

1. AIM:

It is to record the complaints and suggestions made by the institutions or individuals receiving service to our laboratory and to make it a standard process to eliminate the reported dissatisfaction.

2. SCOPE:

This procedure includes detecting complaints and satisfaction levels of customers receiving laboratory services and recording and evaluating the feedback provided.

3. ABBREVIATIONS:**4. DEFINITIONS:****5. RESPONSIBILITIES:**

All employees are responsible for receiving complaints and suggestions, and the Quality Manager, Administrative and Financial Affairs Officer and Laboratory Manager are responsible for evaluating them and planning the improvement works to be carried out.

6. ACTIVITY FLOW:

6.1. In order to increase awareness of the needs and conditions of those who benefit from laboratory services throughout the laboratory, the following practices are carried out under the responsibility of the Laboratory Manager and Quality Manager.

6.2. Customer Satisfaction Survey Application

6.2.1. In order to perceive customer satisfaction in our laboratory **Customer Satisfaction Survey Form** has been prepared. The prepared surveys are forwarded by the Quality Manager to the institution responsible at least once a year via Google Forms, courier, e-mail, fax or courier, or questions are answered via phone. Returned surveys are collected by the Quality Manager. Statistical studies for the collected surveys for each period are carried out by the Quality Manager. Obtained data and survey results are evaluated at the YGG meeting.

6.2.2. Evaluation; **In Customer Satisfaction Survey Form** The answers to the 10 questions are evaluated and the overall satisfaction score is calculated out of 100 and recorded on the form. In the survey evaluation, if all grades given at the "Very Bad (1), Bad (2) or Medium (3)" level or suggestions or complaints written in the description section are stated, corrective or preventive action is initiated by contacting the customer who completed the survey and obtaining detailed information about the problem. .

6.2.3. According to the results checked at the YGG meeting, the issues that require improvement are shared with the relevant responsible people. Complaints from institutions or individuals receiving service are handled by Patient Reception and Secretariat Personnel. **Opinion/Suggestion Form** is transferred and forwarded to the Quality Manager. All work related to the resolution of the complaint is carried out and recorded. Improvement works to be carried out according to the survey results **In Corrective and Preventive Action Procedures** It is processed according to the defined flow. The Quality Manager or the relevant expert will respond by phone or in writing (e-mail) to the person in charge of the institution who is dissatisfied with the results of the improvement activities carried out as a result of the corrective and preventive action studies.

6.2.4. If there is a complaint or objection from customers regarding the Survey Results that needs

to be corrected urgently, it is evaluated by the Quality Manager and Laboratory Manager without waiting for the YGG meeting, and the necessary Corrective/Preventive Actions are initiated and the customer is informed.

6.3. Personnel Satisfaction Survey Application

Staff suggestions and complaints, **Opinion/Suggestion Form** It is recorded with. Written suggestions and complaints are conveyed to the upper management by using the personnel suggestion and complaint box or by forwarding them to the quality manager. The suggestion and complaint box is checked and evaluated by the Quality Manager once a month. When necessary, corrective action is initiated and the result of the action is reported to the personnel who submitted the complaint or suggestion.

Once a year in our laboratory **Employee Satisfaction Survey** application is made. The results of the survey application are evaluated by the Laboratory Manager, and according to the results, preventive or corrective action is initiated when necessary. In the survey scoring, "YES" will be taken as 100 points, "SOMETIMES" will be taken as 50 points, and "NO" will be taken as 0 points. Questions answered with "NO" for **Corrective and Preventive Action Procedure** The process is started accordingly.

6.4. Resolving Complaints and Suggestions Sent from Institutions/individuals

6.4.1. Complaints Reported by Phone

Our laboratory generally receives complaints and suggestions on the following issues;

- Original patient results sent to institutions are not delivered or arrive late.
- Disruptions in communication,
- Loss of samples,
- mixing of samples,
- Missing test entry,
- Complaints about courier and cargo personnel,
- Incorrect or incomplete entry of patient names,
- Problems in getting results from LIS connection,
- Disruptions in the shipment of consumables and bags,

Complaints are sent to our laboratory mainly about the issues mentioned above and other issues that may occur. Complaints and suggestions received from institutions via telephone are addressed by Patient Reception and Secretariat Personnel and employees. **Opinion/Suggestion Form** is recorded. The recorded complaints are forwarded to the quality manager by the personnel receiving the complaint. The quality unit forwards the complaint to the relevant officer and a plan is made for the solution. The official of the institution making the complaint is informed on the same day that the complaint has been recorded by the quality unit and that they have initiated work on it, and that they will be informed again if necessary when it is resolved.

6.4.2. If the situation subject to the complaint is a non-conformity, it is necessary to eliminate the non-conformity after the necessary evaluations. **Corrective and Preventive Action Procedure** The

process is started accordingly. The status of the complaint or suggestion is transferred to the Laboratory Manager. Customers are informed by the Quality Manager or the relevant responsible person by phone or in writing (e-mail) about the complaints and suggestions on which improvement efforts have been completed. Records of the work performed are kept by the Quality Manager.

6.4.3. Suggestions and Complaints Received During Customer Visits

Suggestions and complaints received from institution officials during institution visits made by the Laboratory Supervisor **Opinion/Suggestion Form** is transferred and forwarded to the Quality Manager. Improvement activities to be carried out for complaints and suggestions received **Corrective and Preventive Action Procedure** The results are followed up by the Laboratory Manager, the relevant expert and the Quality Manager, and the results are communicated in writing (e-mail) to the institution or person to whom the complaint or suggestion came.

6.4.4. Complaints Received Via the Internet

Another method of receiving customer complaints and suggestions is www.sapiens.com.tr located at **Opinion/Suggestion Tracking Form** Stop. This form, available on the website, is filled out by customers and sent to the laboratory via e-mail. Complaints or suggestions coming to the laboratory are directed to the Quality Manager. Actions to be taken as a result of complaints or suggestions received by the Quality Manager 6.4.2. It is done as stated in the article.

6.5. Analysis of Customer Complaints

In our laboratory **Opinion/Suggestion Tracking Form** Complaints and suggestions recorded by the Laboratory Quality Manager are analyzed once a year.

The analyzes are evaluated at routine review meetings and YGG meetings and necessary improvement work is carried out.

7. RELATED DOCUMENTS:

Customer Satisfaction Survey Form

Opinion Suggestion Form

Opinion Suggestion Tracking Form

Corrective Preventive Action Procedure

Employee Satisfaction Survey Form

REVISION INFORMATION

Revision date	Revision Number	Revision Description
19.01.2023	01	Questions answered "NO" to article 6.3 for Corrective and Preventive Action Procedure 'The process is started accordingly.' sentence has been added.

PREPARER	APPROVED BY
Quality manager	