KENAS
Delivering Trust

KENYA
ACCREDITATION
SERVICE

QMM-PR-04-02

Complaints Management Procedure

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1 Background Information

1.1 Purpose

This procedure defines how complaints are handled by KENAS. This operating procedure takes into consideration, the process of receipt of complaints through to investigation and resolution.

1.2 Scope

This procedure is applicable to all types of complaints related to activities under the mandate of KENAS.

1.3 Role(s) and Responsibility

Role	Responsibility
All KENAS Staff	Process owner
QRMO	Reviewer
PRSO	Recommender
CEO	Approval
All KENAS Staff	Compliance

2 Terms and Definitions

For the purposes of this document, the terms and definitions given in ISO/IEC 17000 and the KENAS Act 2019 and the following apply.

2.1 Acronyms and Abbreviations

CAB	Conformity Assessment Body
CEO	Chief Executive Officer
MRSQ	Manager Research, Strategy and Quality Assurance
RSQ	Research, Strategy and Quality Assurance Department

2.2 Definition of Terms

2.2.1 Complaint

Expression of dissatisfaction, other than appeal, by any person or organization, to an accreditation body, relating to the activities of that accreditation body or of an accredited conformity assessment body, where a response is expected.

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3 Process Detail

3.1 Receipt and Acknowledgement of Complaints

3.1.1 A complaint can be submitted by:

a) a person/s in their own name or on behalf of another person;

b) A group;

c) An organisation; or

d) An institution.

3.1.2 Any member of KENAS staff may receive a complaint regarding any of KENAS activities either:

a) Directly which include emails, a filled form, fax, telephone call or verbally; or
b) Proactive through the KENAS website, KENAS e-mail info@kenyaaccreditation.org, letter or dedicated telephone lines +254 725 227 640, +254 787 395 679. Website page to fill feedback .

3.1.3 Once a complaint is received, a KENAS staff shall fill the **QMM-FM-05 Complaints and Anomalies Form,** with the details and the nature of the complaint and forward the form to the Complaints Liaison Officer, who will forward to the CEO for noting and acknowledgement. The CEO will forward the complaint to the MRSQ for investigation and manually logged into the Complaints Register ACC-FM-35.

3.1.4 On a quarterly basis, details required by the Commission on Administrative Justice for complaint reports shall be extracted from the register and presented to the commission by the Complaints Liaison Officer.

3.1.5 Upon receipt of a complaint concerning an accredited CAB activity, KENAS shall grant the CAB an opportunity to address the complaint and if not satisfactorily dealt with, then KENAS can take up the investigation.

3.1.6 Any complaint received by the Commission on Administrative Justice relating to KENAS and its activities shall follow the guidelines as per the Commission on Administrative Justice Act No. 23 of 2011.

3.2 Handling of the Complaint

3.3 Investigation

3.3.1 The MRSQ shall look at the nature of the complaint and assign a relevant officer or team to investigate the complaint as per **QMM-FM-05 Complaints and Anomalies Form** or process flow in Q-pulse with a view of establishing the root cause and corrective action thereof.

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3.3.2 The investigation shall be done instantly where possible and, in any case, not more than **fourteen (14) days**, unless external parties are involved in the investigation in which case the complainant shall be informed when to expect response from KENAS. The results of the investigation shall be forwarded for discussion with the MRSQ and the Head of Department where investigation lies, except in cases where they are involved in the activities under investigation The two shall sign the investigation sheet and forward to CEO for approval and onward communication to the complainant.

3.3.3 Where the complaint is immediately resolved by the relevant KENAS officer, the officer shall record the resolution in the **Complaints Register ACC-FM-35**.

3.3.4 Investigations and decisions on complaints shall not result in discrimination actions against a complainant.

4 Associated Documents

Ref	Document Identifier	Document Title
1.	ISO/IEC 17011	Conformity Assessment – Requirements for accreditation bodies accrediting conformity assessment bodies
2.	QMM-01	Quality Manual
3.	ACC-PR-04	Identification, management of non-conformities and corrective actions
4.	ACC-FM-35	Complaint register
5.	QMM-FM-05	Complaints and Anomalies Form

5 Revision/ Amendment Record

Date	Ver	Revised By	Reason for Revision
10/10/2022	01	RSQ	Newly developed/formatted document
14/12/2022	02	RSQ	Removal of the appeals definition

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