

COMPLAINT HANDLING

1 OBJECTIVE

To ensure that all complaints are managed and resolved satisfactorily.

2 SCOPE

This procedure is used for handling complaints with regard to KAN activities and/or KAN accredited CABs.

3 REFERENCE

PM 5.8

4 RESPONSIBILITIES

Director for Accreditation or Quality Manager is responsible for handling and resolving complaints and to implement corrective and preventive actions.

5. PROCEDURE

5.1 General

5.1.1 Complaint shall be made in writing and addressed to Accreditation Director.

5.1.2 KAN Secretariat will advise to complainant to make complaint in writing if the complainant lodges complaint in verbal. KAN will not take any action until the written complaint is received.

5.1.3 Complaint shall contain, but not limited to, the following detail:

- The name and address of the complainant;
- Detail of the subject of the complaint, where possible include objective evidence to support the complaint.

5.1.4 Accreditation Director reviews the complaint to ascertain the substance and determine validity of the complaint.

- 5.1.5 Complaints relating to KAN management system are to be sent to Quality Manager, while complaints relating to the accreditation process will be resolved by Accreditation Director.
- 5.1.6 Accreditation Director notifies, in writing, to the complainant informing that the complaint has been received and will be resolved accordingly.
- 5.1.7 Quality Manager or Accreditation Director appoints appropriate personnel to investigate the complaint and implement corrective actions.
- 5.1.8 If needed, Accreditation Director or Quality Manager will establish an Ad Hoc Team to resolve of the complaint.
- 5.1.9 Quality Manager or Accreditation Director assesses the effectiveness of all actions taken to resolve the issue. Upon actions taken have been considered satisfactory, Accreditation Director or Secretary-General makes approval of resolution of the complaint.
- 5.1.10 Accreditation Director formally notifies, in writing, the complaint resolution to the complainant.
- 5.1.11 KAN records complaints (FSM 06.01), actions taken and resolutions of the complaint.

5.2 Complaint related to KAN Activities General

- 5.2.1 Accreditation Director notifies, in writing, the complaint received by KAN Secretariat to accredited CAB. The CAB is required to provide statement and to investigate the complaint, ensuring that the complaint is first addressed by the CAB.
- 5.2.2 The CAB shall notify, in writing, its statement to complainant and a carbon copy shall be sent to KAN Secretariat within one month.
- 5.2.3 Should the complainant not satisfy to CAB statement, Accreditation Director may arrange for a meeting inviting the parties to the complaint to make resolution.
- 5.2.4 If necessary, Accreditation Director may appoint personnel or team to carry out unscheduled surveillance to investigate the complaint. It should be noted that the outcome of the unscheduled surveillance might be suspension, reduction or withdrawal of accreditation if it has been proven that the accredited CAB has violated the term and condition and/or accreditation criteria. Accreditation Director shall make decision based on the outcome of the unscheduled surveillance and promptly notifies in writing to the complainant.



6 RELATED DOCUMENTS


- PSM 10 : Corrective and Preventive Action Procedure
- FSM 06.01 : Complaint Records

7. DOCUMENT AMANDEMENT

Revision number	Effective Date	Brief description of changes
0	12 March 2012	-

8. APPROVAL

Reviewed by	Signature	Date
Director for Accreditation of Laboratory and Inspection Body		12 March 2012
Director for Accreditation of Certification Body		12 March 2012

Approved by	Signature	Date
Secretary-General		12 March 2012