This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

PROCEDURE FOR HANDLING COMPLAINTS AND APPEALS OF CQA CERTIFICATION

In accordance with **ISO/IEC 17021-1:2015**

Revision	Date	Description	Drafted by	Verified By	Approved By
00	*20.07.25*	*First System Procedure Issue*	S. Di Franco	M. Schmidt	M. Schmidt

Revision Matrix

This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

INDEX

1. PURPOSE AND SCOPE 3

2. REGULATORY REFERENCES 3

3. TERMS AND DEFINITIONS 3

4. LIABILITY 4

5. SUBMISSION OF THE COMPLAINT 4

5.1 Thematic areas of complaint or appeal 4
5.2 Who can make a complaint 4

6. DATA SECURITY 5

7. COMPLAINT OR APPEAL MANAGEMENT 5

7.1 Acknowledgement of Receipt 5
7.2 Registration and Traceability 6
7.3 Preliminary assessment 6
7.4 Investigation 7
7.5 Corrective Actions and Decision 7
7.6 Intermediate Communications 8
7.7 Outcome Communication 9
7.8 Closure and Archiving 9

This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

1. Purpose and Scope

This procedure defines the procedures for handling complaints and appeals submitted to CQA Certification. The aim is to ensure a **transparent, impartial and timely process**, aimed at:

- ensure that any complaint or appeal is taken care of and dealt with;
- protect the right of interested parties to report any inefficiencies or challenge certification decisions;
- promote the continuous improvement of the CQA Certification Management System.

The procedure applies to:

- complaints from certified customers, certification applicants or interested third parties;
- appeals relating to certification decisions issued by CQA Certification.

2. Regulatory references

This procedure is based on the requirements set out in the relevant international standards and accreditation documents, as well as CQA Certification's internal procedures and models. Especially:

[1] ISO/IEC 17021-1:2015 – Conformity assessment – Requirements for bodies providing audit and certification of management systems.
[2] ISO 9001:2015 – Quality management systems.
[3] ISO 14001:2015 – Environmental management systems.
[4] ISO 45001:2018 – Occupational health and safety management systems.
[5] NAR-54 – Handling of complaints and appeal procedures.
[6] IAF MD 7 – Harmonization of Sanctions and Dealing with Fraudulent Behaviour.

3. Terms and Definitions

[1] **Complaint:** expression of dissatisfaction, other than an appeal, filed by any interested party regarding the activities of CQA Certification or an organization certified by it. Complaints may relate to behaviour, decisions, communications, misuse of the certification mark or other aspects of the certification scheme.

[2] **Appeal:** A formal request made by a certified or certification customer seeking review of a decision made by CQA Certification regarding the issuance, maintenance, renewal, suspension, reduction or withdrawal of a certification.

[3] **Complainant/Appellant:** the natural or legal person who files a complaint or appeal. It can be the customer, an employee, an auditor, a public authority, a competitor, a consumer, or any other interested party.

[4] **Interested party: a** person who may influence or be influenced by the activities and decisions of CQA Certification. It includes customers, employees, auditors, accreditation bodies, authorities, associations, competitors, and the general public.

[5] **Non-Conformity (NC):** failure to meet an established requirement (legislative, regulatory, contractual or procedural). When a complaint is accepted, it is formalized as Non-Conformity through the NcM-M-1-2 form.

[6] **Corrective action:** action taken to eliminate the cause of an identified non-conformity, in order to prevent its recurrence. Corrective actions are documented on the NcM-M-1-3 form.

[7] **Correction:** An action taken to eliminate a detected nonconformance (for example, rectifying a document or clarifying a communication). Unlike corrective action, correction does not affect the cause.

[8] **Certification and Impartiality Safeguarding Committee:** an independent body of CQA Certification that handles complaints and appeals. It is composed of 2/3 members from outside the body, in order to ensure impartiality, transparency and absence of conflicts of interest.

[9] **Complaint & Appeal Logbook:** an official document in which all complaints and appeals are recorded, indicating the date of receipt, the whistleblower (if identified), the assessments, decisions and final outcomes.

[10] **Impartiality:** principle according to which CQA Certification decisions and activities must be taken in the total absence of conflicts of interest, undue influence or commercial pressure.

[11] **Confidentiality:** obligation to protect information received in the context of a complaint or appeal, ensuring that it is accessible only to authorized personnel and used exclusively for the management of the case.

[12] **Transparency:** principle that ensures that CQA Certification processes are clear, understandable and accessible to all interested parties, including through the publication of procedures on the website.

4. Liability

[1] **Committee for the Certification and Safeguarding of Impartiality:** an independent body that handles complaints and appeals; **2/3 of it is composed of members external** to CQA Certification.

[2] **Technical Direction:** oversees the process and approves final decisions.

[3] **Management System Manager (RSG):** ensures the recording, traceability and communication of the results.

5. Submission of the Complaint

CQA Certification provides a dedicated system to allow all interested parties to easily and securely file a complaint or appeal. Reports can be submitted through two official channels:

1. **Online form** available on page https://cqacertification.eu/complains/. The module guides the user step by step:
   - allows you to select the type of report (*complaint* or *appeal*);
   - it offers the possibility (not mandatory) to enter contact details to receive updates on the progress of the file;
   - provides a space to describe in detail the facts that are the subject of the report.
2. **Dedicated e-mail** address claim@cqacertification.eu, managed directly by **CQA Certification's Internal Committee**, with exclusive access to authorized personnel, to ensure confidentiality and impartiality.

In both cases, each complaint or appeal is recorded, tracked and taken care of by qualified personnel, who guarantee fair, transparent and independent management.

5.1 Thematic areas of complaint or appeal

To facilitate the correct submission and analysis of reports, CQA Certification has identified some **main thematic areas**. This classification helps the complainant to better identify the nature of their report and place it in the most appropriate category:

- **Audit and certification activities:** Complaints relating to the behaviour of auditors, the correctness of sampling, compliance with audit times and compliance with the methodologies applied.
- **Certification decisions:** Disputes concerning the issuance, suspension, reduction of scope, withdrawal or non-renewal of certification.
- **Contractual aspects and communication:** Lack of transparency in contracts, incomplete or misleading information, delays in the transmission of certificates, reports or official communications.
- **Impartiality and conflicts of interest:** Reports of improper relationships between auditors and certified organizations, disallowed advice, or conditions that may compromise the independence of the entity.
- **Certification Misuse:** Improper use of the logo, mark, or certificates issued by CQA Certification.
- **Handling of previous complaints and appeals:** Failure to respond to reports already submitted, unsatisfactory handling or lack of effective corrective action.
- **Governance and impartiality of the body:** Structural deficiencies in the work of the Committee for the Safeguarding of Impartiality or in other governing bodies of the entity.

5.2 Who can make a complaint

The right to lodge a complaint or appeal with CQA Certification is granted to **any interested party**. In particular, they can report:

- **Certified customers or certification applicants**, who wish to challenge aspects of the certification process or decisions.
- **Auditors, lead auditors and technical experts** involved in audit activities, who may highlight critical issues encountered in the performance of the audits.
- **Internal staff and external collaborators of CQA Certification**, if they detect anomalies or behaviour contrary to the principles of the body.
- **Interested third parties**, such as end customers of certified organizations, consumers, competitors or suppliers.
- **Authorities and institutions**, national or local, that have inspection, regulatory or supervisory powers.
- **Accreditation bodies and trade associations**, which carry out control or collective representation activities.

This broad openness ensures that the complaints and appeals system is an effective tool for **participation, transparency and continuous improvement**.

6. Data Security

CQA Certification attaches the utmost importance to the protection of personal data and the confidentiality of reports received. The system has been designed to ensure that every interested party can file a complaint or appeal with confidence.

The whistleblower has the opportunity to choose:

- **Identify yourself** or leave a **contact address** (such as an email address or phone number) so that you can receive periodic updates on the progress and outcome of your management.
- **Remain anonymous**, choosing not to provide any personal data. In this case, anonymity will be fully guaranteed and no information attributable to the whistleblower will be recorded.

Any data provided will be managed in full compliance with current legislation on the protection of personal data (EU Regulation 679/2016 – GDPR) and used exclusively for:

- the correct handling of the complaint or appeal;
- communication with the whistleblower (if he has chosen to provide contact details);
- the internal management of reports by the CQA Certification Internal Committee.

They will not be disseminated or used for purposes other than those indicated above. In this way, the system guarantees both the **right to anonymity** and the **protection of personal data** for those who prefer to be contacted.

7. Complaint or Appeal Management

Once a complaint or appeal has been received through official channels (online form or dedicated email), CQA Certification applies a structured and transparent process to ensure its proper management.

The treatment path is divided into phases as described in the following chapters

7.1 Acknowledgement of Receipt

The confirmation of receipt represents the first concrete step through which CQA Certification demonstrates to the whistleblower that his communication has been accepted and that the management process has been started. It is therefore not a purely formal act, but a fundamental moment to establish a relationship of **transparency and trust** between the certification body and the interested party.

Within a maximum of **ten working days** from receipt of the complaint or appeal, CQA Certification will send an official communication of acceptance. This communication is transmitted through the channel indicated by the whistleblower – typically an e-mail address – and is intended to provide confirmation that the file has been registered and that it will follow the path provided for in this procedure.

This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

The content of the confirmation is meant to be clear and reassuring. In addition to the simple notification of receipt, in fact, the **identification number** assigned to the report in the MCA-M-1-1 – Complaint & Appeal Logbook is indicated, the **official date of receipt**, a **summary of the reported object** as reported by the complainant, and a time reference that anticipates the main management phases (for example, the communication of the final outcome within 90 days). A direct contact is also provided to which the whistleblower can contact if he intends to integrate further information or request clarifications.

The confirmation of receipt therefore performs a double function: on the one hand it guarantees the **traceability** of the file, on the other hand it reinforces the perception that CQA Certification manages every observation received with seriousness and impartiality.

Importantly, **anonymous reports** are also treated with the same attention. In these cases, not being able to send a confirmation to the whistleblower, the body still registers the file in the MCA-M-1-1 Register, assigns it an identification number and submits it to the Certification and Safeguarding Committee of Impartiality for subsequent evaluation.

In this way, regardless of whether the whistleblower chooses to identify himself or not, each communication is **formally taken care of**, preventing it from remaining unfollowed.

7.2 Registration and Traceability

The registration of a complaint or appeal is a crucial step, because it represents the moment when the report officially enters the CQA Certification management system. This act is not just an administrative formality: it ensures that every communication received is **clearly and unambiguously tracked**, avoiding loss or forgetfulness and allowing its status to be monitored until it is closed.

All reports are recorded in the **Registry MCA-M-1-1 – Complaint & Appeal Logbook**, an official document that forms the basis for the entire management process. Upon registration, each complaint or complaint receives a **unique identification number**, which will accompany it throughout the duration of the processing. This number is also reported in the communication of acceptance sent to the whistleblower, so as to create a clear link between the report and the subsequent preliminary phases.

The register is not limited to collecting the simple report, but contains a series of information that allows **you to accurately trace each step**: the date of receipt, the data of the whistleblower (if provided), the thematic category to which the complaint belongs, the progress, the decisions taken and the final outcome. In this way, it is possible to have an up-to-date and complete view of all open and closed cases at any time.

The principle of traceability ensures that there are no grey areas: every step, from the opening to the closing of the report, leaves a documented and verifiable trace. This allows not only to maintain the trust of stakeholders, but also to provide objective evidence to the accreditation body and other supervisory authorities, who can verify how complaints and appeals have actually been handled.

In summary, registration and traceability represent the **backbone** of the management process: they guarantee order, transparency and responsibility, essential values for a certification body that wants to operate with rigor and impartiality.

7.3 Preliminary assessment

After registration, each complaint or appeal goes through a **preliminary assessment** phase, which aims to verify the completeness of the information received and the admissibility of the report.

This activity is entrusted to the **Certification and Safeguarding Impartiality Committee, an** independent body that oversees the correctness of the decision-making process and which, as required by the internal regulations, is composed **of two-thirds members external to CQA Certification**. The composition of the Committee is a fundamental guarantee: the evaluation is not carried out by those who could have a direct interest in the matter, but by a group capable of ensuring **balance, impartiality and transparency**.

During the preliminary assessment, the Committee focuses on a few key aspects:

- **Completeness of the report:** it is verified that the complaint or appeal contains all the essential information to be able to be analyzed (description of the facts, supporting documents, time references, etc.).
- **Clarity of the thematic category:** the report is associated with one of the areas identified in chapter 5.1 (e.g. audit activities, certification decisions, conflicts of interest, misuse of certification, etc.), so as to correctly route the investigation.

This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

- **Admissibility of the report:** it is assessed whether the content of the complaint actually falls within the scope of CQA Certification. Some reports, in fact, may concern aspects external to the body (e.g. commercial disputes between companies) and in these cases the Committee provides feedback to the whistleblower clarifying the limits of its competence.

If information gaps emerge during this phase, the Committee may request the whistleblower to supplement the communication by providing additional details or useful documents. In the case of anonymous reports, the assessment is carried out on the basis of the available elements, taking into account the possible limitation of the information received.

The preliminary assessment therefore has a **filter and orientation function**: on the one hand it ensures that only relevant and sufficiently documented reports proceed to the preliminary phase, on the other hand it allows the work to be organized in a more targeted way, immediately assigning the file to the most appropriate path.

In this way, each complaint or appeal is initiated to the next stage with the necessary conditions to be analyzed in a complete, consistent and above all impartial manner.

7.4 Investigation

Once the preliminary assessment has been passed, the complaint or appeal enters the **investigation** phase, i.e. the moment when the report is examined on its merits. This phase represents the heart of the management process, because it allows you to fully understand the disputed facts, assess their relevance and determine the most appropriate actions to take.

The investigation is conducted by **competent and independent personnel**, carefully chosen to ensure that there are no conflicts of interest or direct links with the parties involved. The guiding principle is that no one can assess a complaint relating to situations or activities in which they have been personally involved.

During the investigation, some fundamental activities are followed:

- **Desk analysis:** the documents attached to the complaint, the relevant internal records (audit reports, official communications, certificates issued) and any other element useful for reconstructing the facts are examined.
- **Collection of additional evidence:** if necessary, additions can be requested from the whistleblower, or testimonies can be collected from other interested parties (customers, auditors, internal staff).
- **Verification of compliance with procedures:** the investigation also serves to establish whether the disputed conduct is in contrast with CQA Certification's internal procedures, with the requirements of the reference standards (ISO/IEC 17021-1, ISO 9001, ISO 14001, ISO 45001, etc.) or with the regulations of the accreditation body.
- **Assessment of severity and impacts:** Not all complaints carry the same weight. Some may concern marginal or easily solvable aspects, while others may highlight more serious criticalities, such as to affect the credibility of the certification system.

In the case of complaints or appeals that are particularly complex or require very specific expertise, the **Certification and Safeguarding Impartiality Committee** may decide to appoint an **external expert**. The intervention of an independent figure, with adequate experience in the sector covered by the complaint, ensures that the analysis is conducted with the utmost rigor and without conditioning.

The investigation does not have a punitive function, but rather **an ascertaining and improving** one: it serves to clarify, to identify any non-conformities and to prepare the basis for decisions and corrective actions that will be defined in the next phase.

In this way, each report is treated with due attention, in compliance with the principles of **impartiality, transparency and responsibility** that guide the work of CQA Certification.

7.5 Corrective Actions and Decision

The preliminary phase ends with an **assessment by the Certification and Safeguarding Committee of Impartiality**, which has the task of deliberating the outcome of the complaint or appeal. This decision does not represent a simple administrative act, but the result of a process of analysis aimed at ensuring **justice, impartiality and transparency**.

There are two possible outcomes:

a) **Complaint rejected:** If, at the end of the investigation, the Committee determines that the complaint is unfounded or does not fall within the scope of CQA Certification, the file is filed as **rejected**.
   - In this case, evidence of the decision is still given, recording **the reason for the rejection in the** MCA-M-1-1 – Complaint & Appeal Logbook.
   - If the whistleblower has provided his contact details, he will receive a written communication explaining the reasons for the decision in a clear and documented way, so as to ensure transparency and traceability.

b) **Complaint accepted:** If, on the other hand, the Committee recognizes the validity of the complaint, it is treated as an **internal Non-Conformity**.
   - The report is formalized using the **NcM-M-1-2 – Non-Compliance Form**, on which the details of the case and the causes identified are reported.
   - One or more corrective actions **are then planned and implemented**, documented through the **NcM-M-1-3 – Corrective Action Form form**. These actions are intended not only to solve the specific problem, but also to prevent the recurrence of the same criticality in the future.

In the case of appeals relating to certification decisions (e.g. suspension, reduction of the field or withdrawal of the certificate), the procedure provides for additional guarantees:

- the evaluation is conducted independently by the Committee, with the support of qualified personnel not involved in the facts subject to appeal;
- the **final decision is approved by the Technical Management**, which assumes full responsibility for it;
- until the conclusion of the evaluation, the original decision shall remain in force, unless otherwise provided by the Committee.

This phase has a double value:

- on the one hand, it provides the whistleblower **with clear and documented feedback**, strengthening trust in the certification system;
- on the other hand, it represents a tool for the **continuous improvement** of the CQA Certification Management System, which can thus promptly identify and correct any structural or operational criticalities.

7.6 Intermediate Communications

When handling a complaint or appeal, CQA Certification considers it essential to maintain a **constant flow of communication** with the whistleblower, if the whistleblower has chosen to identify himself or provide a contact address.
Interim communications are not mere courtesy updates, but an essential tool to ensure **transparency, participation and trust** in the process. Knowing that one's report is being followed carefully and that the analysis activities are proceeding in an orderly manner is in fact an element of reassurance for those who have filed the complaint.

Methods and timing

- Updates are generally transmitted by e-mail, using the contacts provided by the whistleblower.
- The frequency of communications may vary depending on the complexity of the case, but in general, CQA Certification guarantees **at least one periodic update** in the most significant phases of the process (e.g., initiation of the investigation, any requests for integration, definition of corrective actions).
- In the event of particularly complex complaints or appeals, the Certification and Safeguarding Committee of Impartiality can establish a shorter frequency, so as to keep the whistleblower constantly informed.

This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

Each intermediate communication contains essential information on the status of the file, such as:

- confirmation that the complaint or appeal is being investigated;
- summary description of the activities in progress (without violating the confidentiality of third party data or internal documents);
- any requests for clarification or additional documentation useful for completing the investigation;
- indications on the expected timing for the subsequent steps.

Interim communications reinforce the perception that the complaint is not left unresolved, but that it is being followed up actively and responsibly. They also offer the whistleblower the opportunity to contribute more fully, providing additional details or useful elements that may only emerge after the initial submission of the report.

In this way, the process is not experienced as a passive wait, but as a **collaborative path** between the whistleblower and CQA Certification, oriented towards the search for solutions and continuous improvement.

7.7 Outcome Communication

The communication of the outcome represents the final and most awaited moment in the process of managing a complaint or appeal. This is the step by which CQA Certification provides the whistleblower with a clear, motivated and documented answer, formally closing the file.

CQA Certification undertakes to communicate the final decision **within 90 days of receipt** of the report. This time limit is designed to ensure timely treatment, without sacrificing the quality and accuracy of the analysis conducted.

Content of the Communication

The communication of the outcome is not limited to notifying the closure of the file, but provides a complete and transparent picture of the work carried out. In particular, it includes:

- the **identification number** of the complaint/appeal, so as to unequivocally link the decision to the registered file;
- a **summary of the report** as reported by the complainant;
- the **final decision** of the Certification and Safeguarding Committee of Impartiality, with a clear indication of whether the complaint has been rejected or accepted;
- the **motivation** that led to the decision, described in a comprehensible and documented way;
- any **corrective actions** taken (in the case of accepted complaints), with a summary of the measures taken to resolve the problem and prevent its recurrence.

If the whistleblower has provided contact details, he will receive the communication directly by e-mail or other suitable means.

In the case of anonymous reports, although it is not possible to send a direct response, the outcome of the assessment is still recorded in the **MCA-M-1-1 – Complaint & Appeal Logbook**, so as to ensure traceability and evidence that these reports have also been processed.

7.8 Closure and Archiving

The closure of a complaint or appeal marks the end of the analysis and management process initiated by CQA Certification. It is an important moment, because it consolidates what emerged during the investigation and translates it into documented evidence, ready to be used both for internal purposes and in support of external audits.

When the Certification and Safeguarding of Impartiality Committee has adopted a final decision and this has been communicated to the whistleblower (or registered, in the case of anonymous reports), the file is formally closed. The closure is not a bureaucratic act, but represents the assurance that the entire process has been completed according to criteria of **impartiality, traceability and responsibility**.

This document is the property of **CQA Certification**. Any production, even partial, of the document is forbidden unless directly authorized.

All documentation produced during the process – from the initial report, to intermediate communications, up to the final decision – is collected and stored in CQA Certification's internal system. In particular, the **MCA-M-1-1 – Complaint & Appeal Logbook logbook** records:

- the essential data of the report;
- the management phases carried out;
- the reasons behind the decision;
- any corrective actions taken and their state of implementation.

The archiving is carried out in such a way as to guarantee **confidentiality and protection of personal data**, but at the same time ensures that the file remains available for any verification by:

- the accreditation body, which may request evidence on the correct management of complaints and appeals;
- competent authorities, where required by applicable law;
- the Management of CQA Certification, as part of the review of the management system and continuous improvement activities.