IQCS INTERNATIONAL LLP	CUSTOMER COMPLAINTS HANDLING PROCEDURE, QSP/07
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Date of revision: 31/12/2024

Revisions done
Date of revision: 30/09/2024
Revision Details: The company name change indicated

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. The procedure is for FSMS Certification Program, in accordance with requirements ISO/IEC 17021-1: 2015 & ISO 22003:2022.

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 operations manager in the excel format.

All these will be reviewed by QA in charge and appropriate action will be taken by QA in charge.

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 QA in charge. 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. QA in charge will respond to the customer complaints.

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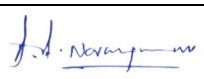
DESIGNATION	Director	QMSCR
SIGNATURE		
DATE	31/12/2024	31/12/2204

PROCEDURE

a) Reviewing complaints

The received complaints will be forwarded to QA in charge 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.

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 QA in charge.

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, QA in charge records the CPR. Investigation on the basis of CPR is assigned to identify team/individual by QMS CR. The cause is investigated by QA in charge and team, 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 QA in charge. While reviewing, the designated authority also indicates on the CPR, 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 data

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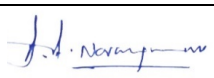
SIGNATURE		
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