

# General Operating Procedure 018

## Complaints Procedure



### 1. Purpose

The purpose of this procedure is to ensure that all complaints about TÜV UK Ltd.'s operations or conduct of its personnel are correctly recorded, investigated, defects in TÜV management systems are identified and that, where appropriate, corrective action is taken to ensure client satisfaction and continual improvement.

### 2. Scope

2.1. This procedure will be followed for all complaints received in writing and will apply to all complainants; these may be clients, customers of our clients (e.g. where the client's management system is certified by TÜV), members of the public, or any person or body affected by the business activities of TÜV UK Ltd

2.2. It will also be followed in respect of all verbal or telephone complaints unless the person who receives the complaint is able to resolve the problem immediately. There is no need for a verbal or telephone complaint that is resolved immediately to be recorded unless the person receiving the complaint decides:

- a) Potential consequences of the complaint might be sufficiently serious for a record to be required.
- b) The complaint cannot be closed out because the complainant is not completely satisfied with the outcome.
- c) The complaint may have highlighted a system failure requiring a corrective action within the quality management system.

2.3. For TÜV UK Ltd.'s ISO 17020 related activities only, throughout this procedure the term "complaint" should be considered synonymous with the term "appeal" as defined in BS EN ISO/IEC 17020:2012 as reproduced below:

#### 3.9

##### **appeal**

*request by the provider of the item of inspection to the inspection body for reconsideration by that body of a decision it has made relating to that item*

*NOTE Adapted from ISO/IEC 17000:2004, definition 6.4.*

#### 3.10

##### **complaint**

*expression of dissatisfaction, other than appeal, by any person or organization to an inspection body, relating to the activities of that body, where a response is expected*

*NOTE Adapted from ISO/IEC 17000:2004, definition 6.5.*

2.4. An employee who considers that an aspect of TÜV UK's operation is unsatisfactory from the client's viewpoint will first try to resolve the matter with the relevant Line Manager or Head of Department. If the problem recurs subsequently, the individual may request the Line Manager to

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record it as a complaint. This procedure will not be used by employees in respect of their personal work situation or terms and conditions of employment.

### 3. Contact

This procedure will be made accessible under “CONTACT US” on the TÜV UK Ltd web site <https://www.tuv-nord.com/uk/en/contact-us/>

Complainants may make contact by any available medium and the matter will be passed to the relevant Head of Department.

TÜV UK Ltd  
AMP House  
Suites 27 - 29, Fifth Floor  
Dingwall Road  
Croydon CR0 2LX  
Tel.: +44 20 8680-7711  
Fax: +44 20 8680-4035  
E-mail: [Enquiries.UK@tuv-nord.com](mailto:Enquiries.UK@tuv-nord.com)

### 4. Process

- 4.1. Complaints received by Head Office personnel or field-based employees must be recorded and passed to the relevant Head of Department or Manager as soon as possible or before the end of the working day following the day it was received. In the case of information about the client obtained from sources other than the client (i.e. complainant), that information shall be treated as confidential.
- 4.2. The relevant Head of Department or Manager will ensure that the complaint is resolved as soon as possible or within 2 working days following initial receipt.
- 4.3. For ISO 17020 related activities, the resolution decision to be communicated to the complainant or appellant shall be made by, or reviewed and approved by, persons not involved in the relevant original inspection activities.
- 4.4. If a resolution is not possible within 2 working days an interim response will be made indicating the timescale for resolution; if a complaint cannot be resolved within this indicated timescale then a further interim explanatory communication must be sent to the client
- 4.5. Employees or associates whose conduct is the subject of a complaint must provide a written statement to cover the circumstances and be advised of the resolution or corrective action.
- 4.6. If the complainant is dissatisfied with the resolution or corrective action, the matter must be referred to the Managing Director who may take the following action: -

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- 4.6.1. Resolve the matter whether to the satisfaction of the complainant or otherwise unless paragraphs 4.5.2 or 4.5.3 apply.
- 4.6.2. In cases where a Management Systems Certification decision is disputed, initiate TÜV procedure “GOP030 Appeals Procedure”
- 4.6.3. Where the complaint is related to NEBOSH training and / or examination services: -
- a) Ensure that the complainant is advised that further appeal may be made to NEBOSH to follow their complaints procedure. Complainants should e-mail [info@nebosh.org.uk](mailto:info@nebosh.org.uk) or write to:

Customer Service Manager  
NEBOSH  
Dominus Way  
Meridian Business Park  
Leicester LE19 1QW

- b) Ensure that the complainant is advised that a second further appeal may be possible to the Scottish Qualifications Authority (SQA) if they are dissatisfied with the NEBOSH resolution and the qualification is accredited by them and assessed in the UK. Complainants should write to SQA within 14 days of the NEBOSH decision:

The Senior Regulation Manager  
SQA Accreditation  
Optima Building  
58 Robertson Street  
Glasgow G2 8DQ

- 4.7. Complaints Logs are maintained on the server in which the following information is recorded:
- a) The date of the complaint and the name and organisation of the complainant.
- b) The nature of the complaint.
- c) Any corrective action agreed.
- d) The date when the corrective action is completed.
- e) Corrective action will include sufficient investigation of the activity implicated to ensure the remedy addresses the cause as well as symptom.
- 4.8. A folder will also be created on the server named for the relevant complainant and dated, under which all correspondence and relevant supporting documents will be filed.

## 5. Responsibility

- 5.1. Each Head of Department is responsible for ensuring that: -
- a) Complaints Logs and relevant files are completed, and that the corrective actions are closed out at the appropriate time.
- b) There is formal notice given of the end of the complaint and appeals handling process to the complainant and or appellants.

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- c) Managing Director and colleagues are kept informed of latest and outstanding complaints and the significant findings of the complaints processes to support continual improvement

5.2. The Quality Manager is responsible for overseeing the complaints process.

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