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Procedure 14

Complaint Handling

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Complaint Handling

Purpose

To ensure how the complaints are handled and resolved amicably.

Scope

This applies to all standard.

Responsibility

Head of Certification, will review the complaints and redress accordingly.

However, where Head of certification is engaged in any certification process it may refer to Managing director.

Cases where Head of certification and managing Director both are engaged in certification process (if any), MD can designate a special board Further consist with at least with three member from the impartiality committee.

Procedure

General System

All clients are made aware of the **UCS** complaints/ disputes procedure by reference to the **UCS** Rules and Regulations.

UCS is responsible for all decisions at all levels of the complaints handling process.


Submission, investigation and decision on complaints will not result in any discriminatory actions against the complainant.

a) Complaints/Disputes Against **UCS**

Recording of Complaints/Disputes

On receipt of a formal written complaint/dispute the recipient shall complete the Complaints/Disputes form F40 confirming whether the complaint relates to certification activities or if it is related to a certified client, then the effectiveness of the certified management system may be considered and the form is forwarded to the Certification Manager within 2 working days.

The Certification Manager shall acknowledge receipt of the complaint/dispute to the complainant/ disputer within a further 5 working days using the acknowledgement letter. In the absence of the Certification Manager this may be issued by a impartiality committee.

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The Certification Manager shall update the complaints/disputes log, and in the case of complaints/disputes against the Certification Manager forward the complaints/disputes form to the Chairman of the impartiality committee.

All complaints shall be subjected to requirements for confidentiality.

Issues which can be provided for complaints to [UCS](#):

1. Delay of any certification processes
2. Lack of Audit team's competence, improper audit team's attributes e.g., impolite wording, disparage, over spent audit time.
3. Unsatisfied in services of any [UCS](#)'s CB personnel

Investigation of Complaints/Disputes

With the exception of complaints/disputes against the Certification Manager or management representative, which are investigated by the impartiality committee, the Certification Manager shall allocate a responsible person to investigate the complaint/dispute.

The investigation shall determine the following:

- The validity of the complaint/dispute;
- Whether [UCS](#) procedures have been followed;
- Whether [UCS](#) procedures are deficient;
- Whether an invoice credit is recommended.

The investigation of complaints/disputes shall be completed within 1 month of receipt, and shall be recorded in complaints/disputes form.

Communication of the Outcome of a Complaint/Dispute

The outcome of the investigation of the complaint/dispute shall be forwarded to the Certification Manager by copy of the complaints/disputes form.


The Certification Manager shall update the complaints/disputes log with the details of the findings of the investigations, and shall communicate these to the client together with any credit that may have been agreed.

Corrective Action

Where corrective action is required this shall be agreed by the Certification Manager and those members of staff affected by the corrective actions and shall be recorded in the complaints/disputes form.

The head of certification shall identify complaint to nonconformity Report (R02) for relevant person to corrective action within the specified period.

The Head of certification shall then ensure that the required corrective action is effectively implemented and where this involves changes to controlled documentation that the Control of Documents procedure is followed.

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Corrective Action Verification

The Internal Auditor shall review the effectiveness of all corrective actions during the audits of this procedure.

Subject to the satisfactory completion of the corrective actions the Internal Auditor shall sign the complaints/ disputes form and shall record details of the objective evidence which has been used to confirm that the corrective actions have been effective. The completed copy of the complaints/ disputes form shall be forwarded to the head of certification at the end of the audit.

Where it is not possible to confirm that the corrective actions have been effectively carried out the impartiality committee shall be informed by the Internal Auditor by copy of the complaints/disputes form.

Review of Complaints/Disputes

The head of certification shall review the complaints/disputes log every 6 months to ensure the following:

- That all complaints/disputes are recorded;
- That all complaints/disputes are investigated;
- That the results of the investigation of the complaints/disputes are communicated to the client;
- That complaints/disputes are closed out at internal audit.

The Head of certification shall, prior to each impartiality committee meeting, prepare a summary of all customer complaints/disputes received within the previous period for presentation at the impartiality committee meeting.

b) Complaints/Disputes Against a Registered Firm


When a complaint/dispute is received against a registered firm from a user of their products or services, it shall be forwarded to the knowledge of Head of certification. Who shall record it on the complaints/disputes against a registered firm log.

Any valid complaint about a certified client is referred by the head of certification to the certified client in question at an appropriate time.

The complaint/dispute shall be investigated by the Head of certification to determine if it is valid and to determine what further actions are required. However, where Head of certification is engaged in any certification process it may refer to Managing director.

Cases where Head of certification and managing Director both are engaged in certification process (if any) or if decided by the MD based upon the severity of the complete, he can designate a special board further which shall consist with at least with three members from the impartiality committee.

The Head of certification shall produce a report on the complaint/dispute and the client shall be informed of the outcome of the investigation.

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Where the registered firm is found to be non-conforming against UCS rules and regulations or the requirements of the standard to which they are assessed a non-conformance note shall be raised and sentenced by the Head of Certification.

This shall be forwarded to the registered firm for corrective action.

UCS shall acknowledge receipt and provide the complainant with progress reports and the outcome of the complaint after investigation.

Final decision shall be recorded and also intimated to the complainant through formal notice. The decision forwarded to the complainant shall be made by or reviewed by and approved by individual not previously involved in the subject of the complaint.

UCS shall determine, together with the client and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution shall be made public.

Any complaint which is not closed out within a timeframe (1 month) shall be escalated to the discretion of the MD or his nominated impartiality committee members team (At least with three member). Complaints that are not closed out within 3 months of timeframe shall be informed to accreditation bodies which UCS is registered with or with the status of the same.

REFERENCE RECORDS:

Record Ref.	Name of Record	Retention
R02	Nonconformity Report	6 Years
F40	Complaints / Disputes Form	6 Years

End Procedure