

# Feedback

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## 1.0 Scope

PTC will actively seek feedback from its participants, stakeholders and other interested parties. PTC maintains records of all feedback it receives. This includes feedback that expresses either satisfaction / dissatisfaction, or requests PTC to reconsider a decision that the association has rendered on any subject of concern to the originator of the feedback.

## 2.0 Policy

PTC actively seeks feedback and input to the operation and improvement of its programs. This feedback is reviewed and documented by appropriate staff and changes made accordingly.

## 3.0 Procedure

### 3.1 SOURCES OF FEEDBACK

#### 3.1.1 Program Feedback

PTC receives written feedback within all PTC programs. The following feedback mechanisms are used within programs:

PT participants submit feedback to PTC following each study. This feedback mechanism is tracked and the resulting information used within the Proficiency Testing program. The process is documented in PROC09 - *PT Procedures*.

PTC periodically issues participant satisfaction surveys and other instruments to acquire feedback on the operation of PTC programs. These ad-hoc mechanisms acquire information that is tracked and acted upon by PTC staff. Records of their implementation and use are contained in management meeting minutes, management review minutes and other similar records.

All other feedback to PTC follows the procedures contained in this procedure and is acquired, tracked and acted upon accordingly.

#### 3.1.2 Compliment

Compliments are acquired and tracked in the F04 - *Feedback Log*. Compliments are forwarded to the Executive Director. At the discretion of the PTM the compliment may be circulated to all staff and the Board. Upon agreement with the person submitting the compliment, the nature of the compliment may be disseminated more widely.

#### 3.1.3 Complaint

In general, complaints include written communication expressing dissatisfaction with a PTC service, policy, procedure, conduct, or some similar aspect of PTC operation. Complaints are recorded and tracked in the F04 - *Feedback Log*.

A Request to check the accuracy of a PT evaluation is not considered to be a complaint. However, if it is found that the evaluation was incorrect, it is treated as a non-conformance and handled as per PROC02 – *Continuous Improvement*.

## 3.2 ACTION UPON RECEIPT OF COMPLAINT

The PTC staff member receiving a complaint is encouraged to resolve it to the satisfaction of the complainant immediately if possible. A record of actions taken shall be entered into the Feedback Log.

The Feedback Log will include at a minimum:

- Feedback number, year and number format (e.g. 2020-001 etc.)
- The date the complaint was received,
- The complainant,
- The issue,
- The employee assigned to investigate/resolve/follow up,
- Summary of the resolution.
- ICAR no. where applicable
- Link to supporting documents/emails.

The Executive Director will review all feedback entered in the feedback log.

If it is not possible to resolve the complaint immediately (within three working days), or if it is necessary to refer it to another staff member for resolution, the staff member who received the complaint shall report it to the Executive Director.

In the event of a significant complaint:

- Staff shall immediately report them to the Executive Director, whether or not they are able to solve the complaint immediately.
- The Executive Director will promptly inform the Board Chair.

A significant complaint is any complaint that, if substantiated, would have a negative impact on reputation, finances or liability.

## 3.3 INVESTIGATION OF COMPLAINT

### 3.3.1 Initiating Investigation

The staff receiving the complaint notifies the Executive Director who assigns it to the person who will conduct the investigation. Normally complaints will be investigated within program staff but the Executive Director may opt to include the Board depending on the nature of the complaint.

The investigator documents the courses of action in F04 – *Feedback log*.

In carrying out the investigations, the investigator should consider the following:

- Has the complaint been substantiated?
- Is the credibility of the applicable PTC program affected?
- Was there a breach of PTC Policy/Procedure?

Any yes answers to these questions require some action from PTC

### **3.3.2 General Conduct of an Investigation**

If the investigation of the facts substantiates the complaint, the investigator shall develop potential solutions to resolve the complaint.

If the facts identify any weakness, shortcoming or non-conformance of the PTC QMS, an ICAR is to be raised to address it. See PROC02 – *Continuous Improvement*.

The investigator shall ensure confidentiality is maintained while investigating the issues with respect to complaints.

Investigation of a complaint consists solely of comparing requirements to actual events. The only requirements that can be compared to actual events are those published PTC requirements that affect the required conduct of the organisation or person named as the object of the complaint. Unpublished procedures and policies do not apply.

From this comparison, the investigator is able to establish whether the facts substantiate the complaint.

### **3.3.3 Resolution Procedure for Complaints**

The Executive Director reviews any suggested solutions for implementation. The Executive Director signs off to close the complaint and indicate the implementation of the solution and any raised ICARs.

If implementation of the suggested solution requires more authority than that vested in the Executive Director, then the Chair of the Board of Directors, will be approached to execute the suggested solution.

The Executive Director closes the complaint in the Feedback log.

### **3.3.4 Review of Compliments and Complaints**

Complaints and compliments are reviewed during the annual Management Reviews.

## **3.4 COMPLETION AND CLOSURE**

Compliments are formally passed to the organisation or person being commended.

As soon as the investigation of a complaint is completed, and a decision on the issue of a non-conformance or opportunity for improvement is made, the complainant is notified in writing of these facts. If the complaint is not substantiated, the complainant is referred to the documentation that supports such a decision. If the complaint is substantiated, the complainant is informed of the nature and extent of corrective action taken to prevent recurrence.

## 4.0 Forms and Logs

The formats of the forms and logs associated with this procedure are:

- F03 - *Feedback Form*
- F04 - *Feedback Log*.

## 5.0 History of Changes

Date	Rev. No.	Sections	Changes
12/18/2019	1.0		Initial publication