



Auriga Research Pvt. Ltd. (Certification Division)

Prepared by: Quality Manager	Doc No: ARPL-QP-05	Issue no. 01
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1. Purpose

This procedure establishes the system for handling complaints, appeals and concerns associated with the certification system of ARPL (Certification Division).

2. Scope

This procedure covers all ARPL (Certification Division) personnel and offices. It is applicable to the following types of complaints:

Complaints about ARPL (Certification Division) personnel or services

Complaints about ARPL (Certification Division)'s clients

Appeals and Disputes (i.e. disagreement or dissatisfaction with ARPL (Certification Division))

Exclusion: This procedure shall not be used by ARPL (Certification Division) employees or agents to complaint about other ARPL (Certification Division) employees, agents or internal services.

3. References

ARPL-QM-1.4 ARPL Quality Manual

ARPL-QM-2.0 FSMS Manual

ARPL-QP-10 Corrective and Preventive Action Procedure

4. Definition

Complaint: A formal expression of dissatisfaction about ARPL (Certification Division) personnel, services, and/or clients. The notifications may take many forms e.g. verbally, in letters or e-mails. This may be received from the any stake holder like Accreditation Body, Regulatory Body, User Company or any other body/individual or as feedback to survey.

Appeal: An appeal is a notification received by ARPL (Certification Division) from a client or a user company, expressing a non-agreement with a decision made or provided by ARPL (Certification Division)

User Company: A customer of ARPL (Certification Division) certified client

5. Responsibilities

Managing Director is overall responsible for the managing and monitoring of this procedure-

- Appointing the investigation officer for the received and registered complaints,
- Identifying and deciding course of actions (both corrective and preventive),
- Intimating the complainant of the status of course of actions through Operations Manager, if he/she is not involved
- Final authority to determine on course of actions recommended by designated complaint investigating officer

Passing needful instructions to sub-ordinates or divisions on allocation of resources as required for completing investigation.

Quality Manager, deemed as coordinator, shall be responsible for

- maintenance and regular updating of [ARPL-06-01 (F) Complaint Handling Register] INDIAGHP & INDIAHACCP.
- coordination and first hand contact for complaints,
- monthly reporting of complaints of summary to Management.
- Coordination and maintaining communication with complainant.



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Appeals Committee (as appointed by Advisory Committee Chairman in para 7.2.3 of this procedure) shall be responsible for second line resolution of appeals where complainant is not convinced of outcomes of appeals review taken up in the first line resolution by Managing Director.

Investigation officer/Manager (as designated) shall be responsible for:

- conducting investigation,
- root cause analysis,
- suggesting or recommendation

In case any person having responsibility of related to complaint handling is part of the complaint or cause of the complaint, he/she will not be allowed to participate in complaint handling process in any way. Managing Director will appoint another suitable person to replace the person involved.

6. Procedure of complaints

6.1. General

The complaint in general shall be classified and determined, before being entered into [ARPL-06-01 (F) Complaint Handling Register] INDIAGHP & INDIAHACCP by Quality Manager, whether complaint relates to ARPL (Certification Division) (including its employees) or is about its clients. The further course of investigation, validating information and corrective action shall depend on this classification which is outlined in subsections 6.2 and 6.3 of this procedure.

ARPL (Certification Division) shall keep the complainant updated throughout the process and ARPL (Certification Division) shall further determine, in agreement with the client (or complainant), the extent to which the subject of complaint and/or resolution shall be made publicly accessible like publishing on websites, advertising in newspaper etc. keeping the confidentiality into consideration. However, this shall be available for reviews by Accreditation Board audits and reviews for verification as and when demanded.

All the received complaints shall be analyzed during the Management Review to indicate the weaknesses and further shall form a part of corrective actions for process improvement.

In all cases, persons engaged in the complaint-handling process are different from those who carried out the audits and made the certification decisions.

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

6.2. Processing of complaints about ARPL (Certification Division)

On receiving a complaint, the relevant details are recorded on a [ARPL-06-01 (F) Complaint Handling Register] INDIAGHP & INDIAHACCP by Quality Manager within 1 day of receipt of complaint. The details of complaint is then apprised to Managing Director who shall, determining the seriousness of the complaint, appoint or designate or assign an independent investigator (one who is not connected with content of complaint) within a timeline of another 3 days from intimation by Quality Manager. Managing Director shall decide on resources allocation for completing investigation into complaints and as such shall be responsible for directing or instructing all departments/personnel as required to complete investigation.

The investigation shall be used to establish a trail of events using following ways –

- Identify the cause of the problem and gather and verify all necessary information for verifying the chain of events
- Recording of statements of the ARPL (Certification Division) employees (the subject of complaint)
- Recording of statements of complainants

Designated investigator shall investigate into complaint and find out the root-cause analysis within minimum possible time. However, there shall not be any fixed deadline for completing investigation



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considering that a transparent and fair investigation may require detailed analysis of various issues. Upon completion of investigation, designated investigator shall submit a detailed investigation report along with recommendations (which can be in any format) to Managing Director. Managing Director shall have discretionary power to accept and implement recommendations in toto or in partial. However, there shall be a written justification for ignoring recommendations. Investigation report together with recommendations shall form the basis for course of redressal and future course of preventive actions.

Once agreement has been reached on satisfactory resolution of the complaint, the Quality Manager shall:

- Update the complaint form,
- Provide written confirmation of the action to complainant that will be or has been taken to resolve complainant's grievance.

Apart from confirming to the complainant what action has been taken to resolve their complaint, the complainant must be advised of their right to appeal against the handling of their complaint before Appeals panel. That is, if the complainant is not happy with the resolution of their grievance with ARPL (Certification Division), they may lodge a written appeal with Appeals panel.

6.3. Processing of Complaints about ARPL (Certification Division)'s Clients

On receiving a complaint, the relevant details are recorded on a [ARPL-06-01 (F) Complaint Handling Register] INDIAGHP & INDIAHACCP. The complaint form (and other relevant details) is passed to Managing Director. Managing Director then reviews the significance of complaint and then assigns to investigation manager/officer. Wherever, conditions permit, Vice President shall be investigation officer for complaints relating to violation of certification norms by an ARPL (Certification Division)'s certified clients. If a decision is taken to investigate a complaint; the method and resources allocated to the investigation is left to the discretion of Managing Director. Progress of such investigations shall be reported as described above.

At the discretion of the Managing Director, client which is the subject of a complaint, may be informed that ARPL (Certification Division) is investigating a complaint made against it within 2-4 weeks of taking the decision for investigation based on the severity of the complaint. The client under the purview of complaint may also be informed of the outcome of the investigation. However, the content of disclosure shall be mandatorily be governed by the following terms:

- Degree and type of information given to a third-party is governed by ARPL (Certification Division) Rules relating to confidentiality.
- Identity of the complainant shall not be disclosed without the complainant's expressed permission to do so.

If the complaint is solely about lack of service or a commercial dispute, the investigating officer shall organize a letter, over the signature of the Manager, outlining ARPL (Certification Division)'s role to the complainant within seven (7) days from receiving the complaint. Once required action has been implemented, Quality Manager completes the entries and updates the Complaint and Appeal Handling Register. If the complainant is not satisfied with complaint resolution, ARPL (Certification Division) Complaint and Appeals policy allows complainant to further file appeal in accordance to appeals procedure outlined in para 7. In cases related to complaint against certified client, continuity of the effectiveness of the food safety management system shall be verified by ARPL (Certification Division).

6.4 Corrective and Preventive action

Where complaint pertain to certification activities of ARPL (Certification Division) and further validated from investigations, Corrective and preventive actions shall include-



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- Counselling and training of the concerned employees or all,
- Provisioning of resources to bring improvement in transparency and compliance
- Other corrective/preventive action as required depending upon the course of investigation
Where complaint pertain to certified clients regarding violation of certification norms and further validated from investigation, Corrective and preventive actions shall include-
- Suspension and withdrawal of certificate,
- Fines
- Other corrective/preventive action as required depending upon course of the investigation

7 Procedure of Appeals

7.1 General

In the event that a complainant disagrees with a certification decision of ARPL (Certification Division) or issues as referred in section 6 of this procedure, they are entitled to respond in writing giving reasons and requesting an appeal within 14 days of being officially informed of Certification decision/outcome of complaint investigation process. The client shall be guided by Quality Manager/Managing Director on the process of the appeals. In the first line response to appeal filed by complainant (referred as Appellant), Managing Director shall first try to resolve the matter in the manner explained in para 7.2.1 of the appeals procedure.

Should the outcome of this first line resolution (or review) still be unacceptable to the client, appellant have recourse to the appeals panel process defined as second line resolution in paragraph 7.2.2. The procedure of appeals shall be made accessible to general public (either through public website or hard printed copy of the procedure) and if required Operation Manager shall further guide the appellant to file appeals by making available appeals application forms Annex A14 Complaint/Appeals/Concern Registration Form.

In all cases, persons engaged in the appeals-handling process and decision making process (taking the decision, review of the decision and approval of the decision) are different from those who carried out the audits and made the certification decisions.

Submission, investigation and decision on appeals shall not result in any discriminatory actions against the appellant.

7.2 Procedure of Appeals

Appeals can be received in writing only-either by letter, email or web portals etc. Upon receiving it is required to be recorded with unique number identification and an acknowledgement is required to be sent to the appellant. Further, a preliminary review is required to be conducted to confirm the validity of the appeal. Every appeal is required to be responded in writing to the appellant in timely manner (less than 30 calendar days in general) after investigation. If investigation is expected to take more than 1 month, an interim progress report is required to be sent to the appellant. Action is required to be decided based on the result/outcome of investigation. While taking action, it is required to take into account the result of any previous similar appeals. Recurring issues or serious issues related to the FSMS system shall trigger the requirement for correction, root cause analysis and corrective action to prevent the recurrence as per the procedure of corrective and preventive action ARPL-QP-10 Corrective and Preventive Action Procedure and clause 7.2.6 and 6.4 of this procedure.

Following steps are taken for the resolution of the appeal:

7.2.1 First Line Resolution

In the first line response to appeal filed by the complainant (hereafter referred as appellant), Managing Director shall first try to resolve the issue by further investigation in the similar process as explained in section 6 of this procedure. The appellant shall be kept apprised of the ongoing



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appeals investigation taken up by ARPL (Certification Division). The outcome of this investigation and final decision shall be informed to the appellant by Managing Director in writing within 3 days of conclusion of investigation.

7.2.2 Second Line Resolution

Where appellant files for re-appeal, Managing Director shall refer the matter to Appeals Committee appointed by Advisory Committee Chairman in accordance to rules laid down in constitution of Appeals committee in 7.2.3 of this sectional procedure on Appeals. Representatives of ARPL (Certification Division) and the appellant shall be entitled to be heard in confidence by the Appeal Panel. The Appeal Panel's decision, based on the majority of the Appeal Panel as declared by its Chairman, shall be final and will be communicated to the Appellant in writing within 7 days of the panel meeting and decision. The findings of Appeals Committee shall be binding on both ARPL (Certification Division) and the appellant. Both Appellant and ARPL (Certification Division) shall be required to take corrective action as outlined in para 7.2.6 of this appeals procedure. Resources for organizing meeting and appeals investigation shall arranged by Managing Director as explained in paragraph in 7.2.3 on Appeals Cost.

7.2.3 Appeals Committee Constitution

Chairperson of the Advisory Council shall appoint a panel to hear the appeal. The panel referred as Appeals Committee shall comprise a Chairperson and two members, none of whom shall have any interest or direct association with the subject of the appeal or have been involved with the related audit or certification process. The Panel shall meet within 30 days of the receipt of the request for appeal. The appellant shall be given at least 14 clear days' notification of the constitution of the Appeal Panel, the time and place of the meeting.

The appellant has the right to state objections to the Appeal Panel's constitution. Such objections shall be in writing and shall be communicated to the ARPL (Certification Division) at least 7 clear days before the scheduled date for the Panel meeting. The appellant's objections to the constitution of the Appeal Panel will be considered by the Advisory Council at its next scheduled meeting, or sooner if this would lead to a period of longer than 30 days between the appeal communication and the Panel's meeting, upon which the Board will decide whether or not to accept the appellant's objections and amend the constitution of the Panel accordingly. The appellant will be informed in writing of the Board's decision and of a new date for the hearing of the appeal in cases of such reconstitution.

7.2.4 Appeals Cost

ARPL (Certification Division) India reserves the right to charge the Appellant, reasonable costs for this second line of independent appeals resolution through invoicing as defined in paragraphs 7.2.2. Levy of charges will be notified in advance at the time of second line resolution and may be charged to the appellant ahead of any review commencing. Managing Director, in the meantime, shall arrange for resources necessary for constitution and meeting of the Appeals Committee which shall then be used for determining the charges to be invoiced.

7.2.5 Liabilities

Under no circumstances shall ARPL (Certification Division) or its employees or agents be liable for any losses, damages, charges, costs or expenses of whatever nature which any approved producer, applicant or scheme member may suffer or incur by reasons of or arising from the administration or the performance of their respective obligations in connection with the Certification Scheme, except where costs arise as a result of the gross negligence or willful default of such persons.



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7.2.6 Corrective Action

In cases where appeal outcome requires, Managing Director shall authorize for suitable corrective action as per para 6.4 of this procedure depending upon nature of outcome of review of Appeals Committee.

8. Records

Record Name	Responsibility	Record Location	Period
ARPL-06-01 (F) Complaint Handling Register]	Quality Manager	ARPL (Certification Division)	03 Years
Annex A15 Complaint/Appeal/Concern Report Form	Quality Manager	ARPL (Certification Division)	03 Years
Annex A14 Complaint/Appeals/Concern Registration Form	Quality Manager	ARPL (Certification Division)	03 Years
Annex A10 Non-Disclosure and Confidentiality Agreement	Quality Manager	ARPL (Certification Division)	03 Years