

Standard Operating
Procedures
For IAPMO Evaluation Service (IAPMO ES)

No: ES-008

Title: External Complaints--Policies & Procedure

By: SM

Ck:AZ

Appr. By: SM

Date: 04/03/09

1.0 Scope: This policy covers complaints directed at IAPMO ES, from person's external to it. Complaints cover all manner of communications with IAPMO ES including, but not limited to: telephone calls, letters, faxes, E-mails, and personal visits to the ES office for the purpose of communicating a problem. Any person directing a complaint toward an IAPMO ES client shall first contact that client and attempt to resolve their issue directly. If satisfactory results are not achieved in this manner, then IAPMO ES shall address the complaint in accordance with this procedure.

2.0 Responsibility. The Sr. Director of IAPMO ES, L.L.C. is ultimately responsible for the expeditious resolution of all complaints, their documentation and dissemination among appropriate departments and/or staff persons within IAPMO ES. The underlying goals of the IAPMO ES complaint system are; the mutually satisfactory resolution of problems between IAPMO ES and its customers, the overall strengthening of the service provider/customer relationship, and the improvement of IAPMO ES internal policies and procedures.

3.0 Procedures:

- a) Complaint Form. All complaints are to be documented using the IAPMO ES Complaint Form on the ES Intranet. The complaint form has ample room for documenting all communications and actions pertaining to the case. All key information and decisions shall be documented.
- b) All customer correspondence must be attached to the form for the record.
- c) All complaint forms documenting resolved issues should be marked "Closed"
- d) All complaints are considered a high priority action and the goal should be to resolve the issues as quickly as possible and to properly document the case consistently throughout its life cycle.
- f) Complaints received regarding the capabilities of recognized testing laboratories, if warranted, shall be followed up with an audit of the laboratory within three weeks of the receipt of the complaint.
- g) Corrective action to QAM sections shall be made if necessary.