



SOP for Handling Appeal & Complaints -QA-P-OP-03

1. INTRODUCTION

1.1 QACS is open to receiving appeals against any decision or complaints from any sources against the quality of the services provided, personnel involved in certification process, certified client, etc. All the complaints received, through any means like letters, e-mails, faxes, telephones (to be followed by written complaints), are given due considerations. Reports appearing in media may also be investigated, if relevant. All appeal and complaints are treated as confidential unless desired otherwise by the Government or by law.

2. PURPOSE

2.1 The document describes the procedure for dealing with appeals and/ or complaints received from various sources.

3. SCOPE

3.1 Any applicant and /or certified client of QACS can make appeal against any/all decision of QACS including decision of application reviewer, audit team and/ or decision maker.

3.2 This procedure includes handling of all complaints received by customer - against the quality of the services provided, personnel involved in certification process, certified clients, or any other by any means or even relevant reference appearing in print media.

3.3 The QACS shall be responsible for collecting and verifying all necessary information to validate the appeals or complaint.

3.4 The top management of QACS ensures that there will not be any discriminatory action against the appellant and/or complainant on submission, investigation and decision on appeal and complaint.

4. RESPONSIBILITY

4.1 Operation manager is responsible to receive the appeals and/or complaint and forward the information to certification manager.

4.2 Certification Manager is responsible for monitoring of appeals and/or complaints and CMD is responsible for final decision on closure of the complaint.

5. REFERENCES

5.1 Quality Manual **QACS-M-00**

Definitions:-

Complaints:- Client, third party or in house problems.

6. PROCEDURE

6.1:- Appeals:-

6.1.1 Appeals are recorded in 'complaint form qa-mkt-09' by certification manager and discussed with the CMD to take the necessary action.

6.1.2 The appellant is informed about the QACS response taking into account the result of previous similar appeals.

6.1.3 If the appellant is not satisfied with the response from the certification manager CMD constitutes Complaint and appeal committee. All member of such team are those who have not involved in any certification activities of client.

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- 6.1.4 The appellant has the right to challenge the composition of the appeals committee. After approval of committee composition by appellant the appeal committee convey its meeting.
- 6.1.5 The appeal committee will gather and verify all information to validate the appeal.
- 6.1.6 The decision of appeal committee is conveyed to the appellant with in 30days.
- 6.1.7 The un satisfied appellant may decide to take the appeal to AB and agrees that this is the final action that can be taken.
- 6.1.8 Through the whole steps for handling appeal and complaints the appellant can formally present its case.
- 6.1.9 The appellant is provided with the progress reports and outcome including the reasons thereof.
- 6.1.10 The decision is communicated to the appellant made by or reviewed and approved by individuals not previously involved in the subject of the appeal with the formal notice of the end of the appeal handling process

6.2 Receipt of Complaints

- 6.2.1 All complaints received in shall be channelled to the Complaints & Appeals Officer (Director operation) who maintains record pertaining to all complaints including important dates like date of receipt, date of acknowledgement, date of closure or final disposal in **QA-MKT-09**
- 6.2.2 Immediately on its receipt the same shall be acknowledged with the assurance that QACS will be investigating the complaint and informing the complainant of the outcome at the earliest. Anonymous complaints shall also be registered if prima-facie they appear to be valid and having some substance.
- 6.2.3 QACS will be responsible for all decisions at all level of complaint handling process.
- 6.2.4 All complaints shall undergo initial scrutiny by the Complaints & Appeals Officer to determine whether they fall within the ambit of QACS activities and whether they are valid, based on which any of the following action shall be taken.
- a) If a complaint is outside the ambit of QACS activities, the complainant shall be informed accordingly and the complaint shall be treated as closed.
- b) If information provided in the complaint is inadequate for any meaningful follow-up and the complainant is not able to provide minimum required information such complaints shall also be treated as closed and the complainant shall be informed accordingly.
- c) If the complaint clearly falls within the ambit of QACS activities and appears to be valid, the initial information provided is sufficient for initial investigation the same shall be taken up for further action.

6.3 Investigation of Complaints

Complaints received by persons broadly fall in three categories:

1. Complaints against clients,
2. Complaints against Certification Committee Members and Assessors, and
3. Complaints against QACS Officials.
4. Complaints against QACS Franchisee / agent
5. Complaint for Certificate not showing on web site (IAFcert search)
6. Complaints of fake certificate

Procedure for dealing with each category of complaints is given below:

6.3.1 Complaint against client

- 6.3.1.1 If a complaint is received against a certified client the content of complaint is noted and severity of complaints is analysed.

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6.3.1.2 If complaint is from any regulatory body then client is immediately sent notice for corrective action and if complaint is for ISO 9001, 14001, 22000, 45001, 27001, 20000-1, 37001 and 50001 then special short visit audit is planned to review effectiveness of certified management system.

6.3.1.3 Complaint for misleading statement of certified client-

a-the statement would be compared with the certification scope, if found that statement is misleading then client would be issued notice to change / remove the misleading statement in 7 days.

b- Failure of client to change / remove the misleading statement within the time granted client would be suspended as per the logo instruction process QA-P-SYS-14.

6.3.1.4 Complaint for misuse of certification logo / marks by client – QACS has allowed only use of QACS logo and Mark to the client as per the logo instruction process QA-P-SYS-14 hence any use of accreditation logo is not permitted.

a- the client has used accreditation board logo with QACS logo having accreditation number- the use of logo is identified and checked with the logo instruction process QA-P-SYS-14. If logo used does not confirm with the logo instruction process QA-P-SYS-14 then client would be issued notice to remove the logo use within 7 days and if client failed to remove misuse then would be suspended.

b- The client has used only accreditation board logo without any reference to QACS - the use of logo is identified, first it is checked that user is our client or related to our client. Immediate suspension letter would be issued and suspension would be removed only after removal of misuse by client and declaration that in future this mistake will not happened. Based on the gravity of misuse QACS may decide to conduct special audit before removal of suspension.

6.3.1.5 The client is inform of all complaints received against it if prima facia evidence required corrective action QACS take prior approval from client and complainant for making complaint and its resolution publically accessible.

6.3.2 Procedure for Dealing with Complaints against Certification Committee Members and Assessors

6.3.2.1 An ad-hoc Committee consisting of Complaints & Appeals Officer and the Training Officer shall investigate the complaint in case of complaint against assessor. In case of complaint against Certification Committee member, the ad-hoc Committee shall consist of the Complaints & Appeals Officer and the Convener of concerned Certification Committee. The committee may seek clarification from client, assessors or other persons who may have knowledge about the matter contained in the complaint.

6.3.2.2 The committee shall submit their findings to Technical Operations Manger, QACS for his decision. The Technical Operations Manager, QACS if necessary may consult the Director, QACS or the appropriate Certification Committee and take decision.

6.3.2.3 In case of valid complaints action taken by QACS may involve feedback for corrective action followed by monitoring, warning against future recurrence and in extreme case, deletion of the assessor from the empanelled list or removal of Certification Committee member from the committee.

6.3.2.4 The outcome of the investigation shall be informed to the complainant.

6.3.2.5 A brief summery of nature of the complaint, outcome of the investigation and action taken shall be added to the monitoring information regarding the concerned Assessors or Certification Committee member.

6.3.3 Procedure for Dealing with Complaints against QACS Officials

6.3.3.1 When the complaint is against a QACS Officer, he / she will not be involved in investigation process either directly or indirectly.

6.3.3.2 All such complaints will be brought to the notice of Director / CEO, QACS. Director/CEO shall seek clarification from the person concerned. If an investigation is required, he may delegate it to an ad-

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hoc committee consisting of one or more suitable persons. The findings of the committee shall be placed before the Director, QACS for his decision.

6.3.3.3 If the complaint is found to be valid, Director/CEO, QACS shall ask the concerned staff to take required corrective action. This information shall also be filed in performance review record of the concerned staff. In extreme case the decision may involve a punishment including a dismissal of the concerned staff in which case QACS Staff Rules and Bye –laws shall be followed.

6.3.3.4 The complainant will be informed about the outcome of the complaint and action taken by QACS if any.

6.3.3.5 If the complaint is against the Director QACS or Technical Operations Manager, QACS the matter will be brought to the notice of the CMD, QACS.

6.3.4 Complaints against QACS Franchisee / agent

6.3.4.1 If any complaint received against franchisee / agent or their employee it would be registered.

6.3.4.2 Based on the content of complaint, complaint would be sorted in any of following category and recommended action-

a- non- payment to the auditor or service provider- Show cause notice to the Franchisee would be given and explanation taken. Ensured Immediate release of payment is done within 7 days.

b- Unrealistic commitment – If complaint is for giving assurance of guaranteed certification or certification without audit or easy audit then objective evidence would be analysed and if found true immediate removal would be done.

c- Use of accreditation board logo / mark – If complaint says that use of accreditation board logo / mark is used on any stationery, publicity material or on any web site or social media account. The complaint would be verified and franchisee would be asked to remove such objectionable content within 24 hours.

d- Giving certificate without traceability to QACS and IAF (fake certificate) – if complaint shows any fake certificate from the locations then first we will check from where complaint came. If it is from some verified customer where the client mention on the certificate has submitted the certificate then will try to get in contact with client to get information on the person organisation who has provided the certificate. If any direct / indirect involvement of franchisee/ agents/ its employee is found then immediate termination would be done.

e- Providing consultancy – if complaint say franchisee also providing consultancy then based on objective evidence if it is confirmed that franchisee is indulge in management system consultancy then immediate termination would be done.

6.3.5 Complaint for Certificate not showing on web site (IAFcert search)-

The certification detail would be check for internal documentation. If it indeed is certificate issued by QACS then IAFcertsearch uploading list would be checked. If certificate detail is not on list then action on the person responsible for preparing list would be taken and also all the certificate are verified. If detail is on the uploading list but still not showing on IAFcertsearch complaint to the IAFcertsearch would be made to rectify the issue. If certificate is found to be fake certificate then action as per clause 6.3.6 would be taken.

6.3.6 Complaints of fake certificate

1. If Fake certificate is identified then the complainants credential is verified if complainant is any user of fake certified client and they are able to provides any such details like submission of fake certificate by fake certified client then legal notice would be given to fake certified client to know the traceability of fake certificate. Based on the traceability legal action would be taken and fake certificate is force to remove from the circulation.

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2. If Fake certificate is identified then the complainants credential is verified if complainant is any user of fake certified client or any random person and they are not able to provides any such details like submission of fake certificate by fake certified client. Then details on the fake certificate referred web sites on the fake certificate is checked if it is not www.qacsworld.com or www.globalqacs.com . If web site uses QACS logo / mark then notice to web site and complaint to public domain registry would be made to remove objectionable material (QACS logo / mark, reference to QACS International) from web site. Will also try to find out registered owner of web site and legal notice would be sent. Further information of non related web site, social media profile would be placed in public notice section of QACS website.

6.4 Reporting on Complaints and Other Related Actions

6.4.1 As an outcome of investigation of complaint and root cause analysis if any corrective action is felt necessary the Complaints & Appeals Officer shall inform the concern department and corrective action shall be initiated by department in line with the requirements of Procedure for Control of Non-Conformities and Corrective Action **QA-P-SYS-08 AND QA-P-SYS-09**

6.4.2 All records pertaining complaints shall be maintained up to date by the Complaints & Appeals Officer. The status of complaints shall be reported to the Certification Manager, QACS, who is responsible for monitoring of complaints.

6.4.3 The Complaints & Appeals Officer shall analyse all the complaints and their outcome for possible trends. The complaints received, their handling and the corrective actions taken shall be discussed as one of the agenda items in the internal analysis and review meeting under the chairpersonship of Director, QACS. The analysis of complaints then shall be placed before QACS Governing Body for management review.

6.4.3.1 All the information collected as complaint received, corrective or corrective action taken and will be used in annual risk assessment and would be taken care in internal audit.

6.4.4 Any complaint pending for more than 90day shall be transferred to Accreditation board along all documents original complaint, Record of review, Response to complainant and with detail of action taken by QACS till date.

7. RECORDS

7.1 Customer complaint **record: QA-MKT-09**

7.2 Appeals & Complaints file is maintained by Complaints & Appeals Officer, where all correspondence in respect of complaints received, the Director's / CEO decisions, and any other relevant documents are filed date-wise.

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