Title: Handling of Complaints Procedure

1. Purpose

This procedure details the steps to be taken by AU to handle a complaint from the moment it is received until it is resolved. It provides guidelines on how to document, classify, investigate the reasons for and resolve each complaint.

2. Scope

This procedure covers all complaints, other than appeals, received by AU relating to its operations or of any of its accredited CABs (complaints against non-accredited CABs does not come under AU's responsibility).

3. Definitions

Refer to Accreditation Unit Guideline JAS-G01: Accreditation & Conformity Assessment – Vocabulary, Definitions and General Abbreviations)

4. Responsibilities:

As defined within the procedure.

5. Procedure:

1. Every complaint, either sent via e-mail or in formal letter or by fax, is received by AU Director.
2. The AU Director will then forward the complaint to the quality officer, who will confirm that the received information contains the following:
   - 2.1 The name of the complainant (anonymous complaints will not be handled by AU);
   - 2.2 A description of the complaint;
   - 2.3 The complainant telephone number or contact address;
   - 2.4 The date and time in which the complaint was lodged.
3. The quality officer shall register the complaint details in form number qf058-01 within one week from the date of receiving the complaint.
4. A letter will be sent to the complainant confirming receiving his complaint and informing him that his complaint is being under process.
5. AU will deal with complaints relating to subjects under its responsibility. Complaints against non-accredited CABs do not come under AU's responsibility. In cases wherein AU receives complaints

against non-accredited CABs or outside AU's responsibility, the complainant will be contacted and will be informed about the scope of AU's responsibility. The complainant may also be referred to the responsible body, if possible. Records of such contacts are maintained by the quality officer.

6. In cases wherein the complaint falls within AU's responsibility and involves handling by an **accredited/ applicant** CAB, against which the complaint was lodged, the CAB will be contacted to verify whether the complaint is justified. Verification of the validity of the complaints against accredited CABs may involve carrying out assessment of their operations under doubt. Records of such contacts are maintained by the quality officer.
7. If the complaint was justified and accepted by the accredited CAB, AU will discuss the corrective actions plan to be taken by the accredited CAB in order to resolve the complaint. AU will also discuss whether it must take action from its side, in addition to the actions taken by the accredited CAB.
8. If the complaint was against AU's internal operations and does not involve an **accredited/ applicant** CAB, the quality officer will study the nature of the complaint. If the complaint can be given an immediate response, the complaint will be handled directly by the quality officer and the complainant will be informed. Records of such contacts are maintained by the quality officer.
9. If the complaint needs thorough investigation to identify the reasons it came about, a task force is set up to investigate the complaint. The task force is ad hoc established in order to discuss and come to a decision regarding the handling of a complaint. The task force is compromised of the head of the section(s), against which the complaint was lodged, and the quality officer. Additional AU personnel and/or other witnesses may join the task force if they were asked to do so, including a representative of the complainant.
10. The task force examine the complaint and the relevant documentation, recommend carrying out of an internal audit according to QP-056, if necessary, and corrective or preventive actions that should be taken according to QP-054 & QP-055.
11. For complaints that require corrective actions, the task force shall recommend, explain the corrective actions required and identify those

who are responsible for carrying out these actions, with target dates. The corrective actions may include changes in policies, in procedures or in work instructions, or providing further training to personnel, etc.

12. The AU director will decide on the task force's recommendation and initiate the corrective actions plan. In general, handling each complaint shall not take more than 60 days from the date of receiving it.
13. AU director shall write a letter of response to the complainant, which will include the AU's decision regarding his complaint, the actions to be taken to resolve the complaint with the estimated time frames and an expression of thanks of his alertness.
14. In cases where complainant does not accept the corrective actions proposed by AU or by the **accredited/ applicant** CAB, against which the complaint was lodged, his complaint will be reconsidered either by AU director or the task force, as appropriate. The **complainant** may be further contacted for discussion and clarification.
15. The quality officer shall monitor the implementation of the corrective actions undertaken according to AU procedure QP-054. In case of any delays in implementation of the corrective actions, the quality officer, in coordination with AU Director, is entitled to take appropriate follow-up actions with the bodies responsible for carrying out the corrective actions.
16. Evidence on completing the corrective actions and resolving the complaint is sent to the complainant.
17. The quality officer shall close the complaint log using form no. qf058-02, when the complaint is completed
18. The quality officer shall bring the summary of the complaints log and follow-up on corrective actions for discussion by the management during the Management Review Meeting.

6. Related documents

1.1 Managing Non-conformities and Corrective Actions Procedure (QP-054)
1.2 Preventive Actions Procedure (QP-055)
1.3 Internal Audit Procedure (QP-056)
1.4 Management Reviews Procedure (QP-057)
1.5 ISO/IEC 17011: General Requirements for Bodies Providing Assessment and Accreditation of CABs

The following documents are defined as quality records for the purpose of Section 5.3 of ISO/ IEC 17011:

1.6 Complaints Registration form; (qf058-01)
1.7 Complaints Log form; (qf058-02)