

1 PURPOSE

The purpose of this procedure is to explain the methods to be followed by real or legal persons when conveying their complaints about NAC's activities, personnel (including A/TEs), and the activities of applicant or accredited CABs, as well as their appeals regarding accreditation decisions to NAC, and the methods to be applied by NAC in handling and resolving complaints and appeals.

2 SCOPE

This procedure covers all complaints to be made to NAC and appeals against accreditation decisions made by NAC.

3 DEFINITIONS

Definitions related to this procedure are provided in INST.001-NAC Instruction on Definitions and Abbreviations Used in NAC Documentation.

4 RELATED DOCUMENTS

FR.013-NAC Complaint/Appeal Record Form
FR.014-NAC Commitment to Confidentiality and Impartiality for NAC Associates
FR.038-NAC Assessment Team Proposal Form
FR.168-NAC Complaint/Appeal Tracking Form
PR.017-NAC Procedure for the Accreditation of Conformity Assessment Bodies

5 IMPLEMENTATION

According to this procedure, complaints and appeals made to the accreditation body are handled impartially, objectively, and in a non-discriminatory manner. No privileges are granted based on the nature of the person or organization making the complaint or appeal. All kinds of conflicts of interest that may harm impartiality are avoided. NAC is responsible for decisions at all levels related to the process of handling complaints and appeals. All necessary measures are taken to identify and prevent potential conflicts of interest.

5.1 Complaints

Complaints about NAC activities are generally related to:

- Handling of applications,
- Conducting assessments,
- Time required for obtaining accreditation,
- Applicant or accredited body finding the performance, manner, and behavior of the assessment team inappropriate during the assessment,
- Applicant or accredited body finding the service performance of NAC personnel insufficient,
- Assessment proposal made by NAC,
- Findings of the assessment team and requests for corrective action as a result of the accreditation assessment carried out on behalf of NAC, etc.

There may also be complaints about the operations and services provided by accredited bodies related to their accredited scope.

All complaints related to NAC activities are received, handled, and managed by the Quality Manager. This process is carried out in accordance with NAC's principles of transparency, objectivity, and impartiality. Critical complaints that may directly affect NAC's reputation, functioning, or legal obligations are resolved with the approval and under the oversight of the President.

Complaints are conveyed to NAC in writing via the website, by e-mail, or verbally. In case of verbal complaints, the complainant is directed to the website and asked to put their complaint in writing.

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If the complaint is related to NAC's activities, services, personnel, or accredited CABs and has been submitted in writing, it is officially recorded in FR.013-NAC Complaint/Appeal Record Form. Each complaint submitted to NAC should include the complainant's name, surname, and contact information and clearly explain the subject of the complaint. In addition, complaints must be supported by sufficient information and evidence. If this information is missing or the person wishes to remain anonymous, an evaluation can be made depending on the importance and criticality of the complaint. Even if NAC promises to keep the person's identity confidential and anonymous, it has the right to disclose this information when legal obligations exist.

The Quality Manager records the information about the received complaint in the FR.013-NAC Complaint/Appeal Record Form. Complaints are numbered sequentially according to the year on this form (e.g., 2024/01 for the first complaint of 2024). The date the complaint is received is recorded as the date it is submitted to NAC in writing.

If the complaint is initially communicated to persons other than the Quality Manager, these persons inform the Quality Manager. If the Quality Manager is the subject of the complaint, the relevant Vice President takes over the complaint process.

The complainant is informed that the complaint has been taken into consideration and the method to be followed. This information is given to the complainant within 7 business days. Complaints are rejected if sufficient documentation is not provided despite being requested. The complainant is informed that it has been rejected, along with the reason. Whether the complaint is valid or not is also recorded in the FR.013-NAC Complaint/Appeal Record Form by the Quality Manager.

5.1.1 Evaluation and Resolution of Complaints Regarding the Activities of CABs within the Scope of Accreditation

Complaints about CABs should primarily be made directly to the CAB related to the complaint. If the result of the complaint cannot be obtained through this method, a complaint can be made to NAC. However, complaints that are not deemed appropriate to inform the CAB about and allege that the body has intentionally violated accreditation rules can be submitted directly to NAC.

For complaints made about CABs, valid evidence and documents to substantiate the allegations should be presented. NAC only considers issues related to the scope for which the CAB is accredited or the accreditation application. If the allegations subject to the complaint cannot be proven or verified, no action is taken, and the relevant party is notified.

Complaints about the general practices of CABs and customer dissatisfaction should first be handled in the CABs' own complaint management processes. In such cases, CABs are required to apply their own procedures and report the result to NAC. This notification includes the investigations and evaluations made and corrective actions, if any. In cases where the CAB does not directly resolve or NAC deems necessary, NAC initiates its own investigation regarding these complaints.

In the following cases, NAC may conduct an extraordinary on-site assessment by notifying the CAB of the reason:

- If NAC is convinced that the complaint has not been resolved,
- If there is doubt about the adequacy of the measures taken,
- If it is determined that the CAB's compliance with accreditation requirements needs to be investigated. If the subject of the complaint is critical issues that the CAB's impartiality and competence have been lost, an extraordinary assessment may be conducted without giving a reason. The assessment is carried out as mentioned in the accreditation program, and other necessary procedures may be initiated about the CAB according to the findings. In such assessments, the CAB is responsible for ensuring that the assessment is safe and effective. In addition, all expenses arising from extraordinary on-site assessments are

covered by the CAB.

The Quality Manager handles complaints received by NAC regarding the activities of CABs in coordination with the relevant Accreditation Officer. The process of complaints requiring an extraordinary assessment, as explained above, is carried out by the Quality Manager and the relevant Accreditation Officer, and the complaint is resolved according to the decision made by the Accreditation Decision Committee at the end of the assessment. The final decision from the Committee is determinative for the sanction and process to be applied about the CAB. The entire process is recorded in the FR.013-NAC Complaint/Appeal Record Form.

5.1.2 Evaluation and Resolution of Complaints Regarding NAC Activities

Written complaints about NAC policies, practices, personnel (including A/TEs), processes, or procedures are recorded in the FR.013-NAC Complaint/Appeal Record Form. First, it is investigated whether the complaint is due to a misunderstanding. In case of a misunderstanding, the Quality Manager informs the complainant and concludes the process.

For complaints received about NAC's activities/services or personnel, an investigation is conducted by the Quality Manager. If necessary, the Quality Manager may also assign impartial and independent persons from the processes subject to the complaint. Documents to be examined regarding the complaint and necessary information are sent to these persons by e-mail, or the documentation of the relevant CAB is made accessible to the persons.

If there is a complaint about the assessment plan or team, these are also evaluated by the Quality Manager within a reasonable time, considering the assessment date, and recorded with the FR.013-NAC Complaint/Appeal Record Form. First, it is investigated whether the complaint is the result of a misunderstanding, lack of information, or material error. If so, it is concluded by the QM, and if necessary, the assessment plan is updated by the Accreditation Officer. All or some of the assessment team members may not be accepted by the CAB. The CAB indicates this in the FR.038-NAC Assessment Team Proposal Form. The NAC Accreditation Officer evaluates this request, provides feedback to the CAB, and informs the Quality Manager of the situation.

In complaints related to NAC's personnel, the person subject to the complaint cannot be involved in any stage of the complaint resolution process. To investigate the complaint about the person, statements are taken from all parties (including witnesses, if any), recorded, and evidence documents are examined. If the complaint is verified, the QM (or Vice President) and the President take action regarding the person in question. If the complaint is about the President, the Complaint and Appeal Evaluation Committee examines the situation, resolves the complaint, and informs the relevant parties.

5.1.3 Notification of the Complaint Result

According to NAC policy, complaints are concluded by the QM within 30 days from the date they are received in writing. Complaints requiring information/document procurement from persons or organizations outside NAC should be concluded within 30 days after the information/document in question is obtained, and for complaints requiring assessment, within 30 days after the completion of the assessment process.

The compliance of the activities carried out regarding the complaint with NAC procedures and policies is ensured by the QM. Complaints are listed in the FR.168-NAC Complaint/Appeal Tracking Form, and after they are concluded, their status (open/closed) is indicated. The QM informs the complainant of the result of the complaint and the closure of the file by e-mail or written notification, if needed. In necessary cases, other relevant parties are also informed. In case the complaint persists, the process specified in article 5.3 is carried out.

5.2 Evaluation and Resolution of Appeals

Appeals can be made by CABs against decisions taken during the accreditation process. These may be related to:

- rejection of the application,
- non-granting of accreditation,
- rejection of continuation,
- reduction of scope,
- partial/full suspension,
- withdrawal of accreditation.

If appeals against the decisions taken are made within 15 days from the notification of the decision, these appeals are considered by NAC. Objective evidence and documents must be presented in appeal applications. In the appeal application, the applicant body/person information, person related to the subject, reason and justification for the appeal, and objective documents/evidence are specified. The Quality Manager is responsible for the appeal process. Appeals made to persons other than the Quality Manager are communicated to the Quality Manager in writing. The Quality Manager conducts the necessary review of the appeal and then directs it to the Complaint and Appeal Committee to investigate the appeal and make a decision. The Committee conducts all examinations, investigations, and decisions related to the appeal and records the results with the FR.013-NAC Complaint/Appeal Record Form.

Expert person(s) (assessor/technical expert) who are not subject to the appeal may be included in the Complaint and Appeal Committee according to the content of the decision. However, those who have made decisions in the activity subject to the appeal cannot take part in the final decision stage regarding the appeal in question. FR.014-NAC Commitment to Confidentiality and Impartiality for NAC Associates is obtained from the included persons. Within 7 days after the appeal is received in writing, the appellant is informed by e-mail of the receipt and of the progress regularly. The Committee conducts its examination and investigation; it conveys its final decision on the appeal and the information that the file has been closed to the QM within 30 days from the date it was communicated to them. The QM conveys the decision to the appellant by e-mail. Relevant information and whether the appeal have been concluded (open/closed) are recorded in the FR.168-NAC Complaint and Appeal Tracking Form. Appeals requiring information/document procurement from persons or organizations outside NAC should be concluded within 30 days after the information/document in question is obtained, and for appeals requiring assessment, within 30 days after the completion of the assessment, and relevant persons should be informed.

5.3 Continuation of the Complaint/Appeal

In cases where the complaint/appeal persists or the resolution of the complaint/appeal requires a legal evaluation, the person managing the complaint/appeal process informs the President, and the Complaint and Appeal Evaluation Committee is notified of the situation. In addition, in cases deemed necessary, the Legal Advisor is informed, and the legal process is initiated. The opinion of the Complaint and Appeal Evaluation Committee, all comments, analyses, evaluations, proposed corrective actions, and other relevant information regarding such complaint/appeal are communicated to the President. The final decision is made by the President. However, those who have made decisions in the activity subject to the appeal cannot take part in the final decision stage regarding the appeal in question.

The decision regarding the complaint/appeal is communicated to the complainant/appellant and, when necessary, to the relevant parties by the Quality Manager in accordance with confidentiality rules. The information that it has been concluded is communicated to the Complaint and Appeal Evaluation Committee by the Quality Manager.

5.4 Complaint and Appeal Evaluation Committee

The Complaint and Appeal Evaluation Committee consists of 3 people, and depending on the situation, additional members can be included from the A/TE pool. The Legal Advisor may also provide legal opinion, when necessary. The Committee objectively examines the complaint/appeal processes delegated to it. If deemed necessary, it may request supporting information/documents from the QM or relevant persons. Decisions are made unanimously. The decisions taken are communicated to the QM or, in necessary critical situations, to the President.

5.5 Confidentiality and Impartiality

NAC Management takes all necessary measures to protect the confidentiality of the information obtained during the examination of complaints and appeals. The legal requests of the complainants regarding the disclosure or confidentiality of their information are taken into consideration. Members serving on the Complaint and Appeal Evaluation Committee sign the FR.014-NAC Commitment to Confidentiality and Impartiality for NAC Associates Form. Thus, they undertake to comply with the principles of confidentiality and impartiality in their committee duties. If a member has a conflict of interest with the body/person subject to the complaint or appeal, they state this and do not attend the relevant meeting, and another member is appointed instead. Members who do not participate due to conflicts of interest are recorded in the FR.013-NAC Complaint/Appeal Record Form.

5.6 Maintaining Statistical Records

The Quality Manager carries out the necessary work to record all complaints and appeals, monitor their response, and generate statistical data on the subject. Persons assigned to investigate the complaint/appeal record all information related to the complaint/appeal in the FR.168-NAC Complaint/Appeal Tracking Form. Statistical information regarding complaints and appeals is evaluated by the Complaint and Appeal Evaluation Committee before each Management Review and the results are added to the FR.172-NAC Management Review Report and included in the MR agenda.

6 AUTHORITIES AND RESPONSIBILITIES

The President, Quality Manager, Complaint and Appeal Evaluation Committee, and NAC personnel are responsible for the implementation of the requirements of this procedure.

7 REVISION TABLE

Date	Section	Amendment
19.03.2020	Header	Logo has been changed.
30.03.2022	All	"FR 013 Complaint Record Form" has been translated to "FR 013 Complaint/Appeal Record Form".
01.08.2022	5.1, 5.1.1, 5.1.3, 5.1.4, 5.2	The word "letter" used in handling and concluding complaints/appeals has been replaced with "FR 013 Complaint/Appeal Record Form".
13.12.2022	All	The document has been revised to combine complaint and appeal processes.
13.12.2022	5.1.4	Result notification has been revised.
04.04.2023	5.1	"Regularly informing the complainant/appellant about the status/progress of the complaint/appeal" has been added.
22.03.2024	All	The complaint and appeal process has been handled as separate processes.
22.03.2024	All	Responsibilities for complaint and appeal processes have been reorganized.

PROCEDURE FOR COMPLAINT AND APPEAL

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22.03.2024	5.4	Member selection for the Complaint and Appeal Committee has been redefined.
08.11.2024	5.4	Complaint and Appeal Evaluation Committee formation is redefined.
08.11.2024	5.1	Rejection of application is deleted from complaint process to be carried out under appeal process.
08.11.2024	All	Editorial changes are made.