1. **SCOPE**

1.1. Appeals/Disputes against the decisions made by Accordia as part of its certification and/or audit process
1.2. Complaints against Accordia, its contractors or its customers
1.3. This document is a publicly accessible document and can be provided to all interested parties or the general public on demand.

2. **OBJECTIVE:**

To ensure that all Appeals/Disputes and Complaints are attended expeditiously and addressed impartially and in nondiscriminatory in line with the requirements of ISO 17021-1:2015

3. **DEFINITIONS:**

**Appeals** are complaints or disputes made against the decisions made by Accordia with respect to certification, results of audit performed by Accordia or investigation of a complaint. Such complaints can be made directly OR through the accreditation bodies.

**Complaints** are issues that cannot be classified as Appeals. Such complaints are typically related to operational activities such as delay in processing reports, behavior of Accordia’s representative(s), perception of high service fees, etc. Complaints also include concerns raised by any interested party against Accordia or any client certified by Accordia (e.g. workers of a factory certified by Accordia, NGOs, etc.) Such complaints can also be made directly to or through the accreditation bodies.

4. **RESPONSIBILITIES:**

- The Global Director of Operation is responsible to handle the Appeals and Complaints procedure. This includes maintaining all records related to the appeals and complaints process.
- **The Program Manager/Scheme Manager of the respective Standard/Code will represent Accordia when the Independent Impartiality Committee (IIC) is hearing an appeal**
- The IIC is responsible to hear, investigate, and make a decision regarding any appeals
- **Office Head of respective Accordia Office** will be responsible for handling minor complaints related to operational activities of Accordia, related to their area of responsibility

5. **PROCEDURE:**

5.1. **Appeals**

5.1.1 The Appeals are received within 3 weeks of the decision made and the client is informed by the management of Accordia.
5.1.2 Appeals can only be made in writing.
5.1.3 In case the auditee disagrees with the audit finding the Lead Auditor will explain the appeals procedure to the client and ask them to contact the Accordia Office. Lead Auditor will record the audit finding and mention that the client disagreed with the audit finding.

5.1.4 After receiving the Appeal in writing, the Accordia Office is responsible to acknowledge, in writing, the receipt of appeal within 2 working days.

5.1.5 The appellant is informed about the Terms and Conditions of the related Certification, Scheme or Code. Appellant is advised to go through Accordia’s Appeals and Complaints procedure available on the website. The appellant(s) is encouraged to ask questions and fully understand the process.

5.1.6 If the appeal is against the audit finding, the related Accordia Office will review the appeal and consult with the related Program Manager / Scheme Manager to get their opinion on the auditor’s and appellant’s point of view and try to resolve the matter. If the decision is against the appellant, the appellant will have the right to request that the appeal is forwarded to the IIC.

5.1.7 The Appeal received is forwarded to the President within 2 working days who will forward the Appeal to IIC Chairperson within 2 working days.

5.1.8 The IIC Chairperson will call a meeting of the IIC members within 30 working days to hear the appellant and will include the Accordia Program Manager / Scheme Manager.

5.1.9 These meetings can be conducted via online (e.g. Teams/Zoom/WebEx) or in person as appropriate. The time and venue will be announced and agreed between the appellant and Accordia.

5.1.10 Accordia will provide access to requests for information made by the IIC in order to complete their investigation. IIC will have the power to appoint an independent person and or organization (if required) for further investigation.

5.1.11 Minutes of the meeting are recorded, where possible the meetings discussions/chat can be recorded online.

5.1.12 IIC is responsible to ensure that the appeal handling process is carried out in a nondiscriminatory manner. Decisions made previously by the IIC in similar appeals are also taken into account.

5.1.13 The decision of the IIC is final. The decision is recorded in form of a notice and issued to the Accordia Program Manager and the appellant.

5.1.14 If the decision against the Appeal requires a Correction or Corrective Action on part of Accordia it is recorded on the FO 017 Nonconformity Form and corrective action process is initiated immediately.

5.1.15 The IIC and the appellant are kept aware of the progress being made towards the corrections and corrective actions taken.

5.1.16 The IIC is informed of the actions taken once completed. Such actions are also analyzed and reviewed during the IIC meetings.

5.1.17 If appellant is not satisfied by the IIC decision, the appellant is informed about the complaints and appeals process of related accreditation body (where applicable) and their right use the option.

5.2. Complaints Received directly by Accordia regarding Operational Activities

5.2.1 All complaints are logged in a form FO 055 Complaint Log.

5.2.2 Receipt of complaint is acknowledged not later than 5 working days to the complainant by letter/email.

5.2.3 The Global Director Operations or related Program Manager/Scheme Manager assesses if the complaint is valid and if it relates to the certification and audit activities of Accordia.
5.2.4. If a complaint is not accepted, the Global Director Operations will notify the complainant explaining why it was not accepted, however, Accordia shall still try to satisfy the complainant. If the complainant is still not satisfied, the process of appeal is explained.

5.2.5. If a complaint is considered valid the Global Director or Operations will record a compliant on a Nonconformity Report and will appoint an independent officer to investigate.

5.2.6. The investigation officer will investigate the cause of the complaint in an impartial, nondiscriminatory, transparent and open manner using Why Why Analysis Tool.

5.2.7. The Global Director Operations take corrective action (or appoint an executive) to take corrective action. Actions taken are recorded on a Nonconformity Report.

5.2.8. Actions taken are communicated to the complainant and, where possible, the complainant is kept informed of the progress.

5.2.9. The Global Director Operations maintains the records of all complaints.

5.2.10. The Local Office Heads will be responsible to handle minor complaints but will be required to submit a summary of complaints received in their respective area to the Global Director Operations every three months.

5.2.11. Global Director Operations will submit a summary of complaints received for use in management review meetings to analyze and look for any trends.

5.3. Complaints Received directly by Accordia about the clients certified/audited by Accordia are handled in the same manner as explained in 5.2 with exception to following:

5.3.1. Such complaints are handled directly by Global Director Operations. These types of Complaints received by local offices are also forwarded to the Global Director Operations.

5.3.2. The Global Director of Operations will review and decide if the complaint was valid and falls under the management system scheme to which the client is certified to.

5.3.3. If the complaint is valid the Global Director of Operations will initiate the investigation directly or by independent Accordia Representative(s).

5.3.4. For investigation purposes a special audit can be undertaken (the special audit can be conducted on unannounced basis if the scheme rules allow such provision).

5.3.5. Where permitted by the scheme and accreditation rules, investigation may include interviews with outside stakeholders including but not limited to NGOs, trade unions, complainant, etc.

5.3.6. Considering the sensitivity, nature of the complaint, scheme rules and accreditation regulations the Global Director of Operation decides the appropriate time to inform the client about the complaint received.

5.3.7. If required, the client may be contacted for the investigation purpose and their opinion can also be considered.

5.3.8. At all times the confidentiality of the complainant is maintained.

5.3.9. If the certified facility agrees to take the corrective actions it may be included in the conclusion of the investigation report.

5.3.10. The certified facility’s management will have the right to submit a written response to the allegations and to have that response, or a summary of it, included in the report.

5.3.11. Once the investigation is completed the Global Director Operations will inform the complainant about the findings and the conclusion of the investigation. This will include justification to reach a particular conclusion.
5.3.12. Confidentiality is maintained as agreed with the client and stated in the Certification Rules and accreditation terms and conditions.

5.3.13. The investigation team will be responsible to prepare the final investigation report and submit to Global Director of Operation within 10 days of completing the investigation.

5.3.14. The Global Director of Operations and the President will jointly make a decision based on the investigation report.

5.4 Complaints received by Accreditation bodies against Accordia or Accordia certified/audited Clients are handled as described in sections 5.3 and 5.4 with exception to following:

5.4.1 Accordia will acknowledge receipt of the complaint from the accreditation body within 2 working days.

5.4.2 Accordia will submit a plan of action (against the complaint received) to the accreditation body within 10 days with subsequent reports every 30 days after that.

5.4.3 Accordia will also be in contact with the complainant as part of the investigation.

5.4.4 Accordia will complete the investigation within 90 days or sooner, unless otherwise agreed to by the Accreditation body’s authorized person.

5.4.5 Where the Accreditation body has defined it own timeline for various steps involved in Complaints and Appeals process, Accordia will follow the timeline specified by the Accreditation Body.

5.4.6 If deemed necessary, the Accreditation Body can elect to investigate Accordia’s actions in investigating the complaint through an additional audit of Accordia’s certified/audited client by the accreditation body.

5.4.7 Where Accreditation Body is investigating a complaint, Accordia will work closely with the accreditation body and provide all required information investigation in timely manner and facilitate the Accreditation body in reaching a conclusion.

5.4.8 Where required by accreditation rules & regulations, all worker interviews conducted by the Accordia auditor shall include information regarding how the worker can communicate with Accordia and the accreditation body regarding a concern or additional information related to the audit. The auditor shall provide such contact information.

5.4.9 All complaints shall be logged, actioned, records kept and shown to the accreditation body auditor during their visit.

5.4.10 In case of SA8000, the complainant can be a stakeholder (having relation with SAAS or SAI) that complaints about Accordia or Accordia’s certified client but decides to remain anonymous, SAAS will act as intermediary. Global Director of Operations will correspond with SAAS to resolve the complaint following the complaint handling process explained above.

5.4.11 In case of SMETA audits the timeline specified in Sedex Grievance process available on Sedex website if followed.

5.5 Records of Complaints and Appeals

5.5.1 The Global Director of Operations is responsible for maintaining the records for appeals and complaints
5.5.2 The retention period of records related to complaints and appeals is minimum 10 years after resolution of the complaint.

5.5.3 A log of all complaints is maintained by the Global Director of Operations and are reported to SAAS every 6 months. The log includes detail of the complaint, outcome, root cause analysis and corrective action.

6.0 RELATED FORMS

   FO 017 Nonconformity Report
   FO 055 Complaint Log