ЛАКОС защитим природата	**ECO-CONSULT-ENGINEERING LTD BURGAS**		Version	**1**
	LABORATORY FOR ANALYSIS OF ENVIRONMENTAL COMPONENTS /LAKOS/		Revision	**2**
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COMPLAINTS

CHRONOLOGY OF CHANGES TO THE DOCUMENT

№	Date of version/date of revision	Version/ Revision	changes made	reason for change / introduction	developed / made the changes to the document
1	Version date: 08/01/2019 Revision date: 08/01/2019	Version 1/ Revision 1	new document code. Structural change of MQP 408-1	Transition to БДС EN ISO / IEC 17025:2018	Eng. Kr. Kalacheva
2	Version date: 08/01/2019 Revision date: 19.12.2022	Version 1/ Revision 2	Supplement on the document by attitude on independent expert for consideration on complaint , criteria for registration on appeal and deadlines for informing on the appellant	Annual review of documents by QS	P. Elkeneva-Vasileva

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1. GENERAL PRINCIPLES

This procedure regulates the process for registering, analyzing, processing and answer to on acted complaints in the laboratory. The aim is to take adequate actions to verify complaints received in relation to the quality of the tests or non-compliance with the code of ethics.
Complaints can relate to:

- doubt on the part of the client with the results obtained by LAKOS, regarding their fidelity and accuracy;
- non-compliance with the special requirements set by the client when commissioning the test;
- missed deadlines and agreements;
- non-compliance with the price offer;
- non-compliance with the Code of Ethics during customer service.

2. TERMS AND DEFINITIONS

complaint	expression of dissatisfaction by a person or organization to the laboratory regarding the activities and results of the laboratory, for which a response is expected
corrective action	action to eliminate the cause of non-conformity and to prevent the re-occurrence of non-conformity (item 3.12.2 of BDS EN ISO 9000:2015)
objective evidence	data confirming the existence or credibility of something (item 3.8 of BDS EN ISO 19011 :2018)
rules of conduct for customer satisfaction	commitments to customers made by an organization affecting its behavior that are aimed at increasing customer satisfaction and related prescriptions (BDS ISO 10001:2018)
customer	organization or person to whom a product is delivered (BDS ISO 10001:2018)
customer satisfaction	customer's perception of the degree to which their requirements are met (BDS ISO 10001:2018)
requirement	an expressed need or expectation that is usually implied or mandatory (item 3.23 of BDS EN ISO 19011 :2018)
organization	a collection of premises, facilities and people with distributed responsibilities, authorities and interrelationships (BDS ISO 10001:2018)

3. RESPONSIBILITIES

Head of laboratory	Accepts received complaints
	Evaluates the complaint for merit, except in cases where the complaint refers to activities carried out by himself and prescribes measures to be taken
	Responds to the complainant within the set deadline
Quality manager	Documents the complaint registration and review process and participates in the review team. Reports to HL and makes suggestions for corrective or improvement actions.
	Maintains documentation reviewed during complaint processing in a file with all necessary documents.
Metrologist	Participates in the complaint review team when it comes to the serviceability of technical means
Staff of laboratory	All laboratory personnel are responsible for following this procedure

4. ORDER OF EXECUTION OF ACTIVITIES FOR PROCESSING RECEIVED COMPLAINTS

4.1 General description of the process

Every client has the right to file a complaint regarding a service provided by the laboratory, or non-compliance with the code of ethics during the service.

A complaint in the sense of this quality procedure means any written objection or dissatisfaction on the part of a customer regarding the quality of the execution of an order, or regarding compliance with the laboratory's code of ethics.

Complaints that are not in writing are not accepted and registered as such. Filing a complaint is done by filling in the form provided for this, which is available to every customer on the website of "ECO-CONSULT-ENGINEERING" LTD and upon request in the office premises of LAKOS.

Hed of laboratory accepts received complaints. The Quality manager confirms to the client or organization that the complaint has been received, registers it and takes subsequent actions to analyze and process it. Head of laboratory informed the applicant about the course of the trial.

All documents related to the complaint are collected, an interview is conducted with the employee who performed the testing, sampling activity or the employee who contacted the client (when the complaint concerns compliance with the code of ethics). All the results of the analysis of the complaint (the documents collected and the interview with the employee) are cited in the complaint processing log.

The head of the laboratory participates in the team for considering (analyzing) the complaint, unless the complaint refers to activities performed by him. After the analysis, HL gives a conclusion on the merits of the complaint. **When the complaint refers to activities concerning HL, the complaint is assessed for merit by the QM or an external expert who is pre-approved in the List of approved suppliers of products and services QL 6.6-1.**

When the complaint is considered to be justified, the activities of managing the non-conforming work and informing the customer about the progress of the process are undertaken.

4.2 Submission of complaints to LAKOS

When written complaints are received in LAKOS, the complaint must be registered in the "Complaints Card" - QF 7.9-1, containing the incoming number and date of receipt of the complaint. Confirmation of receipt and registration of the complaint is carried out by communicating this incoming number to the person who submitted the complaint.

In order for a submitted complaint to be accepted for consideration and registered, the data filled in QF 7.9-1 must provide unambiguous and complete information about:

- **Identification of the applicant, regardless of whether he is a legal entity or an individual;**
- **Name, address, telephone, email for contact with the complainant or his representative;**
- **The reason for filing the complaint;**
- **The circumstances and reasons on which the appeal is based - brief description;**
- **Date of submission of the complaint;**

- **Certification of the submission of the complaint by signature of the complainant;**
- **Deadline for response.**

The complaint card thus completed is copied and one copy is provided to the customer to certify the registration of the complaint in the laboratory and to inform the customer in what time he can expect a response after the analysis and processing of the complaint.

The complaint is not registered in the event that:

- **Applies to actions more than one year old;**
- **It is anonymous;**
- **It has been resubmitted on a matter that has already been decided by the Laboratory.**

In cases where the submitted information is not accepted for examination by the laboratory, the applicant is notified (in writing, by fax, by e-mail) of this within three days, stating the reasons.

If the complaint is regular , it is registered with an incoming number in QF 7.9-2 Complaint Processing Log, where the process of analysis, processing of information and decision-making on merits and further actions is documented.

4.3 Analysis of the submitted complaint

Each complaint accepted for consideration is checked for validity within ten working days after its registration. If the processing of the complaint requires re-testing of a product, the period is extended by the time necessary for the technical implementation of the analysis.

The verification of the merits of the complaint is carried out by a team with the participation of the Head of Laboratory, except in cases where the complaint refers to activities carried out by himself. In this case, the appeal is considered under the guidance of the QM. The LAKOS employees included in the team at "ECO-CONSULT-ENGINEERING" Ltd must not have participated in the performance of the laboratory activities considered in the complaint.

Each meeting of the complaint resolution team is documented in the designated "complaint analysis" location of QF 7.9-2 Complaint Processing Log.

The assembled team analyzed:

- the input data from the submitted complaint;
- the analytical or sampling protocols described by the applicant. The file of the performed analysis is required by the QM (when the complaint concerns suspected wrong results, an error in the test protocol, an incorrectly taken sample);
- non-observed deadlines - the contract, the offer, the assignment, etc. are considered by the QM. and a file of the performed laboratory activity, which shows the date of receipt of the sample and the date of issuance of the protocol;
- In case of non-compliance with the code of ethics, an interview is conducted with the employee against whom the complaint was filed;
- If the complaint concerns other activities - relevant documents from the QM are required to clarify the situation.

The result of the analysis of the complaint and the corrective actions taken (if any) are recorded in QF 7.9-2 Diary for handling complaints by the QM. It describes all protocol numbers, technical serviceability results, etc.

4.4 Establishing the merits of the complaint

In the process of analysis, it should be clarified whether the complaint is justified by checking:

- have all prior verbal arrangements with the customer for the upcoming sampling and testing been documented;
- whether the client's requirements are sufficiently clear and precise and whether they match the offer provided to him;
- whether the sampling and testing methods are in accordance with the client's requirements;
- are all existing documents on the request stored, according to the QS;
- has the client been informed about the order fulfillment period;
- have the customer presented any changes in the scope of the order;
- was the client notified in a timely manner of the progress of the tests and of any irregularities and inconsistencies related to the claim;
- are the apparatus \used serviceable?

If necessary, the head of the laboratory appoints an independent specialist to investigate the received complaint.

The next steps are

- taking corrective action (if necessary) according to QP 8.7-1;
- specifying the damage done and personalizing the responsible persons.

After establishing the validity, HL sends a reasoned response to the client, documented in the designated form QF 7.9-3 "Response to a complaint", informing him of the corrective action taken, when any.

If the complaint is unfounded, if a retest is requested, the costs are at the customer's expense. Retesting can only be done on an arbitration sample

- in LAKOS in the presence of the client
- in another accredited laboratory, in the presence of both parties.

Corrective actions must be carried out in a way that gives assurances that they exclude the recurrence of similar complaints. This is ensured by the prescribed corrective actions being based on a risk assessment, according to QP 8.5-1 Actions to control risks and opportunities.

The results of the risk assessment and the corrective actions taken are used in the annual management review to plan activities for the following annual period.

In the event that the complaint is related to sampling by an employee of the Laboratory, the team shall include an employee with sampling competence who was not involved in the sampling activities subject to the complaint. The verification is carried out by checking all the records accompanying the sampling. At the discretion of the team, the employee who made the claim may be assigned to provide a detailed explanation.

In order to establish the validity of complaints related to organizational deficiencies or the reporting of results, the verification is carried out on the basis of the documents relevant to the specific case. When the complaint concerns compliance with the Code of Ethics QP 6.1-1, if it is found to be justified, the following employee is sanctioned at the discretion of the Manager. The management of the laboratory does not tolerate violations of the Internal Rules - QF 6.1-1 or the Code of Ethics.

When the complaint affects activities outside the control of the laboratory (analyses performed by other laboratories - external suppliers and partners), HL responds to the client in QF 7.9-3 that it

has forwarded the received complaint to the responsible persons and/or organization and that the latter will be informed for the course of action within the specified period.

The entire complaint handling process is documented in QF 7.9-2 Complaint Handling Log.

4. 5 Informing the complainant

The laboratory informs the applicant as follows:

- **Up to 10 days from the receipt of the complaint - to proceed with the complaint or to refuse the consideration;**
- **Up to 10 days from registration in QF 7.9-2 "Diary for processing complaints" - for the decision on the merits of the complaint and the need to take additional actions.**
- **Up to 30 days from registration in QF 7.9-1 "Complaint Card" - for the results of the actions taken to eliminate or minimize the impact.**

The complainant is informed by the HL, through an official letter QF 7.9-3 "Response to a complaint".

5. DOCUMENTS

All activities related to a filed complaint are documented in the form of technical records for the given order, and all evidence from the inspection is applied to well-founded complaints. The records are used in the management review, in the planning of activities for the following year and possibly in the evaluation of the staff.

All documents from the QS used to process submitted complaints are kept by the head of LAKOS until the expiration of their implementation period, after which the records are archived according to the requirements of QP 8.4-1 Records Management.

5.1 Used external documents

BDS EN ISO/IEC 17025:2018	General requirements for the competence of testing and calibration laboratories
BDS EN ISO 9000:2015	Quality management systems. Basic principles and vocabulary
BDS ISO 10001:2018	Quality management. Customer satisfaction. Guidelines for the conduct of organizations (ISO 10001:2018)

5.2 Concomitant internal documents

QF 7.9-1	Complaints Card
QF 7.9-2	Complaint handling log
QF 7.9-3	Response to complaint

5.3 References internal documents

QP 8.5-1	Actions to manage risks and opportunities
QP 8.7-1	Inconsistent work
QP 6.1-1	Code of Ethics
QL 6.2-1	List of personnel - duties and responsibilities
QF 6.1-1	Rules for internal order