

1. Objective

To establish guidelines for an effective and impartial receipt, treatment and record of complaints.

2. Applicability

This procedure applies to any complaint against any certification/verification process of QIMA IBD, regarding any certification/verification scheme, received by any means (telephone, mail, email, site, etc).

Complaint is defined as expression of dissatisfaction or questioning, other than appeal, expressed by clients or other parties, regarding QIMA IBD's certification/verification activities.

3. Reference standards

Always consider the last applicable version:

- ISO/IEC 17065
- European Regulation (EU)2018/848 and associated regulations
- USDA organic regulation, CFR Part 205 – National Organic Program – 205.661
- IFOAM Accreditation Requirements
- RSPO SC Certification Systems
- NATRUE Requirements for Certification Bodies
- ROC™ Certification Body Requirements

4. Associated Quality System documents

- Procedure for investigation of suspicion of irregularities and/or contamination (P_INV)
- Investigation Protocol of suspicion of irregularity (doc. 5_1_7)

5. Involved areas

- Quality Assurance Department
- Technical Managers

6. Authorities and responsibilities

- Complaint evaluation and treatment: assigned evaluators
- Maintenance of complaint records: Quality Assurance Department and assigned evaluators

7. Procedure

a. Complaint reception

Any staff member may receive complaints.

All complaints must be reported immediately in writing to the Quality Assurance Department to perform the registration in the applicable electronic system.

If the complainant does not wish to send the complaint in writing, the employee who received it must transcribe it and validate it with the complainant for proper handling.

b. Complaint evaluation and treatment

When the Quality Assurance Department receives the complaint, the Quality Manager will evaluate if the complaint is related to the certification activities in which QIMA IBD is responsible for.

If not, it will be registered in the applicable electronic system together with all the proper and indicated information as unfounded, communicating the complainant of this decision when possible.

If yes, the Quality Manager must assign at least one person accountable for verifying all necessary information of the complaint and implement all relevant corrective actions and/or measures until complete resolution.

Once the complaint has been registered, if it has not already been done by someone else on the team, the Quality Assurance department will be responsible for formally acknowledging receipt of the complaint to the complainant and saving the records in the system.

When the complaint is related to a suspicion of irregularity or contamination of an organic product, the assigned person shall conduct an investigation according to IBD Procedure for investigation of suspicion of irregularities and/or contamination (P_INV), and fill in the corresponding Investigation Protocol (doc. 5_1_7) that is linked to the Investigation Project in VEGAS system.

The Quality Assistant or the Quality Manager starts filling in the Complaint Protocol (doc. 5_1_1), the Complaint Registration Form (doc. 8_7_6), opens a Complaint Project in VEGAS, acknowledges receipt formally, informing the protocol number to the complainant (except when the complainant did not inform contact information or when the complaint comes from a scheme owner/accreditors), and, in case of suspicion of irregularity or contamination of an IBD certified product, also opens an Investigation Project in VEGAS.

All the information regarding to the treatment of the complaint must be inserted in the system by the responsible people demonstrating all the actions taken in the beginning and end of treatment. In the end of treatment, the Technical Manager responsible for the certification scheme must review and approve the solving of this complaint.

To ensure that there is no conflict of interest, the Technical Manager must not have provided any consultancy to the complainant in the last two years before the complaint.

If further action is required, the Technical Manager can follow up internally.

Upon closure of the complaint's treatment, whenever possible, the result must be reported to the complainant, in order not to place the confidentiality of the parties involved at risk. If there is at least one means of written contact (email, written message via cell phone), this should be communicated to you.

c. Deadlines

Complaints must be evaluated and treated promptly and the complainant should be informed of the status of complaint whenever possible. For RSPO, in case of complaints regarding the provision of service, the certifier must communicate the accreditation body within seven days and seek resolution of the problem within 60 days. Failure to resolve the complaint within this time limit, the certifier shall immediately notify the accreditation body.

If the complaint refers to the conditions of RSPO membership IBD will inform the RSPO Secretariat if a resolution was not achieved within 60 days.

For the CE/EU scheme, any notification of irregularity received in OFIS system (Organic Farming Information System), shall be investigated and replied in OFIS within 30 calendar days, providing any further information available and/or requested by the notifying Member State.

For the USDA scheme, in case non conformities, once a complaint has been concluded, there must be communication with the NOP Program Manager to report the actions taken.

For ROC™, IBD shall report all complaints to the ROA. If the Certification Body does not meet the timelines and requirements outlined, the complainant may present the complaint to the ROA. The ROA Operations Team will review the actions of the Certification Body.

d. Complaints registration

Complaints will be registered in an applicable electronic system, taking into account all related information, for example the confirmation of the complaint receipt whenever applicable, the detail of the evaluation, possible follow-up and the communication of the decision to the complainant, if possible.

The Quality Assurance department and designated assessors are responsible for maintaining these records.