IQCS INTERNATIONAL LLP	CUSTOMER COMPLAINTS HANDLING PROCEDURE, QSP/07
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Revisions:

1. **The form of document to be displayed in website is amended.**

CUSTOMER COMPLAINTS HANDLING PROCEDURE, QSP/07

PURPOSE

The purpose of this procedure is to eliminate root cause of customer complaints/ negative feed backs and opportunities for improvement in auditing activities.

SCOPE

The scope covers all customers handled in Hygiene Rating and Food Safety Management system certification activities.

RESPOSNIBILITY

The customer complaints received in office are recorded by the office in charge. The customer complaints are noted in the customer complaint form maintained in the excel sheet.

The negative feedbacks and opportunities for improvements also will be recorded by the office in charge in the excel format.

All these will be reviewed by the Director and appropriate action will be taken by the Director.

The complaints from external customers are noted in the form. Auditors will directly inform the complaints to office in charge. The sources of complaints can be auditors or FBOs. FSSAI can also be a source in the case of hygiene rating. The data will be noted and rectified by the Director. The RCA will be done and records of RCA will be maintained. The corrective action handling procedure is given below.

The complaints received will be responded within 48 hours. The responsibility for responding the complaints is with Director

PROCEDURE

a) Reviewing complaints

The received complaints will be forwarded to the Director by the office in charge and the consultants in the respective area by mail/phone/photo/ or any other media

The customer complaints are reviewed and immediate rectification is done.

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DESIGNATION	Director	QMSCR
SIGNATURE		
DATE	01/01/2025	01/01/2025

The rectification includes change of documents/training/retraining/format change or any other action as relevant to the nature of the complaints. The negative feed-back also will be reviewed and responded with 48 hours. The opportunities for improvement will be reviewed in each management review meeting by the Director.

b) Determining the causes of non-conformities.

The causes are identified by investigating the root cause of the problem.

c) Actions initiation for complaints/feedback/OFI

On completion of the regular disposition, Director records the CPR. Investigation on the basis of CPR is assigned to identify team/individual by QMS CR. The cause is investigated by the Director, using why – why analysis. The root cause is investigated and corrective actions are implemented.

The designated team/individual records result of investigation and suggest corrective action to be taken.

d) Records of corrective action

Corrective action of non-conformities is recorded in the corrective action register.

e) Reviewing the effectiveness of corrective action taken

The suggestions for corrective action are reviewed and further action as well as responsibility recorded by QMS CR. While reviewing, the designated authority also indicates on the CAR, the actions for improvement. The effectiveness of corrective action taken are verified and discussed during the management review meeting. The corrective actions are taken for complaints/negative feedbacks and opportunities for improvements.

Forms/Records

Customer complaints/feedback/OFI data

Corrective action form

	APPROVED BY	ISSUED BY
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