***prOCEDure No 17   
Issue 3***

**Certification Process for All Standards**

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# 1 Purpose

To ensure that certification audits are planned to determine the extent to which the Client’s management system meets the requirements of Management Systems standards.

# 2 Scope

The planning of all audits for the Certification Body's audits.

# 3 References

* PROC15 Planning and Compliance of OHSAS 18001
* Proc 16 Planning and Compliance Requirements for QMS BCMS EMS
* PROC25 Determination of audit time ISMS
* ISO 17021-1

# 4 Definitions

Opportunity for improvement (OFI)

- Where the auditor feels that there is a potential non conformity but cannot provide objective evidence to prove it (for guidance only)

CAR - Corrective Action Request. Written notification to a Client of non-compliance identified during an audit. These will be classified either major or minor nonconformity.

Minor nonconformity Nonconformity (non-fulfilment of a requirement) that does not affect the capability of the management system to achieve the intended results.

Major nonconformity Nonconformity (non-fulfilment of a requirement) that affects the capability of the management system to achieve the intended results.

*Note: Nonconformities could be classified as major in the following circumstances:*

*— if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements;*

*— a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.*

Root cause analysis (RCA) A root cause is a factor that caused a nonconformity and should be permanently eliminated through process improvement. Root cause analysis is a collective term that describes a wide range of approaches, tools, and techniques used to uncover causes of problems e.g. 5 Whys is an iterative interrogative technique used to explore the cause-and-effect relationships underlying a particular problem. The primary goal of the technique is to determine the root cause of a defect or problem by repeating the question "Why?".

# 5 certification audit Procedure

## **5.1 Risk-based approach**

SN REGISTRARS (HOLDINGS) LTD will take into account the risks associates with providing competent, consistent and impartial certification. Risks may include those associated with:

* The objective of the audit
* The sampling used in the audit process
* Real and perceived impartiality
* Legal, regulatory and liability issues
* The client organisation being audited and its operating environment
* Impact of the audit on the client and its activates
* Health and safety of the audit teams
* Perception of interested parties
* Misleading statements by the certified clients
* Use of marks

## **5.2 Audit report**

SN Registrars shall provide a written report for each audit to the client through eCMS. The audit team may identify opportunities for improvement (OFI) but shall not recommend specific solutions. SN Registrars require the client to analyse the cause (e.g. using 5S) and describe the specific correction and corrective actions taken, or planned to be taken, to eliminate detected nonconformities, within a defined time and response through eCMS.

Ownership of the audit report shall be maintained by SN Registrars.

The audit team leader shall ensure that the audit report is prepared and shall be responsible for its content. The audit report shall provide an accurate, concise and clear record of the audit to enable an informed certification decision to be made and shall include or refer to the following:

a) identification of the certification body SN Registrars (Holdings) Ltd;

b) the name and address of the client and the client’s representative;

c) the type of audit (e.g. initial, surveillance or recertification audit or special audits);

d) the audit criteria;

e) the audit objectives;

f) the audit scope, particularly identification of the organizational or functional units or processes audited and the time of the audit;

g) any deviation from the audit plan and their reasons;

h) any significant issues impacting on the audit programme;

i) identification of the audit team leader, audit team members and any accompanying persons;

j) the dates and places where the audit activities (on site or offsite, permanent or temporary sites) were conducted;

k) audit findings, reference to evidence and conclusions, consistent with the requirements of the type of audit;

l) significant changes, if any, that affect the management system of the client since the last audit took place;

m) any unresolved issues, if identified;

n) where applicable, whether the audit is combined, joint or integrated;

o) a disclaimer statement indicating that auditing is based on a sampling process of the available information;

p) recommendation from the audit team;

q) the audited client is effectively controlling the use of the certification documents and marks, if applicable;

r) verification of effectiveness of taken corrective actions regarding previously identified

nonconformities, if applicable.

The report shall also contain:

a) a statement on the conformity and the effectiveness of the management system together with a summary of the evidence relating to:

— the capability of the management system to meet applicable requirements and expected outcomes;

— the internal audit and management review process;

b) a conclusion on the appropriateness of the certification scope;

c) confirmation that the audit objectives have been fulfilled.

# 6 Planning of the certification audits for a contract

If the auditor experiences any problems with the planning of a Stage 1 audit, Stage 2 audit, surveillance audit or recertification audit SN REGISTRARS (HOLDINGS) LTD shall be informed and appropriate action taken.

SN REGISTRARS (HOLDINGS) LTD shall begin the planning of the Stage 1 audits, Stage 2 audits, surveillance audits, close out audits and re-audits using Proc 16 and/or 25 as a guide for audit times once the Client and certification body has completed the:

Application, Contract review, Quotation, and Contract.

The following has been reviewed as correct and if eCMS is used, uploaded to the client details:

1. **Application** correctly and fully completed, signed and dated;
2. **Contract review** has identified the audit duration with documented justifications for increase/decrease in the duration, selected the competent resources and nominated a Lead auditor to undertake the stage 1 and stage 2 Audits;
3. **Client signed contract** and **quotation** received;
4. Where another auditor takes over the client for audits then the Scheme Manager or nominee shall ensure that the outgoing auditor briefs the incoming auditor on the client;
5. The presence and justification of observers during an audit activity shall be agreed to by SN REGISTRARS (HOLDINGS) LTD and client prior to the conduct of the audit.

Where any part of the audit is made by electronic means or where the site to be audited is virtual, SN Registrars shall ensure that such activities are conducted by personnel with appropriate competence. The evidence obtained during such an audit shall be sufficient to enable the auditor to take an informed decision on the conformity of the requirement in question.

NOTE “On-site” audits can include remote access to electronic site(s) that contain(s) information that is relevant to the audit of the management system. Consideration can also be given to the use of electronic means for conducting audits.

NB: The time spent by any team member that is not assigned as an auditor (technical experts, translators, interpreters, observers, auditors in training) shall not count in the established audit time.

**The continued use of the auditor after a full audit cycle shall be reviewed by the scheme manager for risk of familiarity and impartiality.**

SN Registrars and any part of the same legal entity and any entity under the organizational control of SN Registrars shall not offer or provide management system consultancy or internal audits to its certified clients. A recognized mitigation of this threat is not to certify the management system for a minimum of two years following the end of the consultancy or provision of internal audits.

## **6.1 Initial certification audit**

The initial certification audit of a management system shall be conducted in two stages: stage 1 and stage 2.

## **6.2 Stage 1 audit**

The stage 1 audit shall be performed

a) review the client’s management system documented information;

b) to evaluate the client's location and site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for the stage 2 audit;

c) to review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system;

d) to obtain necessary information regarding the scope of the management system, including: the client’s site(s), processes and equipment used, levels of controls established (particularly in case of multisite clients), applicable statutory and regulatory requirements;

e) to review the allocation of resources for stage 2 audit and agree with the client on the details of the stage 2 audit;

f) to provide a focus for planning the stage 2 audit by gaining a sufficient understanding of the client's management system and site operations in the context the management system standard or other normative document;

g) to evaluate if the internal audits and management review are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for the stage 2 audit.

For most management systems part of the stage 1 audit will be carried out at the client's premises in order to achieve the objectives stated above.

**6.2.1** Documented conclusions with regard to fulfilment of the stage 1 objectives and the readiness for stage 2shall be communicated to the client, including identification of any areas of concern that could be classified as nonconformity during the stage 2. On completion of the Stage 1 Audit visit the report and documentation shall be processed in accordance with the eCMS and this procedure.

**6.2.2** In determining the interval between stage 1 and stage 2 audits, consideration shall be given to the needs of the client to resolve areas of concern identified during the stage 1 audit. SN REGISTRARS (HOLDINGS) LTD may also need to revise its arrangements for stage 2. If any significant changes which would impact the management system occur, SN Registrars shall consider the need to repeat all or part of stage 1. The client shall be informed that the results of stage 1 may lead to postponement or cancellation of stage 2.

## **6.3 Stage 2 audit**

The purpose of the stage 2 is to evaluate the implementation, including effectiveness, of the client's management system. The stage 2 shall take place at the site(s) of the client. It shall include the auditing of at least the following:

a) information and evidence about conformity to all requirements of the applicable management system standard or other normative document;

b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);

c) the client's management system ability and its performance as regarding meeting of applicable statutory, regulatory and contractual requirements;

d) operational control of the client's processes;

e) internal auditing and management review;

f) management responsibility for the client's policies.

SN REGISTRARS (HOLDINGS) LTD shall complete and send the nominated Lead Auditor the audit documentation pack, Audit plan required to progress the main audit in accordance with this procedure and Auditor appointment form for all members of the audit team.

SN REGISTRARS (HOLDINGS) LTD confirms with the Lead auditor:

* The audit date,
* The scope of the audit,
* The audit standard,
* The audit plan.

SN REGISTRARS (HOLDINGS) LTD then contact the Client and confirm:

* The presence and justification of observers
* The audit date
* The audit plan
* The team members
* The need for appropriate guides and a room for the audit team to work from.

**6.3.1** Stage 2 audit findings shall be documented and communicated to the client. On completion of the Stage 2 Audit visit the report and documentation shall be processed in accordance with the eCMS and this procedure. Lead auditor needs to complete the 3-year surveillance audit programme with any required site visit and provide it to SN REGISTRARS (HOLDINGS) LTD for uploading to eCMS client details.

**Lead auditor Documentation pack (eCMS captured documents in red)**

Audit Location and Travel instructions

Form P16/02 Audit Team Appointment

Report Form

Meeting agenda and Attendance record

nonconformity

Observations

Post + audit action sheet

Plan for audit as per standard

Audit check list

Audit Checklist Stage 1

Surveillance plan for surveillance audits only

Audit recommendation

Client file copies all on eCMS

i) Reports

ii) nonconformity

iii) Observation sheets

iv) Previous audit information;

nonconformities raised and their status

Observations reports

Programme for audit

Clause/requirement action plan

Audit checklist

## **6.4 Surveillance activities**

**6.4.1 SN REGISTRARS (HOLDINGS) LTD** shall develop its surveillance activities so that representative areas and functions covered by the scope of the management system are monitored on a regular basis, and take into account changes to its certified client and its management system using 3 year surveillance audit programme (form FMP16/7, FMP16/11, FMP16/15, FMP15/19 and FMP25/9).

**6.4.2** Surveillance activities shall include on-site auditing of the certified client's management system's fulfilment of specified requirements with respect to the standard to which the certification is granted.

Other surveillance activities may include:

a) enquiries from the certification body to the certified client on aspects of certification,

b) reviewing any certified client's statements with respect to its operations (e.g. promotional material, website),

c) requests to the client to provide documented information (on paper or electronic media), and

d) other means of monitoring the certified client's performance.

**6.4.3** Surveillance audits are on-site audits, but are not necessarily full system audits, and shall be planned together with the other surveillance activities so that the certification body can maintain confidence that the client’s certified management system continues to fulfil requirements between recertification audits.

Each surveillance for the relevant management system standard shall include:

a) internal audits and management review,

b) a review of actions taken on nonconformities identified during the previous audit,

c) complaints handling,

d) effectiveness of the management system with regard to achieving the certified client's objectives and the intended results of the respective management system (s),

e) progress of planned activities aimed at continual improvement,

f) continuing operational control,

g) review of any changes (organisation, system maturity, etc.), and

h) use of marks and/or any other reference to certification.

Surveillance audits shall be conducted at least once a calendar year, except in recertification years. The date of the first surveillance audit following initial certification shall not be more than 12 months from the certification decision date.

NOTE It can be necessary to adjust the frequency of surveillance audits to accommodate factors such as seasons or management systems certification of a limited duration (e.g. temporary construction site).

**6.4.4** On a monthly basis SN REGISTRARS (HOLDINGS) LTD scrutinises the audit programme and selects Clients who are due a surveillance audit within 8 weeks, update programme and inform lead auditors.

SN REGISTRARS (HOLDINGS) LTD shall complete and send the nominated Lead Auditor the audit documentation pack, Audit plan required to progress the main audit in accordance with this procedure and Auditor appointment form for all members of the audit team.

SN REGISTRARS (HOLDINGS) LTD confirms with the Lead auditor:

* The audit date,
* The scope of the audit,
* The audit standard,
* The audit plan.

SN REGISTRARS (HOLDINGS) LTD then contact the Client and confirm:

* The presence and justification of observers
* The audit date
* The audit plan
* The team members
* The need for appropriate guides and a room for the audit team to work from.

**Lead auditor Documentation pack (eCMS captured documents in red)**

Audit Location and Travel instructions

Form P16/02 Audit Team Appointment

Report Form

Meeting agends and Attendance record

nonconformity

Observations

Post + audit action sheet

Plan for audit as per standard

Audit check list

Audit checklist Stage 1

Surveillance plan for surveillance audits only

Audit recommendation

Client file copies all on eCMS

i) Reports

ii) nonconformities

iii) Observation sheets

iv) Previous audit information;

nonconformities raised and their status

Observations reports

Programme for audit

Clause/requirement action plan

Audit checklist

**6.4.5** Surveillance audit findings shall be documented and communicated to the client. On completion of the surveillance audit visit the report and documentation shall be processed in accordance with the eCMS and this procedure. 3-year surveillance audit programme is reviewed and amended if any changes.

## **6.5 Recertification**

The purpose of the recertification audit is to confirm the continued conformity and effectiveness of the management system as a whole, and its continued relevance and applicability for the scope of certification. A recertification audit shall be planned and conducted to evaluate the continued fulfilment of all of the requirements of the relevant management system standard or other normative document. This shall be planned and conducted in due time to enable for timely renewal before the certificate expiry date.

The recertification activity shall include the review of previous surveillance audit reports and consider the performance of the management system over the most recent certification cycle (Form FMP16\_6 Third year review report).

Recertification audit activities may need to have a stage 1 in situations where there have been significant changes to the management system, the organization, or the context in which the management system is operating (e.g. changes to legislation).

NOTE Such changes can occur at any time during the certification cycle and the certification body might need to perform a special audit, which might or might not be a two-stage audit.

Any changes shall be recorded on the contract review and uploaded to eCMS client details.

The recertification audit shall include an on-site audit that addresses the following:

a) the effectiveness of the management system in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification;

b) demonstrated commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance;

c) the effectiveness of the management system with regard to achieving the certified client’s objectives and the intended results of the respective management system (s).

On a monthly basis SN REGISTRARS (HOLDINGS) LTD scrutinises the audit programme and identifies Clients due a recertification within the next 3-month period.

**NOTE.** *The eCMS client file shall contain all the Client contract information, audit performance and supporting records.*

SN REGISTRARS (HOLDINGS) LTD shall complete and send the nominated Lead Auditor the audit documentation pack. Audit plan required to progress the main audit in accordance with this procedure and Auditor appointment form for all members of the audit team.

SN REGISTRARS (HOLDINGS) LTD confirms with the Lead auditor:

* The audit date,
* The scope of the audit,
* The audit standard,
* The audit plan.

SN REGISTRARS (HOLDINGS) LTD then contact the Client and confirm:

* The presence and justification of observers
* The audit date
* The audit plan
* The team members
* The need for appropriate guides and a room for the audit team to work from.

**6.5.1** Recertification audit findings shall be documented and communicated to the client. For any major nonconformity, SN Registrars shall define time limits for correction and corrective actions. These actions shall be implemented and verified prior to the expiration of certification.

On completion of the recertification audit visit the report and documentation shall be processed in accordance with the eCMS and this procedure. When recertification activities are successfully completed prior to the expiry date of the existing certification, the expiry date of the new certification can be based on the expiry date of the existing certification. The issue date on a new certificate shall be on or after the recertification decision.

If SN Registrars has not completed the recertification audit or SN Registrars is unable to verify the implementation of corrections and corrective actions for any major nonconformity prior to the expiry date of the certification, then recertification shall not be recommended and the validity of the certification shall not be extended. The client shall be informed and the consequences shall be explained.

Following expiration of certification, SN Registrars can restore certification within 6 months provided that the outstanding recertification activities are completed, otherwise at least a stage 2 shall be conducted. The effective date on the certificate shall be on or after the recertification decision and the expiry date shall be based on prior certification cycle.

3-year surveillance audit programme is reviewed and updated. The first three-year certification cycle begins with the certification decision. Subsequent cycles begin with the recertification decision.

# 7 Close-out NONCONFORMITYs

All NONCONFORMITYs are monitored in the eCMS.

If Root cause and proposed corrective actions with time frames are not returned entered into the eCMS within the nominated time scale, SN REGISTRARS (HOLDINGS) LTD shall contact the Client to request action. If, despite repeated requests, the Client fails to respond the mater shall be advised to SN REGISTRARS (HOLDINGS) LTD who will act in accordance with Procedure No. 24.

When Root cause, proposed corrective actions with time frames are entered in the eCMS by a Client, SN REGISTRARS (HOLDINGS) LTD shall ensure the eCMS is updated and completed.

on completion of the audit the eCMS report and documentation shall be processed in accordance with this procedure.

# 8 Review & Processing of Audit Reports

the Lead Auditor shall submit the audit report via the eCMS ensuring that non-conformities are uploaded to the system and visit status changed either “ready for review” if no NCRs or “NCR responses not year received” if waiting for client’s response for findings. The report shall be electronically signed by the Lead Auditor.

Auditors send details of audit expense claims, invoice (if applicable) to

SN REGISTRARS (HOLDINGS) LTD within seven working days of completing the audit.

SN REGISTRARS (HOLDINGS) LTD offices shall ensure that the audit report and documentation is reviewed by a competent person in accordance with (procedure 26).

Each SN REGISTRARS (HOLDINGS) LTD office shall ensure that certification file is ‘Technically Reviewed’ for compliance to SN REGISTRARS (HOLDINGS) LTD procedures prior to requesting decision maker’s review. The decision maker signs the visit off by adding their name, date and reason for certification decision in the eCMS. The certificate valid date is 3 years after the approval/decision date.

Management staff responsible for technical matters such as: Auditor approval, Auditor appointment and Audit file technical review shall have appropriate levels of knowledge and experience in the areas of responsibility and to meet the requirements of the SN REGISTRARS (HOLDINGS) LTD QMS and ISO 17021.

Should they not have the academic skills for the above but can demonstrate adequate experience in the technical areas required for their job description the final decision will be made by referral to SN REGISTRARS (HOLDINGS) LTD.

The review shall determine that the audit report and documentation technically meets the general good audit practices, evaluates the client’s processes and takes into account the following:

(a) The recommendations of the Lead Auditor must be based on documented and verifiable facts.

(b) for main and close-out audits a certificate cannot be recommended until all outstanding major NONCONFORMITYs have been closed out.

(c) For surveillance audits evidence must demonstrate that continued certification is justified on the basis of continued compliance of the quality management system with the relevant standard.

(d) Consistency of presentation.

(e) All the relevant items regarding management system have been adequately addressed.

Unsatisfactory reports shall be returned to the Lead Auditor for correction and re-submission.

Where appropriate SN REGISTRARS (HOLDINGS) LTD shall implement Issue and Withdrawal of Certification in accordance with Procedure No. 24.

8.1 Managing agents shall submit certificates to the SN REGISTRARS (HOLDINGS) LTD office for approval if the approved competent person does not have the particular scope approval (procedure 26 refers).

# 9 Certificates

Certificates are issued containing the approval and scope of client’s operations.

This single certificate may be accompanied by an Appendix to the certificate, which will contain extra information that can’t be put on the certificate of approval:

* Extra client’s site addresses.
* Scopes that are part of the client’s operation but are not a UKAS approved scope for SN REGISTRARS (HOLDINGS) LTD Certification.

Non Accredited certificates shall be reviewed in the same way as accredited certificates but issued without the UKAS crown and tick logo.

# 10 Quality Records

For system and surveillance audit the Lead Auditor shall complete the eCMS records held on the Client's file. Records shall be kept for the duration of the current cycle plus one full certification cycle.

|  |  |  |  |
| --- | --- | --- | --- |
| **Quality Record Number** | **Quality Record Title:** | **Type of File** | **Retention Time** |
| P 16/01 | Not in use |  |  |
| P 16/02 | Audit team appointment Form | Client | 6 Years |
| P16/03 | Audit Letter to Client | Client | 6 years |
| eCMS | SN REGISTRARS (HOLDINGS) LTD overseas certificates review. | Operations | On going |
| FMP16/7  FMP16/11  FMP16/15  FMP15/19  FMP25/9 | 3-year surveillance programme | Operations | 6 years |