

PROCEDURE

Research Management

SUBJECT: PROCEDURE for customer service management within the CRCHUM's core facilities	NUMBER: CRCHUM 50 511-02
ADDRESSEE: Any CRCHUM's scientific core facility staff	Issued on: January 16, 2016 Revised on: June 23, 2020
ISSUED BY : Céline Coderre, Senior Manager, Scientific Performance	
APPROVED BY: Direction de la recherche (DR) And SIGNED BY: Vincent Poitout, Research Director, CHUM and Scientific Director, CRCHUM	Date: June 23, 2020

OBJECTIVE

Describe the procedures to follow to manage the service offered by the CRCHUM core facility, to answer and to keep track of all problematical situations that may arise during the service provision.

1. **TARGET AUDIENCE**

The staff including core facility's manager, employees and scientific advisors that works on the different core facilities recognized by the CRCHUM.

2. **DEFINITIONS**

2.1 Internal Client: Any equipment or service user being part of a research team in the CHUM, whether it is a researcher, an employee or a student. Also included is any user acting on behalf of another core facility service of the CRCHUM.

2.2 External Client: Any equipment or service user part of a research team, whose researcher is not part of the CHUM or a user from an external company.

2.3 Core Facility Manager (RP): Person responsible of the equipment and services and manages the core facility.

2.4 Scientific Advisor (CS): Regular CRCHUM researcher responsible of the core facility.

2.5 Service à la clientèle: The customer service is the one offered by the core facility staff from the request of a client for a service or a quotation until the remittance of the final results or associated discussions, or until the last use of equipment from a client. It includes among other things a respectful communication, transparency and honesty with any client or potential client, a fast and accurate transmission of the information required and/or results to the client and a quick resolution of issues raised by the client or by the core facility manager.

2.6 Senior Manager, Scientific Performance (PM): The person responsible for the overall organization and management of the core facilities, referred to as the PM in the policy.

Page 1 de 5

PROCEDURE

Research Management

SUBJECT: PROCEDURE for customer service management within the CRCHUM's core facilities

NUMBER: CRCHUM
50 511-02

3. POLICY REFERENCE

This procedure follows policy number 50 511 'CRCHUM's Core facilities policy' –Section 1 – Internal management of activities and services' which purpose is to describe the different rules that the CRCHUM core facilities managers must follow to manage efficiently the services offered to their internal and external CHUM clients.

4. RESPONSIBILITIES

Primarily, to maintain good business practices and customer relationship, the core facility manager of each core facility and their employees must ensure to:

- Transmit the necessary information to the client before the provision of service;
- Collect and file documents signed by the client that are required for the delivery of requested services;
- perform the requested service in the timeframe planned and with the expected quality;
- offer high-performance equipment in good condition;
- Follow up with the client during the provision of service (ex. advise of any delay or problem);
- Transmit, if applicable, the results to the client without delay and communicate any technical or operational problem.

The RP of each core facility and their employees have to document all problematic situations that arise with the client as well as the follow up made to resolve the issues. They must also advise the core facility coordinator of any irregularity and formal complaint.

5. PROCEDURE

5.1 Initiation of a business relationship with a client.

- 5.1.1 No discrimination shall be made in the choice of clients, except for the scientific capabilities of the core facility, the availability of the facilities and the client's ability to pay, unless there is history justifying an access refusal to the different services. Although all possibilities must be considered to accommodate external clients, noted that internal clients are treated as a priority. If an agreement is reached between the CRCHUM's management and researcher for a priority access to equipment, acquired via a grant, this have to be taken into account by the RP in the management of the activities.
- 5.1.2 If the RP have any reason to believe or judge that a potential client shouldn't have access to a service, he should inform and discuss it with the GP BEFORE an access refusal to the client. See point 5.5 for more details on access suspensions.
- 5.1.3 The RP should ensure that the client received all related information on the existing practices to the core facility and the CRCHUM for proper execution of its activities: politics and procedures, rules of

PROCEDURE

Research Management

SUBJECT: PROCEDURE for customer service management within the CRCHUM's core facilities

NUMBER: CRCHUM
50 511-02

regulatory agencies, core facility rules, current rates, the *modus operandi* of the equipment, the format for the transmission of results, etc.

- 5.1.4 The RP must ensure that the client and its supervisor (researcher or employer) have signed and sent the appropriate documents indicating their acceptance of all current terms for access to the facility and have provided a fund number for internal clients or a purchase order for external clients.

5.2 Communication before, during and after the provision of service: Internal Clients.

- 5.2.1 In any circumstance, the core facility staff has to remain courteous, honest and open to listen and discuss the clients' comments.
- 5.2.2 The RP have the responsibility to follow up with the client throughout the provision of service and notify the client of any problem or delay in the service delivery.
- 5.2.3 If a problematic situation creates tension that cannot be resolved between the parties, the RP must inform the GP to determine together an appropriate action plan or resolution. The scientific advisor of the facility needs to be notified as well for any scientific related problems. In case of major problems, the Scientific Associate Director – fundamental and translational research and CRCHUM's management will be notified.
- 5.2.4 For any written complaint received, that directly concern the work and/or attitude of a core facility employee, it should be immediately transferred to his immediate supervisor (the RP or the scientific advisor), who will handle it in collaboration with the GP and, if necessary, with the human resources service of the CRCHUM.
- 5.2.5 No disclosure of information related to a client is allowed with a third party, except with the Scientific Associate Director – fundamental and translational research and CRCHUM's management, the GP and the scientific advisor of the related facility. All core facility staff must keep confidential all documents, discussion, reviews, results, types of service provided and problematic issues with a client.

5.3 Correspondence and documentation

- 5.3.1 The core facility staffs must maintain and electronically archive all correspondence made with a client, in order to facilitate a possible traceability. See item 5.3.3 for the location and storage duration of information.
- 5.3.2 The core facility staff has to, as often as possible, document and maintain records of **official** meetings with clients regarding projects, results and analyzes. A notebook specific to each facility is strongly recommended to document meetings with clients.
- 5.3.3 Documentation related to a project/service must be retain for at least 1 year in files of the core facility on the H networks and I\Plateformes, except the results that are stored on the network I\Inter-Équipe\Chercheur or transmitted to an external client and deleted, following the timeframe established and indicated in the procedure 50 512-02 'CRCHUM's core facilities procedure for access to equipment and services for internal and external clients'.

PROCEDURE *Research Management*

SUBJECT: PROCEDURE for customer service management within the CRCHUM's core facilities

NUMBER: CRCHUM
50 511-02

- 5.3.4 Documentation and correspondence must be accessible to the Scientific Associate Director - fundamental and translational research of the CRCHUM in the event of a conflict or a serious problematic situation or insolvent with a client.
- 5.3.5 All RP shall maintain an up to date registry (Annex 1) of complaint and problems (see point 5.4), that documents dates, persons involved, facts, the actions taken to resolve the issues and the conclusion of the event.
- 5.3.6 The GP must have access to each registry kept by the RP under **H:\DREC\Plateformes\ (name of the facility)\Divers\Registre service à la clientèle**. A registry model is provided to the RP and can be adapted to the needs of each facility.

5.4 Issues to be noted in the registry

- ❖ Scheduling conflicts causing an important material injury to a reservation made by a client and for which he files a complaint;
- ❖ Equipment failure involving a client (responsible or not);
- ❖ Conflict between 2 users requiring intervention, that can be resolve verbally with the RP;
- ❖ Formal complaint from a client on a service offered;
- ❖ Formal complaint from a client on the use of equipment or laboratory;
- ❖ Failure from a client to a facility's rule, putting at risk equipment, users or staff;
- ❖ Negligence with equipment;
- ❖ Written contestation with justification on results transmitted;
- ❖ Written contestation with justification on the conclusion of the analysis of the results;
- ❖ Refusal to pay or dispute on billing;
- ❖ Request from a client to repeat an experiment free of charge;
- ❖ Any other situation deemed relevant by the person responsible of the core facility.

5.5 Monitoring and resolutions of problems

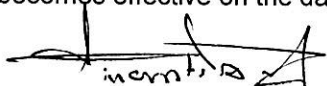
- 5.5.1 The person responsible of the core facility discuss the possible resolution with the GP, according to the situations.
- 5.5.2 If needed, the Scientific Associate Director – fundamental and translational research and CRCHUM's management are involved in the resolution.
- 5.5.3 The client is notified by e-mail or in a documented meeting, of the solutions or corrective measures to be applied.
- 5.5.4 When both parties agree, the details of the agreement are documented in the registry.

PROCEDURE
Research Management**SUBJECT:** PROCEDURE for customer service management within the
CRCHUM's core facilities**NUMBER:** **CRCHUM**
50 511-02

- 5.5.5 If there was negligence, failure or conflict and a client is reoffending after being advised in writing, he might get his access to the core facility suspended.
- 5.5.6 In the case of problem on the quality of the results transmitted at the origin of the complaint (following a damaged, contamination, technical or human error), the actions taken to resolve the situation and prevent a similar situation in the future, must be documented and the quality controls made attached to the file.
- 5.5.7 Any suspension of access to a service toward a client has to be approved by the Scientific Associate Directorate – fundamental and translational research and CRCHUM's management.
- 5.5.8 For a refusal to pay, if no agreement is possible, CRCHUM Finance Department will be involved in order to resolve the situation.

6. APPLICATION

This policy becomes effective on the day of its approval by the Research Director of the CHUM.



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