Handling and evaluation of complaints, appeals and review requests

1. Purpose & scope

This procedure aims at describing the steps adopted by IHC for:

- Complaints handling
- Handling of appeal against a certification decision
- Handling of request of reviewing an evaluation decision.

This SOP applies to all IHC personnel and to all parties that are involved in the complaints, appeals, and review request procedure.
Complaints can be made by any interested party (such as clients, consumers, accreditation bodies or authorities). All IHC clients have the right to appeal against any certification decision or to request a review of any evaluation decision IHC may take if they can bring forward good arguments. This SOP outlines the principles and responsibilities with regards to complaints, appeals and review requests.

A description of the handling process for complaints and appeals is publicly accessible on the IHC website and is provided on request.

2. Responsibilities

The General Manager has the overall responsibility and authority for ensuring that this procedure is implemented, and delegates the coordination of the process to the QM. It's the responsibility of the QM, TD and CAC to ensure the proper setting, implementation, and communication of this document.

- The General Manager appoints the members of the CAC for each case and ensures that the CAC has the necessary authority and resources.
- The QM receives all complaints, appeals and review requests, records them in the log (LIS-02), sends the acknowledgement of receipt, coordinates the validity check, the investigation and the communication of the outcome, and verifies that the agreed corrections and corrective actions are implemented and effective.
- The CAC investigates and decides on appeals and on the complaints forwarded to it, and informs the related parties.
- The TD; when involved, handles the requests for review of evaluation decisions through personnel who were not involved in the evaluation decision concerned.
- All IHC personnel forward without delay every complaint, appeal or review request they receive to the QM and cooperate in the investigation.

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3. Abbreviations and definitions

SC:	Sharia committee
CDC:	Certification decision committee
CAC:	Complaints/ Appeals committee
TD:	Technical department
QM:	Quality Manager
IAE:	Islamic affairs expert
QMS:	Quality management system
IHC:	International Halal center
AB:	Accreditation body
SOP:	Standard operating procedure
PFC:	Process flow chart
NC:	Non-conformity

4. Further definitions relevant to this SOP

- **Complaint:**

A "Complaint" means an expression of dissatisfaction, other than an appeal or a review request, by individual(s) or organization(s) (including certified organization(s) and other interested parties) with an issue related to IHC or organizations certified by IHC where a response is expected. Specifically, the complaint is related to the certification service of IHC.

- **Certification decision:**

A decision taken by IHC to grant or deny initial certification, confirm certification after surveillance audit, renew certification, extend a certificate, suspend a certificate, lift the suspension or to decertify. A Certification decision becomes valid with immediate effect.

- **Evaluation decision:**

A decision taken by IHC to confirm non-conformities identified during an audit, confirm corrective measure proposals or objective evidence, verify objective evidence during a follow-up audit without suspension, or to consider a major non-conformity. An Evaluation decision becomes valid with immediate effect.

- **Appeal:**

A request by the client to review and reverse a certification decision. Appeals against certification decisions are decided on by the CAC of IHC.

- **Requests for review:**

These are requests by the client to review an evaluation decision. They are handled by the TD through personnel who were not involved in the evaluation decision concerned.

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- **Complaints/ appeals committee (CAC):**

This committee is an internal quality control body that objectively handles the complaints considering any raised argument and objection by the involved parties. As a company-internal body, its role is not that of an external or official arbitration body nor a court-like institution.

5. Categories of complaints, appeals, or review requests

The complaints, appeals, review requests can be classified under the following categories:

- Against QMS of IHC (complaint)
- Against implementation of the QMS of IHC (complaint)
- Against IHC-certified product or client (complaint)
- General dissatisfaction against the whole IHC or personnel of IHC
- Against already taken evaluation decisions (request of review)
- Against already taken certification decisions (appeal)

6. Reasons for a complaint, appeal, or a review request

All complaints, appeals, review requests must state the reason(s) and need to be supported by information and evidence. This is important for the IHC case evaluation.

The complaints, appeals, review requests may have one or more of the following reasons:

- Confidentiality not held.
- Bias or unfair behavior or decision.
- Failure to consider presented and relevant information.
- Unreasonable delay in processing or taking decision.
- Unprofessional behavior or decision.
- Dispute about facts
- Non-compliance with the audit plan or inconsistent description of findings (non-conformities, audit report).
- Other reasons mentioned by complainant, appellant, and request provider.

7. Acknowledgement of a complaint, appeal, or a review request

- Complaints, appeals, and requests of review must be submitted through written text. The client feedback form of IHC (FOR-15) can be used for complaints. Complaints, appeals, and requests of review can be also sent via email, fax, filling online form, or other means to transfer written texts.
- A complaint, appeal or review request received verbally or by any IHC employee is written down by the recipient and forwarded to the QM without delay.
- A complaint related to IHC certification service can be submitted any time.

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- A review request against an evaluation decision can be submitted within 1 month after an evaluation decision is taken.
- An appeal can be submitted within 1 month after a certification decision.
- IHC will not respond to anonymous requests without clear contact information.
- After receipt of the complaint, request of review, or appeal in writing, the QM shall verify whether it relates to the certification activities .for which IHC is responsible. If this is the case, it is handled according to this SOP; if not, the submitter is informed in writing with justification.
- IHC confirms the receipt and acknowledgement to the complainant, review request submitter, or appellant using an official letter without delay.
- The QM maintains a register of complaints, appeals or request of reviews (LIS-02) and records in it each submission, the persons involved in its handling, the investigation, the decision, and the corrections and corrective actions until their closure.
- The GM and/ or QM shall handle or forward the complaints, appeals, and requests of review. The GM and/or QM decides after initial evaluation if this request shall stay in handling by QM or be forwarded to the TD or to the CAC.
- Within 7 calendar days after receipt, the CAC check the validity of the complaint, appeal or review request; critical and urgent complaints are checked as soon as possible. A submission is valid if it relates to activities carried out or caused by IHC and if these activities are against the requirements of the accreditation bodies, of the applicable standards or the internal requirements of IHC.
- If a submission is not valid, the QM informs the submitter in writing with justification and records this in the log (LIS-02).
- The identity of the complainant, appellant or request provider and the content of the submission are treated confidentially.
- No discriminatory action is taken against the complainant, appellant or request provider as a result of the submission, the investigation or the decision.
- The present status of evaluation or certification stays unaffected, until a revised decision is issued. All restrictions resulting from a suspension remain in effect during the suspension, regardless of the outcome of an appeal. The new decision is valid with immediate effect.
- Interested parties or ABs can ask to see and evaluate the log of complaints, appeals or request of reviews.

8. Constitution of the complaints/ appeals committee (CAC) and its decision

CAC is established by the General Manager for each case and involves at least three IHC employees:

- From Quality Manager (QM) (1 person)
- From technical department (TD) (1 person) (when involved)
- From Sharia committee (SC) at least 1 Islamic affairs expert (IAE))
- A technical expert can be called upon by the CAC if necessary.

Decisions of the CAC regarding appeals and complaints are taken unanimously, not by majority of votes. The quorum for CAC meetings is three members, including the Islamic affairs expert.

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9. Criteria for selecting the CAC members. Independence and impartiality:

- CAC members shall not have been involved in any selection, evaluation, review or decision step related to the subject of the complaint or appeal.
- Employees (including those acting in a managerial capacity) who have provided consultancy for a client or been employed by a client, or who have any other conflict of interest, shall not be members of the CAC for a complaint or appeal of this client within two years following the end of the consultancy or employment.

CAC members shall demonstrate the ability to apply knowledge and skills in the following areas:

- principles for halal certification;
- Islamic rules related to halal certification;
- current principles and understanding of relevant management systems;
- identification and assessment of risks for halal requirements;
- corrections and corrective actions to be taken with regards to halal matters;
- laws, legislation and regulations relevant to the halal products/services;
- products, processes and practices;
- review and assessment of an audit report for accuracy and completeness;
- review and assessment of the effectiveness of corrective actions;
- the certification process;
- good understanding of the fundamental rules and conditions related to halal, especially about the slaughtering of animals according to Islamic rules and the requirements of relevant standards.

10. Investigation, action, and response

This procedure is handled by the QM, TD or CAC and includes the following steps:

- Gathering more relevant information
- Discussion with other related parties
- Analysis of the cause(s)
- Internal discussion
- Decision
- Reply to the complainant, appellant, or request provider.
- Proposal of corrective action
- Proposal of preventive actions

The QM or the CAC is responsible for gathering and verifying all necessary information to progress the case to a decision. The persons involved can be questioned (verbally or in writing) and the client or the complainant is contacted for further clarification if the information is incomplete or inaccurate. All investigations are recorded.

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The decision on an appeal or a complaint is taken unanimously by the CAC, not by majority of votes, within 30 days after the necessary investigations. The complainant, appellant or request provider is informed about the progress of the case. The decision, with its justification, is communicated to them in writing and, whenever possible, they receive a formal notice of the end of the handling process. The decision is taken, or reviewed and approved, by persons not involved in the certification activities concerned.

A decision on an appeal or a review request has one of the following outcomes:

- Original decision overturned: the decision is changed by the CDC (evaluation decision: by the TD) and the effect of the changed decision is explained to the appellant with the communication of the decision.
- Original decision confirmed: the decision is confirmed and not changed.

For a valid complaint, the CAC identifies the causes and defines corrections and corrective actions. The QM records the planned actions, the persons in charge and the target dates, and verifies that the actions are implemented and effective.

For a complaint about a certified client, IHC informs the client and considers the effect on the certification. IHC determines, together with the client and the complainant, whether and to what extent the subject of the complaint.

Where complaints or appeals are repetitive or serious, the QM raises a non-conformity (NC), analyses the root causes with the parties concerned and applies the corrective action procedure.

All complaints, appeals and review requests and the actions taken are reviewed systematically as part of the management review.

11. Process flow chart

The flow chart of this process is shown in PFC-14.

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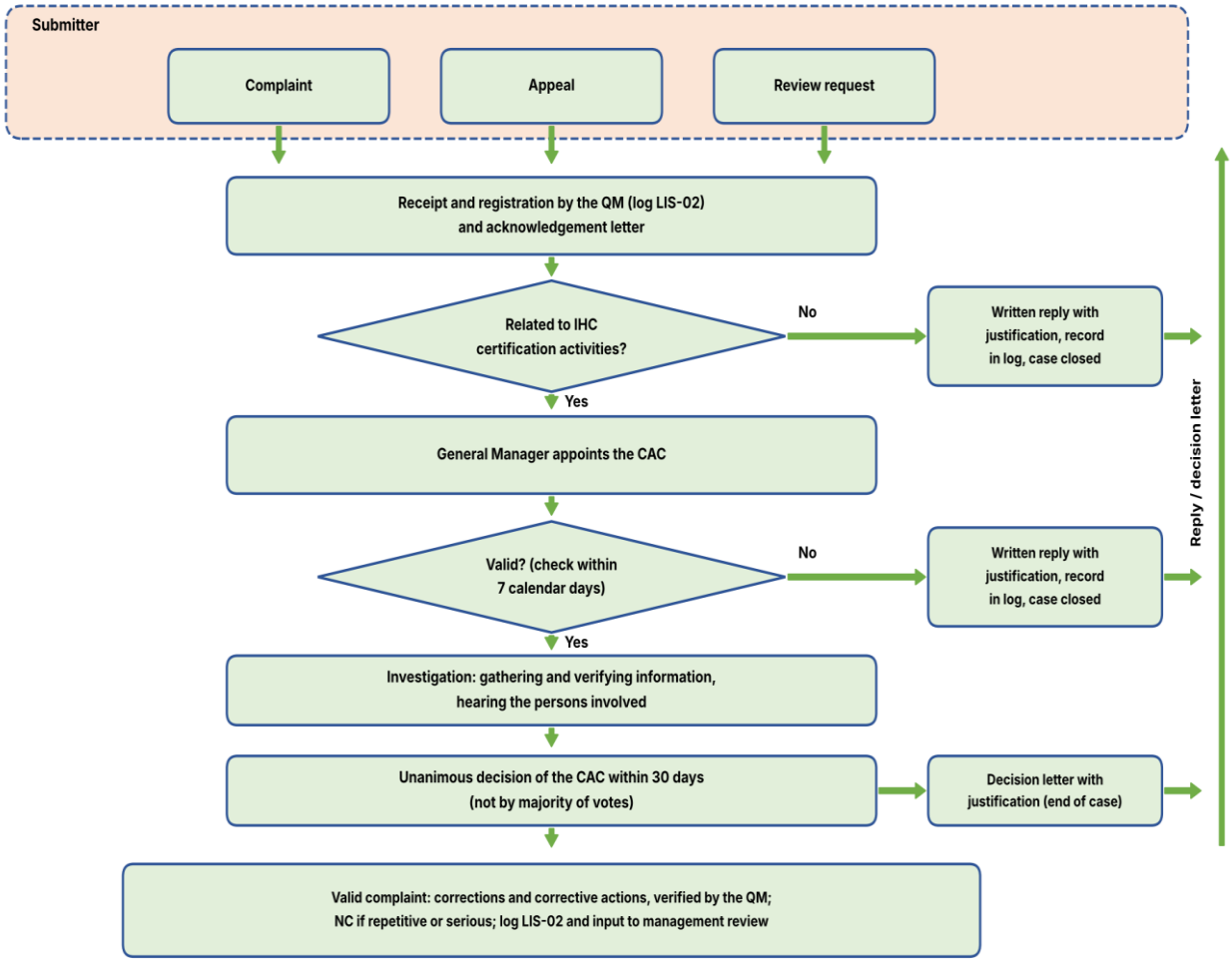

12. References

N°	Name of Document	Internal/external Document	Document Code
01	List of complaints and corrections/ corrective actions	Internal	LIS-02-ALL-00-EN-01
02	Organization chart	Internal	ORG-01-ALL-00-EN-01
03	Policy of the company	Internal	POL-01-ALL-00-EN-01
04	Certification decision making process (SOP)	Internal	SOP-04-ALL-00-EN-01
05	Certification scheme (SOP)	Internal	SOP-06-ALL-00-EN-01

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13. Revision and approvals table:

Revision	Date	Nature of Changes	Created by	Approved by
01	29.01.2021	Original issue	Samer Khader	Dr. Abdullah Hito
01.01	03.05.2024	Review	Jihene Bedoui	Dr. Abdullah Hito
02	19.11.2026	Update: complaints and appeals handling aligned with GSO 2055 and OIC/SMIIC requirements (responsibilities, validity check, timeframes, CAC independence and competence, corrective actions)	Laila Chatoine	Dr. Abdullah Hito

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