

## Complaints Procedure Foundation HealthNet TPO

### 1. GENERAL

#### *Aim*

This is a protocol for dealing with all complaints received by HealthNet.

The aims of the protocol are:

- To ensure that employees act according to pre-determined, unambiguous guidelines;
- To increase the current level of service to donors, clients and prospects;
- To provide the administration and/or management with an insight into the total number, type and severity of complaints;
- To achieve results in the form of recommendations on work processes.

#### *Definition of a complaint*

A complaint is information indicating that something – as perceived by the client – has gone wrong or is incorrect in terms of HealthNet TPO's communications or activities. A complaint provides feedback to HealthNet on how it can improve its communications or activities according to the client's standards.

A complaint therefore always contains important information about the client:

- The client is motivated to inform the organization;
- The client communicates by writing or calling;
- The client trusts that the organization will follow up on the complaint and attempt to improve its service;
- The client knows something that the organization is not (yet) aware of;
- Something has gone wrong or is incorrect.

#### *General guidelines*

- Substantive political positions on the organization's policy are set by the board and management;
- All complaints are dealt with as quickly as possible, preferably within 14 days;
- If this is not feasible, then the client is notified;
- The tone of the response is personal;
- All complaints are registered;
- An appeal can be made to the board of directors.

#### *How a complaint is expressed*

A complaint can be expressed in several ways:

- Orally, through a letter, by email or by telephone;
- The nature of the complaint;
- Use of intonation: how it is said;
- Clearly or casually, for example at the end of a conversation or 'in passing'.

#### *Information to the client about the protocol*

Clients can request information regarding the protocol from HealthNet.

#### *Possibilities for appeal*

If a client is dissatisfied with the way he or she has been treated by HealthNet TPO, the client may appeal in writing to the board. The appeal will be handled within 14 days.

## 2. INTERNAL PROCEDURE

### *Registration of complaints*

Any complaint – via telephone or in writing – should be recorded.

The following information must always be recorded:

- Date the complaint was received;
- Name of the employee(s) involved (if applicable);
- Client's name, address and telephone number;
- Client's relationship with the organization: donor, client or prospect;
- Nature of the complaint (a brief but complete description)
- Description of the action promised to the client following the complaint;

The complaint should be saved in the folder on the network and the CRM system.

### *Internal audit if complaint is resolved*

- Before calling the client back, be sure that the promised solution has actually been carried out;
- Record important information on the call-back sheet;
- Enter information in the database.

Processes are randomly checked for quality, so that complaints can even be avoided.

### *Processing a complaint*

- All data is entered, including the call-back date. It may be assumed that the promised follow-up was conducted (check if the client is satisfied);
- With serious complaints, send a copy of the complaint to the board;
- In all cases, call back in 15 to 21 days and check the result/satisfaction;
- Record all solutions and results.

### *Call-back: the message to the client*

Feedback on the complaint should be given to the client, the following messages should be communicated:

- Thank the client for taking the trouble to inform HealthNet TPO;
- Let the client know that we are very concerned that he or she has had this experience;
- Inform the client about the solution previously discussed;
- Ask the client whether the proposed solution has been properly implemented;
- If the answer is no, ask how, in the opinion of the client, the complaint should now be handled. Do this and monitor the process until the complaint has been properly resolved.

### *Management information*

Compile complaints annually and report them per category. This will produce an overview of where the most improvements can be made (by type of complaint and by type of client).