

**393014.a Introduction**

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**14.b General**

The aim of this procedure is to provide correct and efficient registration, handling and evaluation of complaints, appeals and claims, to prevent repetition of mistakes and if possible to satisfy the complainant or appellant. Implementation and follow-up of measures are aimed at improving the quality of *CUICIPL* certification activities.

*CUICIPL* distinguishes between appeals, complaints, concerns and claims.

An appeal is a formal notification of disagreement with a (certification) decision within a certification process, or request by the provider of the object of conformity assessment to *CUICIPL* for reconsideration of a decision it has made relating to that object.

A complaint is a formal expression of dissatisfaction, other than appeal, by any person or organisation regarding a *CUICIPL* employee's behaviour, *CUICIPL* methodology, or work executed under contractual responsibility of *CUICIPL* by a critical office or subcontractor, where a response is expected. Where the dissatisfaction relates to a (certification) decision within a certification process of *CUICIPL*, this must be submitted as an appeal, not a complaint.

A concern originates from a source within *CUICIPL*, and is an expression of dissatisfaction by any person within this organisation. Concerns may be used as starting points of trajectories for internal improvement.

*A whistleblowing is an act of reporting suspected wrongdoing or risk of wrongdoing of the organization such as breach of organization policies, fraud, corruption including bribery, actions or omissions resulting in damage or risk of harm to human rights, the environment, public health and safety, safe work-practices or the public interest. Any complaint from whistle blower from external channel is handled according to procedure 14.d and internally as mentioned in this section 14.e.*

A claim is a formal request for a financial or legal settlement, not to be considered as complaints or appeals. Claims are resolved by the financial and / or legal departments. Elements crucial to *CUICIPL*'s procedures, are mentioned in this section.

**14.c Appeal**

Clients wishing to submit an appeal to *CUICIPL* shall use the Complaint/Appeal Registration Form A23. They are requested to specify the nature of the appeal as well as possible ("who, what, where, when") and to describe the subject matter clearly as well as to provide any objective evidence to support each element or aspect of the appeal, if applicable.

An appeal always relates to a (certification) decision within a certification process of *CUICIPL* and must be submitted in writing. *CUICIPL* will only accept appeals in English or **other language**, unless otherwise agreed in writing.

The client may appeal against a (certification) decision, or request to reconsider a (certification) decision *CUICIPL* has made, relating to the item or system subject to assessment.

Appeals must be received by *CUICIPL* within 6 (six) weeks after the (certification) decision was issued and must be submitted to the office of *CUICIPL*. If the client fails to do so, or if the appeal is insufficiently substantiated, incomplete, *CUICIPL* may reject the appeal and will not handle such an appeal. In such cases the interested parties are informed thereof. For some programs separate or additional dispute procedures apply as specified in the applicable contract (see also specific organisations' websites).

An appropriate member of staff (usually the Certifier or the Quality Manager) will confirm receipt of the appeal within 10 calendar days of receiving an appeal. This confirmation must at least state:

- a timeframe of handling the appeal;
- a first proposal of course of action to follow up on the appeal;
- whether the appeal relates to certification activities for which *CUICIPL* is responsible and therefore is admissible.

The MD is informed of the appeal and either the QM or MD will appoint two members of staff to investigate the appeal. All personnel engaged in the appeals-handling process, including those in review, approval and decision-making, shall be different from those who carried out the audits and made the certification decisions. Any member of staff, including those acting in a managerial capacity, who have provided consultancy for the client in question, or been employed by that client, within two years prior to submission of the appeal, shall not be involved in the review or approval of the resolution of the appeal for that client.

The appointed members of staff will gather and verify all necessary information (as far as possible), including a root cause analysis, and propose how to proceed, including corrections and corrective actions where applicable. *CUICIPL* will endeavour to seek a timely resolution of the appeal and will take any subsequent action needed to resolve the appeal.

The Quality Manager will review the outcome of the assessment and inform the director. The director may decide to consult the Advisory Council and will take a decision after careful consideration of all information.

The Quality Manager will give the appellant formal notice of the outcome and the end of the appeals handling process and the motivation of the decision in writing within 3 (three) months after receipt of the appeal. The Quality Manager will record the appeal, its outcome and any action undertaken to resolve it in ICU under a unique identification, including any established correction and corrective action.

The Technical Manager will be informed of the outcome of the appeal, will implement the established corrections and corrective actions and handle the follow-up of the appeal.

*CUICIPL* will keep the appellant(s) informed of the progress in evaluating the appeal, especially if the indicated timeframe is in danger of being exceeded.

Submission, investigation and decision on appeals may under no circumstances result in discriminatory actions against the appellant.

#### 14.d Complaint

Clients wishing to submit a complaint to *CUICIPL* shall use the Complaint/Appeal Registration Form A23. They are requested to specify the nature of the complaint as well as possible (“who, what, where, when”) and to describe the subject matter clearly as well as to provide any objective evidence to support each element or aspect of the complaint, if applicable.

In order to avoid misinterpretation and the appearance of self-favouritism from the side of *CUICIPL*, complaints must always be submitted in writing. Only complaints in English or **other language** will be accepted, unless otherwise agreed in writing.

Complaints must be received by *CUICIPL* within 6 (six) weeks after the event that gave rise to the complaint at the applicable office of *CUICIPL*. Complaints that are insufficiently substantiated or incomplete may be deemed inadmissible by *CUICIPL* and rejected. In such cases the interested parties are informed thereof. For some programs separate or additional dispute procedures apply as specified in the applicable contract (see also specific organisations’ websites).

If the complaint is submitted by an anonymous complainant, *CUICIPL* must conduct an appraisal to assess the risk related to that complaint. However, is under no obligation to investigate the complaint if there is no sufficient preliminary evidence or information. Complaints submitted on behalf of a group, such as a community or labour organization, must have at least one viable contact person to manage communications and further inquiries.

The QM or MD is informed of the complaint and either the QM or MD will determine whether the complaint impacts or may affect the validity of a certification decision process or not. If not, the handling of the complaint may be left to *Scheme Manager* or Certifier concerned, including communications with the client, evaluation and decision and filing of the complaint in ICU. If it has been established that a complaint does or may affect the certification decision process, the QM will handle the complaint and decides whether or not it is necessary to include the MD in the complaint handling procedure. Where the complaint is considered to be of a sufficiently serious nature, the MD may decide to take charge of the handling process. Depending on the involvement of the MD, the QM and MD will decide upon the admissibility of the complaint. The QM or MD will appoint two members of staff to investigate the complaint. Complaints in relation to methods are assigned to the TM or QM. All personnel engaged in the complaints handling process, including those in review, approval and decision making, shall be different from those who carried out the audits and made the certification decisions. Any member of staff, including those acting in a managerial capacity, who have provided consultancy for the client in question, or been employed by that client, within two years prior to submission of the complaint, shall not be involved in the review or approval of the resolution of the complaint for that client.

The assigned members of staff will confirm receipt of the complaint in writing within 10 calendar days of receiving the complaint. This confirmation must at least state:

- a timeframe of handling the concern;
- a first proposal of course of action to follow up on the concern;
- whether the concern relates to certification activities for which *CUICIPL* is responsible and therefore is admissible.

The appointed members of staff will gather and verify all necessary information (as far as possible), including a root cause analysis, and propose how to proceed, including corrections and corrective actions where applicable. *CUICIPL* will endeavour to seek a timely resolution of the complaint and will take any subsequent action needed to resolve the complaint. If the complaint relates to a client

certified for a management system, examination of the complaint must also consider the effectiveness of the certified management system.

The QM will review the outcome of the assessment and inform the director, where applicable. The director may decide to consult the Advisory Council and will take a decision after careful consideration of all information.

The assigned members of staff will give the complainant formal notice of the outcome and the end of the complaint handling process and the motivation of the decision in writing within 3 (three) months after receipt of the complaint. The assigned member of staff will record the complaint, its outcome and any action undertaken to resolve it in ICU under unique identification, including any established correction and corrective action.

The Technical Manager will be informed of the outcome of the complaint, will implement the established corrections and corrective actions and handle the follow-up of the complaint.

*CUICIPL* will keep the complainant informed of the progress in evaluating the complaint, especially if the indicated timeframe is in danger of being exceeded.

Complaint about a certified client that has passed through the complaints handling process must be addressed to that certified client by *CUICIPL* within an appropriate timeframe. If this is requested by the complainant, the anonymity of the complainant must be retained. And *CUICIPL* must determine, together with the certified client and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution will be made public.

Submission, investigation and decision on complaints may under no circumstances result in discriminatory actions against the complainant.

If *CUICIPL* decides and substantiates that *CUICIPL* or any of its employees, officers, agents or subcontractors was not to be blamed to the extent specified in the complaint, all costs and expenses may be charged to the complainant.

*CUICIPL* shall endeavour to settle any complaint amicably. Where no amicable settlement is reached, all disputes which may arise between *CUICIPL* and the client shall be brought before the competent court of jurisdiction in **India**, which shall have exclusive jurisdiction on the matter, unless the parties agree in writing between themselves upon another competent court.

#### 14.e Concern

Concerns are typically internal by nature, and are submitted to either the MD, MDc, TM or QM. A concern must always be submitted in writing and clearly identify the person or entity voicing the concern.

The person receiving the concern shall determine the validity of the concern and establish whether the concern does or may affect the validity of a certification decision process or not. If not, the handling of the concern may be left to *Scheme Manager* or Certifier concerned, including, evaluation and decision and filing of the concern in ICU. If it has been established that a concern does or may affect the certification decision process, the QM will handle the concern and decides if it is necessary to include the MD in the process. Where the concern is considered to be of a sufficiently serious nature the MD may decide to take charge of the handling process. The QM or MD will appoint two members of staff to investigate the concern. All personnel engaged in the concern-handling process, including

those in review, approval and decision making, shall be different from those who carried out the audits and made the certification decisions. Any member of staff, including those acting in a managerial capacity, who have provided consultancy for the client in question, or been employed by that client, within two years prior to submission of the concern, shall not be involved in the review or approval of the resolution of the concern for that client.

The assigned members of staff will confirm receipt of the concern in writing within two (2) weeks of receiving the concern. This confirmation must at least state:

- a timeframe of handling the complaint;
- a first proposal of course of action to follow up on the complaint;
- whether the complaint relates to certification activities for which *CUICIPL* is responsible and therefore is admissible.

The appointed members of staff will gather and verify all necessary information (as far as possible), including a root cause analysis, and propose how to proceed, including corrections and corrective actions where applicable. *CUICIPL* will endeavour to seek a timely resolution of the concern and will take any subsequent action needed to resolve the concern. If the concern relates to a client certified for a management system, examination of the concern must also consider the effectiveness of the certified management system.

The QM will review the outcome of the assessment and inform the MD, where applicable. The MD may decide to consult the Advisory Council and will take a decision after careful consideration of all information. The decision may include the necessity to perform an audit or inspection at the client immediately or to verify concerns at the next audit.

The assigned members of staff will give the concerned party formal notice of the outcome and the end of the concern handling process and the motivation of the decision in writing within 3 (three) months after receipt of the concern. The assigned member of staff will record the concern, its outcome and any action undertaken to resolve it in ICU under unique identification, including any established correction and corrective action.

The Technical Manager will be informed of the outcome of the concern, will implement the established corrections and corrective actions and handle the follow-up of the concern.

#### 14.f Claim

A claim must always be submitted in writing and clearly identify the person or entity submitting the claim. Only claims in English or **other language** will be accepted, unless otherwise agreed in writing.

The liability *CUICIPL* in respect of any claims for loss, damage or expense of whatsoever nature and howsoever arising in respect of any breach of contract and/or any failure to exercise due skill and care by *CUICIPL* shall in no circumstances exceed a total aggregate sum equal to 10 (ten) times the amount of the fee or commission payable for the specific services required under the applicable contract with *CUICIPL*. *CUICIPL* will not be held liable for any claims for indirect or consequential loss including loss of profit and/or loss of future business and/or loss of production and/or cancellation of contracts entered into by the client.

Upon receipt of a claim, the MD will be informed immediately. The MD will appoint a member of staff to handle the claim, who may be assisted by the Certifier or the Auditor/Inspector concerned. The claim, including all handling, is registered in ICU under unique identification. The MD may decide to

send a written rejection of the claim with reference to the terms of contract to the claimant. The MD may also decide to find a commercial solution.

The MD makes sure that no statements will be made and nothing will be done by which recognition of liability or any obligation to compensation may be concluded.

The MD may decide to inform the insurance company without delay (within 30 days) of all relevant details of the claim and circumstances. All relevant correspondence with regard to the claim is copied to the insurance company.

**Whistleblowing:**

CUIC IPL is committed to maintaining the highest standards of ethical behaviour and compliance with all applicable laws and regulations. This policy applies to all employees, contractors, vendors, customers, and other stakeholders of CUIC IPL and encourage to report any concerns or suspicions of wrongdoing, including violations of laws, regulations, or company policies, without fear of retaliation.

Reporting may be done using any of the following methods.

- Speak with their supervisor or any member of management.
- Contact the Ethics and Compliance Officer.
- Submit a report through the company's anonymous reporting hotline.

All reports will be taken seriously and investigated promptly and confidentially. Employees and stakeholders are encouraged to provide as much information as possible to assist with the investigation.

CUIC IPL prohibits retaliation against any employee or stakeholder who reports a concern or suspicion of wrongdoing in good faith. Any employee found to have engaged in retaliation will be subject to disciplinary action, up to and including termination of employment. All reasonable steps is taken to protect the confidentiality of the whistleblower's identity and the information provided, to the extent permitted by law and company policy.

CUIC IPL will follow up to ensure that the concern or suspicion of wrongdoing has been investigated thoroughly and fully resolved and also ensures the whistleblower has not experienced any retaliation.

**14.g References**

Annex A23 "Complaint Appeal Registration Form"

Annex A24 "Complaint and Appeal Investigation Report"