

Title: Procedure for Complaint & Appeal Handling (HCG/02/10)

1.0 Purpose

The purpose of this procedure is to describe handling of incident, complaint and appeals received from the client, in house and from other parties.

2.0 Scope

This procedure covers all complaint and appeal received at Organization by any means, like written, verbal, e-mail etc. It also includes adverse findings during audits/inspections.

3.0 Competency Criteria for Members of Appeal & Complaint Committee

- Working knowledge of Management Systems (FSMS, HACCP, Halal etc.)
- Working knowledge of ISO/IEC 17021-1:2015, ISO/IEC 17065:2012, UAE.S 2055-2:2016.
- Working knowledge of certification processes
- Working or retired from a position at senior management level in areas of food, commerce, industry or government agencies for a minimum of three years.

4.0 Responsibility

Certification Manager / Quality Manager is responsible for receiving the complaint and appeal from the clients / other parties. They in consultation with the office staff and auditor are responsible for handling, validating and analysis of the complaint and appeal to the satisfaction of the clients / other parties

The overall responsibility to execute this procedure is given below;

Activity	Responsibility
Completion and submittal of incident report records for	staff members
entry into the Corrective Action System	
Incident investigation and analysis	Certificaton Manager /
	Quality Manager
Handling of Appeal and Submission to Appeal	Director / Certification
subcommittee (for appeals)	Manager
Appeal review, analysis and decision	Appeal Subcommittee

5.0 Description of activity

5.1 Quality System Incidents

For the purposes of this document "Quality System Incidents" are defined as complaints, suggestions, observations and opportunities for improvement. Quality System Incident data is entered into the Corrective Action System for proper treatment. This procedure describes the methodology by which collects and processes incident reports; and communicates the impact to staff members. Halal Center Group (HCG) recognizes that incidents occur in daily operation that collectively have an impact on the Quality Management System. In order to properly analyze and address system issues a consistent and thorough process for collection of information is vital.

5.2 Complaints

Complaints are incidents of grievance or dissatsifaction with Halal Center Group (HCG)'s service. Complaints may be:

• Internal in nature - raised by a staff member with regard to internal service, operations or employee performance



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- external in nature- raised by clients, suppliers or other affiliated organizations
- written
- verbal
- complaints raised by client's customers or stake holders

5.3 Terminology used in this procedure for incidents

The incidents and complaints are considered as any of the below 4 things and procedure describes the system for handling the same.

Suggestions

Halal Center Group (HCG) recognizes that positive feedback is as important as negative. Suggestions are vital in identifying preventive action and system improvement. As with complaints, suggestions may be internal or external in nature, written or verbal.

Appeals

Halal Center Group (HCG) recognizes that the client may have some reservations ormay not agree with the conduct of audit/inspection, audit/inspection findings, certification committee decision and / or overall interaction with staff. Client is free to communicate the same to Appeal committee and this is treated as an appeal from the client.

Observations

Observations are witnessed incidents of service/operational deficiency, malfunction and or failure. Observations are often made by individuals independent of the activity witnessed and therefore objective in nature. Observations also play important role in identification of preventive action and system improvement.

Opportunities for Improvement

Opportunites for Improvement are incidents where the system has not failed, yet greater operational efficiency may be obtained in analyzing current practice. Opportunites for Improvement are often collected internally, but input from external sources is also beneficial.

5.4 Receipt of Incidents

- 5.4.1 The quality incident may be reported by any means verbal or written. In case of an external source, the incident report may be received by any staff member. The staff member shall fill the Incident report recording all the information and details of the complaint. The filled report shall be submitted to Quality Manager for further action. In case of internal source, the incident report shall be filled by the staff member and submit to Quality Manager.
- 5.4.2 Quality Manager shall contact (telephone, email, letter) the external source to acknowledge the receipt of information within 5 working days of receipt. He shall understand the issue in details from the source (to avoid any error in writing the report). He may decide to personally meet the initiator, depending on the gravity and seriousness of issue.
- 5.4.3 In case of Complaints and Observations, it may be against Halal Center Group (HCG) (a system / procedure or a person) or a certified company (client). In case of suggestion / opportunity for improvement, it is for Halal Center Group (HCG) to study the suggestion and decide.



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- 5.4.4 All such incidents received by any means or by any one is first of all recorded in the Incident report with the details of:
 - Complaint and appeal sr. No.,
 - Mode of receipt,
 - Received by,
 - Name of client / other parties,
 - Description of complaint and appeal,
 - Reference of services against, which complaint and appeal is raised along with the reference ,date and other details,
- 5.4.5 Client / other parties' complaint and appeal incident report are issued to the Quality Manager for analysing the root cause.
- 5.4.6 Quality Manager validates the complaint after checking necessary back—up records or personal interview of auditor / staff members (who were involved in to job).

5.5 Handling of Client Complaint and Observations

5.5.1 In case of a complaint / observation against Halal Center Group (HCG), Quality Manager analyses the issue to determine if there is system error or person error. He shall determine the root cause and determine correction, corrective and preventive action.

The possible complaints are –

- Administration problems with appointments, certification/inspection files, certificates issued or issued late,
- Auditor/subcontractor problems with incomplete audit/inspection or surveillance documentation
- Agents problems with general compliance with administration or audit/inspection procedures
- 5.5.2 The correction is affected immediately to satisfy the complainant. This may include training / counseling the person involved. The CAPA is discussed with management during next Management Review. Appropriate action is taken based on discussions (change in procedure / formats, training to all personnel etc.). An email is sent out to all staff detailing the issue and remedial action (for information). A copy of the complaint and investigation details is maintained in the respective individual's personnel file for reference at the performance appraisals.
- 5.5.3 In case of a complaint / observation against a certified client, the Quality Manager studies the complaint and discusses with the auditor (last audit/inspection). If the complaint is found genuine and valid i.e. indicates a system failure, the complaint is sent to the client for a response. No confidential reports or information will be sent to complainants without written permission from the client. Adequate time is given to the client for response. If required, Quality Manager follows up with the client for the response. Depending on the response, Quality Manager may decide to
 - Write to the complainant about the response and asks for his response.
 - Ask further clarification from the client
 - Depute an auditor to personally visit the client and investigate for system failure. Such visit shall be considered as special visit and charged to client.
 - Request a joint meeting with client, complainant and Halal Center Group (HCG).
- 5.5.4 Quality Manager shall communicate with the complainant at the end of the process detailing the findings and to formally close the complaint. Whenever possible, HCG gives formal notice of the complaints -handling process to the complainant. HCG determines, together with the certified client



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and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution will be made public.

5.5.5 A copy of the correspondence is kept in the client file for records and the same is passed to auditor during next audit/inspection. The details of all complaints and action taken (Correction, CAPA) are discussed in Management Review and IC meeting.

5.6 Handling of Appeals

Any company or organisation who fails to satisfy an audit/inspection or surveillance may appeal against the decision. Where an appeal is received the following procedure will be followed.

- The Director / Certification Manager will appoint the members of the appeals committee under the leadership of Director who will hear the appeal and determine the outcome. With respect to Halal certification the Halal Islamic affairs expert is one of the members of the committee. In case, Director / Certification Manager are part of the audit/inspection/certification team, Director / Certification Manager shall decide the investigating officer for the appeals process. In such a scenario Director / Certification Manager shall approach Impartiality Committee and/or team to provide decision on the appeal. The decision on the appeal shall be taken based on the decision by Appeal Committee and the Impartiality committee. Results of the appeal will be reported to the board of directors.
 - All appeals shall be received by the Certification Manager /Quality Manager and details of appeals shall be recorded in the Appeals Register maintained by the Quality Manager.
 - Certification Manager / Quality Manager shall investigate the appeal made and inform the client about its plan of action for investigation and action there upon.
 - An investigation report (Incident Report) for each individual appeal shall be maintained by the Quality Manager. In case, any further corrective action is required post actions identified and taken based on Incident report – Corrective action procedure QP04 is implemented.
 - A copy of the investigation report shall be sent to the client.
 - In case of any further ambiguity, the same shall be reviewed by the board of directors and appropriate decision arrived at.
 - In case the issue still remains open; the same shall be intimated to the accreditation board for its valuable comments.
 - All appeals made are collated and analyzed on a yearly basis.
 - Necessary corrective and preventive actions shall be taken based on the appeal trend.
 - Appeal trends and corrective and preventive action taken shall also be reviewed as part of the Management committee meeting and Impartiality committee meeting.
 - Quality Manager shall ensure that details with respect to the appellant and actions there upon is not shared with the audit/inspection team members.
 - Quality Manager shall ensure that no discriminatory action is taken against the appellant.
 - The client is made aware of the appeals process and is available to him on request.
- In case of an appeal made by a client against a decision made by auditor, Lead auditor or certification committee, the appeal shall be recorded by Quality Manager and forwarded to Appeal Subcommittee. Appeal subcommittee shall review the appeal, investigate (which may include discussion with concerned client, respective auditor / lead auditor and review of audit/inspection report). Appeal subcommittee may also direct any other lead auditor to visit the site and determine the validity of the appeal. The decision taken by Appeal subcommittee shall be communicated to the client and to



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Certification Manager / Quality Manager for necessary action. The case is also discussed during the next MRM and Impartiality Committee meeting. In special cases, the case may be discussed with Impartiality Committee members on one-to-one basis.

5.7 Handling of Suggestions / Opportunity for improvement

- In case of suggestion / opportunity for improvement, the source is predominantly internal and the concerned staff member fills the incident report and submits to Certification Manager / Quality Manager. The other source may be internal / external audit/inspection.
- Certification Manager / Quality Manager studies the suggestion to determine any conflict with ISO/IEC 17021, ISO/IEC 17065, UAE.S 2055-2, Halal Center Group (HCG)'s Policy. In case the suggestion is in conflict, the same is communicated to the initiator. However, the suggestion is also discussed in Management review. In case the suggestion is found not in conflict, the suggestion is studied for benefits and the impact on other processes.
- The suggestion is accepted if found beneficial and does not adversely impact any other process.
 Quality Manager determines the changes in existing documentation and implements through Document Change process.
- If any certified client or interested party asks for the appeal/complaint handling process, then it is forwarded to Certification Manager / Quality Manager. He will inform a certified client /any other interested party the appeals and complaint handling process of Halal Center Group (HCG) if any complaints / appeals are received by certified clients / interested party

5.8 Closing of complaint and appeal

- 5.8.1 Depending on the nature of the non-conformity, the Certification Manager / Quality Manager may follow up with requests for corrective and preventive actions. When the investigation of client complaint and appeal determines that remote operation or other external organizations contributed to the complaint and appeal, the Certification Manager / Quality Manager or his delegate contacts these organizations and provides them with all relevant information.
- 5.8.2 Every client complaint and appeal is recorded. The records are maintained by the Quality Manager. When there are copies of written communication, reports and other documents related to a complaint and appeal, these records are organized into a file and are identified with the complaint and appeal number and also having records of the corresponding corrective or preventive actions. The records of investigations that concern product quality or other test characteristics are maintained by Quality Manager. Based on analysis of Client / Other Parties complaint and appeal, necessary actions are taken and client is replied for closing the complaint and appeal. Quality Manager identifies need for taking corrective and preventive action to prevent such complaint and appeal in future and accordingly concerned person is informed.
- 5.8.3 All the complaint and appeal received by Organization will be closed within 7 working days after receipt of the complaint and appeal. Certification Manager / Quality Manager is authorised for closing of complaint and appeal.

5.9 Constitution for Complaint/Appeal Committee

The committee consists of the Certification Manager, Quality Manager and member of other Committees involved in certification activities. Where the any member of committee is involved in the Audit/inspection, the particular member/s will be replaced from the pool of pre-identified members. The



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committee members will be appointed after fulfilling the competency requirements mentioned above in clause 3.

6.0 References

- Ref: HCG/02/04 Procedure for control of documents
- Ref: HCG/02/07 Procedure for corrective and Preventive action

7.0 Formats / Exhibits

• Ref: HCG/03/25 - Appeal & Complaint Log