by the QAM to describe the corrective actions taken and/or follow-up with the complainant.

3.5 The form is provided to the Director for review and signature. The Director returns the form to the QAM.

3.6 The QAM assigns the complaint a unique identifier for documentation purposes and files the complaint as a Quality Record.