

1 Aim

This procedure aims to establish the system for receiving, evaluating, and making decisions on complaints and appeals related to the activities carried out by Sbcert.

2 Reference and Supplementary Documents

- ISO/IEC 17065 - Conformity assessment - Requirements for bodies responsible for certifying products, processes and services;
- ISO/IEC 17000 - Conformity Assessment - Vocabulary and General Principles;
- FSG-03 - Complaint and Appeal Registration;
- FSG-04 - Corrective Action, Preventive Action or Improvement (if applicable);
- FSG-05 - Non-Conformance Map, Corrective/Preventive/Improvement Action;
- PSG-04 - Corrective Action, Preventive Action and Improvement.

3 Terms and Definitions

Assessment: A process carried out by Sbcert to assess an organization's compliance, based on standard(s) and/or normative documents for a specific scope/scheme/audit.

Appeal: A request by a person or organization that provides or is the subject of conformity assessment to Sbcert or an accreditation body, for reconsideration by that decision-making body of any decision taken in relation to the subject matter.

Complaint: An expression of dissatisfaction, other than an appeal, issued by a person or organization to Sbcert, or to an accreditation body, regarding Sbcert's activities, where a response is expected.

4 Deadlines

4.1 Timeframe for the Customer to File a Complaint or Appeal

Complaint: up to 10 calendar days after the occurrence or the certification decision/certificate issuance.

Appeal: up to 7 consecutive days immediately after the audit (e.g., receipt of the non-conformity report) and after the certification decision/issuance of the certificate.

4.2 Deadline for SBCert to Respond to Received Complaints and Appeals

Sbcert will send the claimant or appellant confirmation of receipt and registration of the appeal/claim within 5 business days.

Complaints: Requests will be completed no later than 30 business days from receipt. If it is not possible to complete the process within this timeframe, the client must be informed of the status of the process.

Appeals: They will be completed within 20 business days from the date of receipt.

Use: For complaints and appeals related to IFS protocols, Sbcert will send an initial response within 10 business days of receipt and before the final conclusion of the complaint or appeal.

4.3 Communication to Scheme Owners

For schemes that require direct communication regarding complaints and appeals, Sbcert establishes that:

- **LEAF:** Complaints related to the LEAF protocol must be reported to the scheme owner within a maximum of 5 (five) business days after receipt.
- **IFS:** For complaints and appeals related to the IFS protocol, the registration must be reported to the scheme owner immediately upon receipt, before any decision is made on the matter.
- **BRCGS:** For complaints related to the BRCGS protocol, the scheme owner must be notified within 3 (three) months of receiving the complaint.

5 Responsibilities

Contributors: It is the responsibility of all employees to report customer complaints/appeals and forward them to the Quality Department for registration.

Certification Manager: responsible for resolving appeals and complaints received.

Quality Manager: Responsible for managing customer complaints and appeals, ensuring that the complainant or appellant is informed about the registration of complaints and appeals, the complaint/appeal handling process, and the people involved; providing reports and the actions resulting from the complaint or appeal received. Formally notify the appellant of the appeal outcome, and whenever possible send a formal notification of the complaint outcome to the complainant.

6 Procedure

6.1 Complaints

Complaints can be received through various means such as email, website, telephone, among others.

Upon receiving the complaint, it must be registered in...*FSG-03 - Complaint and Appeal Registration* and/or forwarded to the Quality Department, which must confirm whether the complaint is related to the certification activities under the responsibility of Sbcert.

If the complaint is not related to the activities carried out by Sbcert, the person in charge records the finding on the form, concludes it as unfounded, and sends a response to the complainant, thanking them for their feedback and informing them of the finding.

If the complaint is related to activities carried out by Sbcert, the Quality Department formally informs the complainant about the registration of the complaint.

The responsible manager, or a person designated by them, should gather as much information as possible and assess its scope, then forward it for a final decision.

If the complaint is deemed valid, the action to be taken must be defined, and the decision recorded. This decision must be consistent with the nature of the complaint.

The decision on a complaint is made, reviewed, and approved by individuals who were not involved in the certification activities related to the complaint. Additionally, personnel who provided consulting services or were contracted by the client involved in the complaint are not used to review or approve that client's complaint for at least two years following the completion of the consulting services or termination of employment.

Whenever possible, after the complaint is finalized, the Quality Department informs the complainant about the conclusion of the process.

6.2 Appeals

Appeals can be received by email or through the website. They are usually received by Certification Managers or the Technical department.

When received, they must be forwarded to the Quality Department, which in turn registers the appeal in the system. *FSG-03 - Complaint and Appeal Registration*. After registration, the Quality department formally informs the appellant and forwards the information to the Certification Manager.

The Certification Manager must designate an independent and impartial person to collect and verify all information necessary to assess the appeal against the requirements of the applicable scheme; these individuals must not have participated in the certification Assessment and Decision process.

Following a technical assessment and analysis, the Board of Directors, or a person designated according to the job description, makes the decision based on the findings. The decision is made, reviewed, and approved by individuals who were not involved in the certification activities. Additionally, personnel who provided consulting services or were hired by the client involved in the appeal are not used to review or approve that client's appeal for at least two years following the completion of the consulting services or termination of employment.

After a decision is made, the records are forwarded to the Quality Department, which files them in the computerized system and informs the appellant about the conclusion of the process.

6.3 General Provisions

When deemed necessary, an internal corrective action process may be initiated. This process may occur concurrently with the handling of the complaint/appeal, or it may be initiated after the complaint/appeal has been finalized.

If applicable, the relevant authorities should be included in the complaint/appeal process.

Periodically, the Quality Manager analyzes complaint records to assess the likelihood of recurrence.

When the assessment indicates that the complaint may recur or that there are situations that jeopardize the compliance of the activities, a Corrective Action must be recorded on the form *FSG-04 - Corrective Action and Improvement*, as indicated in the procedure *PSG-04 - Corrective Action, Preventive Action and Improvement*.

7 Revision Schedule

Revision Schedule			
Rev	Description	Data	Responsible
13	Revision of the text of the note for item 4.2.	09/12/2024	Quality Manager
14	Inclusion of item 4.3.	21/05/2025	Quality Manager