

Standard Operating Procedure

“Complaints and Appeals”



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1. Process History

S. No.	Process Details	Version No.	Release Date	Performed By
1	ISP-04	1.1	Jan'19	Risk & Compliance
2	Format Change & Entire SOP revised	2.0	Mar'20	Risk & Compliance
3	ILAC Review	3.0	Feb'21	Risk & Compliance
4	Segregation of Complaints & Appeals	4.0	Aug'25	Risk & Compliance

2. Process Stakeholders Details

S. No.	Role	Owner	Signature	Date
1	Process Approver	VP – IS		
2	Process Champion	Risk & Analysis Manager		
Other Stakeholders Details				
3	Management Committee			
4	All Concerned Departments & Circles			
5	IT			

3. Process Objective

The objective of this process is to: -

- a. Handling of Complaints/Appeals from Client/Suppliers.
- b. Effective resolution of complaints and Appeals.
- c. Horizontal deployment of any issue observed.

4. Detailed Process Description

a. Recruitment

Process Step No	Process Description	Responsibility	Document
Complaints			
1	This procedure is applicable to complaints from any interested parties including clients, accreditation body and others. This procedure is available to any interested party upon request. The same can be seen on our website as well. Ombudsman is also integrated with complaints.		
2	Complaints are received by any means (verbal, written) are logged in "Complaints Log Register". Acknowledgement of receipt of the complaint is done by a written communication mode and shall provide the complainant with progress reports and the outcome.	Quality	Complaint Log Register
3	Quality department will be validating the complaints to which department the complaint lies.	Quality	
4	Complaint is communicated to the concerned process owner. All complaints are channelized to the Quality, General Manager IS& CEO initially. They collectively decide on the investigating team, composition etc. However if the complaints is related to themselves, then the person involved is removed from the independent investigating team. The members of the team ensure that the confidential issues are protected and as a part of meeting this requirement, the form itself is designed to meet all requirements.	Quality	Mail
5	A member of organization, independent from the concerned person (s), who carried out inspection activities or took inspection decisions, is deputed for	Quality	

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	validating & investigating the complaints, appeals or claims.		
6	A QCR No. is raised by Quality for determining the root cause and necessary correction, systematic corrective actions.	Quality	Complaint Log Register
7	Root cause is determined by involving relevant personnel and corrective action is planned with responsibility and target dates.	Investigation Team	RCA-CAPA
8	Approval of RCA-CAPA is done basis defined process	Quality	
9	Progress of corrective action is tracked.	Quality	
10	Corrective action taken is recorded in Complaint log register.	Quality	Complaint Log Register
11	Corrective action taken is reviewed for its effectiveness and result of review is recorded in Complaint log register.	Quality	Complaint log register.
12	Concerned interested party is communicated about the correction and corrective action taken. The complainant is also made aware about the progress of the complaints on a periodical basis.	Quality	Mail
13	Records of appeals, claims and complaints are maintained.	Quality	Complaint Register Folder
14	All complaints are given a unique identification number for traceability.	Quality	Complaint log register.
15	If actions taken are found effective, complaint is closed and recorded in Complaint log register.	Quality	Complaint log register.
16	If actions taken are not found effective, complaint is remained open and further investigations are carried out and steps are taken as mentioned in point 4 onwards.	Quality	
17	All relevant documents are updated, if required. The client in question is also communicated at an appropriate time of the details of the complaint. After mutual agreement between the client and the complainant what portion of the complaint is to be made public, is decided.	Quality	
18	The decision to be communicated to the complainant shall be made by or reviewed by, individual(s) not previously involved in the subject of the complaint.	Quality	
19	There shall be no discrimination on the complaints and nor any discrimination on the complainant.		
20	Records of all the actions are linked to the above Log and a report if required is also prepared.		

Appeals			
1	This procedure is applicable to appeals from clients. This procedure is available to any interested party upon request. The same can be seen on our website as well.		
2	An appeal can be received by QACA personnel and brought to the notice of the top management based on or against any decision taken by QACA which is not acceptable to the concerned. Appeal can be in the form of issue raised by a inspected client/against a decision taken on a complaints or an issue by an interested party on a decision taken by QACA management or an employee. This is logged in the Appeals Log. It is then evaluated by an independent team of minimum two personnel so that a decision can be reached. If the gravity of the issue is serious, then a committee is formed to evaluate and take a decision.	GM	
3	A description of the appeals-handling process is made available on the QACA website.		Website
4	QACA is responsible for all decisions at all levels of the appeals-handling process. It is ensured that the persons engaged in the appeals-handling process are different from those who carried out the Inspection and made the Inspection decisions.		
5	Submission, investigation and decision on appeals does not result in any discriminatory actions against the appellant.		
6	The appeals-handling process includes at least the following elements and methods: <ul style="list-style-type: none"> a) an outline of the process for receiving, validating and investigating the appeal, and for deciding what actions are to be taken in response to it, taking into account the results of previous similar appeals. b) Tracking and recording appeals, including actions undertaken to resolve them. c) Ensuring that any appropriate correction and corrective action are taken. 		
7	Acknowledgement of receipt of the appeal is done by a written communication mode and shall provide the appellant with progress reports and the outcome.		
8	The decision to be communicated to the appellant shall be made by, or reviewed and approved by, individual(s) not previously involved in the subject of the appeal.		
9	QACA gives a formal notice to the appellant of the end of the appeals-handling process.		
10	There shall be no discrimination on the appeals nor any discrimination on the appellant.		

5. Annexure

List of Records	Format Revision No.	Retention Period
Complaint Log Register	QACAPL/ASIA/COMPLAINTS Version 1.0	3 Years
RCA-CAPA Format	QACA/CAPA/VERSION 02	3 Years
Appeal Log	QACAPL/IS/APPEALS	3 Years

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