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# MANAGEMENT AND REVIEW PROCESS FOR COMPLAINTS, SUGGESTIONS OR CONGRATULATIONS IN UIB SERVICES

Version:	Date approved:	Changes to previous:		

Produced by:	Reviewed by:	Approved by:
SEQUA	SEQUA	Office of the Head of Administration
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#### 1 PURPOSE

Detect, collect, review, analyse and record complaints, suggestions and congratulations from different interested parties in order to establish and implement corrective, preventive or improvement actions that underpin the organisation of ongoing improvement activities.

#### 2 SCOPE

All activities linked to submitting, processing and analysing complaints and suggestions, as well as proposing and implementing corrective and prevention actions and their monitoring to resolve any submitted complaints or suggestions.

#### 3 REFERENCES/REGULATIONS

RD 951/2005 of 29<sup>th</sup> July that sets out the general framework for improving quality in the national general administration service.

#### 4 **DEFINITIONS**

**CGQ**: Quality Assurance Committee.

#### **5 IMPLEMENTATION**

#### 5.1 General Features

Complaints and suggestions are not an administrative appeal. Nor does the submission of a complaint mean deadlines that may be set out in current regulations are halted. In the same vein, submitting complaints does not represent a waiver of other rights.

#### 5.2 Submitting a Complaint, Suggestion or Congratulations

#### 5.2.1 Who may submit complaints, suggestions or congratulations

All interested parties within and external to the UIB may submit complaints, suggestions or congratulations.

Anonymous complaints and suggestions may be submitted although, in this instance, the interested party shall have no right to a reply. In this case, the head of the unit shall decide on whether to include the document in the complaints and suggestions report, depending on its relevance.

#### 5.2.2 Communication Channels

Those interested in submitting a complaint or suggestion may do so by any of the following methods:

In-person: at the service by submitting the form attached to this document. Services must have a sufficient number of forms available to interested parties. Where there are none, the service staff shall be responsible for providing a form to anyone who requests it. In this instance, one copy shall be given to the interested party and one be registered in the service

Online: the Information Service shall deliver complaints or suggestions received on the website to the quality officer in the service to which they are addressed



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Post: a letter addressed to the quality officer E-mail: addressed to the quality officer.

The interested party must specify the channel over which s/he wishes to receive the reply to the complaint or suggestion. Failure to do so will mean the reply is sent back over the same channel where the complaint or suggestion was received, except in the case of the website. In this instance, the reply shall be sent via e-mail.

### 5.3 Determining and analysing the Causes and Categorising the Complaint or Suggestion

The head of the unit, alongside the quality officer, must determine and analyse the causes behind the problem, using the form attached to this document.

#### 5.4 Proposing Corrective, Preventive or Improvement Actions

Once the reasons for the complaint or suggestion have been analysed, the head of the unit, alongside the quality officer, must propose corrective, preventive or improvement actions for all those that cannot be immediately resolved.

The proposal must include the proposed activities, the person responsible for undertaking them and the planned start date.

#### 5.5 Approving Improvement Actions

The CGQ must approve the actions proposed by the head of the unit, alongside the quality officer, regarding all complaints or suggestions that have not been immediately resolved.

### 5.6 Implementation and Monitoring of Corrective, Preventive or Improvement Actions

Actions that come as a result of complaints or suggestions shall be implemented and monitored. This applies to those resolved immediately and those approved by the CGQ.

All planned or undertaken actions shall be documented on the form and be monitored. The quality officer is responsible for overseeing the implementation of the planned actions. Once the planned actions are implemented, the implementation date must be registered.

#### 5.7 Notifying the Interested Party about Actions

Whether the problem has been immediately resolved or whether corrective or preventive actions have been proposed, the quality officer must notify the interested party about the decision taken.

A deadline of 12 working days is set in order to reply to the interested party and inform her/him about the steps taken or, at least, to confirm receipt of her/his complaint/suggestion and subsequent processing.

The interested party may request an acknowledgement of receipt via a different method than how the form was originally submitted. Where a specific channel is not stated for the acknowledgement of receipt, the same one used by the interested party to submit her/his complaint or suggestion shall be used to reply.



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The communication date must be recorded.

#### 5.8 Effectiveness Check

Finally, the quality officer must check that the reasons leading to the complaint or suggestion have been resolved and record the date of this check.

This activity closes the complaint or suggestion record and this will then be registered. The record shall be included in the annual complaints and suggestions report, in line with what is set out in section 6.1.

#### 5.9 Congratulations

Where congratulations are received, a record of best practice must be noted.

#### 6 MONITORING AND EVALUATING

#### 6.1 Annual Complaints and Suggestions Report

The quality officer shall produce a minimum of one report per year covering at least the following:

1. A comparative statistical report on the number of complaints and suggestions received in the current and previous year, categorised by:

The reasons for the complaints and suggestions

The timing of the complaints and suggestions

Compliance with the reply deadlines

Anonymous complaints and suggestions, where applicable, must be given differentiated statistical processing from non-anonymous submissions

2. Copies of the forms, replies and adopted measures for all complaints and suggestions.

The following are indicators of this process:

- Average complaint response time
- Number of incidents processed
- Percentage of improvement actions implemented.

#### 7 FILE

Record ID	Mediu m	Custody Supervisor	Storage Time
Complaint or Suggestions Form	Paper	Quality Officer	6 years
CGQ Minutes	Paper and/or Computer File	CGQ Secretary	6 years
Annual Complaints and Suggestions Report	Paper and/or Computer File	Quality Officer	6 years

#### 8 RESPONSIBILITIES



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#### 8.1 Head of Service / Quality Officer

Analyse complaints and suggestions, propose corrective, preventive and improvement actions, communicate with the interested person, perform the effectiveness check and produce the annual complaints and suggestions report.

#### 8.2 Quality Assurance Committee (CGQ)

Approve, implement and monitor corrective, preventive and improvement actions.

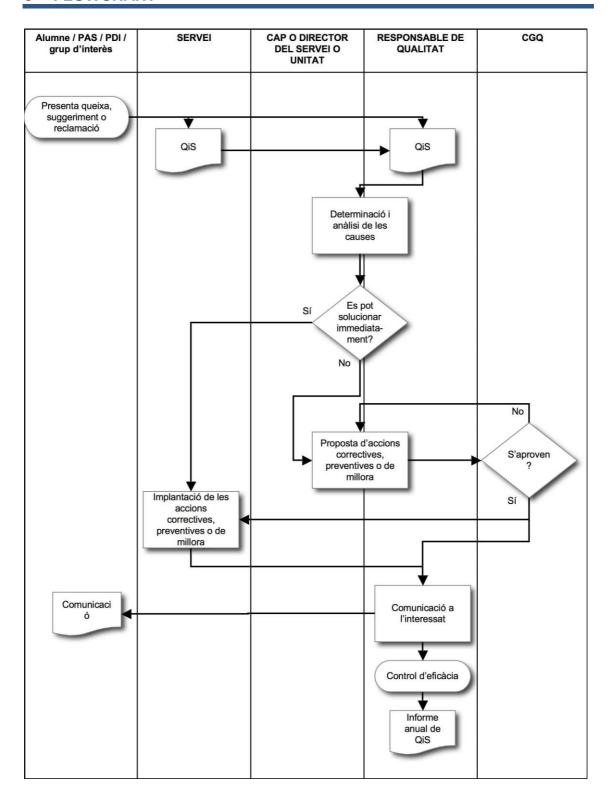


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#### 9 FLOWCHART





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**APPENDICES** 

COMPLAINT OR SUGGESTION FORM					
PERSONAL DETAILS					
Name Address ID No. E-mail  Stu		□ F			P/code  PAS
DETAILS OF THE UNIT INVOLVED IN THE COMPLAINT OR SUGGESTION Name/service where the complaint or suggestion is addressed Incident date  Description / reason for complaint / suggestion					
Would you like u	s to reply by	☐ Post		☐ E-mail	



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This section is to be filled in by the head of service or quality officer					
Analysis of the reasons					
Proposed actions					
Proposed action	Supervisor	Start date	Implemen- tation date		
Notification date of reply to interested party					
Effectiveness check					
Have the reasons behind the complaint/suggestion been add	o Date				
Is the person who submitted the complaint or suggestion sati	Date				

Signed,