



Handling events violating organizational integrity, complaints and appeals against a certification decision

Procedure E 97

Address: H 1097–Budapest, Albert Flórián út 3/a
Postal address: H 1097–Budapest, Albert Flórián út 3/a
Phone: +36-20 268 7595
E-mail: cert@emki.hu / Web: www.emki.hu

Made by:

Győri Lajos

Approved by:

Dobó Zoltán
quality manager

Put into effect by:

László Imre
managing director



National Medical Device Conformity assessment and certification LLC.

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1. Scope

This procedure defines the tasks to be carried out in relation to notifications received by NEOEMKI LLC (hereinafter organization), in particular with regard to the reporting of incidents that breach organizational integrity, complaints and appeals. The procedure will be reviewed by NEOEMKI management at planned intervals to ensure that it remains appropriate and effective, including the stated quality policy and objectives.

1.1. Legal background

- Regulation 2017/745 of the European Parliament and of the Council (EU) (hereinafter MDR)
- Government Decree 50/2013 (II. 25.) on the integrity management system of public administration bodies and the procedure for receiving advocates
- Government Decree 370/2011 (XII. 31.) on the internal control system and internal audit of budgetary bodies

1.2. Standards

NEOEMKI takes the following harmonised standards into account in the procedure:

- EN ISO 9001:2015 Quality management systems. Requirements
Conformity assessment. Requirements for certification bodies
- EN ISO 17021-1:2016 carrying out the audit and certification of management systems.
Part 1: Requirements

1.3. Definitions

Complaint: a request for the elimination of an individual violation of a right or interest, and its handling is not subject to other procedures, such as judicial or administrative proceedings. The complaint may also include a suggestion.

Announcement: any communication relating to the operation of the organization that concerns a breach of its independence, impartiality, objectivity, violation of conflict of interest rules or any other ethical or legal non-compliance.

Announcement of public interest: draws attention to a circumstance, in which case the remedying or elimination of said circumstance is the interest of the community or society as a whole. The public interest announcement may also include a proposal.

Appeal: an objection by a client against a certification decision of the organization. An objection by a client to a certificate issued, modified, suspended, withdrawn or refused qualifies as an appeal.

Integrity: the proper functioning of the organization in accordance with the objectives, values and principles set by the head of the organization and the managing authority.

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Risk to integrity: the possibility of misconduct, irregularities or other incidents that violate or compromise the objectives, values or principles of the organization.

Risk of corruption: integrity risk that represents the potential for an act of corruption to occur.

Incident breaching organizational integrity: a breach of the organizational objectives, values and principles set out by the head of the organization and the managing authority, within the (legal) rules or legal framework applicable to the organization.

Ethical misconduct: violation of a rule laid down by an accepted code of ethics or of a system of professional conduct deemed ethically acceptable by the national and European economic and social environment.

Disciplinary offence: culpable breach of an obligation arising from the employment relationship. The conduct is considered to be wrongful if the employee has not acted in a way that would normally be expected in the situation.

Supervisory Committee: The Supervisory Committee (the Impartiality, Independence and Complaints Committee) is a periodic body of the Company. According to clause 4.2.4 of the ISO/IEC 17021-1:2016 standard, the Supervisory Committee is an impartial body and its members shall not engage in any activities that may compromise their impartiality (e.g. consulting, expertise, other financial interests in the clients to be certified).

The Supervisory Committee consists of the President and at least one member. The Supervisory Committee is chaired by the current Chairman of the Supervisory Board. The members of the Supervisory Committee are appointed by the President, and their membership is established upon acceptance and is for an indefinite period.

1.4. Personal requirement

- managing director of the organization
- quality manager
- employees and contracted staff

2. Procedure description

2.1. Event reporting, claiming, submission of an appeal

Written report

The written report can be made in two forms, one by post and one by electronic means. Written submissions are received at the current postal address stated on the organization's website. Letters containing submissions should be addressed to the head of the organization. Notifications received in written form must be received and filed at the time of receipt in accordance with the filing rules.

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Reports submitted in electronic form will be received at the central mailbox provided on the organization’s website. The electronic mailbox is capable of receiving attachments to the report in a variety of formats and sizes. The electronic mailbox is accessible to the person in charge of the task (quality manager) and the head of the organization. Notifications received in electronic form must be received and filed upon receipt.

Verbal report

There are two main forms of verbal reports: in person and by phone. Verbal reports are received by the person in charge (quality manager), who receives the report in the room or office designated for this purpose, taking into account the confidential nature of the report. Verbal reports shall be recorded in the minutes. If it is not possible to record the minutes or if the protection of the notifier justifies it, a reminder or note of the notification may be made.

The notifier may request their data to be treated in a confidential manner. In this case, their personal data must be placed in the case file in a sealed envelope signed by the person involved in the filing of the report, and only the head of the supervisory body may be informed of its content.

The completed minutes, the note or the reminder must be received and filed in the same way as the written submissions.

The central telephone number indicated on the website is used to receive reports by telephone. Notices made by phone, once received, must also be documented in the form of a note or reminder, and must be received and filed in the same way as written submissions.

2.2. Primary Evaluation

After receiving the report, the first step is to assess and analyze the information contained in the report.

This task is carried out by the person responsible for handling reports (quality manager).

In the event that the registered reports of abuse, irregularities and integrity and corruption risks related to the functioning of the organization are not received by the person in charge of handling the reports, they shall be forwarded to them without delay.

Primary evaluation

The primary evaluation should first of all examine whether the body receiving the report has the competence and jurisdiction to investigate the content of the submission. If the content of the report indicates that the organization is not the body entitled to proceed, the notification should be transferred to the body entitled within eight days of receipt. The notifier shall be informed of this at the same time as the transfer.

If the submission also contains a proposal for the creation or amendment of a legislative act, it must also be sent to the competent body.

The primary evaluation should consider whether the examination of the report can be disregarded or rejected.

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Repeated reports with the same content from the same notifier may be disregarded and the notifier shall be informed accordingly in writing.

In addition, in the case of a report made by an unidentified notifier, the investigation can also be waived, as before.

In addition to the cases set out above, an investigation may also be waived if the notifier has submitted their complaint after six months from the date on which they became aware of the act or omission complained of.

A report submitted more than one year after the occurrence of the act or omission complained of may be rejected without substantive investigation.

In the event that the submission is a complaint or appeal and the organization has the competence and jurisdiction to deal with the matters contained in the submission, the submission shall be dealt with in accordance with the relevant complaints and appeals procedure.

If no further action is required, the submission may be filed in accordance with the organization's file management rules, with the known notifier being informed at the same time.

The quality manager will assess the report on the basis of the following criteria:

- a) the nature of the report (what it concerns),
- b) whether the content of the report requires an investigation,
- c) whether the report requires urgent action.

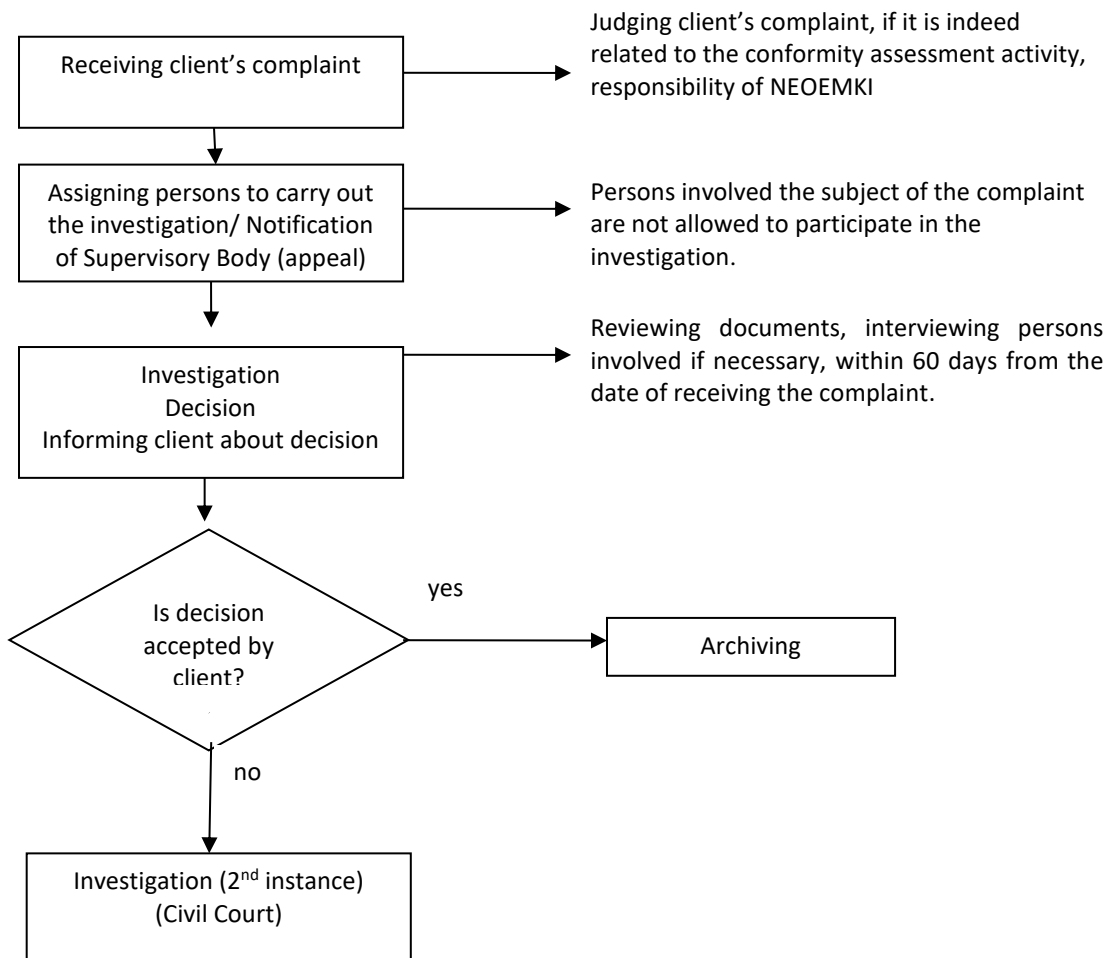
The quality manager shall immediately inform the head of the organization of the receipt of the report and the subject of the report in a brief note following the assessment, forwarding the report and any annexes simultaneously.

If the report does not require an investigation, the head of the organization decides how to proceed.

After evaluating the report, the quality manager will check the availability of the documents necessary for the procedure or indicated in the submission, as well as the availability of any additional information necessary to deal with the report.

If necessary, they arrange for additional documents and information to be obtained.

3. Report and claim processing



3.1. Investigation of reports and claims

If, based on the results of the preliminary evaluation, the report contains an incident or a risk related to organizational integrity, constitutes a complaint or an appeal against a decision of the organization, the head of the organization shall appoint a person responsible for investigating the report/complaint/appeal.

The designated person responsible cannot be the person concerned by the report, complaint or appeal.

The designated person responsible will check whether the results of a previous investigation into a similar report or complaint can be taken into account.

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The designated person in charge investigates the circumstances of the complaint and makes a proposal to the managing director on how to deal with the complaint and how to inform the complainant.

The organization will send information on the status of the case to the notifier/complainant via the secretariat, if their contact details are known.

3.2. Decision on reports and claims

The organization takes responsibility for all its decisions throughout the complaint/appeal process.

The head of the organization, based on the recommendation of the investigation, will decide on the notification/complaint:

- accept and initiate the correction and the necessary corrective actions, or
- reject the application on substantiated grounds.

If a decision cannot be taken within 60 days due to objective difficulties, the procedure may be extended for a further 30 days.

The secretariat shall notify the complainant of the postponement in writing before the expiry of the 60-day deadline.

The organization will inform the customer concerned in writing of the outcome of the investigation and the action to be taken within 8 days of the complaint being verified.

The organization shall treat the information in connection with the report/complaint in accordance with the confidentiality rules for client documents.

The organization's secretariat will notify the customer of the decision in writing.

The documents of the decision are filed with the case file by the secretariat of the organization.

The submission, investigation and handling of complaints must not result in any discrimination against the complainant.

3.3. Appeal handling

If, following a preliminary evaluation of the report, the report contains an objection by the client against a certification decision of the organization concerning the issuance, suspension or revocation of a certificate issued to it or the refusal to issue a certificate, the report shall be treated as an appeal.

The appeal is examined and decided by the Supervisory Committee.

The administration of the appeal procedure is handled by the secretariat of the organization.

An appeal may be lodged within 30 working days of receipt of the decision.

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The organization must decide on the appeal or complaint within 60 working days of its submission.

- The document submitted must include the following:
- the identification data of the appellant/respondent, natural or legal person;
- (data of their legal representative, if there is one);
- the subject matter and grounds of the appeal or complaint;
- the date and place of the appeal or complaint;
- company signature

One can also submit an appeal using the S9701 Appeal Handling Report form available on the website, or the S9702 Complaint Handling Report form available on the website.

The secretariat registers (files) the submitted documents separately from the client's certification documentation and sends a written acknowledgement of receipt.

The acknowledgement will contain the decision of the head of the organization as to whether the objection received will be assessed as an appeal or a complaint.

In the event of an appeal, the confirmation shall name the Chairman of Supervisory Committee.

3.3.1. Appeal investigation

The Chairman of the Supervisory Committee draws up the list of members and invites the members of the Board.

The Chairman of the Supervisory Committee sets the date of the appeal meeting.

The secretariat of the organization notifies the members of the Supervisory Committee of the subject and date of the appeal meeting and provide them with the necessary documents.

It is the responsibility of the head of the organization to gather and verify for the Supervisory Committee all the information necessary to determine the merits of the appeal.

The Supervisory Committee will examine whether the Board of Supervisors has previously acted on a similar appeal and whether its findings can be taken into account.

At the meeting of the Supervisory Committee, the appeal is discussed and, if necessary, the lead auditor/auditors, the administrative staff member and the certification decision-maker involved in the procedure are heard.

The Supervisory Committee concludes its meeting with a decision or sets a new meeting date for further investigations.

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The Supervisory Committee shall take a position at the meeting on the information to be given to the appellant.

A record of the appeal meeting shall be made by the secretariat of the organization and filed in the appeal file. The minutes shall be sent by the secretariat to the participants of the meeting.

The appeal decision is documented in the F9701 Appeal record.

The secretariat of the organization shall, as instructed by the Chairman of the Supervisory Committee, send information on the status of the case to the appellant.

3.3.2. Appeal decisions

The Supervisory Committee makes its decisions by majority vote. Each member and the Chairman shall have one vote.

The decision can be:

- the appeal is upheld and a new full or partial certification procedure is ordered, which is not carried out by the previous person (the costs of which are borne by the certifying organization), or
- the appeal is dismissed with substantiated justification.

If objective difficulties prevent a decision within the 60-day deadline, the procedure may be extended for a further 30 days. The secretariat shall notify the appellant in writing before the expiry of the 60-day time limit.

If the Supervisory Committee decides that the audit needs to be supplemented or repeated, the new auditors are proposed by a decision-maker independent of the previous audit.

The secretariat will notify the client of the decision in writing.

The records of the decision are filed in the case file by the secretariat.

3.3.3. Supervisory Committee

The Supervisory Committee is an ad hoc committee of NEOEMKI, convened by the President-designate to resolve disputes between NEOEMKI and the client who has submitted an appeal.

The rules of procedure of the Supervisory Committee shall be approved and, if necessary, amended by the Supervisory Committee.

3.4. Corrections and Corrective actions

If the investigation of a report/complaint/appeal reveals a deficiency that needs to be corrected/can be corrected, the quality manager will ensure that the necessary corrections are made.

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The decision to take corrective and preventive action is made by the managing director, and the input data are included in the documentation of the appeal or complaint in question.

4. Documentation

NEOEMKI records and documents the implementation of the appeal and complaint handling in the following document templates.

Identifier	Name
S9701	Appeal report
S9702	Complaint handling report
F9701	Record of appeal
F9702	Record of complaint

5. QMS documents

Identifier	Name
E01	QMS Manual

6. History

Identifier	Name	Version	Reason for modification	Effective from
Procedure E 97	Handling events violating organizational integrity, complaints and appeals against a certification decision	version 1.1	Introduction	2021. 06. 23.