



Bureau of Corrections

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MONITORING AND MEASUREMENT OF CLIENT SATISFACTION PROCEDURE

Page 1 of 5

REVISION HISTORY AND APPROVAL

Rev.	Date	Nature of Changes	Approved By
0		Original issue.	 Rey M. Raagas

	<h1>Bureau of Corrections</h1>	Document Reference Code BUC-STO-PR-007	
		Revision No. 0	Effectivity Date 01/05/2018
MONITORING AND MEASUREMENT OF CLIENT SATISFACTION PROCEDURE		Page 2 of 5	

1. PURPOSE

This procedure describes the monitoring and measurement of client satisfaction processes, the implementation of corrective and preventive actions specifically the management of client complaints and the continual improvement of Quality Management System (QMS) effectiveness.

2. SCOPE

This procedure contains the following sections:

- a) Monitoring of Client Satisfaction and Complaint handling
- b) Measurement of Client satisfaction
- c) Corrective and Preventive Action
- d) Related documents
 - Feedback From
 - Client Satisfaction Survey Form


This procedure initially covers services of BuCor Central Offices as well as, all Operating Prisons and Penal Farms (OPPFs).

3. DEFINITION OF TERMS

Complaint	<ul style="list-style-type: none"> • Expression of dissatisfaction made to an organization related to its products, services and/or process(es), where a response or resolution is explicitly or implicitly expected.
Client	<ul style="list-style-type: none"> • Organization or person that receives a product and/or service.
Feedback	<ul style="list-style-type: none"> • Opinions, comments, suggestions and expressions of satisfaction/ dissatisfaction
ARTA Action Office	<ul style="list-style-type: none"> • Office in charge to handle and act on complaints and improvement in service quality
QMS	<ul style="list-style-type: none"> • Quality Management System
QA	<ul style="list-style-type: none"> • Quality Auditor

4. RESPONSIBILITIES


4.1 The ARTA Action Office is responsible for the overall implementation of this procedure, including the gathering of customer satisfaction data and the implementation of improvement activity.

	<h1>Bureau of Corrections</h1>	Document Reference Code BUC-STO-PR-007	
		Revision No. 0	Effectivity Date 01/05/2018
MONITORING AND MEASUREMENT OF CLIENT SATISFACTION PROCEDURE		Page 3 of 5	

4.2 The Quality Auditor (QA) is responsible for the monitoring of QMS effectiveness through audit and process review.

5. PROCEDURE DETAILS

Activity	Person Responsible	Details/Functions	References
START	ARTA Action Office	<ul style="list-style-type: none"> The ARTA Action Office handles client complaints and feedback. 	<ul style="list-style-type: none"> ARTA Law
Registration	ARTA Action Office staff	<ul style="list-style-type: none"> Client registers and appropriate information is recorded to identify the client, complaint/problem type and initial corrective action 	<ul style="list-style-type: none"> Feedback form (STO-PR-007-F01)
Evaluation and Investigation	ARTA Action Officer	<ul style="list-style-type: none"> Results of the investigation and subsequent corrective action is fed back to the client. All corrective action is reviewed by the ARTA Action Officer before full implementation. 	<ul style="list-style-type: none"> Complaint investigation report
Corrective action	ARTA Action Officer	<ul style="list-style-type: none"> All corrective action is reviewed by the ARTA Action Officer before full implementation. 	<ul style="list-style-type: none"> Recommendations (Corrective Action report)
Feedback on Action taken	ARTA Action Officer	<ul style="list-style-type: none"> Corrective action is fed back to the client 	<ul style="list-style-type: none"> Acknowledgement of Client (signature thru Logbook)
Quality Report prepared	QMS Auditor	<ul style="list-style-type: none"> A Quality Report form is prepared with corrective and preventive actions resulting from the analysis of the issue raised. 	<ul style="list-style-type: none"> Quality Report
END			

	<h1>Bureau of Corrections</h1>	Document Reference Code BUC-STO-PR-007	
		Revision No. 0	Effectivity Date 01/05/2018
MONITORING AND MEASUREMENT OF CLIENT SATISFACTION PROCEDURE		Page 4 of 5	


6. GUIDELINES

6.1 Monitoring of Client Satisfaction and Complaint handling

- 6.1.1 All feedback from clients is monitored and analysed to ascertain client satisfaction. Appropriate information is recorded to identify the client, complaint/problem type and initial corrective action any complaint or improvement suggestions can be received by any member of the ARTA Action Office. A record of correspondence related to significant feedback is maintained on a *Quality Report/ Customer complaint form/ Feedback Form*.
- 6.1.2 The ARTA Action Office handles client complaints and feedback.
- 6.1.3 Results of the investigation and subsequent corrective action is fed back to the client. All corrective action is reviewed by the ARTA Action Officer before full implementation.
- 6.1.4 A Quality Report form is prepared with corrective and preventive actions resulting from the analysis of the issue raised.
- 6.1.5 In case the decision is not in line with the remedy requested by the complainant, the justification for the decision taken along with alternative internal and external recourse available for appeal shall also be intimated, after which the complaint shall be closed.
- 6.1.6 The Quality Report form may also to be used to record positive client feedback and suggestions, including those received through Client Satisfaction Surveys (CSS).
- 6.1.7 All client related Quality Reports are reviewed at least quarterly to ascertain whether client requirements are being met and to identify possible opportunities for improvement. The method for analysing the results from the CSS will be defined in the data analysis reports.

6.2 Measurement of Client Satisfaction

- 6.2.1 Quality processes and procedures are verified by internal audit and process monitoring.
- 6.2.2 A Quality Report form is prepared/completed with corrective and preventive actions resulting from the analysis of the issue raised.

	<h1>Bureau of Corrections</h1>	Document Reference Code BUC-STO-PR-007	
		Revision No. 0	Effectivity Date 01/05/2018
MONITORING AND MEASUREMENT OF CLIENT SATISFACTION PROCEDURE		Page 5 of 5	

6.2.3 The Quality Report form may also to be used to record positive client feedback and suggestions, including those received through Client Satisfaction Surveys (CSS). The method for analysing the results from the CSS will be defined in the data analysis reports.

6.2.4 The data generated from monitoring and measurement or other relevant sources is analysed to provide performance information relating to measurement of Client satisfaction and Conformity of service requirements.

6.2.5 Results of data analysis are reviewed at the Management Review meetings.

6.3 Corrective and Preventive Actions

6.3.1 BuCor shall take action to eliminate the cause(s) of non-conformities and potential cause(s) in order to prevent recurrence and occurrence respectively.

6.3.2 Non-conformity is identified and recorded on a Quality Report, investigated and acted upon as appropriate.

6.3.3 All Quality Reports are maintained and reviewed at Management Review meetings and the need for action to prevent nonconformity is evaluated. The results of any preventive action taken are recorded on the Quality Report form and the effectiveness of the preventive action reviewed.

6.3.4 A review of key processes is conducted through quality audit. This review is used to identify and eliminate potential nonconformities. The implementation and maintenance of effective management system procedures is also part of preventive action planning.

6.3.5 In addition, a process of continuous review is applied to all services and processes to identify possible improvement opportunities.