QCS LLC

Doc No: QMS-PRO-013 Issue Date: 01.03.2016

Revision No: 0 Last review date: 01.06.2019

APPEALS PROCEDURE

1. Purpose

The purpose of this procedure is to ensure that the processes to be followed in order to address appeals in line with ISO 17021, and other applicable accreditation requirements.

2. Scope

This procedure applies to certification; gap analyses audits, third party inspections, and occupational trainings activities.

3. Responsibilities

Apply for details to info@qcs.az

4. Key areas of appeals process

Appeal is defined as an "appeal made by a client for a review of a decision taken by our organization in regards to verification/certification activities". All appeals requests must be controlled, documented, evaluated, investigated and solved.

Appeals handling shall pass the following processes within company:

- Receipt
- Evaluation
- Investigation
- Decision making
- Reporting
- Evaluation of effectiveness of decision made

5. Receive of appeals

Our organization is committed to receive and investigate all complaints and appeals from its partners, clients and any other interested parties. Complaints and appeals must be received in writing or email to info@qcs.az alternatively appeals originator may raise an issue through our website as it indicated in chart below

5.1 How to send appeal to our organization through website Step 1: Go to www.qcs.az Azure Business Center +994 50 389 79 33 EQUEST CALL BAC Step 2: CONTACTUS EN/AZ/RU/GE Open "Contact us" page QCS LLC Management Systems Certification Body QCS LLC is an independent non-governmental organization dedicated to promoting sustainable certification, auditing, inspection, training and We provide audit and certification solutions for a number of Standards and Codes of Practice, including ISO 9001 Quality Management, ISO 14001 Environmental Management, ISO 45001 OH&S Management System, ISO 22000 Food Safety Management and others.



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C 88 E ≜ gcs.az/contact-us/ HOME ABOUT US SERVICES BLOG MEMBERSHIP CONTACTUS EN/AZ/RU/GE f ir Get in touch You can write here inquiries, complaints, suggestions and observations. Each email will be reviewed and responded within 24 hours Step 3: Write your name The field is required. Step 4: Azure Business Center Nobel Avenue 15. Baku Write your email The field is required. address Step 5 info@qcs.az anar.a@qcs.az Indicate the subject of The field is required. your apply (+994 50) 389 79 33 Step 6: Message (+994 55) 676 61 31 Describe your complaint/appeal Step 7: I'm not a robot Tick this cell

The appeals may be submitted in a language, which is most comfortable for reporter: Azeri, English or Russian. Company management will accept and consider all appeals regardless of the language used for reporting.

QA officer will acknowledge receipt of the appeal within 24 hours from time of receipt and provide the appellant with progress reports and the result of the appeal. All appeals shall be recorded in NCR register, "Appeals" section.

6. Evaluation & investigation of appeals

Investigation of appeals shall be implemented as per requirements of Non-Conformance Reporting, Corrective and Preventive actions Procedure QMS-PRO-004.

6.1 Investigation team

Step 6: Click this button to send your application

Depending of nature of appeal company management shall appoint persons responsible for investigation of the cases. Director and QA officer shall ensure that the persons engaged in the appeals-handling process are different from those who carried out the audits and made the certification decisions. The investigators shall be individual(s) not previously involved in the subject of the appeal.

6.2 Investigation process

Appeal may occur in different areas of company activities and most relevant person(s) shall be designated for investigation. Examples of typical areas of appeal are listed below but not limited and may vary depending of the work nature conducted by our company:

- Decisions about certification of organizations (certification process).
- Decisions about certification of persons (training process).

Investigation team shall avoid "blame policy", i.e. system weakness to be identified rather than personal fault of the employee(s). Additionally the person reporting an appeal will never be subject to disciplinary action or retaliation for the act of making the report.



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The person(s) responsible for investigation will carry out necessary interviews and review documentation and then complete the root cause analyses. This exercise should be thoughtful and detailed, so as to ensure the actual system failures are identified. The team can use Root Causes Analyses Checklist* for identification of system failures. Inability to conduct proper root cause analysis may result in the wrong cause being acted upon, and thus the problem not being permanently resolved. Once root cause of nonconformity is identified – the responsible persons shall be designated to implement corrective actions within indicated time bounds.

7. Decision on appeal / Corrective actions

Investigators shall accept decision and corrective actions and indicate them in Non-Conformance Report*. Actions raised as a result of investigation must be entered also into Actions Tracking Register*. This document shall include corrective actions to be taken, responsible personnel, a time scale for implementation and status of the actions.

Progress on the implementation of agreed corrective actions shall be permanently monitored by the Director and QA officer. Outstanding corrective actions shall be discussed on the next management meetings

8. Reporting

Non-Conformance Report* shall be sent to director and other related parties by lead of investigation team within three days from occurrence unless otherwise more time required for investigation.

Once the investigation is completed and decision made then the formal notice shall be send to the appellant. The decision on appeal to be communicated to the appellant by individual(s) not previously involved in the subject of the appeal.

The status of implementation of corrective / preventive actions is to be kept under company director's control and NCR to be closed as soon as all accepted corrective actions completed.

Evaluation of the effectiveness of the corrective actions to be conducted after 6 month from report issue and appropriate entries shall be made on report form.

Investigation reports shall be reviewed and analyzed as part of the Management Review Meeting.

9. Lessons learned

Lessons learned from investigation results are to be analyzed and in case of necessity shall be updated risks and opportunities determined during planning, or modifications to be made in the QMS. Conclusions altogether with recommendations to be communicated to related staff and other interested parties.

10. Preventive Actions

Company management shall continuously analyze all sources of information in order to identify the potential causes of non-conformances and for the introduction of preventive actions to avoid reoccurrence of the same or similar cases.

Necessary information is to be obtained but not limited from the following sources:-

- Internal or external audits;
- Consultations
- Inspections
- Suggestions / complaints;
- Non-conformance reports
- Publications
- Changes in legislation



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Others as appropriate

Preventive actions need to be identified and reviewed on a regular basis. This must also be discussed on Management Review Meetings. During these discussions, possible future problems that may arise are to be identified and relevant preventive actions formulated in order to prevent occurrence of any problem. Accepted actions shall be recorded in Actions Tracking register*

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