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| Process Step No. | Process Description | Resp. | Forms | |
|---------------------|--|-------------------------------------|--|--|
| 1. | This procedure is applicable to appeals, claims and complaints from any interested parties including clients, accreditation body and others. | Executive Director | - | |
| 2 | Complaints are received by any means (verbal, written) are logged Any person in "Complaints Log". | | Complaints Log | |
| 3 | Complaint is communicated to the concerned process owner. All complaints are channelized to the Executive Director & MD initially. They collectively decide on the investigating team (if necessary), composition etc. However if the complaints is related internally, 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. If the complaints originating from QACA personnel i.e. within the organization itself then the same could be directed to Quality Austria, Austria itself directly to the VP International Business. | | | |
| 4 | A member of organization, independent from the concerned person (s), who carried out audit activities or took certification decisions, is deputed for validating & investigating the complaints, appeals or claims. If the complaint is related to the certified client and is valid, then the investigating team also evaluates the effectiveness of the client's QMS and the overall management of the same. If the complaint is on QACA itself, then the same is escalated to the Impartiality Committee for the redressal. This shall be done in a time bound manner with clear cut communication channels established to all concerned including the complainant. Acknowledgement of receipt of the complaint is done by a written communication mode and shall provide the complainant with progress reports and the outcome. Submission, investigation and decision on complaints shall not result in discriminatory actions against the complainant. | <u>Executive</u> <u>Director</u> | Complaints | |
| 5 | A CAR is raised by Executive Director for determining the root cause and necessary correction, systematic corrective actions. | Executive Director | Corrective Action Request (CAR) | |
| 6 | Necessary correction action is taken in consultation with Executive Director. | Process Owner | Corrective Action Request (CAR) | |
| 7 | Root cause is determined by involving relevant personnel and corrective action is planned with responsibility and target dates. | Process owner | Corrective Action Request (CAR) | |
| 8 | Progress of corrective action is tracked. | Executive Director | Corrective Action Request (CAR) | |
| 9 | Corrective action taken is recorded in "CAR". | Process Owner | Corrective | |

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| | | | Action Request (CAR) |
|----|--|-------------------------------------|--|
| 10 | Corrective action taken is reviewed for its effectiveness and result of review is recorded in "CAR" | <u>Executive</u> <u>Director</u> | Corrective Action Request (CAR) |
| 11 | 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. | <u>Executive</u> <u>Director</u> | Corrective Action Request (CAR) |
| 12 | Records of claims and complaints are maintained. | <u>Executive</u> <u>Director</u> | Corrective Action Request (CAR) |
| 13 | All complaints are given a unique identification number for traceability. | <u>Executive</u> <u>Director</u> | - |
| 14 | If actions taken are found effective, complaint is closed and recorded in Complaint Log. | Executive Director | Complaint Log |
| 15 | 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. | Executive Director | Complaint Log |
| 16 | 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. QACA is responsible for all decisions at all levels of complaint handling process. | Process Owner | Relevant documents |
| | Appeals | | |
| 17 | An appeal can be received by QACA personnel and brought to the notice of the top management. Appeal can be in the form of issue raised by a certified client or an issue by an interested party. This is logged in the Appeals Log. It is then evaluated by an independent team of minimum 4 internal QACA personnel so that a decision can be reached including gathering and verification of information to validate the appeal. Records of all the actions are linked to the above Log and a report if required is also prepared. If the appeals is originating from QACA personnel ie within the organization itself then the same could be directed to Quality Austria, Austria itself directly to the VP International Business. | <u>Executive</u> <u>Director</u> | Appeals Logs and actions |
| 18 | A description of the appeals-handling process is made available on the QACA website. | <u>Executive</u> <u>Director</u> | Appeals Logs and actions |
| 19 | QACA is responsible for all decisions at all levels of the appeals- handling process. Its is ensured that the persons engaged in the appeals-handling process are different from those who carried out the audits and made the certification decisions. | Executive Director | Appeals Logs and actions |
| 20 | Submission, investigation and decision on appeals does not result in any discriminatory actions against the appellant. | Executive Director | Appeals Logs and actions |
| 21 | The appeals-handling process includes at least the following | <u>Executive</u> | Appeals |

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| | elements and methods: 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. | <u>Director</u> | Logs and actions |
|----|--|---|--------------------------------|
| 22 | Acknowledgement of receipt of the appeal is done by a written communication mode and shall provide the appellant with progress reports and the outcome. | Executive Director | Appeals Logs and actions |
| 23 | 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. | <u>Executive</u> <u>Director</u> | Appeals Logs and actions |
| 24 | QACA gives a formal notice to the appellant and complainant of the end of the appeals-handling process and complaint handling process respectively. | Executive Director | Appeals Logs and actions |
| 25 | Personnel who provided consultancy for a client, or been employed by a client, shall not be used to review or approve the resolution of a complaint or appeal within two years following the end of consultancy or employment. | <u>Executive</u> <u>Director</u> | Appeals Logs and actions |
| | List of Records | Format No. | Retention Period |
| 1 | Complaint Log | QACAPL/ASIA INIDA/Complain ts Log | Three years Three |
| 2 | Corrective Action Request (CAR) | n Request (CAR) QACAPL/ASIA INIDA/CAR | |
| 3 | Appeals Log | QACAPL/ASIA INIDA/Appeals Log | Three years |
| 4 | Complaint Resolution Form | QACAPL/ASIA INIDA/CRF | |

Amendment History

| S.No. | Date | Nature and details | Changes | Approvals |
|-------|------------|---|--------------------------|-----------------------|
| 01 | 01/09/2016 | Changes due to ISO 17021-1:2015 added. | Para 4, 16 & 17 amended. | Director |
| 02 | 25/11/2019 | Requirements related to notice to complainant and appellant made clear. | Para 24 ammended | Director |
| 03 | 25/10/2020 | Requirements of clause 7.13.6 of ISO 17065 added | Para 25 added | Director |
| 04 | 10/08/2023 | Director replaced with Executive Director as a result of change in responsibility | Throughout the document | Executive Director |