



Complaints against Accredited Certification Bodies

1 Preamble

Introduction and purpose of the policy

This policy regulates how complaints related to accredited certification bodies, bodies under surveillance or applicants and their operators are handled by the IOAS. Special additional measures are described for handling complaints under the Canada Organic Regime (COR).

Scope

The categories of complaints included in this policy are:

- complaints regarding accredited and applicant certification bodies; and
- complaints regarding operators certified by accredited and applicant certification bodies;

This policy does not deal with complaints about the performance of IOAS personnel or general IOAS performance which are found in Doc# [PL 0511a](#) "Complaints against the IOAS." Complaints by accredited certification bodies regarding decisions pertaining to their own accreditation are considered appeals and are to be handled following IOAS appeals procedure [PL0504](#). Unsubstantiated rumours are dealt with in line with the Guidance document 'Rumours and scandals' [PR0515](#)

Definitions

- Complainant - a person or body who files a complaint.
- Subject - a person or body who is being investigated
- For other definitions, reference is made to the IOAS Operating Manual.

Distribution

This policy is distributed to all Board members, AC members, staff, applicant and accredited certification bodies and IFOAM. Other interested parties may obtain a copy on request.

Authority and revision

This policy is approved by the Executive Director. It is the responsibility of the IOAS Executive Director to review the appropriateness of the policy from time to time. It may be revised when the need arises. Revisions must be approved by the Executive Director. Its effectiveness in meeting the quality policy of the IOAS will be assessed during Internal Audits and any measures for improvement notified to the Executive Director.

2 Policy

Filing of complaints

- Complaints regarding applicant and assessed/accredited certification bodies should, in the first instance, be directed to the certification body. When complaints have not been satisfactorily handled by the certification body, or referral to the certification body is considered inappropriate, they shall be directed to the IOAS Quality Manager.

- Complaints against applicant bodies shall normally be treated in the same way as responses to calls for comments. (see below)
- Complaints regarding operators of accredited certification bodies shall be directed to the Quality Manager subject to the conditions outlined in this policy
- Under the COR an operator or any other party wishing to contest a certification decision must attempt to resolve the matter with the Certification Body. If this is not possible then the next step is the Certification Body's Conformity Verification Body (the IOAS). If the dispute cannot be resolved at the Certification Body and Conformity Verification Body levels then the Manager of the COO is the final step to hear the issue.

Policy

Validity of complaints

- In order for complaints to be valid, they must relate to issues under the authority of the IOAS. This means they must relate to issues covered by the appropriate norms against which the certification body has been accredited or has applied for accreditation. Complaints may also relate to other accreditation requirements.
- At the discretion of the IOAS, and as might be agreed to in the relevant accreditation contract ([PL0502](#)), section E, the IOAS may investigate complaints related to certification programmes and activities outside that specified in the accreditation contract schedule when the IOAS judges that evidence suggests complicity in fraud or a level of incompetence such that the name of the certification body is brought into disrepute and/or its accreditation by the IOAS brought into question. The procedure will otherwise follow that described here.
- All complaints shall be submitted in writing for this policy to fully apply. Written complaints should be accompanied by a documentation of evidence
- At the discretion of the IOAS, oral complaints may be investigated following these procedures, but hearsay will not be considered as valid evidence

Confidentiality and non-disclosure

- The privacy and identity of the complainant shall be protected to the maximum extent possible, with recognition that the complainant's identity may be obvious or may become evident during the investigation.
- All parties involved in the investigation shall not publicly comment on the complaint until the issue has been resolved.

Initial procedures

- On receipt of a complaint the Quality Manager shall appoint a person to investigate the complaint or decide to carry out the investigation him/herself.
- An assessment shall be made as to whether the complaint is valid under the above criteria. The subject of the complaint may be approached to determine the validity.
- The assessment should also consider whether any aspect of the complaint requires implementation of actions covered under [PR0515](#) Rumours and Scandals.

- The receipt of a complaint shall be acknowledged within 15 days.
- Acknowledgement shall include a preliminary assessment of the complaint's validity, a statement of whether or not the complaint will be investigated, and a copy of the IOAS Complaints Policy.
- If a complaint is deemed to be invalid or irrelevant by the IOAS, this will be stated to the complainant, accompanied by the reasons. The complainant will be given one month to substantiate the validity of the complaint.
- Where a complaint is considered valid an investigation shall be carried out. Additional information may be requested of the complainant, third parties named as sources of information in the complaint and other parties likely to have information relevant to the investigation

Investigation of complaints regarding accredited certification bodies

- When sufficient information has been compiled, and the complaint has been determined to be valid, the investigator shall contact the subject of the complaint and present all substantiated information which has been found to be the basis for the complaint. The investigator shall request a full explanation/ clarification of actions taken by the subject relevant to the complaint.
- Upon receipt of the response the investigator shall determine whether sufficient information has been obtained in order to present a recommendation to the board for resolution. If there is still a lack of clarity or if the investigator requires additional evidence of the certification body's actions they will continue to carry out the investigation, reporting to the Board of Directors at any meetings that occur during the investigation period.
- The investigator may undertake any of the following actions:
 - ◆ **Continue to correspond with the subject of the complaint and if necessary the complainant.**
 - ◆ **Carry out an on site visit**
 - ◆ **Include aspects of the investigation in an already scheduled visit**
 - ◆ **Contact third parties for expert opinions respecting the confidentiality requirements above**
- The investigator will review all information obtained and formulate a recommendation. The recommendation may contain corrective actions and/or disciplinary measures.
- The recommendation and necessary supporting information will be submitted by the investigator to the IOAS Board of Directors (resolution authority) at the conclusion of the investigation.
- In cases where significant costs have been incurred (such as arising from an on-site visit), the cost of the investigation will be fully covered by the certification body where the complaint against the body is well-founded. If not, IOAS will cover all costs.

Investigation of complaints regarding applicant certification bodies

- Responses to an IOAS 'call for comments' are treated within the normal evaluation process and are not considered complaints.

- Complaints received prior to the evaluation visit shall be treated in the same manner as calls for comments.
- Complaints received after the evaluation visit has occurred are treated in the same manner as complaints against accredited certification bodies (see above)

Investigation of complaints regarding operators of applicant and accredited certification bodies

- On receipt of a complaint against an operator of an accredited or applicant certification body the Quality Manager shall first determine whether the complaint has been filed with the certification body in question. If not, the complainant will be encouraged to do so and to contact the IOAS again should they be dissatisfied with the way in which their complaint has been processed.
- Should the complainant be reluctant to do so, the Quality Manager shall at their discretion determine whether to treat the complaint as a complaint against a certification body (as above). The decision shall be guided by an assessment as to whether there is any evidence of wrongdoing on the part of the certification body and the seriousness of the complaint
- If the decision is to not treat it as a complaint against the certification body, the Quality Manager shall nevertheless instruct the staff person responsible for the certification body to ensure that the file of the operator in question is examined at the next surveillance visit.

Complaint Resolution

- The IOAS Board of Directors shall serve as the resolution authority for all complaints.
- The IOAS Board resolution shall specify any required corrective actions and/or disciplinary measures within one month of receipt of the final report from the investigator.
- Once an investigation has been completed, the resolution shall be communicated to the complainant and the subject of the investigation by the resolution authority. If no further issues arise, the IOAS shall deem the complaint to be resolved and the file closed.
- Any corrective actions or disciplinary measures determined will be communicated to the subject of the complaint and be monitored by the responsible Client Manager.
- The implementation of corrective actions shall be done in a timely manner.
- The implementation of corrective actions will be checked during the course of Annual surveillance or re-evaluation visits and records maintained in the compliance database.
- If the Client Manager, in consultation with the Programme Manager and Quality Manager, consider that new issues arise throughout this process or that close out of any corrective actions proves to be delayed or not fulfilled, the complaint may be reopened and brought, once again, to the attention of the IOAS Board who will decide, where appropriate with advice of the Accreditation Committee, on further action.
- On closure of a complaint, the IOAS Board will consider whether the complaint demonstrated actual or potential weaknesses in the IOAS quality system and where

necessary define corrective or preventive actions. Any such actions will be recorded in the Quality Improvement database for monitoring purposes.

- When complaints relevant to the Canada Organic Regime (COR) the IOAS will inform the COO of the resolution of the complaint.
- For complaints relevant to the Canada Organic Regime, if the dispute cannot be resolved at the Certification Body and Conformity Verification Body levels then the Manager of the COO is the final step to hear the issue.

Urgency

After the Quality Manager, in consultation with the Executive Director and if necessary in discussion with the Executive Board, the procedural timeframes for dealing with what are considered serious complaints may be reduced so as to resolve an issue within the shortest possible time.

Disclosure

The IOAS reserves the right, and is sometimes obliged, to inform scheme owners, applicant and accredited programmes, regulatory authorities and the public of the outcome of complaints investigated.

Records of complaints

Complete files containing all information related to the investigation of complaints shall be maintained for a period as defined in IOAS policy [PL0108](#). For complaints relevant to the Canada Organic Regime, the IOAS will make available the number of complaints handled.