



St. Francis Institute of Management and Research - PGDM

PROCEDURE
AS PER ISO 21001:2018

Rev. Date
Rev. No.

Department: Admin
No. PGDM//

| No. | INPUT SOURCES (Person/Institution/ Document) | INPUT | ACTIVITY | RESPONSIBILITY | OUTPUT /REF RECORD | RECIEVER OF OUTPUT | KPI |
|-----|--|-------|--|---|---------------------------------------|-------------------------------|-----|
| 1 | | | Stakeholders may submit their complaints or suggestions either verbally to the Director/Grievance Redressal Committee/Administrator or in written form through the Complaint/Suggestion Box placed in the designated area of the institute. | Director /Grievance Redressal Committee / Administrator | Stakeholder Complaint Register | Management | |
| | | | In case of a verbal complaint, the stakeholder shall be requested to submit the complaint in written form for further processing and redressal by the Grievance Redressal Committee. | Grievance Redressal Committee / Administrator | Written Complaint Record | Grievance Redressal Committee | |
| | | | The complaints received are reviewed by grievance committee and discussed with the Director. Appropriate corrective action is initiated based on the nature and severity of the complaint. All complaints and actions taken are recorded after conducting root cause analysis. | Grievance Redressal Committee | Stakeholder Complaint Register | Management | |
| 2 | | | In case of written complaints: 1) Complaints and suggestions received through the Complaint/Suggestion Box are checked on a fortnightly basis by the Grievance Redressal Committee/Administrator. | Grievance Redressal Committee / Administrator | Stakeholder Complaint File | Management | |
| | | | 2) All written complaints received are entered in the Stakeholder Complaint Register and maintained in the Stakeholder Complaint File for further action and reference. | Grievance Redressal Committee / Administrator | Stakeholder Complaint Register / File | Management | |
| 3 | | | Root cause analysis of the complaints is initiated by the Grievance Redressal Committee along with the Director and Administrator. | Grievance Redressal Committee | Complaint Investigation Report | Management | |

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Approved by : MR

S. Saorane
Approved by : Director



Dr. Alphonse
Approved by : Chairman



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| 1.4 | | | A) In case the complaint pertains to a specific individual or process owner, the concerned person is called for discussion and counseling. Corrective and preventive actions taken are documented in the Stakeholder Complaint File, and the effectiveness of such actions is reviewed periodically over a period of six months. | Grievance Redressal Committee | Stakeholder Complaint File | Management | |
| | | | B) In case the complaint relates to any process or system, investigation is carried out to identify the root cause and appropriate corrective action is initiated. In severe cases, the matter may be placed before the Top Management for further review and decision-making. The actions taken are recorded in the Stakeholder Complaint Register. | Grievance Redressal Committee / Top Management | Stakeholder Complaint Register | Management | |
| | | | Actions arising from the decisions of the Grievance committee are implemented, and the effectiveness of corrective actions is reviewed during subsequent meetings. | Top Management / Grievance Redressal Committee | Action Taken Report | Management | |
| | | | After taking final decision, it is communicated to concern parties in writing by Grievance Committee | Grievance Redressal Committee | Action Taken Report | Management | |
| 1.5 | | | To further reduce the number of grievances, the management follows an open-door policy. Students, staff, and other stakeholders are free to approach the management regarding any issues, complaints, or suggestions. Regular meetings are also conducted with faculty and staff to encourage communication and timely grievance resolution. | Management | Meeting Minutes | Management | |

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