1.0 Purpose

The purpose of this procedure is to describe the roles, responsibilities and processes in a certification body **according to ISO 17021** involved in the certification of management systems (MS).

The certification process consists of the phases:

a) Contract review and offer preparation,
b) Audit preparation,
c) Performance of audit stage 1,
d) Performance of audit stage 2,
e) Issue of the certificate, and
f) Surveillance of the certified management system.

The procedure is repeated with each recertification, with the exception of the audit stage 1, which is replaced in the recertification by the confirmation of the calculation of the audit effort /audit program. Recertification audit activities may need to have an audit stage 1 in situations where there have been significant changes to the management system, the client, or the context in which the management system is operating (e.g. changes in legislation).

2.0 Scope

This procedure applies to AGA Dubai and its external auditors.

3.0 Procedure

3.1 Certification Process for Marketing Office

3.1.1 AGA Dubai Office based on its marketing efforts does generate the Enquiries and Submit Questionnaire Form to AGA Dubai. AGA office does prepare Quotations based on the following information provided:

a) Desired scope of the certification;

b) General features of their organization, including the name and address (es) of its physical location(s), significant aspects of its process and operations, and any relevant legal obligations;

c) General information, relevant for the field of certification applied for, concerning the their organization, such as its activities, human and technical resources, functions and relationship in a larger corporation, if any;

d) Information concerning all outsourced processes used by the organization that will affect conformity to requirements;

e) The standards or other requirements for which they are seeking certification;

f) Information concerning the use of consultancy relating to the management system.

3.1.2 The Marketing office Role is only submitting the quotation to client and get it accepted. Once proposal is accepted and Agreement is signed, the acceptance will be acknowledged by AGA Dubai Office. And then onwards AGA Dubai will follow below procedure for certification.

3.2 Stage 1 Audit

3.2.1 A Stage 1 audit is performed for all new clients and will include the following:

a) Auditing of the client's management system documentation;
b) Evaluation of the client's location and site-specific conditions and discussions with the client's personnel to determine the preparedness for the Stage 2 audit;
c) Review of 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) Collecting necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory aspects and compliance (e.g. quality, environmental, legal aspects of the client's operation, associated risks, etc.);
e) Reviewing the allocation of resources for stage 2 audits and agree with the client on the details of the stage 2 audit;
f) Gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects to provide a focus for planning the stage 2 audit;
g) Evaluation to determine 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.

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

3.2.3 Upon completion of the Stage 1 audit a report will be generated and given to the client documenting the audit findings including identification of any areas of concern that could be classified as nonconformity during the stage 2 audit.

3.2.4 If the outcome of the Stage 1 audit is satisfactory, albeit with minor points raised, the Auditor will agree a date for the Stage 2 audit to commence.

3.2.5 Where the outcome is not satisfactory (major points raised) and the Auditor does not believe the client is ready to proceed to the Stage 2 audit, the Stage 2 audit will not be scheduled until the client has had sufficient time to resolve the points rose during the Stage 1 audit.

Stage-01 Audit : The part of stage 1 can be document review.

Opening Meeting:
The audit team (one member or multi member team) visits the audit site as per mutually agreed audit plan. The audit team leader introduces him/her and the audit team members. Client's introduction is received and after confirming address and scope of this audit, brief explanation of the purpose of the stage-1 audit, and its methodology is provided by the audit team. The audit team assures the client about maintaining full confidentiality and informs about audit team's legally enforceable contract & declaration of confidentiality. Signature of the participants from both the sides is taken.

Closing Meeting: During the closing meeting the client is thanked about their transparency and hospitality. Audit team's conclusion about recommendation / no recommendation regarding approval for stage-2 final audit is communicated to the Client. After audit closure pending non conformities / inadequacies are finalized, documented and the client's representative is asked to acknowledge it. The client is further asked to inform the AGA after closing the NC, in order to plan for Stage-2 certification audit. Signature of the participants is taken in the audit attendance sheet in Form Attendance Sheet.

3.3 Stage 2 Audit

3.3.1 A Stage 2 audit is conducted to evaluate the implementation and effectiveness of the clients' management system and will include 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 and performance as regards legal compliance;
d) Operational control of the client's processes;
e) Internal auditing and management review;
f) Management responsibility for the client's policies;
g) Links between the normative requirements, policy, performance objectives and targets (Consistent with the expectations in the applicable management system standard or other normative document), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.

Communication with client:

The client is informed about the stage-2 audit team at least 3-4 days before audit date to enable him/ her to submit assent or dissent.

Audit plan in is prepared by the Technical Manager with the help of stage-2 audit team leader as per inputs received from the Stage I audit team leader. Availability of the Stage-2 auditors is confirmed, and the audit plan is submitted to the Client organization for approval of timings and to ensure availability of required officers.

For multi-site audit, sampling plan is developed as per each client's individual situation and accordingly audit is planned. After receipt of acceptance of the audit plan from the client, the stage II audit conducted. Stage-2 audit is assigned to the auditors/ technical experts, only after they submit a declaration of confidentiality and no conflict of interest to the AGA office.

In case during stage-1 audit gross deficiency in documentation is found and audit objective is unattainable, the audit team leader should advise to the client to prepare all the documents and re-invite the audit team for stage-1 audit and inform to AGA office. If the audit team leader feels that the client is not co-operating with the audit the Team Leader should warn the client's representative about the termination of the audit, if even after this the client does not co-operate the team leader should talk with organizations head and warn him/her that if the client does not co-operate the audit will be abandoned. Even after this the client does not co-operate the audit team leader should abandon the audit and inform the AGA office.

Audit Sample-

During Stage-2 audit the audit team must pick appropriate samples to gather audit evidences regarding each product, services, aspects or activities, described in the scope of the MS. The audit team should gather information about the various aspects described in the scope and should evaluate whether this conforms to the Related MS audit standards and clients MS documentation, or not.

Audit Information-

Audit Information is gathered by observation of the processes and activities by interviewing personnel involved in activities described in the scope and review of related documents and records. In addition to these methods the audit team may investigate as per audit scope related information gathered from external sources.

After verification objective Evidences of conformity and non-conformity should be recorded in audit note/rough sheets. The audit team should be confident of defending audit evidence if challenged.

Communication within the Audit Team-

During the audit process the audit team leader and the audit team members should communicate with each other to assess the audit progress. They should make each other aware of existing audit leads. The audit team leader should deviate from the audit plan and reassign work to the audit team members, in accordance with the new information gathered in course of audit. However, the audit team should always remain within the scope of the audit.

Updating the Client-

The audit team should inform the client about minor non-conformities which may be easily eliminated before the end of the audit.

In course of the audit if the audit team feels that available audit evidence show that the audit objectives are unattainable due to deficiency in the MS or due to safety risk to the audit team, the audit team leader should inform the client tactfully and should terminate the audit and inform AGA office.

Audit non-conformities are classified as major non-conformity and minor non-conformity

Major Non-Conformance

Major NC is a non-compliance of a serious nature that may have a significant and direct adverse impact on the quality of the product / services provided by the client. Multiple minor non-compliance may also be flagged as major Non conformity, because this shows a lack of knowledge or lack of commitment. Major non conformities must be responded to, corrected and formally closed-out, preferably within 90 days. These are re-verified by the auditors, mostly by revisiting the audit site. Only after satisfactory closure of major non conformities the certification and registration can proceed. Major non-conformity related to legal non-compliance may be closed by perusal of documentary evidence submitted to the AGA without any re-visit at the audit site.

Minor Non-Conformance

Minor NC is a non-compliance of less serious nature that does not cause significant adverse impact over the goods or services provided by the client. These Minor non conformities are closed-out by the auditors by reviewing evidences of corrective action, which the client must submit to the AGA office within the agreed time, preferably within 30 days. Some minor non-conformities where corrective action may be initiated within 30 days but full closure can be verified only after months of implementation-are verified during subsequent surveillance audit.

Observation is an isolated non compliance that does not show collapse of MS process. It is not mandatory to submit corrective action plan or corrective action evidence. However, observations should be treated as potential non conformities, which should be closed in order to stop its conversion into actual non conformities.

Opportunity for Improvement (OFI) is not a non-compliance. These are areas where scope of further improvement is available. These are recommendation and value addition by the audit team. Compliance is not mandatory.

No conformities are documented and classified and the client's representative is asked to acknowledge it. During the closing meeting the client is thanked about their transparency and hospitality. Positive and negative issues are shared and the Client is asked to submit corrective action plans against each individual non conformities recorded in form NCR Report within one week along with the NC Closure Format.

As per audit findings, the audit team leader declares the audit result/ conclusion/ recommendation regarding grant, refusal, hold up, suspension, scope extension, scope reduction, continuation or withdrawal of the certificate.

The client is asked to close minor NC within one month, and major NC within 3 months. Mode of verification of effectiveness of the corrective action is also explained and documented by the audit team leader, which varies depending upon the nature of the non-conformities. Some non-conformities corrective action may be verified by submission of documentary evidence of corrective action.

In case of some major non conformity and in case of multiple minor non conformities follow up audit is declared to verify corrective action at the audit site.

Certificate of conformity is not issued unless all non-conformities are closed by AGA auditors.

However, Corrective action verification of some minor non conformities where evidence of initiating corrective action is submitted within one month, but due to nature of non-conformity the actual closure requires many months (not affecting product conformity and/ or customer satisfaction, not amounting to collapse of key element of MS) may be deferred up to next surveillance audit, and in this case the client may be recommended for grant of certification, without verifying closure of such minor NC.

Summary of non-conformities, observations for improvement and decision about recommendation/non recommendation is communicated to the Client organization by the Audit team leader, during the Closing meeting. Audit summary report is also submitted in hard and soft copy to the client within two weeks.

During *closing meeting brief narration of audit findings is done. It is explained that the audit was conducted on sampling basis. Type of non-conformities detected and time frame and method of submitting corrective action plan and corrective action evidence for verifying Closure of non-conformities and its time frame is also explained. Information about method of lodging complaints and appeal and its handling is also explained. Consequences of closure or non-closure of non-conformities and its impact on certification decision is also explained to the client. Post audit activities of the AGA like, verification of corrective action plan and corrective actions (where required), preparation of audit report and its subsequent review by the technical committee/ decision makers is also explained. If the client is recommended for certification, the process of surveillance, validity of certificate and recertification process is also explained. The client is informed that a summary of audit report would be submitted to the client along with documented audit result.*

For OHSMS Audits:
The organization representative shall be requested to invite the management legally responsible for occupational health and safety, personnel responsible for monitoring employees' health and the employees' representative(s) with responsibility for occupational health and safety to attend the closing meeting. Justification in case of absence shall be recorded.

Difference Between Stage-01 and Stage-02 Audit not more than 60 Days.

3.4 Post Audit Activities

3.4.1 Upon completion of the Stage 2 audit, the Audit Team will analyse and review all information and audit evidence gathered during the Stage 1 and Stage 2 audits and agrees on audit findings and conclusions.

3.4.2 A report will be generated and given to the client.

3.4.2.1 Where no concerns (discrepancies or non-compliances) have been raised, certification will be recommended by the Lead Auditor.

3.4.2.2 Where there are minor concerns (discrepancies) raised, the client will need to close out the concerns prior to certification being recommended.

3.4.2.3 Major concerns (non-compliances) raised also need to be closed out by the client, however a limited re-audit of the client may be required to effectively close out the major concerns prior to certification being recommended.

3.4.3 Once certification has been recommended, Report will be submitted to Further Review of Decision Maker and after review of Report, if Decision Maker accepted the Report, Certificate issued.

3.4.4 If it's not accepted, reviewer will keep report on hold and may ask auditor for Justification on particular area of audit, if justification accepted, can be proceed further, if not Certificate cannot be proceed, This may require to Re-audit client or reject the certification.

3.4.5 The Decision Maker/ report reviewer should make the decision for granting or refusing Certification (upon Completion of certification Audit), expanding or reducing scope of certification, suspending or restoring scope of certification (upon Completion of certification/Surveillance Audit), Withdrawing or renewing certification (Upon Completion of Surveillance/Recertification Audit).

3.4.6 After issuance of certificate and the client will be placed on an agreed surveillance regime. For the smaller company, this may mean a single one-day visit per annum. However, for the larger client and depending upon the standard registered, the surveillance man-day requirements can be more onerous - see notes below.

3.4.7 At each surveillance visit, a random sample of the client's system will be audited, but the approach will be similar to that of the formal on-site audit described above as a Stage 2 audit.

3.4.8 As such, a written report will be issued at the close of each surveillance visit and providing no major noncompliance points are raised, continued certification will be maintained.

3.4.9 The initial certificate of certification is valid for a three-year period, providing the client complies with the Certification Regulations, and the surveillance visits scheduled during the three-year period are satisfactory.

3.4.10 Prior to the end of the three-year certification period, a triennial review of all previous visit reports is conducted and then a complete reassessment audit is performed to ensure that all is in order for a new certificate, valid for a further three-year period, to be issued. The recertification audit may need to include a Stage 1 audit in situations where there have been significant changes to the management system, the client or the context in which the management system is operating (e.g. changes in legislation). The process then repeats as described above.

Notes

- As stated previously, the process described above is in essence the same for all certifiable schemes offered. However, some schemes have slight variations.
- During its validity period, Certification may be suspended (not exceeding 6 months) or the scope of certification reduced by order of the designated authority in line with the policy on this aspect, if the conditions so warrant, such as the following
  1. Organization does not agree or allow to get surveillance audit /recertification audit conducted within due date at the prescribed frequency.
  2. Financial issues, such as non-payment of dues.
  3. As a result of special visit, it is observed that correction or corrective actions taken by the client against findings/complaints are not appropriate. As a result, there is serious or persisting failure in maintaining Management System.
  4. Failure to meet certification requirements including the requirement to maintain effectiveness of the certified management system
  5. Client (certified organization) requests itself, provided suspension sought is for a limited period (say not exceeding six months) for any reason, such as strike at work of operation, temporary lock out, financial crises, major changes being taken up in the system during which they may not be able to comply with the system.
  6. As a result of investigation of complaint, where the findings so warrant.

4.0 Recertification

4.1 Reassessment is a requirement of ISO17021-1:2015 and is intended to verify overall continuing effectiveness of the organization's applicable management system in its totality. The reassessment provides for a review of the past performance of the quality management system over the period of previous certification, including examination of the

documents/records relating to the internal audits, management review and effectiveness of corrective and preventive actions, etc.

The process of recertification would include a reassessment of the organization's documented quality management system including a review of the Management System, where necessary, to be conducted before the expiry of three years term of validity. The recertification audits planned and conducted to evaluate the continued fulfillment of all of the requirements of the relevant management system standard or other normative document.

Reassessment is normally carried out at the end of three-year cycle within one year from the last day of the last surveillance audit. However, in the case of 9 month/Six-month frequency the reassessment audit can be done at agreed interval but certainly before expiry of the certificate.

The process of Re-certification is planned by the competent application reviewer, in consultation with the Technical Manager.

Notice is sent to the client, at least two months before the expiry of the certificate validity. If the client agrees for the recertification, updated status is captured in fresh application form, Proposal is sent and application review is re done, and new Agreement is signed.

Information about any substantial change in management, and process and IMS scope is gathered, and if substantial change is reported, stage-1 audit is planned to assess suitability of the documentation with current process status of the client.

4.2 **Objective of the recertification audit**

- ✓ To assess the extent of the effectiveness of the management system in the light of internal and external changes with reference to the scope of the IMS certification.
- ✓ To assess whether the operation of the certified management system contributes to the achievement of the organization's policy and objectives.
- ✓ To verify that the client is following the conditions of certification.
- ✓ Demonstrated commitment to maintain the effectiveness of the system.
- ✓ This reassessment activity can be divided under following headings covering the points listed below.
- ✓ Summary of Previous Audit Reports.
- ✓ Whether all areas/ processes/ clauses have been audited at least once in the last three-year cycle.
- ✓ Any concentration of non-conformities against particular clauses/areas and effectiveness of corrective actions taken on nonconformities identified by AGA shall be closed as earlier.
- ✓ Quality Objectives and Continual Improvement.

Whether the operation of the certified management system contributes to the achievement of the organization's policy and objectives.

5.0 **Surveillance Audit**

Surveillance audits are on-site audits, but are not necessarily full system audits. Surveillance audits planned together with the other surveillance activities so that the certification body can maintain confidence that the certified management system continues to fulfill requirements between recertification audits. The surveillance audits conducted at least once a year and the date of the first surveillance audit following initial certification shall not be more than 12 months from the last day of the stage 2 audit.

The Assigned team leader is responsible for conducting and managing the assessment along with other team member, if any. The Team Leader shall be of Auditor status as a minimum. As far as possible, same team should be sent for surveillance audit for the certification cycle. The team leader also ensures that any Technical Expert / Specialist are not allowed to function independently and are always accompanied by Auditor/ Lead Auditor.

The objective of surveillance audit is to:

- ✓ Ensure that the client's management system which was basis of grant of certificate has been maintained on continuous basis.
- ✓ Verify and ensure that any changes to management system which might have taken place since last audit meet the requirement of the standard/ specification and implemented effectively
- ✓ Ensure on-site audits assessing the certified client's management system's fulfillment of specified requirements with respect to the standard to which the certification is granted.
- ✓ Ensure that the management system continues to be appropriate to the product/ process/ service offered by client, with the capability of managing and improving performance.
- ✓ Assess continual improvement in client's management systems

The team leader shall review the client file, specially the last audit report to make note of any issues to be followed up, including the non-conformities and corrective action plan. Audit plan shall be sent to clients in advance so that they can seek any changes with respect to timing etc., if found inconvenient due to administrative reasons. Audit should be conducted (at least annually and it shall be ensured that the date of first surveillance audit shall not be more than 12 months from the last day of stage 2 audit.) as per Surveillance audit plan given in the last audit report but if there is any change due to any justified reasons, the same should be recorded in auditor notes and surveillance audit plan shall be updated in the report. During opening and closing meeting, the attendance record sheet is circulated for recording name and designation of the client representative present. Either each person can record their name & designation or one person can do so for all present. During each surveillance audit, client's management systems shall be audited in adequate depth to ensure continued effectiveness of implemented system. All areas shall be audited at least once over a period of the certification cycle of three years however mandatory areas shall be audited every time. Following parameters are verified during each surveillance audit.

- ✓ Additionally, client's statements with respect to its operations (e.g. promotional material, website). Also reviewed during each surveillance audit.
- ✓ enquiries from the certification body to the certified client on aspects of certification,
- ✓ requests to the client to provide documents and records (on paper or electronic media),
- ✓ other means of monitoring the certified client's performance.
- ✓ Internal audits and management review.
- ✓ A review of actions taken on nonconformities identified during the previous audit
- ✓ Actions taken on customer complaints.
- ✓ Effectiveness of the management system with regard to achieving the objectives
- ✓ Progress of planned activities aimed at continual improvement.
- ✓ Continuing operational control.
- ✓ Review of any changes and use of CB marks.

The corrective action taken on non-conformities identified during last audit should be verified for its effectiveness. If the corrective action taken is not satisfactory/ non-taken, the severity of the minor NC shall be re-issued escalated to Major and client shall be advised accordingly. In such a case, further action would be taken. Non-conformity reporting, report preparation, report distribution, requirement of CAP (in case NC is raised) shall be similar to certification audit procedure. In case a major NC is identified, the team leader shall review to look for the possibility whether the corrective action taken can be verified off site (i.e., on-site verification is not required). In such case the suitable recommendation shall be made in the report.

Description of Complete Certification Process:

1. **Receiving of Application**
2. **Application Review**

3. **Audit Programme**
4. **Proposal**
5. **Agreement {General Terms and conditions}**
6. **Stage-01 Plan**
7. **Stage-01 Report**
8. **Closure of NC**
9. **Stage-02 Plan**
10. **Stage-02 Report and Attendance**
11. **Closure of NC**
12. **Audit Report Review**
13. **Customer Satisfaction**
14. **1st Surveillance, 2nd Surveillance and Re-Certification Audit.**