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| **REVISION TRACKING TABLE** | | |
| **Rev. No.** | **Justification for Revision** | **History** |
| 01 | Corrected in accordance with the requirements of ISO/IEC 17021-1 **.** | 29.03.2017 |
| 02 | Article 4.2 has been revised. | 24.05.2017 |
| 03 | Document references added. The document has been reviewed. | 01.02.2022 |
| 04 | The statement "Complaint and objection committee is appointed for 3 years" was changed to "appointed indefinitely".  Additionally, it was added that the audit plan can also be transmitted via OneDrive. | 20.03.2024 |

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| **DOCUMENT APPROVAL TABLE** | | |
| **Preparer** | **Controller** | **Approved by** |
|  |  |  |
| management representative | Certification Manager | General manager |

## PURPOSE and SCOPE:

written or verbal customer complaints/requests regarding DSR, auditing, certification, operational activities and suppliers (such as using documents and logos) according to **the Certification Regulation Procedure** and other relevant standards.

1. **DEFINITIONS**

**Complaint**

At all stages from receipt of application to certification; Negative applications, written or oral, from natural or legal persons about issues such as DSR policy, procedures, regulations, activities, performance, permanent and contracted personnel, and certification institutions.

**Objection**

Negative applications made by relevant parties against the decisions taken by DSR in its certification activities.

1. **REFERENCE DOCUMENTS**
2. **APPLICATION**
   1. **Evaluation of complaints: DSR** documents and maintains **the Complaints and Objections Evaluation Procedure** for the process control and execution of the management of objections .
      1. **Evaluation of complaints regarding DSR activities**

* The complaint evaluation process in DSR is defined on the website, and complaints regarding DSR service quality can be received in writing or verbally, as a result of customer surveys.
* The personnel who receives the complaint reports the situation to the Management Representative.
* All complaints are handled by the Management Representative as stated by the customer. It is recorded and evaluated in the Complaint and Objection Notification Form .
* The evaluation result is completed within fifteen (15) days at most and must be notified to the customer in writing.

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| **S/N** | **Complaint type** | **Management Representative decision** |
| **one** | **Complaint regarding DSR office services;**   * Inability to reach relevant people, * The offer deadline is late, * Documents that the customer needs to know are insufficient or inaccessible, * Late editing and sending of the document, etc. like | 1. It is finalized within a week at most and the customer is returned. 2. Corrective action is initiated to prevent recurrence and eliminate the root cause and its effectiveness is measured. |
| **2** | **Audit committee and audit-related complaints that may affect audit impartiality, independence and efficiency;**   * Attitude and behavior of the audit committee, * Unethical behavior of the audit committee, * Failure to use appropriate methods in auditing, * Failure to comply with the audit plan, * Audit does not provide added value, etc. like |

* + 1. **Evaluation of complaints about documented customers**

Complaints/objections about suppliers; Failure to comply with **the Certification Regulation Procedure** and **Logo and Document Usage** Instructions .

* The personnel who receives the complaint reports the situation to the Management Representative.
* After recording the situation, the Management Representative leaves it to the evaluation and decision of the Certification Manager.

Complaints/objections regarding suppliers may occur within the scope stated below;

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| **S/N** | **Complaint type** | **Certification Manager decision** |
| **one** | Use of the logo and the right to use documents outside the specified scope | Corrective action is requested within a maximum of 10 days; if the result is negative, the document will be suspended for one month; if it is still negative, the document will be canceled. |
| **2** | Using the logo in a way that may cause misunderstanding, such as product certification. For example, using the logo on the product |
| **3** | Incorrect use of the logo of the accreditation body, |
| **4** | Complaints / objections and feedback from relevant chambers or professional groups to which suppliers are affiliated or members | Corrective action is requested within a maximum of 1 month; if the result is negative, the document will be suspended for one month; if it is still negative, the document will be canceled. |
| **5** | Complaints / objections and feedback from relevant parties who benefit from the supplier's product | If it is a justified complaint, based on the continuation of customer satisfaction;  Special inspection can be done within one month,  Corrective action may be requested within a maximum of 1 month; if the result is negative, the certificate may be suspended for one month; if it is still negative, the certificate may be cancelled.  To be taken into account in the next audit (surveillance, document renewal, etc.). |
| **6** | Appearing inappropriate news about suppliers in the written and visual media, | Special inspection can be done within one month,  Corrective action may be requested within a maximum of 1 month; if the result is negative, the certificate may be suspended for one month; if it is still negative, the certificate may be cancelled.  To be taken into account in the next audit (surveillance, document renewal, etc.). |

In the cases mentioned above, the Certification Manager evaluates the objective evidence within a week at most and communicates the results and decision to the supplier in writing.

The certification stages of the organization regarding the complaint are reviewed retrospectively and if there are any malpractices or issues that need improvement, they constitute data for corrective action.

Compliance with the principle of confidentiality is essential in evaluating such complaints. In special cases where the issue needs to be announced to the public, it is DSR 's responsibility how and in what detail it will be announced , and legal requirements are complied with.

In case of complaints, DSR forwards them to the committee only when there is a situation that it cannot resolve within itself. As stated above, there is no need to send the complaint to the committee in cases where it is resolved internally.

DSR determines, together with the customer and the complainant, the subject of the complaint and whether its solution will be made public, and if so, to what extent. The evidence of joint determination is the correspondence made with the customer and the complainant. (e-mail, mail, fax, etc.)

* 1. **Objections**
     1. **Objections to decisions taken regarding the audit result**

Such objections, whether written or verbal, are reported to the Management Representative and the Certification Manager by the personnel receiving the objection. It is recorded by the Management Representative and forwarded to the Complaints and Objection Committee together with the Certification Manager without wasting any time.

The objection handling process includes at least the following elements and methods:

1. Considering previous similar objections, their objections are; outlines the process for obtaining, validating and investigating and deciding on actions to be taken in response,
2. Monitoring and recording objections, including activities to resolve objections,
3. Ensuring appropriate correction and corrective action to be taken.

ŞİK ( Complaint and Objection Committee) is completely independent from audit and certification processes. It is evaluated by the ŞİK within a week at most.

In the evaluation;

Certification standards such as ISO 17021, ISO/TS 22003, ISO 27006 and related guides are based on issues such as impartiality and independence.

If necessary, detailed information about certification conditions is requested from the Certification Manager.

The decision taken as a result of the evaluation is communicated to the relevant parties in writing, together with its justifications (by referring to the relevant standard or procedure, and sending a copy if necessary).

* + 1. **Objection to major/minor non-conformance, observation or recommendation decision written by the audit committee as a result of the audit.**

Any major/minor nonconformity or observation written by the audit committee is not accepted and signed by the auditee.

In this case, the chief auditor explains to the auditee that they have the right to object. Then he prepares a report. The subject is stated in the minutes and it is emphasized that the auditee abstained from signing. The auditee is asked to sign the report; if he does not, a unilateral report is signed.

The Certification Manager examines the objection and communicates his decision in writing to the relevant parties with detailed justifications within 5 days at most.

**Certification Manager can make the following types of decisions based on the evaluation results;**

* Approval of the recommendation decision of the audit committee,
* the audit committee, conducting a full or partial audit again,
* It's like the audit committee making the opposite decision.
* The audited company also has the right to object to the decision of the Certification Manager. In this case, evaluation is carried out according to article 4.2 .
  + 1. **Objection to the audit committee**

The CVs of the auditors appointed to perform the audit, together with the Audit Plan, are sent to the company via mail, e-mail or *Onedrive before the audit* .

The audited company has the right to object to one or all auditors from the audit committee.

The objection is forwarded to the Certification Manager in writing or verbally, along with its justification . The Certification Manager evaluates this situation in a way that does not hinder or delay the audit process.

The evaluation is made in a way that does not compromise the objectivity, independence and consistency of the audit.

If the objection is found to be justified, the Certification Manager is requested to change the audit committee .

The information of the new delegation is sent to the company for confirmation.

If the objection is not justified; This situation is communicated to the company in writing and reconfirmation regarding the audit is requested. If the company insists on its objection, the situation is forwarded to the Complaints and Objection Committee.

* + 1. **Objection to the decision regarding supplier complaints**

It is processed according to Article 4.1 .

* 1. **Establishment of the Complaint / Objection Committee**

DSR and to improve the quality of service; It has established a Complaint and Objection Committee that is completely independent from audit and certification processes such as acceptance of applications, appointment of auditors, auditing, reporting and certification decision.

The Complaints and Objection Committee General Manager and Management Representative are appointed *for an indefinite period* .

Appointment of Complaint and Objection committee members; It is carried out in case of a complaint or objection regarding the relevant sector and/or the subject of service. Appointment criteria for complaint and appeal committee members;

* Having at least 1 year of work experience in the sector they represent,
* University, vocational high school or college graduate,
* Having knowledge about DSR Certification procedures (1-day information training),
* Having general knowledge or experience about the relevant standard
* Having the ability to make professional decisions, free from financial pressures,
* Being completely expert and professional,
* Being qualified to follow the sector.

Complaint and Objection Committee members are recorded in the Management Team and Committee Organization Chart .

The chairman of the Complaints and Objections Committee is elected by the committee members by majority vote. The person(s) evaluating the complaint and/or objection cannot take part in the certification and/or audit process of the relevant customer.

*It continues unless otherwise decided by the Complaints and Objection Committee and the General Manager.*

* 1. **Working of the Complaint and Objection Committee**

The committee's scope of work is to evaluate objections received at any stage of the DSR certification and audit processes, in accordance with the principles of impartiality and confidentiality.

All objections received in writing, verbally or via the internet are recorded by the Management Representative and forwarded to the complaint and objection committee together with its own recommendation and evaluation opinion.

All information must be collected in order to validate the complaints submitted to the complaint and objection committee. This responsibility belongs to the committee. The Committee Chairman determines the subcommittee responsible for the objection.

If necessary, the subcommittee officer makes an evaluation by obtaining opinions and information from the relevant parties and conveys the result to the committee.

Complaint and Objection committee decisions are made unanimously. The result is delivered to the customer.

As a result of the evaluation , if there is a deficiency resulting from DSR, corrective action is requested from the Certification Manager. The decision to lodge a complaint is made, reviewed and approved by a person(s) not previously involved in the complaint.

The committee chairman monitors whether the decision taken has been implemented or not. In case of negative results, new corrective action is required. If DSR does not comply with the decision taken by the Complaint and Objection Committee as a result of a deficiency caused by DSR and insists on not complying, the Complaint and Objection Committee may notify TÜRKAK in writing.

The decision of the committee members cannot result in any discriminatory action against the objector. All members must keep the same distance from the objecting persons, institutions and organizations and maintain their impartiality. The person(s) elected to this committee must read and understand this procedure. This item must be discussed in the trainings to be given to the committee.

While the committee makes its evaluation, DSR;

* Compliance with accreditation standards,
* Adhering to the principle of impartiality and confidentiality,
* Auditors are competent,
* Audits will measure whether the supplier system is capable of meeting and maintaining customer requirements and continuously improving the system,
* Audits must be of a quality that will provide added value to the supplier system,
* The supplier can easily access its services regardless of any group or association membership and the number of certified suppliers,
* Implementation in accordance with policies and procedures,
* Use of document and logo,

Criteria such as are taken into account. The procedure for evaluating complaints and objections is available for the information of interested parties on the DSR website.

1. **Related documents**

* **Certification Regulation Procedure**
* **Logo and Document Usage Instructions**
* ***Management Team and Committee Organization Chart***