7 Process Requirements

7.9 Complaints

7.9.1 A complaint as it applies to this policy will be defined as any concern about the quality system brought to the attention of laboratory management by a customer or laboratory personnel. The TBI-FSD views the receipt of complaints as a way to improve its quality system and customer service. Therefore, each complaint is taken seriously and investigated thoroughly.

7.9.2 This policy will be made available to any party wishing to file a complaint. Upon receipt of a complaint, applicable management personnel will confirm the complaint relates to TBI Laboratory activities. If so, the complaint will be handled as outlined below. Applicable management personnel will be responsible for decisions made handling the complaint.

7.9.3 The following outlines the process for handling complaints:

a) Complaints concerning the quality system can be submitted by any laboratory employee. The Quality Assurance Manager shall document, validate, investigate, and resolve all complaints/concerns regarding the quality system. It is vital complaints are resolved to assure personnel their concerns are addressed in an unbiased, timely and, if requested, anonymous manner. If the complaint concerns the Quality Assurance Manager, the appropriate Regional Supervisor will handle the complaint.

b) For those complaints deemed appropriate, the Quality Assurance Manager is responsible for tracking the complaint, verifying the complaint, notifying the complainant, documenting the complaint, and formulating a remediation plan.

c) Records of corrective actions implemented by the TBI Laboratory will be maintained by the Quality Assurance Manager. If the Unit/Regional Supervisor and the Quality Assurance Manager cannot successfully resolve the issue, then the Assistant Director for Forensic Services or their designee may intervene.

7.9.4 The Regional Supervisor in which the complaint originated shall be responsible for reporting the complaint to the Quality Assurance Manager.

All communications (written, electronic, or oral) received from an employee regarding a potential quality system problem/complaint shall be documented by the Quality Assurance Manager. At the earliest opportunity, the complaint information shall be forwarded to the Assistant Director of Forensic Services. The Crime Laboratory Regional Supervisor and the Unit Supervisors will be made aware of the complaint regarding a section in their laboratory or their unit by the Quality Assurance Manager.

7.9.5 If possible, the Quality Assurance Manager will acknowledge receipt of the complaint and may provide the complainant with progress reports of the complaint.
investigation. All communications regarding the complaint will be maintained by the Quality Assurance Manager.

7.9.6 If the investigation determines that the validity of the quality concern is genuine, then the concern may be handled through a corrective action, revision of a policy, or other process deemed appropriate by the Regional/Unit Supervisor in conjunction with the Quality Assurance Manager and the Assistant Director of Forensic Services.

7.9.7 If possible, notice may be given to the complainant regarding the outcome of the complaint investigation.

7.9.8 External Investigations: Processing of Complaints and Allegations of Policy Violation

7.9.8.1 Upon completion of initial review of complaints and/or allegations of policy violation, if the complaint is found to constitute “serious negligence or misconduct substantially affecting the integrity of forensic results” then it should be referred to the appropriate government entity for external investigation as stated below.

7.9.8.2 All negligence and misconduct known or suspected by any employee should be reported immediately to the appropriate SAC/ASAC/Supervisor. It shall be the responsibility of the SAC/ASAC/Supervisor taking the complaint to notify their respective Division Manager that negligence and/or misconduct has been reported. The Division Manager shall notify the Assistant Director of Administrative Services. The Assistant Director of Administrative Services will notify the Director.

7.9.8.3 As required by the Paul Coverdell Forensic Science Improvement Grants Program:

- Complaints of serious negligence or misconduct substantially affecting the integrity of forensic results committed by a TBI employee or contractor shall be referred to the appropriate government entity for an independent, external investigation.
- The Director of the TBI has ultimate responsibility and discretion when there is a question as to whether the allegation is “serious negligence or misconduct substantially affecting the integrity of forensic results” and should be referred for external investigation;
- Oversight responsibility for ensuring proper referral of applicable complaints and allegations made against employees or contractors of the TBI shall rest on the Assistant Director of Administrative Services and the Professional Standards Unit (PSU);
- TBI identifies the following entities with an appropriate process in place to conduct independent external investigations: Tennessee Office of Criminal Justice Programs, Tennessee Comptroller of the Treasury, and the District Attorney General 20th Judicial District;
- Allegations rising to the level of serious negligence or misconduct substantially affecting the integrity of forensic results will be reported to the Office of Criminal
Justice Programs in accordance with the State of Tennessee, Paul Coverdell Forensic Science Improvement Grant Program, Allegations of Serious Negligence or Misconduct Policy.

The report document should include the following:

1. Agency name;
2. Name and title of individual preparing the report;
3. Date the report was prepared;
4. Date of the negligence/misconduct;
5. Name and phone number of witness/witnesses;
6. Name of employee/contractor suspected of negligence/misconduct;
7. Circumstances involved

7.9.8.4 Allegations rising to the level of serious negligence or misconduct substantially affecting the integrity of forensic results will be reported to the appropriate accrediting or certifying body from which accreditation has been obtained.

7.9.8.5 TBI will maintain a written record of all suspected cases of negligence and/or misconduct. The written record of an incident should contain case notes, a formal report, a police report (if applicable), any email reporting the incident to a higher authority or to an investigating authority, and any other pertinent back up documentation.