



MJC Halaal Trust

COMPLAINTS AND APPEALS PROCEDURE

PURPOSE

The purpose of this procedure is to establish a structured process for the receipt, recording, investigation, and resolution of complaints and appeals related to MJCHT certification activities. The procedure ensures that all complaints and appeals are managed in a fair, transparent, and timely manner

SCOPE

This procedure applies to all complaints and appeals submitted to the Muslim Judicial Council Halaal Trust (MJCHT) relating to the certification activities, certified clients, and decisions made by the MJCHT

RESPONSIBILITY

- **Quality Assurance Manager (QAM)** – Responsible for receiving, recording, investigating, and coordinating the resolution of complaints and appeals.
- **Technical Customer Support (TCS)** – Assists with Technical investigations where required.
- **Shariah Compliance Auditor (SCA)** – Assists with Shariah Compliance investigations where required.
- **Shariah Advisory Committee (SAC)** – Responsible for decisions on appeals when escalation is required.
- **Impartiality Committee** – Reviews matters relating to impartiality or unresolved appeals where necessary.

RELEVANT DOCUMENTATION

- Complaint Log Sheet – [ComplaintLogSheet/Form005]
- Complaint Register – [ComplaintRegister/Form020]

PROCEDURE

RECEIPT OF COMPLAINTS

Complaints may be received from any stakeholder including clients, consumers, regulatory bodies, or members of the public.

Upon receipt of a complaint, the Quality Assurance Manager (QAM) shall:

1. Confirm whether the complaint relates to MJCHT certification activities.
2. Acknowledge receipt of the complaint within two (2) working days.
3. Inform the complainant that the matter will be treated as a formal complaint.
4. Record the complaint in the **Complaint Log Sheet [ComplaintLogSheet/Form005]**.
5. Register the complaint in the **Complaint Register [ComplaintRegister/Form020]**.

Each complaint shall be assigned a **unique complaint reference number** to ensure traceability and tracking.

COMPLAINT REGISTRATION AND TRACKING

All complaints shall be formally recorded and monitored in the **Complaint Register**.

The register shall include the following information:

- Complaint reference number
- Date complaint received
- Complainant details
- Organisation or certified client involved
- Description of the complaint
- Assigned investigator
- Root cause analysis and investigation findings
- Corrective actions implemented
- Status of complaint (Open / Closed)
- Date of closure

INVESTIGATION OF COMPLAINTS

The Quality Assurance Manager shall ensure that complaints are investigated at the appropriate level of authority.

The investigation shall include:

- Collection and evaluation of relevant evidence
- Determination of whether the complaint relates to certification activities
- Assessment of whether decisions or actions were made:
 - on incorrect or false grounds
 - in conflict with scheme regulations
 - in conflict with ISO/IEC 17065 requirements

Technical Customer Support shall assist with technical aspects or where necessary, independent technical experts may be consulted.

All complaints shall undergo documented root cause analysis to determine the underlying cause of the issue.

The investigation findings, root cause, and corrective actions shall be documented.

COMPLAINTS RELATING TO CERTIFIED CLIENTS

Where a complaint relates to a **certified client**, the Shariah Compliance Auditor shall:

- Notify the certified client of the complaint where appropriate
- Review certification records related to the complaint
- Determine whether the complaint indicates non-conformity with certification requirements
- Conduct further evaluation where required (including document review or on-site assessment)

Where non-conformity is identified, the certified client may be required to implement **corrective actions**.

Where necessary, certification actions may be taken including:

- suspension of certification
- reduction of certification scope

- withdrawal of certification

All findings and actions shall be documented in the Complaint Register.

COMPLAINTS RELATING TO IMPARTIALITY

Complaints relating to impartiality shall follow procedure and be forwarded to the Impartiality Committee for review.

CORRECTIVE ACTIONS AND RESOLUTIONS

Where investigation identifies deficiencies or nonconformities, a **corrective action plan** shall be established.

The plan shall include:

- root cause identification
- corrective actions
- responsible persons
- implementation timelines

The complaint shall be resolved within thirty (30) working days, unless additional time is required due to complexity. Where additional time is required, the complainant shall be informed.

Before a complaint is closed, the **Chief Operating Officer (COO)** shall review and approve the resolution.

COMMUNICATION OF OUTCOME

Once the complaint has been resolved, the Quality Assurance Manager shall:

- Inform the complainant of the outcome of the investigation
- Inform the complainant of their **right to appeal**
- Ensure all documentation is filed under document control

APPEALS PROCESS

A complainant who is not satisfied with the outcome of a complaint or a certification decision may submit an appeal.

Appeals shall be reviewed by personnel who were not involved in the original certification decision or complaint investigation, or the impartiality committee to ensure impartiality.

HANDLING OF APPEALS

The Quality Assurance Manager is responsible for:

- Confirming whether the appeal relates to certification activities
- Ensuring the appeal contains the necessary information
- Acknowledging receipt of the appeal within five (5) working days
- Conducting an investigation of the appeal

If required, independent technical experts may be consulted.

ESCALATION OF APPEALS

the appeal cannot be resolved by the Quality Assurance Manager:

1. The appeal shall be presented to the Shariah Advisory Committee (SAC) for review and decision.
2. If further resolution is required, the matter shall be referred to the Impartiality Committee.

COMMUNICATION OF THE APPEAL OUTCOME

The appellant shall be informed in writing of the outcome of the appeal.

All decisions and actions relating to the appeal shall be documented and retained.

RECORDS AND RETENTION

All complaints and appeals records shall be maintained as controlled records.

These records include:

- Complaint Log Sheets
- Complaint Register
- Investigation reports
- Correspondence with complainants
- Appeal decisions

All records shall be retained in accordance with MJCHT document control and record retention procedures.