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| **Accorp MANUAL FOR CERTIFICATION SCHEMES**  Accorp Policy Manual  **As per ISO 17021-1:2015 Standard** | | | | | | | | | | | | | | |
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| **Amd. No.** | | | | **Section** | **Revision** | | | **Page No.** | **Date of Amd.** | | | **Brief description of change** | | |
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| **Title: Terms and Definitions** | | | | | | | | | | | | **Section: 2.1** | | |
| **Audit-** Systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which audit criteria are fulfilled.  **Audit Criteria-** Set of policies, procedure or requirements used as a reference  **Audit Evidence:** Records, statements of fact or other information, which are relevant to the audit criteria and verifiable.    **Audit Findings:** Result of the evaluation of the collected audit evidence against audit criteria.  **Audit Conclusion-** Outcome of an audit, providing by audit team after consideration of the audit objectives and all audit findings.  **Audit Client-** Organization or person requesting an audit.  **Auditee-** Organization being audited  **Auditor-** Person with the competence to conduct an audit  **Audit Team-**One or more auditors conducted an audit, supported by technical experts, if required.  **Audit Programme and Plan-** Set of one or more audits planned for a specific time frame and directed toward a specific purpose and Description of the onsite activities and arrangements for an audit  **Audit Scope-** Extent and boundaries of an audit.  **Certification-** The assessment that the client has a documented management system in place, the system in use, and the system conforms to the specific standard / specification under which it is audited**.**  **Certification Cancellation-** The permanent withdrawal of certification status. Certification documents are withdraw and the client is consisted to have non-certified status  **Client-** The company or organization with whom **Accorp** has a contractual agreement to provide certification services  **Competence-** Demonstrated ability to apply knowledge and skills | | | | | | | | | | | | | | |
| **Title: Terms and Definitions** | | | | | | | | | | | | | **Section: 2.1** | |
| **Complaint-** A situation where a customer expresses dissatisfaction with a product or service  **Complainant/ Complainer-** The individual or organization making the complaint    **Conflict of interest-** A situation where a body or person could compromise their objectivity or put into question their independence.    **Corrective Action-** Action taken to correct deficiencies or non-conformities within the management system.  **Document Review-** The process by which auditor systematically reviews the client’s documentation, including the Management System Manual and Procedures, to determine if the client’s documented management system satisfies the requirement of the relevant standard/ specification. The Document Review occurs prior to the certification audit    **Follow-up Audit-** If a major nonconformity is found within the management system, **Accorp** will conduct a follow-up audit to ensure that effective corrective action have been taken within the required time frame    **Impartiality-** Actual and perceived presence of objectivity  **Logo Accorp-** The mark used by Accorp to signify certification of a management system to a given standard/ specification. The certified client may reproduce this logo provided the proper procedures and guidelines are followed.  **Major Non-conformity-** The non-addressing of requirement of an appropriate clause of the management system (or) Existence of a non-conformity or a number of minor non-conformity or minor nonconformities when combined together are of such severity that a non-conforming product or service could be released to the customer (or) Persistent breach exiting which could be catastrophic to environment, health of safety  **Management system consultancy-** Participation in designing, implementing or maintaining a management system  **Observation-** The situation which does not indicate non-conformity but if the same condition is allowed to continue may lead to non-conformity.  **Technical Expert-** Person who provides specific knowledge or expertise to the audit team. | | | | | | | | | | | | | | |
| **Title: List of Abbreviations** | | | | | | | | | | | | **Section: 2.2** | | |
| **1** | Accorp | | | | | | Accorp Partners Cert Inc. | | | | | | | |
| **2** | CEO | | | | | | CHEF EXECUTIVE OFFICER | | | | | | | |
| **3** | QM | | | | | | QUALITY MANAGER | | | | | | | |
| **4** | AA | | | | | | ADMINISTRATIVE ASSISTANT | | | | | | | |
| **5** | TL | | | | | | TEAM LEADER | | | | | | | |
| **6** | LA | | | | | | LEAD AUDITOR | | | | | | | |
| **7** | TM | | | | | | TEAM MEMBER | | | | | | | |
| **8** | TE | | | | | | TECHNICAL EXPERT | | | | | | | |
| **9** | CAP | | | | | | CORRECTIVE ACTION PLAN | | | | | | | |
| **10** | CAR | | | | | | CORRECTIVE ACTION REPORT | | | | | | | |
| **11** | QMS | | | | | | QUALITY MANAGEMENT SYSTEM | | | | | | | |
| **12** | ISMS | | | | | | INFORMATION SECURITY MANAGEMENT SYSTEM | | | | | | | |
| **13** | ITSM | | | | | | INFORMATION TECHNOLOGY SERVICE MANAGEMENT | | | | | | | |
| **14** | PIMS | | | | | | PRIVACY INFORMATION MANAGEMENT SYSTEM | | | | | | | |
| **15** | Accorp | | | | | | Accorp Partners Cert Inc. | | | | | | | |
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| **Title: References** | **Section: 2.3** |
| **ISO Documents**   1. ISO 9001:2015 – Quality Management System – Requirements 2. ISO 17021-1:2015- Conformity Assessment- Requirements for bodies providing audit and certification of management systems. 3. ISO 17021-3:2013-Competency Requirements for QMS Certification Personnel. 4. ISO 19011:2018 -Guidelines for quality management systems auditing. 5. ISO/IEC 27006:2015- Information technology — Security techniques — Requirements for bodies providing audit and certification of information security management systems 6. ISO/IEC 20000-6:2017 - Information technology — Service management — Part 6: Requirements for bodies providing audit and certification of service management systems   **IAF Documents**   1. **MD 1:2018**: IAF Mandatory Document for the Certification of Multiple Sites Based on Sampling 2. **MD 2:2017**: IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems 3. **MD 5:2015**: IAF Mandatory Document For Duration of ISMS / QMS Audits   **Accorp Documents**   1. Accorp Management System Policy Manual – Refer **Accorp\_F-ML Master List of Documents** 2. Accorp Management System Quality Procedure - Refer **Accorp\_F-ML Master List of Documents** 3. Accorp Work Instructions Refer **Accorp\_F-ML Master List of Documents** 4. Accorp Forms and Formats– Refer **Accorp\_F-ML Master List of Documents** | |
| **Title: Company Profile and Authorization** | **Section: 2.4** |
| **Accorp Partners Cert Inc.** (hereinafter referred to as **Accorp**) is an independent certification body and was established to undertake Audit and Assessment of Quality Management System and by a group of auditors and technocrats having experience, as per requirement of the ISO Standard such as ISO 17021-1:2015 and ISO 27001. The management team is headed by the Company CEO Mrs. Sanyam Goel. The organization is an independent legal entity registered under State of Wyoming.   |  |  | | --- | --- |   The objective of **Accorp** is to offer its certification services in an **impartial manner** conforming to the contractual requirements agreed with the client companies and third party audit for conformity assessment to various management standards and related certification activities. The methodology of assessment and certification is strictly as per the requirements of ISO 19011 and ISO 17021 respectively and is approved by an **independent and impartial Accorp Experts Committee.** Related to enquiries for guidance documents from clients **Accorp** shall only provide standard guidance documents, issued by the IAF, which provide additional or supplementary guidance as to the application of the relevant standard. In exceptional cases, **Accorp** may issue supplementary documentation to highlight important audit requirements. The Scope of certification applied by an organization would be verified on receipt of questionnaire whether it falls within the scope granted to **Accorp** by the accreditation bodies.  **Scope and Applicability of this manual-** This manual is applicable over all third party audit and certification activities (QMS/ISMS/ITSM/PIMS), performed by the **Accorp Partners Cert Inc.** in U.S.A related to industries as scope applied.  The policies and procedures for operating the certification system of **Accorp** are documented in the following Manuals   1. **Accorp Quality Management System** **Policy Manual – Accorp /PM-01**   This contains the company’s policy, organization structure and responsibilities related to the management of the assessment services offered in accordance with Section 9 of this Manual.   1. **Accorp Quality Management System** **Quality Procedure Accorp /QP (brief description in Accorp \_F-ML Master List of Documents)**   It covers procedures that describe in detail the operations within each function in the company, defining responsibility, requirements and records. These are considered to be confidential, and as such shall not be issued to outside agencies, unless specifically authorized in writing by the C.E.O .  This manual is a living document, and hence revisions are made in this Manual in order to ensure its continued conformity with the applicable professional standards. To ensure continual improvement we review this Manual at least once every year. | |

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| **Title: Control and distribution** | | | **Section: 3.0** |
| **Structural of the Policy Manual-** This Policy Manual is structured as detailed in the table of contents. This manual begins with page 1 and the numbering continues throughout the manual. This has been done to facilitate future addition / deletion of pages. The procedures are referred to in **Accorp** Management System **Accorp** /QP-04\_Quality Procedure for control of Documents. The manual may be issued in hard copy or electronic media (read only).  **Responsibility** The CEO approves all the pages of the Policy Manual and **Quality Manager** is responsible for its maintenance and control. The Quality Manager is responsible for maintaining a master list of all documents.  **Distribution** Policy Manuals are distributed to the various sections on a “controlled" basis. Controlled copies are those, which are subject to incorporation of "revisions.” "Controlled" hard copies of the Policy Manual are stamped “**Controlled”** on all pages for maintenance purpose. For soft copies, clear identification of controlled/uncontrolled status is given. The Quality Manager maintains the distribution list of the Policy manual. The Quality Manager issues amendments and revised pages of the Policy manual to holders of controlled copies of the manual; such re–issues are accompanied by a “change note.” The Quality Manager issues "Uncontrolled" copies to the accreditation body, prospective clients and others upon the request of the C.E.O or other concerned employees. The Quality Manager is responsible for completing the Amendment Record Sheet detailing amendments made. The Amendment Record Sheet together with the table of contents is marked as **“Controlled”** in hard copy. The table of contents shall be amended accordingly.  **Numbering and document control for Policy Manual** The number for Policy Manual is given as PM 01, being first tier document. The Policy manual is deals with general information and has Section numbered 1-3 and addresses the management system elements of ISO/IEC 17021-1:2015 and follows the same numbering system as per ISO/IEC 17021-1:2015 .  **Distribution of controlled documents**   |  |  |  |  | | --- | --- | --- | --- | | **Type** | **Controlled Copy No.** | **Distributed to** | **Responsibility** | | Hard Copy | 1 | Master Copy | C.E.O | | 2 | Mrs. Sanyam Goel | C.E.O | | 3 | Ms. Ishan Jindal | Director (Sales and Marketing) | | 4 | Mr. Varun Mittal | Quality Manager | | 5 | Accreditation Body | Quality Manager | | Soft Copy | 1 | Master Copy | C.E.O (Operations) | | 2 | Quality Manager | Quality Manager | | 3 | Member of Impartial Committee | Quality Manager | | | | |
| **Title: Principles for Guidance in Certification** | | | **Section: 4.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **4.0** |  | **Principles and Guidance for Certification** | |
| **4.1** |  | **General** | |
|  | **4.1.1** | These principles are the basis for the subsequent specific performance and descriptive requirements, which have been implemented in the successive section and requirements. These principles have been established as per guidelines provided in the ISO 17021-1:2015 standard. | |
|  | **4.1.2** | The overall aim of certification is to give confidence to all parties that a management system fulfils specified requirements. The value of certification is the degree of public confidence and trust that is established by an impartial and competent assessment by a third party. Potential customers that have an interest in certification include, but are not limited to;   1. the clients of the certification bodies, 2. the customers of the organizations whose management systems are certified, 3. governmental authorities and non-governmental organizations, 4. Consumers and other members of the public.   To secure interest of our actual and potential customers and to promote trust in our Audit and Certification Services we have established a committee (Impartiality Committee) which is constituted by representatives of the above mentioned interest groups. The overall aim of certification is to give confidence to all parties that a management system fulfils specified requirements. The value of certification is the degree of public confidence and trust that is established by an impartial and competent assessment by a third party. Potential customers that have an interest in certification include, but are not limited to;   1. the clients of the certification bodies, 2. the customers of the organizations whose management systems are certified, 3. governmental authorities, 4. non-governmental organizations, and 5. Consumers and other members of the public.   To secure interest of our actual and potential customers and to promote trust in our Audit and Certification Services. We have established a committee (Impartiality Committee) which is constituted by representatives of the above mentioned interest groups.  **Reference:**   * Accorp/QP-01\_Quality Procedure for Impartiality | |

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| **Title: Principles for Guidance in Certification** | | | **Section: 4.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **4.1.3** | Accorp identified following factors which ensure objective and confidence in our assessment and certification proceedings. These are mentioned below-   1. Impartiality, 2. Competence, 3. Responsibility, 4. Openness, 5. Confidentiality and responsiveness to complaint and appeal | |
| **4.2** |  | **Impartiality** | |
|  | **4.2.1** | Being impartial, and being perceived to be impartial, is necessary for Accorp deliver certification that provides confidence in our certification services. Accorp has developed its organizational structure and has established various policies which ensure and demonstrate impartiality. | |
|  | **4.2.2** | It is recognized that the source of revenue for Accorp is its client paying for certification, and that this is a potential threat to impartiality. | |
|  | **4.2.3** | To obtain and maintain confidence, it is essential that Accorp decision be based on objective evidence of conformity (or nonconformity), and that its decision is not influenced by other interests or by other parties. | |
|  | **4.2.4** | Threats to impartiality are identified as follows;   * **Self-interest threats**: threats that arise from a person or **Accorp** acting in their own interest. A concern related to certification, as a threat to impartiality, is financial self-interest. * **Self-review threats**: threats that arise from a person or **Accorp** reviewing the work done by them-selves. * Auditing the management systems of a client to whom the **Accorp** provided management systems consultancy would be a self-review threat. * **Familiarity (or trust) threats:** threats that arise from a person or **Accorp** being too familiar with or trusting of another person instead of seeking audit evidence. * **Intimidation threats**: threats that arise from a person or **Accorp** having a perception of being coerced openly or secretively, such as a threat to be replaced or reported to a supervisor.   To ensure impartiality in our Audit and Certification Services we have established a committee to safeguarding impartiality (Impartiality Committee).  **Reference:**   * Accorp/QP-01\_Quality Procedure for Impartiality | |

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| **Title: Principles for Guidance in Certification** | | | **Section: 4.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **4.3** |  | **Competence:** Competence of the personnel supported by the management system of the **Accorp** is necessary to deliver certification that provides confidence. We use only competent personnel in our assessment and certification process and competency criteria on the basis of Competency criteria/guidelines laid down in international standards. | |
| **4.4** |  | **Responsibility-** Accorp established responsibility towards assessment and certification process is another principle factor upon which credibility of the certification relies. | |
|  | **4.4.1** | The client organization, not the **Accorp**, has the responsibility for conformity with the requirements for certification. | |
|  | **4.4.2** | **Accorp** has the responsibility to assess sufficient objective evidence upon which to base a certification decision. Based on audit conclusions, it makes a decision to grant certification if there is sufficient evidence of conformity, or not to grant certification, if there is not sufficient evidence of conformity. To demonstrate that this responsibility has been sufficiently discharged, Accorp has established documented procedures for carrying out certification process. Evidentiary records are also maintained in form of Audit reports and certification decisions. | |
| **4.5** |  | **Openness** | |
|  | **4.5.1** | **Accorp** provides public access to our website www.accorppartners.com, or disclosure of, appropriate and timely information about its audit process and certification process, and about the certification status (i.e. the granting, extending, maintaining, renewing, suspending, reducing the scope of, or withdrawing of certification) of any organization, in order to gain confidence in the integrity and credibility of certification. Openness is a principle of access to, or disclosure of, appropriate information. | |
|  | **4.5.2** | Accorp has established to gain or maintain confidence in certification, **Accorp** provides appropriate access to, or disclosure of, non–confidential information about the conclusions of specific audits (e.g. audits in response to complaints) to specific interested parties. | |
| **4.6** |  | **Confidentiality**- To gain the privileged access to information that is needed for the **Accorp** to assess conformity to requirements for certification adequately, it is essential that a **Accorp** keep confidential any proprietary information about a client. To ensure this we legally bind our employees and our empaneled associates through confidentiality agreement.  **Reference**-   * Accorp/QP-08\_Quality Procedure for H R Management | |
| **Title: Principles for Guidance in Certification** | | | **Section: 4.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **4.7** |  | **Responsiveness to complaints:** Parties that rely on certification expect to have complaints investigated and, if these are found to be valid, should have confidence that the complaints will be appropriately addressed and that a reasonable effort is made to resolve the complaints. Effective responsiveness to complaints is an important means of protection for the **Accorp**, its clients and other users of certification against errors, omissions or unreasonable behavior. Confidence in certification activities is safeguarded when complaints are processed appropriately. To ensure this we have established complaint handling process which has been described in our website www.accorppartners.com. Accorp has established a documented procedure to address complaints and appeals made by any interested party. While addressing complaints adequate care is taken to achieve appropriate balance between the principles of openness, confidentiality, and responsiveness to complaints.  **Reference-**   * Accorp/QP-06\_Quality Procedure for complaint management | |
| **4.8** |  | **Risk based Approach**  Accorp has identified the risks associated with providing competent, consistent and impartial certification. Risks includes followings, but not limited to, those associated with;   * The objective of audit, * The sampling used in the audit process, * Real and perceived impartiality, * Legal, regulatory and liability issues, * The client organization being audited and its operating environment, * Impact of the audit on the client and its activities, * Health and safety of the audit teams, * Perception of interested parties, * Misleading statements by the certified clients, * Use of certification marks   The above risks are identified and mitigation against each risk is prepared and implemented on day to day basis. | |
| **Title: General Requirement** | | | **Section: 5.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **5.0** |  | **General Requirements** | |
| **5.1** |  | **Legal and Contractual Matters of Accorp** | |
|  | **5.1.1** | **Legal responsibilities:** Accorp Partners Cert Inc. is a Inc company registered under State of Wyoming. All the assessment and Certification services provided by Accorp.  The constitution of the Board of Directors and legal documents defining the entity of Accorp are described in the Memorandum and Articles of Association of Accorp. *The Present Board of Directors is constituted by*   1. *Mr. Sanyam Goel – CEO* 2. *Mr. Varun Mittal – Quality Manager*   Being a Inc. company, any claim arising out of the services provided by the company or by its personnel (Liability arising out of professional conduct in course of company assigned work) are addressed by the company in accordance with the legal provisions of the Govt. of U.S.A. | |
|  | **5.1.2** | **Certification Agreement**  **Accorp Partners Cert Inc.** establishes a legally enforceable agreement for the provision of certification activities to its clients and all the sites covered by the scope of certification (all agencies and offices reporting to **Accorp Partners Cert Inc.** included). Where there are multiple sites of client, the agreement covers all the sites covered by the scope of the certification (Accorp/QP-02\_Quality Procedure for Multi Sites Clients). Presently we are providing all critical services like Application Review, Contracting, Selection and evaluation of certification Personnel, Certification Decision Making Process etc only through our administrative head office situated at 26500 W Agoura Road Suite 207 Calabasas CA 91302, USA, Contract with Clients is subject to judicial court of CA 91302, USA.  **Reference-**   * Accorp\_CF-003-Client Agreement | |
|  | **5.1.3** | **Responsibility for certificate decisions:** Accorp Partners Cert Inc. retains both responsibility and authority for its decisions relating to certification, including the granting, ***refusing***, maintaining of certification, expanding or reducing the scope of certification, ***renewing***  , suspending or ***restoring following suspension***, or withdrawing of certification, as per Accorp Scheme, through CEO., and Certificate Decision maker or technical committee, This Function is never outsourced. | |
| **Title: General Requirement** | | | **Section: 5.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **5.2** |  | **Management of impartiality** | |
|  | **5.2.1** | **Accorp Partners Cert Inc.** Its CEO and staff are fully committed to ensuring that all management system certification activities are impartial. Any relationships between **Accorp Partners Cert Inc.** or individuals employed by **Accorp Partners Cert Inc.** or Sub Contractors to **Accorp Partners Cert Inc.** With other organisations or individuals will be declared, reviewed, documented and risk assessed. *Accorp has made its commitment to impartiality public by making a publicly accessible statement of impartiality (available in our website-* www.accorppartners.com **STATEMENT OF IMPARTIALITY**  Accorp Partners Cert Inc. believes that trust in audit and certification process depends on the impartiality of the persons involved in these processes.  *Accorp has established a system to ensure that individual and organizational conflict of interest is avoided, and Objectivity & complete impartiality is practised in the auditing and certification process. We ensure this by –*   * *Engaging only those professionals in our certification process, who have demonstrated their competence in accordance with applicable professional standards* * *Educating certification personnel about avoiding possible issues that might affect objectivity and impartiality* * *Legally binding our certification personnel to disclose relevant information regarding issues that may lead to possibilities of conflict of interest* * *Establishing impartiality monitoring and enforcement committee to act as ultimate authority enforcing impartiality in our audit & certification process.*   ***Sanyam Goel – CEO***  **Reference-**   1. Accorp/QP-01\_Quality Procedure for Impartiality 2. Accorp\_F-IMP\_01\_Imp Analysis 3. Accorp\_F-029 Index of Personnel record 4. Accorp\_F-018 Conflict of Interest 5. **Accorp Partners Cert Inc.** website [www.Accorppartners.com](http://www.Accorppartners.com) | |
|  | **5.2.2** | **Accorp Partners Cert Inc.** has no relationship (formal or informal) with any other company or organisation which may result in a conflict of interest arising from its certification activities. Accorp has established a documented procedure and ***policy*** to ensure impartiality where apprehension of bias and conflict of interest exists.  **Accorp Partners Cert Inc.**does not offer consultancy to any client or potential client, training other than general training courses such as Internal Audit etc. **Accorp Partners Cert Inc.at least yearly** identifies and analyse possible situations where our impartiality may be impacted adversely due to any conflict of Interest or financial distress. Record of risk analysis is maintained (Record of Assessment of threat of impartiality **Reference** of Risk Analysis Tracker). All relationship (formal or informal) with other organisations or individuals which may result in a conflict of interest arising from its certification activities. | |
| **Title: General Requirement** | | | **Section: 5.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  |  | **Accorp Partners Cert Inc.** conducts a risk assessment at our office ***(Risk Analysis Tracker)***. Should the company propose to enter into any relationship with another company or organisation or enter into any new area of business; that relationship or new area of business will be re assessed to identify any possible factors that may affect impartiality by **Accorp** and the record of risk assessment and action taken thereof, is reviewed by the Impartiality Committee to ensure that impartiality can be demonstrated and the integrity of the Certification process assured. Any conflict of interest arising from existing or past relationships between employees or sub–contractors and **Accorp** clients (including potential clients), is required to be declared. All staff and sub-contractors are made aware of the need to declare any such conflict of interest and sign to acknowledge the obligation (contract of employment and sub–contractors agreement).  Annually the Impartiality Committee will review the activities of the company to ensure that impartiality continues to be demonstrated. *The risk assessment record in form* ***Risk Analysis Tracker Form for Risk Analysis is submitted before the impartiality committee for review and guidance*** (Refer Record of Minutes if Meeting of the impartiality Committee). Where a possible or potential conflict of interest is declared e.g. an Auditor has worked in the past as a consultant or employee of the client, the Auditor will not be asked to undertake an audit at that client nor will he/she be asked to undertake any work concerning that client until a minimum period of time has elapsed (minimum 2 years). Even if the 2 year period has passed the relationship between the company and the individual auditor will be determined and a decision made as to the suitability of that auditor to undertake the work.  Where the conflict of interest is not clear it is still a requirement of the individual to declare that interest, however the Directors will establish the nature of that possible conflict of interest and make a decision based upon the individual circumstance and will refer the matter to the Impartiality Committee if required. | |
|  | **5.2.3** | Accorp have ***a process to identify, analyse, evaluate, treat, monitor, and document the risks related conflict of interest*** arising from provision of certification including any conflict arising from its relationship on an ongoing basis. Where any threats to impartiality is identified, ***Accorp shall document and demonstrate how it eliminates or minimizes such threats and document any residual risk.*** When a relationship poses an unacceptable threat to impartiality, then certification is not being provided as a policy decision.  **References-**   1. **Risk Analysis Tracker** | |
|  | **5.2.4** | As required by ISO 17021 **Accorp Partners Cert Inc.**will not certify another certification body for its ***Quality management system*** certification. | |
|  | **5.2.5** | As required by ISO 17021 **Accorp Partners Cert Inc. and any entity under the organizational control** does not offer or provide management system consultancy. | |
| **Title: General Requirement** | | | **Section: 5.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **5.2.6** | **Accorp Partners Cert Inc.** does not offer to provide Internal Audits (nor has it) to any of its clients and does not provide an Internal Audit service to any company or organisation and shall not certify a management system on which it provided internal audits for a minimum of two years following the completion of the internal audits. | |
|  | **5.2.7** | **Accorp Partners Cert Inc. *has established a policy to not provide QMS, ISMS, ITSM and PIMS consultancy or Internal Audit service. Therefore, no risk to the impartiality of the Certification process is posed****. Further we have no relationship with any consultancy organisation to ensure our impartiality we have decided to not establish any business relationship with any consultancy organisation in future.*  *However, our empanelled auditors may have provided a consultancy service, internal audit services. In such cases the individual will be required to declare any such current or past relationship and will not be allowed to undertake Audits or other work with that client. At the discretion of the* ***C.E.O*** *the individual may be allowed to conduct an Audit or undertake other work with a client when a minimum of 2 years has elapsed since the end of the management system consultancy or other relationship.*  *Any such relationships or conflicts of interest will be recorded within the personnel records of the individual and the responsibility to declare any such conflicts stated in contracts of employment and sub-contractor agreements. We bind our employees and empanelled staff to Maintain Confidentiality and to disclose conflict of interest if any, through legally enforceable agreements of Confidentiality- No Conflict Interest.*  ***(Reference Form No. Accorp\_AUF-004 Conflict of Interest)*** | |
|  | **5.2.8** | As required by ISO 17021, **Accorp Partners Cert Inc.** does not outsource Audits to a Management Consultancy Organisation. Auditors and technical expert/part time worker/empanelled certificate personnel and not outsourced service providers. | |
|  | **5.2.9** | **Accorp Partners Cert Inc.**does not in its marketing, publications; website, correspondence etc. state or imply that certification would be simpler, easier, faster or less expensive if a specified consultancy organisation were used. Should **Accorp Partners Cert Inc.**become aware of any claims stating or implying that certification would be simpler, easier, faster or less expensive if a specified consultant was used it will be referred to the C.E.O for appropriate action which may include instruction to the claimant stop making false claim failing which legal action will be initiated. Rebuttal is also published in our website. ***We have no relationship with any consultancy organisation to ensure our impartiality we have decided to not establish any business relationship with any consultancy organisation in future.*** *(***Reference-** All publicity material and website.) | |
| **Title: General Requirement** | | | **Section: 5.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **5.2.10** | No individual will be used by the Certification Body to take part in any Audit when they have been involved in Management System Consultancy for that client. At the discretion of the C.E.O , ***an individual may be allowed to participate in an Audit, if more than 2 Years has elapsed following the end of the consultancy***-  **Reference-**   1. Accorp\_CF-004 2. Risk Analysis Tracker 3. **List of Auditors with IAF Codes** | |
|  | **5.2.11** | Any threats to its impartiality arising from the actions of other persons, bodies or organisations will be referred to the C.E.O and Impartiality Committee to determine the appropriate actions to be taken. Record of such action shall be maintained as per situation as annexure to our record of risk analysis. | |
|  | **5.2.12** | The Impartiality Committee, Directors and Managers of **Accorp** will ensure that all personnel either internal, external or committees act impartially and shall not allow commercial, financial or other pressures to compromise impartiality. Appropriate action will be taken by the Impartiality Committee or C.E.O, where any such pressures are identified.  **References-**   1. Accorp\_AUF-004 - Appointment/Acceptance for Lead Auditor / Auditor/ Expert 2. Risk Analysis Tracker 3. List of Auditors with IAF Codes | |
|  | **5.2.13** | All personnel both internal and external are required to reveal any situation known to them that may present them or **Accorp** with a conflict of interest. This requirement will be established during the recruitment process and will also be an ongoing requirement of the individuals to declare such conflict of interest. ***Accorp shall record and use this information as input to identifying threats to impartiality raised by the activities of such personnel or by the organizations that employ them, and shall not use such personnel, internal or external, unless they can demonstrate that there is no conflict of interest.***  **Reference-**   1. Risk Analysis Tracker 2. List of Auditors with IAF Codes 3. List of Staff 4. Accorp\_F-IMP\_01\_Imp Analysis | |
| **Title: General Requirement** | | | **Section: 5.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **5.3** |  | **Liability and financing** | |
|  | **5.3.1** | ***We annually conduct risk assessment. This risk assessment is done by the MD and Quality Manager, all factors posing business risk, financial risk and risk to our impartiality is considered. Appropriate action is taken to reduce or manage the risk. To cover our potential liabilities, risk arising from audit and certification activities we have decided to take insurance against business liabilities.***  We have sufficient fund to sustain our operations for more than three months even without doing any certification activities, as such we have safeguarded our organization from any financial pressure that can adversely influence our certification process in order to procure business.  To cover business risk, we have purchased insurance policy related to possible business liabilities arising out of our audit & certification activities.  ***Risk assessment record is submitted to impartiality committee along with required financial record for their review and guidance.***  **Reference-**   1. Insurance policies 2. Accorp\_F-IMP\_01\_Imp Analysis 3. Risk Analysis Tracker | |
|  | **5.3.2** | **Accorp Partners Cert Inc.**produces independently audited accounts which together with the accountants report are examined in detail by Impartiality committee, to both ensure that the finances of the company are on a sound basis and to establish as far as possible that commercial, financial or other pressures do not compromise the company’s impartiality.  **Reference-**   1. Accorp\_F-IMP\_01\_Imp Analysis MoM | |

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| **Title: Structural Requirements** | | | **Section: 6.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **6.0** |  | **Organizational Structure** | |
| **6.1** |  | **Organizational structure and top management** | |
|  | **6.1.1** | **Accorp Partners Cert Inc.**has produced an organisational structure showing duties, responsibilities and authorities of management, staff and all involved in the certification process. Accorp has planned and documented structure of Accorp, as per its functional and regulatory requirements.  **Reference-**   1. Accorp-Doc.-01 Organization chart | |
|  | **6.1.2** | Accorp’s Certification activities shall be structured and managed so as to safeguard impartiality.The following shows the responsibilities for areas of activities and responsibilities that have overall authority to effectively carry out these tasks-   |  |  |  | | --- | --- | --- | | **Area of responsibility** | **Responsibility** | **Overall authority** | | development of policies and establishment of processes and procedures relating to its operations | CEO | Accorp Partners Cert Inc. | | Development and Supervision on implementation of the policies, processes and procedures | C.E.O /Quality Manager | Impartiality Committee | | Ensuring impartiality | Impartiality Committee Chairman | QM | | Supervision of the finances | Director- Finance | C.E.O | | Development of management system certification services and schemes | Quality Manager | C.E.O | | Performance of audits and certification, and responsiveness to complaints | Lead Auditor, Quality Manager | C.E.O | | Decisions on certification | Quality Manager | C.E.O | | Delegation of authority to committees or individuals, as required, to undertake defined activities | C.E.O | C.E.O | | Contractual arrangements | Marketing Manager | C.E.O | | Provision of adequate resources for certification activities | Technical Manager | C.E.O | | |
| **Title: Structural Requirements** | | | **Section: 6.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **6.1.3** | **Accorp Partners Cert Inc.**has established formal rules for the appointment, terms of reference and operation of different certification personnel/ committees that are involved in the certification activities. In principle the C.E.O approves appointment/empanelment of certification personnel after competency evaluation carried out with the help of experts. The impartiality committee (which is the supreme authority for monitoring audit & certificate activities) has been constituted by the Director-Operations . Rules for appointment terms of reference & operation of committee has been define in Quality Procedure for Impartiality.  No certificate will be issued, refused (deferrals), amended, suspended or withdrawn without the decision made by the certification decision maker/decision making committee and signature of the C.E.O.  Reference-   1. Accorp/QP-01- Quality Procedure for Impartiality 2. Accorp/QP-08- Quality Procedure for Human Resource Management | |
|  | **6.1.4** | ***Accorp has established formal rules for the appointment, terms of reference and operation of any committees that are involved in the certification activities. In principle the C.E.O and Quality Manager have the authority and the requirements of ISO 17021 to determine the constitution terms of reference etc. of any committee involved in certification activities.***  ***Ref-***  ***Accorp\_F-IMP\_01\_Imp Analysis*** | |
| **6.2** |  | **Operational Control** | |
|  | **6.2.1** | ***Accorp have a process for the effective control of certification activities delivered by branch offices, partnerships, agents, franchisees, etc., irrespective of legal status, relationship or geographical location. Accorp has already considered the risk that these activities pose to the competence, consistency and impartiality.*** | |
|  | **6.2.2** | ***Accorp consider the appropriate level and method of control of activities undertaken including its processes, technical areas of CABs’ operations, competence of personnel, lines of management control, reporting and remote access to operations including records maintained for the certification purpose***.  The Impartiality Committee is the committee established by **Accorp** to safeguard the impartiality of the company and its certification process, its authority and responsibilities includes:   * To assist in developing the policies relating to impartiality of its certification activities * To advise on matters affecting confidence in certification, including openness and public perception * To counteract any tendency on the part of a ***Accorp*** to allow other considerations to prevent the consistent objective provision. * To conduct a review, at least annually of the impartiality of the audit, certification and decision making process of Accorp. * To take ultimate decision regarding all appeals where the client is not satisfied with the response of C.E.O or Decision Maker   Ref.   1. Accorp-QP-01\_Quality\_Procedure\_for\_Impartiality 2. Accorp-QP-06\_Quality\_Procedure\_for\_Complaint\_management 3. Accorp-QP-07\_Quality\_Procedure\_for\_Management\_of\_appeal | |

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| **Title: Structural Requirements** | | | **Section: 6.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  |  | The composition, terms of reference, duties, authorities, competence of members and responsibilities of the Impartiality committee and Appeals  Committee are fully documented and authorised by the C.E.O of **Accorp Partners Cert Inc.** to ensure that:   1. The committee represents a balance of interest such that no single interest predominates. The composition of the Impartiality Committee is predominately non **Accorp Partners Cert Inc.** employees, with only C.E.O as non–voting members and convener of the committee. 2. The Impartiality Committee will be supplied with all information necessary in order to fulfil its authority and responsibilities and has the authority to ask for any additional information it deems necessary. 3. Should **Accorp Partners Cert Inc.** not to respect the advice of the Impartiality Committee, then it has the right to take independent action (e.g. informing authorities, accreditation bodies etc) whilst respecting its obligation to respect confidentiality.   **Reference-**   * Accorp/QP-01- Quality Procedure for Impartiality * Accorp\_F-IMP\_01\_Imp Analysis   **Accorp Partners Cert Inc.**will make every effort to ensure that the Impartiality Committee represents key interests. Impartiality Committee members will typically be drawn from clients, Clients Customers, industry trade associations, regulatory bodies or other governmental services or representatives of non–governmental organisations, including consumer organisations.  Reference:   * Accorp/QP-01- Quality Procedure for Impartiality * Accorp\_F-IMP\_01\_Imp Analysis | |
| **Title: Resource Requirements** | | | **Section: 7.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **7.0** |  | **Resource Requirements of the Organization** | |
| **7.1** |  | **Competence of personnel** | |
|  | **7.1.1** | **General Considerations:** Accorp Partners Cert Inc.establishes processes and procedures to ensure that personnel (both employees and sub–contractors) have appropriate knowledge ***and skills*** relevant to the types of management systems (QMS/ISMS/ITSM/PIMS) and geographic area (U.S.A) in which it operates. The process and procedure will determine the competence required for each technical area (as defined in IAF/NACE) and for each function in the certification activity. The competence requirements of all Certification Position and support staff have been established by C.E.O with the help of professional experts.  **Reference-**   1. Accorp/QP-08- Quality Procedure for Human Resource Management 2. AUF 06 Competence Evaluation along with Question Answers 3. Competency Requirement for Certification Positions Accorp-QP-10\_Quality\_Procedure\_for\_Competency\_Evaluation\_and\_Performance   The Quality Procedure of Accorp has determine the means for the demonstration of competence in form of –   1. Records of Evaluation of Knowledge by perusal of testimonial   (AUF 02 Audit Log)   1. Records of Evaluation of Knowledge & Skill by interview AUF 06 Competence Evaluation along with Question Answers 2. Record of Witness Audit (to assess audit skills and knowledge of Accorp audit process and documentation) AUF 05 Onsite Assessment for each standard   After evaluation, record of technical areas/codes for which the certification personnel have been approved is also maintained. (**Ref:** List of Auditors with IAF Code). Initial Evaluation records are maintained only for certification personnel. For support staff record of testimonial is preserved but formal evaluation record is not preserved. | |
|  | **7.1.2** | **Determination of Competence Criteria:**  **Accorp Partners Cert Inc.** has documented processes for determining the competence criteria for all support personnel (Management Representative, Quality Manager, Admin Officer, Marketing Officer, and Office Attendant) and certification personnel (Application reviewer, Audit programmer, Auditor, Audit Team Leader, Decision Maker and Technical Expert). | |
| **Title: Resource Requirements** | | | **Section: 7.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  |  | The criteria are determined with regard to the requirements of the management system standard and include required knowledge (product, process and applicable statutory and regulatory requirements) and skill for the job assigned, as per requirement of ISO 17021-1:2015, ISO 27006 and ISO 20000-6, ISO 27006-2 & ISO 17021-3:2013. The competency requirements have been made stringent as per the complexity. For this we have classified as per their complexities (high, medium and low) Refer Accorp-Doc.-02 of Accorp/QP-08 in form Accorp.  At Accorp, we evaluate candidates only for the position of Auditors for high and medium complexity industries. The candidate qualifying for high or medium complexity industry is deemed to qualify for low complexity industry. The competency criteria have been structured to include requirements for application reviewer/decision maker. As such any person who is approved for the role of auditor is also approved for the roles for application review, audit and report review/Certification decision for that industry.  In absence of approved certification personnel for any specific code, the function can be performed by an auditor who is approved for any similar or higher complexity industry, with the help of competent technical expert for that industry.  **Reference -**   * Accorp/QP-08\_Quality Procedure for HR management. * Accorp-QP-10\_Quality\_Procedure\_for\_Competency\_Evaluation\_and\_Performance | |
|  | **7.1.3** | **Evaluation Process:** Accorp has documented processes for initial competence evaluation and on–going performance evaluation competence measurement for all its certification and support personnel. Initial evaluation is done in following steps-   1. Academic and Professional experience is evaluated by perusal of testimonials. AUF 02 Audit Log and AUF 03 Qualification management Card 2. When the candidate is found competent as per criteria, he/she is selected for evaluation by interview. Interview is conducted by the C.E.O /Quality Manager with the help of competent Tech. Expert. Interview is conducted as per Questionnaires prepared with the help of Question bank. Record of interview and result thereof is maintained in the concerned candidate’s personal file in Form for Evaluation of Code related Knowledge and Skill by Interview (as per 17021-3:2013). | |
| **Title: Resource Requirements** | | | **Section: 7.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  |  | 1. Candidates are approved for the functions of Auditors in technical area on the basis of their performance during actual audit in the concerned technical area. This evaluation is done by a competent evaluator Audit Witness Report. In case of auditor’s failure the audit is re-conducted by another set of competent auditors, so that the client’s interest is not hampered. 2. For initial evaluation/selection of Auditors for High Complexity Industry, the candidate is evaluated for basic knowledge of the technical area. On the basis of examination result the candidate is selected for interview. Examination is based on ISO 17021-3:2013.   Ongoing Evaluation is done as per HR Quality Procedure. For certification personnel evaluation timing is based on frequency of their uses. However, each certification personnel are mandatorily evaluated at least once in every 3 Years . If the personnel is not evaluated, he/she is not allowed to perform certification activity. The evaluation is including performance review report/feedback, complaints received and result of witness audit. For support staff evaluation is done 6 monthly  **Reference-**   1. Accorp/QP-08\_Quality Procedure for H R Management 2. Accorp/QP-10\_Quality Procedure for Competency Evaluation and Performance monitoring & appraisal | |
|  | **7.1.4** | **Other Consideration: Accorp** has defined competency requirement for its support staff. We have access to technical expertise (either from within the company or from an external source) to advise on matters relating to relating to different technical areas audit standard (ISO 9001:2015, ISO 27001:2022, ISO 27701:2019 and ISO 20000-1:2018) where our certification personnel do not possess required technical or language knowledge. When required technical knowledge and competency relevant for the certification function is not found, that function is performed with the help of an external Technical expert hired for specific advisory assignments.  Competency requirement for technical expert different technical areas is defined in Accorp-Doc.-02 of Accorp/QP-08. List of technical experts approved for different industries is preserved in List of Auditor with IAF Code.  To upgrade knowledge of our staff, continuously upgraded by the C.E.O /Quality Manager, our auditors and technical experts, and is accessed by our staff for technical knowledge, as and when required. Accorp’s policy to assess its staff and key associates, whether they are fit for the assigned responsibility. This is not to assess their competency but to assess their suitability for the assigned responsibility. The Policy requirements have been detailed in the Accorp/QP-08\_Quality Procedure for H R Management.  **Reference:**   1. Accorp-QP-10\_Quality\_Procedure\_for\_Competency\_Evaluation\_and\_Performance | |
| **Title: Resource Requirements** | | | **Section: 7.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **7.2** |  | **Personnel involved in the certification activities** | |
|  | **7.2.1** | **Accorp Partners Cert Inc.** has regular staff with sufficient competence to manage the type and range of audit programmes and other certification work performed.  **Reference-**   1. List of Accorp Employees | |
|  | **7.2.2** | **Accorp Partners Cert Inc.**also has sufficient auditors, team leader’s employees or sub–contractors to cover all its activities scope of technical areas, the volume of audit work it has and the volume and type of audit work it anticipates.  **Reference-**   1. List of Auditors. | |
|  | **7.2.3** | All **Accorp Partners Cert Inc.**members are made aware of their roles, responsibilities and authority on joining the company and when changing roles. All **Accorp Partners Cert Inc.**members have access to job descriptions, company policies and procedures. | |
|  | **7.2.4** | **Accorp** has developed processes and procedures which define the requirements for selecting, training and authorising auditors and Technical experts. Recruitment will be based on the qualifications and experience of the candidate, as per criteria defined.  Accorp has established a policy to use experienced auditors, who have demonstrated evidence of having carried out audit under some competent evaluator on behalf of any duly accredited CAB. Their testimonials are evaluated to meet our competency criteria, and their updated knowledge and skill is assessed by interview/questionnaire as per requirements of ISO 17021-1, ISO 27006, ISO 27006-2 and ISO 20000-6 and only after assessing their conformity they are approved as auditor or Audit team leader for specified technical areas/ codes where they have demonstrated their competence. Record of interview is also maintained. | |
| **Title: Resource Requirements** | | | **Section: 7.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  |  | For approval of new auditors after perusal of testimonials and interview the candidate is witnessed during actual audit of a high complexity client, by a competent evaluator. The candidate is approved as auditor/ audit team leader only after appropriate recommendation of the evaluator. Auditor who demonstrate evidence of having providing service as audit team leader for specified technical areas by duly accredited CAB shall be engaged as evaluator for that specified technical area/codes. Evaluation is done to ensure their conformity to the requirements of ISO 17021-1:2015 , ISO 17021-3:2013, ISO 27006 and ISO 20000-6 and ISO 19011:2018.  All selected / empanelled staff are provided initial induction/ orientation training about certification policies, procedures, staff responsibilities etc. Training need is identified continuously on the basis of monitoring, evaluation, feedbacks or complaints or appeals. Change in procedures and policies also necessitate training. Record of training needs identified, planned and provided; is maintained.  In principal each auditor will need to have   1. The required background and expertise 2. Passed the relevant training courses for each standard e.g. Lead Auditor ISO 9001:2018, ISO 27001:2022 and ISO 20000-1:2018. 3. Demonstrated (witnessed and assessed) competence as an auditor 4. Demonstrated technical competence   Technical experts shall be used to provide advice at any point in the certification process only after they have successfully demonstrated their competence through presenting testimonials in terms of their academic background, and technical job experience.  They are interviewed by the Director-Operations, only to assess their fitness for the assignment. Accordingly, they are authorised prior to being engaged. Record of academic qualification and work experience and authorization is maintained.  **Reference-**   1. Accorp-QP-08 Quality Procedure for H R 2. Personnel records of auditors (including record of interview, audit logs/ witnessed audit reports) 3. Personnel Record of technical expert. | |

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| **Title: Resource Requirements** | | | **Section: 7.0** |
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|  | **7.2.5** | **Accorp Partners Cert Inc.**has a process and procedure for achieving and demonstrating effective auditing, including the use of auditors and audit team leaders possessing generic auditing skills and knowledge, as well as skills and knowledge appropriate for auditing in specific technical areas as defined in procedure for Application Review and Audit Programming.  **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Record of Client Audit File | |
|  | **7.2.6** | Accorp ensure that all certification personnel possess knowledge of Audit process, certification requirement and Quality Procedures relevant to their role. This is done by providing to them access to the relevant documents and initial training before assignments.  All selected / empanelled staffs are provided initial induction/ orientation training about certification policies, procedures, staff responsibilities etc. Training need is identified continuously on the basis of monitoring, evaluation, feedbacks or complaints or appeals. Change in procedures and policies also necessitate training. Record of training needs identified, planned and provided; is maintained. Auditors are specially provided knowledge and instruction about opening and closing meeting, audit methodology and audit reporting formats.  **Reference-**   1. Auditors Guidelines 2. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 3. Client Audit File | |
|  | **7.2.7** | The application reviewer identifies competent auditors and technical experts where required as per technical area/ codes of the client. The auditors and technical experts are picked from the list of approved auditors and technical expert’s being maintained by the Accorp.  Reference 🡪   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. List of Auditors 3. Client Audit File | |

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|  | **7.2.8** | The authorized individuals (or group) take the decisions on, granting, ***refusing***, maintaining, renewing, suspending, ***restoring***, or withdrawing certification, or on ***expanding*** or ***reducing*** the scope of certification, shall understand the applicable standard and certification requirements, of the proposed member will be reviewed and the individual will be required to demonstrate to the Quality Manager that he / she is competent to evaluate the audit process and recommendations of the audit team. The approved member will receive training in respect of the certification process. Where changes to standards, processes etc are made the competence and knowledge of the Committee members will be assessed and an appropriate method of training undertaken.  Reference-   1. Accorp-QP-16\_Quality\_Procedure\_for\_Conducting\_Client\_audit | |
|  | **7.2.9** | Accorp ensures the satisfactory performance and competence of those involved in the audit and certification activities. Documented procedures and criteria are maintained and implemented for monitoring and measurement of the performance of all persons involved, based on the frequency of their usage and the level of risk linked to their activities. In particular, Accorpreviews ***and records*** the competence of its personnel in the light of their performance in order to identify training needs.  The approved member is provided access to relevant procedures and guidelines, and appropriate training in respect of the certification process. In case of changes to standards, processes etc are made the competence and knowledge of the Committee members will be assessed and an appropriate method of training undertaken.  Reference 🡪   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp-QP-16 Quality Procedure for conducting Client’s audit 3. Accorp-QP-10\_Quality\_Procedure\_for\_Competency\_Evaluation\_and\_Performance 4. List of Auditors | |
|  | **7.2.10** | Monitoring procedure is documented for auditors, ***considering each type of management system to which the auditor is deemed competent,*** having reference of combination of on–site observation, review of audit reports and feedback from clients or from the market and is defined in documented requirements. This monitoring is designed in such a way as to minimize disturbance to the normal processes of certification, especially from the client's viewpoint.  **Reference-**   1. Accorp-QP-10 Quality Procedure for Competency Evaluation and Performance monitoring & appraisal | |
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|  | **7.2.11** | Monitoring procedure is documented for auditors, having reference of combination of on–site audit observation, review of audit reports and feedback from clients or from the market and is defined in documented requirements. Accorp periodically observe **(At-least once in a year)** the performance of each auditor on–site. The frequency of on–site ***evaluations*** is based on need determined. **Accorp Partners Cert Inc.** observes the performance of each auditor on–site. All ***certification personnel are evaluated at least once in 3 Years for each role that they have performed***, irrespective of number of services they have provided to the CAB. In certain cases audit can be witnessed even earlier based on need determined from all monitoring information available.  This monitoring is designed in such a way as to minimize disturbance to the normal processes of certification, especially from the client's viewpoint.   * Through an appropriate member of management witnessing audit activities (frequency of witnessing will depend on the level of risk linked to their activities). * Through feedback from customers regarding the performance of individuals * Through the individuals appraisal process * By examining complaints and internal non conformances * Through the internal checking and quality assurance measures * Through feedback from the Certification decision makers regarding the performance of individuals (gained from examination of reports)   **Reference-**   1. Accorp-QP-10 Quality Procedure for Competency Evaluation and Performance monitoring & appraisal 2. Record of performance evaluation. 3. Accorp-QP-08 Quality Procedure for H R | |
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| **7.3** |  | **Use of individual external auditors and external technical experts**  External Auditors and Technical Experts (referred to as sub–contractors) have a written signed agreement with **Accorp Partners Cert Inc.** that commits them to comply with applicable policies and procedures. The agreement also addresses aspects relating to confidentiality and ***impartiality*** and to independence from commercial or other interests, and requires notification of any existing or prior association with any organisation they may be assigned to audit. A decision on whether to allocate an individual to an audit where an association exists (or has existed) is made on the information supplied.  **Reference-**   1. Accorp\_CF-005 Conflict of Interest 2. List of Auditors 3. Auditor and Technical Expert Agreement | |
| **7.4** |  | **Personnel records**  **Accorp Partners Cert Inc.**maintains up–to–date personnel records both in paper and computer record format for all staff and sub–contractors that complies with regulations concerning retention of records and includes amongst other items, relevant qualifications, training, experience, affiliations, professional status, competence relevant consultancy services that may have been provided.  **Reference-**   1. Index of Personnel record | |
| **7.5** |  | **Outsourcing**  As a policy decision **Accorp** has decided not to outsource (sub–contracting to another organisation to provide part of the certification activities) any aspect of its certification activities, except where that organization has an associate agreement with **Accorp Partners Cert Inc.,** **U.S.A** Head Office has retained the authority in every case to authorise the issue of certificates. Hence the requirements given in the clause no. 7.5.1, 7.5.2, 7.5.3 and 7.5.4 are not applicable to **Accorp Partners Cert Inc.** | |
| **Title: Information Requirements** | | | **Section: 8.0** |
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| **8.0** |  | **Information Requirement** | |
| **8.1** |  | **Publicly accessible information:** | |
|  | **8.1.1** | **Accorp** makes public (principally through the **Accorp Partners Cert Inc.**at our website www.accorppartners.com) and make public, ***without request*** information regarding the Accorp’s   1. Audit processes, 2. processes for granting, refusing, maintaining, renewing, suspending, restoring or withdrawing certification or expanding or reducing the scope of certification; 3. types of management systems and certification schemes in which it operates; 4. the use of the Accorp name and certification mark or logo; 5. processes for handling requests for information, complaints and appeals; 6. Policy on impartiality.   Information in hard copy format is also supplied on request. Periodically the information made available to the public and clients (website, brochures, advertising etc.) is checked to ensure that it is current, correct and not misleading. | |
|  | **8.1.2** | **Accorp** ensure that all information made available to the public is kept up to date and updated periodically, to ensure that the information is adequate and not misleading. Upon request the following information is provided to the customers;   1. geographical areas of operation of Accorp 2. the status of a given certification 3. the name, related normative document, scope and geographical location (city and country) for a specific certified client   Reference 🡪   1. Accorp Partners Cert Inc. Website ([Accorppartners.com](https://accorppartners.com/)) 2. Information and publicity materials/company brochures/ introductory letters. | |
|  | **8.1.3** | **Accorp** has information about certificates granted, suspended or withdrawn in a hard copy at any of the **Accorp Partners Cert Inc.** U.S.A office. This information is available at **Accorp Partners Cert Inc.**Office and can be freely accessible to publicly on Accorp’s website. The validity of any certificate issued is confirmed to any party/client upon request in written. Any party can confirm the validity or current status of a given certification by clicking the certification number of the client in our website. In special cases, this information is also provided verbally or by telephone or by E- mail.  **Reference-**   1. Record of enquiry regarding client’s information | |
| **Title: Information Requirements** | | | **Section: 8.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **8.2** |  | **Certification documents** | |
|  | **8.2.1** | Certification documents are normally sent to the certified client in paper format though the postal system or by hand, however provision exists for the certificate to be sent electronically in a format that prevents alteration and recorded. Otherwise all the certification documents are available on our website <https://accorppartners.com/> in download section of the website. The effective date on a certificate will in all cases be the date on or after the date on which the certification decision was made. All non-conformities must be effectively closed–out prior to a certification decision being made, is clearly defined in Accorp Quality Procedure. However, in some case where the corrective action plan has been accepted by the auditor, but the corrective action being a prolonged process cannot be verified with in short, the certificate may be issued by the decision maker, if the concerned auditor has recommended issue of certificate subject to verification of the closure of the NC during surveillance audit.  Reference 🡪   1. Certificate Dispatch Register | |
|  | **8.2.2** | Certification documents identify the followings:   1. The name and geographic location of each client whose management system has been certified (or the geographic location of the headquarters and any sites within the scope of a multi–site certification). 2. the ***effective*** date of granting, ***expanding or reducing the scope of certification, or renewing*** certification which shall not be before the date of the relevant certification decision; 3. the expiry date or recertification due date consistent with the recertification cycle; 4. a unique identification code for certificate/s; 5. the management system standard and/or other normative document, including indication of issue status (e.g. revision date or number) used for audit of the certified client. 6. the scope of certification with respect to the type of ***activities***, ***products and services*** as applicable at each site ***without being misleading or ambiguous*** 7. the name, address and certification mark of the Accorp; other marks (e.g. accreditation symbol, client’s logo) may be used provided they are not misleading or ambiguous. 8. any other information required by the standard and/or other normative document used for certification 9. in the event of issuing any revised certification documents, a means to distinguish the revised documents from any prior obsolete documents 10. In the event of issuing any revised certification documents, a means to distinguish the revised documents from any prior obsolete documents ***(in case of revision in the certificate suffix “-01” is added to the certificate no. In case of repeated revision in one certificate the suffix is revised in ascending order like -02, -03....)***   **Reference-**   1. Accorp-QP-17 Quality Procedure for issue of certificate, suspension, reduction and withdrawal | |
| **Title: Information Requirements** | | | **Section: 8.0** |
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| **8.3** |  | **Reference to certification and use of marks** | |
|  | **8.3.1** | **Accorp Partners Cert Inc.** shall have ***rules*** governing any ***management system certification mark*** it authorises clients to use assures amongst other things, traceability back to **Accorp Partners Cert Inc.** The policy has provision for instructions on ensuring that no ambiguity, in the mark or accompanying text, as to what has been certified.  This directory shows the name of the certified organization, name of the audit standard, scope and geographical location of each certified site of the organization. Office address of the certified organization is also shown in the directory.  If requested by the certified organizationand that **Accorp Partners Cert Inc.** has granted the certificate. The policy also covers the prohibition of using the mark on a product or packaging seen by a consumer or in any other way that may be interpreted as denoting product conformity. The policy is available both on website and as hard copy; all certified companies receive a copy of the policy with their certificate.  **Reference-**   1. Accorp Logo Usage Guide | |
|  | **8.3.2** | The policy is clear that **Accorp Partners Cert Inc.** mark is not permitted to be applied to laboratory test, calibration or inspection reports. The same are verified during the audit and is conveyed to all Auditors concerned.  **Reference-**   1. Accorp Logo Usage Guide | |
|  | **8.3.3** | ***Accorp has defined rules governing the use of any statement on product packaging or in accompanying information that the certified client has a certified management system. Product packaging is considered as that which can be removed without the product disintegrating or being damaged. Accompanying information is considered as separately available or easily detachable. Type labels or identification plates are considered as part of the product. It is ensured that the statement shall in no way imply that the product, process or service is certified by this means. The statement includes reference to:***   * ***identification (e.g. brand or name) of the certified client;*** * ***the type of management system (e.g. quality) and the applicable standard;*** * ***Accorp name in the certificate.*** | |
| **Title: Information Requirements** | | | **Section: 8.0** |
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|  | **8.3.4** | **Accorp Partners Cert Inc.** requires ***through legally enforceable arrangements*** that the client organisation when certified shall:   1. Conform to the requirements of **Accorp Partners Cert Inc.**when making reference to its certification status in communication media such as the internet, brochure or advertising or other documents 2. Does not make or permit any misleading statement regarding its certification 3. Does not use or permit the use of a certification document or any part thereof in a misleading manner 4. Upon suspension or withdrawal of its certification, discontinues its use on all advertising matter that contains a reference to certification, as directed by **Accorp Partners Cert Inc.** 5. Amend all advertising matter when then the scope of certification has been reduced 6. Does not allow reference to its management system certification to be used in such a way as to imply that the **Accorp Partners Cert Inc.** certifies a product (including services) or process. 7. Does not imply that the certification applies to activities that are outside the scope of certification, and 8. Does not use its certification in such a manner that would bring the certification into disrepute and lose public trust.   **Reference-**   1. Accorp Logo Usage Guide | |
|  | **8.3.5** | **Accorp** will take action and deal with incorrect references to certification status or misleading use of certification documents, marks or audit reports. The action may include requests for correction and corrective action, suspension, withdrawal of certification, publication of the transgression and if necessary legal action. Clients are notified of the actions that may be taken should the client transgress the rules of certification in the use of certification mark policy. Any reported transgression of the use of certification marks will be treated as a complaint.  **Reference-**   1. Accorp Logo Usage Guide | |

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| **Title: Information Requirements** | | | **Section: 8.0** |
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| **8.4** |  | **Confidentiality** | |
|  | **8.4.1** | ***Accorp*** *has established a policy to safeguard the confidentiality of the information obtained or created during the performance of certification activities at all levels of its structure, including committees and external bodies or individuals acting on its behalf through legally enforceable agreements. This is done by binding them through legally enforceable agreement such as-*   1. *Support Staff: By appointment letter* 2. *Auditor and TE : By Service agreement* 3. *Impartiality Committee Members* 4. Trainee auditors and witness auditors | |
|  | **8.4.2** | **Accorp Partners Cert Inc.** informs the client, in advance, of the information it intends to place in the public domain. All other information, except for information that is made publicly accessible by the client, is considered as confidential and not shared. | |
|  | **8.4.3** | Except as required in this International Standard as well as policy, information about a particular client or individual are disclosed to a third party without the written consent of the client or individual concerned. Where the **Accorp Partners Cert Inc.** is required by law to release confidential information to a third party, the client or individual concerned are notified in advance of the information provided. | |
|  | **8.4.4** | When the Accorp is required by law ***or authorized by contractual arrangements,*** Information about the client from sources other than the client (e.g. complainant, regulators) is also treated as confidential, consistent with the **Accorp Partners Cert Inc.’s** policy. | |
|  | **8.4.5** | Personnel, including any committee members, contractors, personnel of external bodies or individuals acting on the certification body's behalf, shall keep confidential all information obtained or created during the performance of the **Accorp Partners Cert Inc.’s** activities ***excepts as required by law.***  **Reference-**   1. No Conflict of Interest | |
|  | **8.4.6** | All confidential information relating to a client will be retained in appropriate secure filing cabinets; the offices are secure. Access to information stored electronically either from using computer equipment in the offices or via the website is password controlled and measures taken to prevent unauthorised access. | |
|  | **8.4.7** | **Accorp** shall have ***processes*** and where applicable equipment and facilities that ensure the secure handling of confidential information and we will inform the client when any confidential information is made available to other bodies i.e. accreditation bodies.  **Reference-**   1. No Conflict of Interest 2. Accorp-QP-06 Quality Procedure for complaint management 3. Accorp-QP-07 Quality Procedure for management of appeal | |
| **Title: Information Requirements** | | | **Section: 8.0** |
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| **8.5** |  | **Information exchange between Accorp and its clients** | |
|  | **8.5.1** | **Information about the Accorp’s certification activity and Clients requirements**  **Accorp** will provide and update clients on the following;   1. A detailed description of the initial and continuing certification activity, including the application, initial audits, and the process for granting, ***refusing, maintaining of certification, expanding or reducing the scope of certification, renewing, suspending or restoring, or withdrawing of certification***. 2. The normative reference for certification. 3. Information about the fees for application, initial certification and continuing certification. 4. **Accorp** requirements for prospective clients to; 5. Comply with certification requirements 6. To make all necessary arrangements for the conduct of the audits, including provision for examining documentation and the access to all processes and areas, records and personnel for the purposes of initial certification, surveillance and resolution of complaints, and 7. To make provisions, where applicable, to accommodate the presence of observers. 8. Documents describing the rights and duties of certified clients, including requirements, when making reference to its certification in communication of any kind in line with the requirements in for the use of certification marks. 9. Information on procedures for lodging and handling complaints and appeals against audit team or audit conclusion/ decision made by its auditors.   **Reference-**   1. Quotation 2. Rules and Regulation for Use of Certification Mark/Logo 3. Accorp\_CF-003 Client Agreement | |
| **Title: Information Requirements** | | | **Section: 8.0** |
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|  | **8.5.2** | **Notice of changes by a certification body: Accorp Partners Cert Inc.**gives due notice to its certified clients of any changes to its requirements for certification. **Accorp Partners Cert Inc.**will ensure that it verifies that each client complies with the new requirements and will amend procedures accordingly. | |
|  | **8.5.3** | **Notice of changes by a client: Accorp Partners Cert Inc.** has established legally enforceable arrangements to ensure that the certified client informs the certification body, without delay, of matters that may affect the capability of the management system to continue to fulfil the requirements of the standard used for certification. These include (but are not limited to) –   1. The legal, commercial, organisational status or ownership, 2. Organisation and management (e.g. key managerial, decision–making or technical staff) 3. Contact address and sites 4. Scope of operations under the certified management system, and 5. Major changes to the management system and processes 6. Breaches of legal obligations   **Accorp Partners Cert Inc.**takes appropriate actions on the event basis.  **Reference-**   1. Accorp\_F-003 Client Agreement 2. Accorp Logo Usage Guide | |

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| **9.0** |  | **Process Requirement** | |
| **9.1** |  | **Pre Certification Activities** | |
|  | **9.1.1** | **Application**  Accorp identifies the authorized representative of the applicant organization to provide the necessary information to enable to establish the following:   1. the desired scope of the certification; 2. relevant details of the applicant organization as required by the ***specific certification scheme, including its name and the address(es) of its site(s), its processes and operations, human and technical resources, functions, relationships*** and any relevant legal obligations; 3. identification of outsourced processes used by the organization that will affect conformity to requirements; 4. the standards or other requirements for which the applicant organization is seeking certification; 5. whether consultancy relating to the management system to be certified has been provided and, ***if so, by whom.***   **Ref.**   1. Accorp\_CF-001 Client Information form | |
|  | **9.1.2** | **Application Review** | |
|  | **9.1.2.1** | Accorp conducts a review of the application and supplementary information for certification to ensure that:   1. the information about the applicant organization and its management system is sufficient ***to develop an audit programme*** 2. any known difference in understanding between the **Accorp** and the applicant organization is resolved 3. Accorp has the competence and ability to perform the certification activity 4. The scope of certification is sought, the site(s) of the applicant organization’s operations, time required to complete audits and any other points influencing the certification activity are taken into account (language, safety conditions, threats to impartiality, etc.).   **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming | |
|  | **9.1.2.2** | After review of above points in the application, **Accorp Partners Cert Inc.**either accepts or decline an application for certification. When the **Accorp Partners Cert Inc.** declines an application for certification as a result of the review of application, the reasons for declining an application is documented and made clear to the client. | |
|  | **9.1.2.3** | Based on this review, **Accorp Partners Cert Inc.** determines the competences it needs to include in its audit team and for the certification decision.  **Reference-** Accorp\_CF-002 Contract Review | |
| **Title: Process Requirement** | | | **Section: 9.0** |
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|  | **9.1.3** | **Audit Plan** | |
|  | **9.1.3.1** | Accorp’s audit programme for the full certification cycle is developed to clearly identify the audit activity required to demonstrate that the client's management system fulfils the requirements for certification to the selected standard(s) or other normative document(s). The same programme is prepared based on the size and nature of the client. ***Accorp plans audit programme for the complete certification cycle of the management system as per requirements.*** | |
|  | **9.1.3.2** | ***The audit programme followed by Accorp includes a two–stage initial audit, surveillance audits in the first and second Years , and a re–certification audit in the third year prior to expiration of certification. The three year certification cycle begins with the certification or recertification decision. The determination of the audit programme and any subsequent adjustments are based on the size of the client organization, the scope, and complexity of its management system, products and processes as well as demonstrated level of management system effectiveness and the results of any previous audits***. During preparation of audit plan, followings may be taken in to consideration when developing or revising an audit programme, they might also need to be addressed when determining the audit scope and developing the audit plan;   1. complaints received about the client; 2. combined, integrated or joint audit 3. changes to the certification requirements; 4. changes to legal requirements; 5. changes to accreditation requirements; 6. organizational performance data (e.g. defect levels, key performance indicators data); 7. relevant interested parties’ concerns. | |
|  | **9.1.3.3** | Surveillance audits are conducted ***at least once a calendar year***, except in recertification Years . Care is taken and ensures that ***the date of the first surveillance audit following initial certification should not be more than 12 months from the certification decision date.*** | |
|  | **9.1.3.4** | Where the **Accorp Partners Cert Inc.** is taking account of certification already granted to the client and to audits performed by another certification body, it obtains and retain sufficient evidence, ***such as reports and documentation on corrective actions, to any nonconformity. It is ensured that the documentation support the fulfilling of the requirements in this part of ISO/IEC 17021.*** **Accorp Partners Cert Inc.** shall, based on the information obtained, justify and record any adjustments to the existing audit programme and follow up the implementation of corrective actions concerning previous nonconformities. | |
|  | **9.1.3.5** | ***If the client operates in shifts, the activities that take place during shift working are also considered when developing the audit programme and audit plans.*** | |
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|  | **9.1.4** | **Determining audit time** | |
|  | **9.1.4.1** | **Accorp** has documented procedures for determining audit time for each client, **Accorp** determines the time needed to plan and accomplish a complete and effective audit of the client's management system. The audit time determined by the **Accorp** and the justification for the determination is recorded.  **Reference:**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp\_CF-002 Contract Review | |
|  | **9.1.4.2** | In determining the audit time, the **Accorp** considers, among other things, the following aspects:   1. the requirements of the relevant management system standard; 2. complexity of the client ***and its management system***; 3. technological and regulatory context; 4. any outsourcing of any activities included in the scope of the management system; 5. the results of any prior audits; 6. ***size*** and number of sites and multi-site considerations; 7. the risks associated with the products, processes or activities of the organization; 8. When audits are combined, joint or integrated.   **Reference:**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp\_CF-002 Contract Review | |
|  | **9.1.4.3** | The audit time determined by the **Accorp** and the justification for the determination is recorded. | |
|  | **9.1.4.4** | As a policy decision, the time spent by any team member that is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and auditors under training) are not counted in the above established audit time, while defining the above established ***duration of the management system audit***. | |
|  | **9.1.5** | **Multi-site sampling:** Where multi-site sampling is utilized for the audit of a client's management system covering the same activity in various locations, the **Accorp** has developed a sampling programme to ensure proper audit of the management system. The rationale for the sampling plan is documented for each client. ***Sampling is not done for some specific certification schemes, and where specific criteria have been established for a specific certification scheme, e.g. ISO27006, ISO 20000-6, ISO 17021-3, these are applied***. | |
|  | **9.1.6** | **Multi management system standard:** When certification to multiple management system standards (e.g. integrated management system for ISO 9001) is being provided, the planning for the audit ensures adequate on site auditing to provide confidence in the certification, determine that the processes and procedures are established, implemented and maintained effectively, to provide a basis for confidence in the client's management system. | |
| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **9.2** |  | **Planning Audit** | |
|  | **9.2.1** | **Determining audit objectives, scope and criteria** | |
|  | **9.2.1.1** | The audit objectives are determined by the **Accorp**. The audit scope and criteria, including any changes, are established by the **Accorp** after discussion with the client. The audit scope and criteria, including any changes, are established by the **Accorp Partners Cert Inc.** after discussion with the client. | |
|  | **9.2.1.2** | The audit objectives describe what is to be accomplished by the audit which includes assessment of client’s readiness for stage-2 audit and confirmation of information submitted by the client and to collect the information for stage-2 planning. The audit objective includes the following;   1. determination of the conformity of the client's management system, or parts of it, with audit criteria; 2. ***determination*** of the ability of the management system to ensure the client organization meets applicable statutory, regulatory and contractual requirements; 3. ***determination*** of the effectiveness of the management system to ensure the client can reasonably expect to achieving its specified objectives; 4. As applicable, identification of areas for potential improvement of the management system.   QMS audit is not a legal compliance audit, focus is laid on those issues which may hamper smooth & timely delivery of contracted goods and services to the customers. | |
|  | **9.2.1.3** | The audit scope describes the extent and boundaries of the audit, such as ***sites***, organizational units, activities and processes to be audited. Where the initial or re–certification process consists of more than one audit (e.g. covering different ***sites***), the scope of an individual audit may not cover the full certification scope, but the totality of audits is consistent with the scope in the certification document. | |
|  | **9.2.1.4** | The audit criteria used as a reference against which conformity is determined that includes followings;   1. the requirements of a defined normative document on management systems 2. the defined processes and documentation of the management system developed by the client;   **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp-QP-16 Quality Procedure for conducting Client’s audit | |

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|  | **9.2.2** | **Audit Team Selection and Assignments** | |
|  | **9.2.2.1** | **General** | |
|  | **9.2.2.1.1** | Accorp have a process for selecting and appointing the audit team, including the audit team leader ***and technical experts as necessary***, taking into account the competence needed to achieve the objectives of the audit. If there is only one auditor, the auditor must have the competence to perform the duties of an audit team leader applicable for that audit and ***The audit team shall have the totality of the competences identified by Accorp for the Audit***. | |
|  | **9.2.2.1.2** | In deciding the size and composition of the audit team, consideration is given to the followings;   1. audit objectives, scope, criteria and estimated time of the audit; 2. whether the audit is a combined, integrated or joint audit; 3. the overall competence of the audit team needed to achieve the objectives of the audit; 4. certification requirements (including any applicable statutory, regulatory or contractual requirements); 5. language and culture; 6. Whether the members of the audit team have previously audited the client's management system. | |
|  | **9.2.2.1.3** | The necessary knowledge and skills, required for conducting effective audit, the audit team leader and auditors may be supplemented by technical experts, translators and interpreters who shall operate under the direction of an auditor. Where translators or interpreters are used, they are to be selected such that they do not unduly influence the audit. | |
|  | **9.2.2.1.4** | Auditors under training may be included in the audit team as participants, provided an auditor is appointed as an evaluator. The evaluator must be competent ***in the code*** to take over the duties and have final responsibility for the activities and findings of the auditor under training, ***only those auditors are selected as evaluators who have total experience of at-least 15 certification audits.*** | |
|  | **9.2.2.1.5** | The audit team leader, in consultation with the audit team, assigns to each team member responsibility for auditing specific processes, functions, sites, areas or activities. Such assignments takes into account the need for competence, and the effective and efficient use of the audit team, as well as different roles and responsibilities of auditors, auditors under training and technical experts. Changes to the work assignments may be made as the audit progresses to ensure achievement of the audit objectives.  **Reference-** Accorp-QP-03 Quality Procedure for Contract review and Audit programming | |
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|  | **9.2.2.2** | **Observers, technical experts and guides** | |
|  | **9.2.2.2.1** | **Observers**  The presence and justification of observers during an audit activity is agreed to by the **Accorp Partners Cert Inc.** and client prior to the conduct of the audit. The audit team ensures that observers do not influence or interfere in the audit process or outcome of the audit.  **Reference:**   1. Accorp-QP-16 Quality Procedure for conducting Client’s audit | |
|  | **9.2.2.2.2** | The role of technical experts during an audit activity is agreed to by the **Accorp Partners Cert Inc.** and client prior to the conduct the audit. Technical expert shall not act as an auditor in the audit team. The Technical experts are accompanied by an auditor. | |
|  | **9.2.2.2.3** | **Guides:**  Each auditor is accompanied by a guide, unless otherwise agreed to by the audit team leader and the client. Guide(s) are assigned to the audit team to facilitate the audit. The audit team ensures that guides do not influence or interfere in the audit process or outcome of the audit.  The responsibility of guide includes the followings;   1. establishing contacts and timing for interviews; 2. arranging visits to specific parts of the site or organization; 3. ensuring that rules concerning site safety and security procedures are known and respected by the audit team members; 4. witnessing the audit on behalf of the client; 5. providing clarification or information as requested by an auditor | |

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|  | **9.2.3** | **Audit Plan** | |
|  | **9.2.3.1** | **General: Accorp Partners Cert Inc.** ensures that an audit plan is established for each audit identified in the audit programme to provide the basis for agreement regarding the conduct and scheduling of the audit activities. This audit plan is based on documented requirements of the **Accorp** as per ISO 17021 and IAF requirements (MD-5). Audit plan is communicated to the client at least 2 days before the planned audit. | |
|  | **9.2.3.2** | **Preparing the audit plan:**  The audit plan is appropriate to the objectives and the scope of the audit. The audit plan at least includes the following;   1. the audit objectives; 2. the audit criteria; 3. the audit scope, including identification of the organizational and functional units or processes to be audited; 4. the dates and sites where the on–site audit activities are to be conducted, including visits to temporary sites, ***and remote auditing activities***, where appropriate; 5. the expected time and duration of on–site audit activities; 6. The roles and responsibilities of the audit team members and accompanying persons, ***such as observers or interpreters.***   **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp-QP-16 Quality Procedure for conducting Client’s audit | |
|  | **9.2.3.3** | **Communication of audit team tasks:** The tasks given to the audit team is defined and made known to the client organization and requires the audit team to:-   1. examine and verify the structure, policies, processes, procedures, records and related documents of the client organization relevant to the management system, 2. determine that these meet all the requirements relevant to the intended scope of certification, 3. determine that the processes and procedures are established, implemented and maintained effectively, to provide a basis for confidence in the client's management system, and 4. communicate to the client, for its action, any inconsistencies between the client's policy, objectives and targets (consistent with the expectations in the relevant management system standard or other normative document) and the results | |
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|  | **9.2.3.4** | **Communication of audit plan:**  The dates of the audit are agreed upon ***between Accorp and the client after mutual discussion and send to client organisation.*** ***The audit plan is sent to the client at-least 5 days before the audit date.*** | |
|  | **9.2.3.5** | **Communication concerning audit team members:** Accorp Partners Cert Inc. provides the name of and, when requested, makes available background information on each member of the audit team, with sufficient time for the client organization to object to the appointment of any particular auditor or technical expert and for the **Accorp** to reconstitute the team in response to any valid objection. | |
| **9.3** |  | **Initial Certification** | |
|  | **9.3.1** | **Initial certification audit** | |
|  | **9.3.1.1** | **General:** The initial certification audit of a management system will normally (refer to the requirements of individual standards) be conducted in two stages i.e. stage 1 and stage 2. | |
|  | **9.3.1.2** | **Stage-1 Audit:** | |
|  | **9.3.1.2.1** | Planning ***shall*** ensure that the ***objectives*** of stage 1 can be met and the client is informed of any “on site” activities during stage 1. | |
|  | **9.3.1.2.2** | The ***objectives*** of the stage 1 are-   1. To audit the client’s management system documentation, 2. To evaluate the client’s location and site specific conditions and to undertake discussions with the clients personnel to determine the preparedness for the stage 2 audit, 3. 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, 4. To collect necessary information regarding the scope of the management systems, including- 5. the client’s site(s); 6. processes and equipment used 7. ***levels of controls established (particularly in case of multisite clients)*** 8. Applicable statutory and regulatory aspects and requirements, 9. To review the allocation of resources and competence for stage 2 audit and agreeing with the client on the details of the stage 2 audit, | |
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|  |  | 1. To provide a focus for planning the stage 2 audit by gaining a sufficient understanding of the clients management system and site operations in the context of the ***management system standard or other normative document,*** 2. To evaluate the internal audits and management reviews are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for stage 2.   **Accorp Partners Cert Inc.** intent that the stage 1 audit is carried–out at the client’s premises in order to achieve the objectives stated above. If the stage 1 audit is not carried out at the client’s premises, the justification will be clearly documented.  The stage 1 findings (including the audit plan) will be documented and communicated to the client, including identification of any area that could be classified as nonconformity during the stage 2 audit. The stage 1 audit report will be reviewed and authorised prior to the stage 2 audit by a competent person.  **Reference-**   1. Accorp\_CF-008 Stage 2 Audit Report | |
|  | **9.3.1.2.3** | Documented conclusions with regard to fulfilment of the stage 1 objectives and the readiness for stage 2 shall be communicated to the client, including identification of any areas of concern that could be classified as nonconformity during stage 2. | |
|  | **9.3.1.2.4** | During determining the interval between stage 1 and stage 2, consideration is given to the needs of the client to resolve areas of concern identified during stage 1. **Accorp** also need to revise its arrangements for stage 2.  ***If any significant changes which would impact the management system occur, Accorp shall considers the need to repeat all or part of stage 1.*** The client is informed that the results of stage 1 may lead to postponement or cancellation of stage 2. | |
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|  | **9.3.1.3** | **Stage 2 Audit:**  The purpose of the stage 2 audit is to evaluate the implementation, including effectiveness, of the client’s management system. The stage 2 audit will take place at the site(s) of the client. It includes at least the followings.   1. Information and evidence about conformity to all requirements of the applicable management system standard or other normative document. 2. 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) 3. The client’s management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements 4. Operational control of the client’s processes 5. Internal auditing and management review 6. Management responsibility for the client’s policies   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.  **Accorp Partners Cert Inc.** normally agree the first surveillance date during the Stage 2 Audit. This date must be within 12 months of the last day of the Stage 2 Audit.  **Reference-**   1. Accorp\_CF-008 Stage 2 Audit Report | |
|  | **9.3.1.4** | The audit team will analyse all information and audit evidence gathered during the stage 1 and stage 2 audits to review the audit findings and agree on the conclusions. The audit team will produce a report for the company detailing the findings (including any non–conformances, observations summary of the audit etc.) and the conclusion reached by the audit team i.e. recommended for certification. The audit team makes clear to the organisation that the recommendation made is only a recommendation and that the audit file (including the report) will be reviewed by **Accorp Partners Cert Inc.** staff and will be submitted for a decision to the authorized certification decision maker. | |
| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **9.4** |  | **Conducting Audits** | |
|  | **9.4.1** | **General:** Accorp has a process for conducting on site audits. This process includes an opening meeting at the start of the audit and a closing meeting at the conclusion of the audit.  ***Where any part of the audit is made by electronic means or where the site to be audited is virtual, Accorp ensures that such activities are conducted by personnel with appropriate competence. The evidence obtained during such an audit is sufficient to enable the auditor to take an informed decision on the conformity of the requirement in question***. | |
|  | **9.4.2** | **Conducting the opening audit:**  A formal opening meeting, where attendance of participants of the meeting is recorded, held with the client's management and, where appropriate, those responsible for the functions or processes to be audited. The purpose of the opening meeting, which is usually be conducted by the audit team leader, is to provide a short explanation of how the audit activities will be undertaken and must include the following elements. The degree of detail of opening meeting shall be consistent with the familiarity of the client with the audit process;   1. introduction of the participants, including an outline of their roles; 2. confirmation of the scope of certification; 3. confirmation of the audit plan (including type and scope of audit, objectives and criteria), any changes, and other relevant arrangements with the client, such as the date and time for the closing meeting, interim meetings between the audit team and the client's management; 4. confirmation of formal communication channels between the audit team and the client; 5. confirmation that the resources and facilities needed by the audit teams are available; 6. confirmation of matters relating to confidentiality; 7. confirmation of relevant work safety, emergency and security procedures for the audit team; 8. confirmation of the availability, roles and identities of any guides and observers; 9. the method of reporting, including any grading of audit findings; 10. information about the conditions under which the audit may be prematurely terminated; | |
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|  |  | 1. confirmation that the audit team leader and audit team representing the certification body is responsible for the audit and in control of executing the audit plan including audit activities and audit trails; 2. confirmation of the status of findings of the previous review or audit, if applicable; 3. methods and procedures to be used to conduct the audit based on sampling; 4. confirmation of the language to be used during the audit; 5. confirmation that, during the audit, the client keep informed of audit progress and any concerns; 6. Opportunity for the client to ask questions.   ***Refer to***   1. ***Accorp\_CF-005 Stage 1 and Accorp\_CF-007 Stage 2.*** | |
|  | **9.4.3** | **Communication during the audit** | |
|  | **9.4.3.1** | During the audit, the audit team will periodically assess audit progress and exchange information. The audit team leader reassign work as needed between the audit team members and periodically communicate the progress of the audit and any concerns to the client. | |
|  | **9.4.3.2** | Where the available audit evidence indicates that the audit objectives are unattainable or suggests the presence of an immediate and significant risk (e.g. safety), the audit team leader reports this to the client and, if possible, to the **Accorp Partners Cert Inc.** to determine appropriate action. Such action may include reconfirmation or modification of the audit plan, changes to the audit objectives or audit scope, or termination of the audit. The audit team leader reports the outcome of the action taken to the **Accorp Partners Cert Inc.**. Record of the audit findings and result is maintained in the concerned Audit file.  **Reference:**   1. Accorp-QP-16 Quality Procedure for conducting Client’s audit | |
|  | **9.4.3.3** | Audit team leader reviews with the client for any need for changes to the audit scope which becomes apparent as on site auditing activities progress and report this to the **Accorp Partners Cert Inc.** | |

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|  | **9.4.4** | **Obtaining and verifying information** | |
|  | **9.4.4.1** | During the audit, information relevant to the audit objectives, scope and criteria (including information relating to interfaces between functions, activities and processes) are ***obtained*** by appropriate sampling and verified to become audit evidence. | |
|  | **9.4.4.2** | Methods to ***obtain*** information include followings, but are not limited to;   1. interviews, 2. observation of processes and activities; 3. review of documentation and records verified to become the audit evidence, | |
|  | **9.4.5** | **Identifying and Recording Audit Findings** | |
|  | **9.4.5.1** | Audit findings summarizing conformity and detailing nonconformity ***identified, classified and recorded*** to enable an informed certification decision to be made or the certification to be maintained. | |
|  | **9.4.5.2** | ***Accorp ensures that the Opportunities for improvement identified in the audit are recorded in the audit report, unless prohibited by the requirements of a management system certification scheme. Audit findings, however, which are nonconformities, will never be recorded as opportunities for improvement.*** | |
|  | **9.4.5.3** | A finding of nonconformity is recorded against a specific requirement of the audit criteria, contain a clear statement of the nonconformity, and identify in detail the objective evidence on which the nonconformity is based. Nonconformities are discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood. The auditor however refrains from suggesting the cause of nonconformities or their solution. | |
|  | **9.4.5.4** | The audit team leader attempts to resolve any diverging opinions between the audit team and the client concerning audit evidence or findings, and unresolved points are recorded. | |
|  | **9.4.6** | **Preparing audit conclusions-** Under the responsibility of the audit team leader and Prior to the closing meeting, the audit team:   1. review the audit findings, and any other appropriate information obtained during the audit, against the audit objectives and ***audit criteria and classify the nonconformities***; 2. agrees upon the audit conclusions, taking into account the uncertainty inherent in the audit process; 3. identifies any necessary follow–up actions; 4. confirm the appropriateness of the audit programme or identify any modification required ***for future audits*** (e.g. scope of certification, audit time or dates, surveillance frequency, audit team competence). | |
| **Title: Process Requirement** | | | **Section: 9.0** |
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|  | **9.4.7** | **Conducting the closing meeting** | |
|  | **9.4.7.1** | A formal closing meeting, where attendance of all participants is recorded and held with the client's management and, where appropriate, those responsible for the functions or processes audited. The purpose of the closing meeting, which is normally be conducted by the audit team leader, is to present the audit conclusions, including the recommendation regarding certification. Any nonconformity is presented in such a manner that they are understood, and the timeframe for submitting corrective action plan and, corrective action against the non–conformity with evidence is agreed between **Accorp Partners Cert Inc.** and its client/s.  **Reference:**   1. Accorp-QP-16 Quality Procedure for conducting Client’s audit | |
|  | **9.4.7.2** | During closing meeting brief narration of audit findings is done. It is explained that the audit was conducted on sampling basis. The closing meeting also includes the following elements. The degree of detail is dependent upon the familiarity of the client with the audit process:   1. advising the client that the audit evidence collected was based on a sample of the information; thereby introducing an element of uncertainty; 2. the method and timeframe of reporting, including any grading of audit findings; 3. **Accorp Partners Cert Inc.’s** process for handling nonconformities including any consequences relating to the status of the client's certification; 4. the timeframe for the client to present a plan for correction and corrective action for any nonconformities identified during the audit; 5. the **Accorp Partners Cert Inc.’s** post audit activities; **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 Accorp 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.*** 6. information about the complaint handling and appeal processes   Also explained the process of surveillance, validity of certificate and recertification process is also explained, if recommended. | |
|  | **9.4.7.3** | The client is given opportunity for questions. Any diverging opinions regarding the audit findings or conclusions between the audit team and the client is discussed and resolved where possible. Any diverging opinions that are not resolved are recorded and referred to the Accorp. | |
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|  | **9.4.8** | **Audit Report** | |
|  | **9.4.8.1** | **Accorp Partners Cert Inc.** provides a written report for each audit. The audit team may identify opportunities for improvement but shall not recommend specific solutions. Ownership of the audit report is maintained by the **Accorp;** hence the report is first submitted (Accorp\_F-006 Stage 1 Audit Report and Accorp\_F-008 Stage 2 Audit Report) to the certification body. The Client is informed only about the salient findings (Audit summary) of the audit specially the non-conformities and audit conclusion. | |
|  | **9.4.8.2** | The audit team leader ensures that the audit report is prepared and is responsible for its content. The audit report provides an accurate, concise and clear record of the audit to enable an informed certification decision to be made and includes or refer to the followings;   1. identification of the **Accorp Partners Cert Inc.**; 2. the name and address of the client and the client's management representative; 3. the type of audit (e.g. initial, surveillance or recertification audit); 4. the audit criteria 5. the audit objectives 6. the audit scope, particularly identification of the organizational or functional units or processes audited and the time of the audit 7. ***any deviation from the audit plan and their reasons*** 8. ***any significant issues impacting on the audit programme***; 9. ***identification of the audit team leader, audit team members and any accompanying persons;*** 10. the dates and places where the audit activities (on site or offsite, permanent or temporary sites) were conducted 11. audit findings, evidence and conclusions, consistent with the requirements of the type of audit; 12. significant changes, if any, that affect the management system of the client since the last audit took place 13. any unresolved issues, if identified 14. ***where applicable, whether the audit is combined, joint or integrated*** 15. ***a disclaimer statement indicating that auditing is based on a sampling process of the available information*** 16. ***recommendation from the audit team*** 17. ***the audited client is effectively controlling the use of the certification documents and marks, if applicable*** 18. ***verification of effectiveness of taken corrective actions regarding previously identified nonconformities, if applicable*** | |

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|  | **9.4.8.3** | ***The audit report also contains;***   1. ***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;***  1. ***A conclusion on the appropriateness of the certification scope;*** 2. ***Confirmation that the audit objectives have been fulfilled.*** | |
|  | **9.4.9** | **Cause analysis of nonconformities-**  **Accorp Partners Cert Inc.** requires the client to analyses the cause and describe the specific correction and corrective actions taken, or planned to be taken, to eliminate detected nonconformities, within a defined time in form Accorp\_CF-009 Corrective Action Report. Refer Accorp/QP-16. | |
|  | **9.4.10** | **Effectiveness of corrections and corrective actions- Accorp** reviews the corrections, identified causes and corrective actions submitted by the client to determine if these are acceptable. **Accorp** verifies the effectiveness of any correction and corrective actions taken. The evidence obtained to support the resolution of nonconformities is recorded. The client is informed of the result of the review and verification. The client is informed if an additional full audit, an additional limited audit, or documented evidence (to be confirmed during future audits) is needed to verify effective correction and corrective actions. | |
| **9.5** |  | **Certification Decision** | |
|  | **9.5.1** | **General** | |
|  | **9.5.1.1** | Accorp ensure that the persons or committees that make the decisions ***for granting or refusing certification, expanding or reducing the scope of certification, suspending or restoring certification, withdrawing certification or renewing certification*** are different from those who carried out the audits. The individual(s) appointed to conduct the certification decision have appropriate competence. | |
|  | **9.5.1.2** | The person(s) [excluding members of committees] assigned by the **Accorp** to make a certification decision shall be employed by, or shall be under legally enforceable arrangement with either Accorp or an entity under the organizational control of the **Accorp.** Accorp**’**s organizational control are one of the following:   1. whole or majority ownership of another entity by the **Accorp**; 2. majority participation by the **Accorp** on the board of directors of another entity; 3. a documented authority by the **Accorp Partners Cert Inc.** over another entity in a network of legal entities (in which the certification body resides), linked by ownership | |
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|  | **9.5.1.3** | The persons employed by, or under contract with, entities under organizational control fulfill the same requirements of this part of ISO/IEC 17021 as persons employed by, or under contract with, Accorp. | |
|  | **9.5.1.4** | Accorp record each certification decision including any additional information or clarification sought from the audit team or other sources. | |
|  | **9.5.2** | **Actions prior to making a decision**  **Accorp *have a process to conduct an effective review prior to making a decision*** for granting certification, expanding or reducing the scope of certification, renewing, suspending or restoring, or withdrawing of certification, including, that   1. The information provided by the audit team is sufficient with respect to the certification requirements and the scope for certification; 2. for any ***major nonconformities***, it has reviewed, accepted and verified the correction and corrective actions 3. for any minor nonconformities it has reviewed and accepted the client’s plan for correction and corrective action   **Reference-**   1. Accorp-QP-17 Quality Procedure for issue of certificate, suspension, reduction and withdrawal 2. Accorp\_F-034 Certificate issue checklist | |
|  | **9.5.3** | **Information for granting initial certification** | |
|  | **9.5.3.1** | The information provided by the audit team to **Accorp Partners Cert Inc.** and for review by the Certification decision will as a minimum include:   1. The audit reports 2. Comments on the nonconformities and, where applicable, the correction and corrective actions taken by the client. 3. Confirmation of the information provided to the **Accorp** used in the application review. 4. ***confirmation that the audit objectives have been achieved*** 5. A recommendation whether or not to grant certification, together with any conditions or observations. | |
|  | **9.5.3.2** | ***If Accorp is not able to verify the implementation of corrections and corrective actions of any major nonconformity within 6 months after the last day of stage 2, Accorp Conduct another stage 2 prior to recommending certification.*** | |
|  | **9.5.3.3** | ***When a transfer of certification is envisaged from one certification body to another, the accepting Accorp have a process for obtaining sufficient information in order to take a decision on certification***. Certification schemes of **Accorp** have specific rules regarding the transfer of certification. | |
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|  | **9.5.4** | **Information for granting recertification**: Accorp will make a decision on renewing certification based on the results of the certification audit, review of the system over the period of certification and complaints received from users of certification. The process is the same as for initial certification following a stage 2 audit.  **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp-QP-17 Quality Procedure for issue of certificate, suspension, reduction and withdrawal | |
| **9.6** |  | **Maintaining Certification** | |
|  | **9.6.1** | **General**  **Maintaining Certification- Accorp Partners Cert Inc.** will maintain certification based on demonstration that the client continues to satisfy the requirements of the management system standard. It maintains a client's certification based on a positive conclusion by the audit team leader (without further independent review). **Accorp Partners Cert Inc.** will not refer the client’s surveillance file to a certification decision maker provided that a positive conclusion has been reached by the audit team leader and also provided that;   1. For any nonconformity or other situation that may lead to suspension or withdrawal of certification. **Accorp Partners Cert Inc.** has a procedure which requires the audit team leader to report the need to initiate a review by the certification decision maker (i.e. major non–conformance raised, changes to scope or any other changes that may affect certification) in order to determine whether certification can be maintained, and 2. Competent staffs with **Accorp Partners Cert Inc.** continue to monitor the surveillance activities, including monitoring the reporting by its auditors, to confirm that the certification activity are operating effectively.   **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp-QP-17 Quality Procedure for issue of certificate, suspension, reduction and withdrawal | |

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|  | **9.6.2** | **Surveillance Activities** | |
|  | **9.6.2.1** | **General** | |
|  | **9.6.2.1.1** | Accorp has developed its Surveillance activities and to ensure that representative areas and functions covered by the scope of the management system are monitored on a regular basis, and also take account of changes to the standard to its certified client and its management system. | |
|  | **9.6.2.1.2** | Surveillance activities include on–site audits assessing the certified client’s management systems fulfilment of specified requirements with respect to the standard to which certification is granted. Other surveillance activities may include-   1. Enquiries from **Accorp Partners Cert Inc.** with regard to aspects of certification 2. Reviewing any clients statements with respect to its operations (e.g. promotional material, website) 3. Requests to the client to provide documents and records (on paper or electronic media) 4. Other means of monitoring the certified client’s performance- ***The client is instructed to inform Accorp, in case of change in key personal, addition or deletion in activities described the scope of the QMS, or any substantial change in infrastructural resources. The quality manager and or the auditors interact with the certified client on random basis (by personal visit/telephonic) and enquire about any substantial change in the working of the client. Negative Information from media or clients customers, having bearing upon client QMS and its reputation, when received; is recorded in the clients file for further investigation if required.*** | |
|  | **9.6.2.2** | **Surveillance audit:** Surveillance audits are on site audits, but are not necessarily full systems audits, and are planned together with the other surveillance activities so that **Accorp Partners Cert Inc.** can maintain confidence that the certified management system continues to fulfil requirements between recertification audits. The surveillance audit programme includes, at least;   1. Internal audits and management review 2. A review of actions taken on nonconformities identified during the previous audit 3. Treatment of complaints 4. effectiveness of the management system with regard to achieving the certified client’s objectives ***and the intended results of the respective management system (s)*** 5. Progress of planned activities aimed at continual improvement 6. Continuing operational control 7. Review of any changes, and 8. Use of marks and/or any other reference to certification | |
| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **9.6.3** | **Re–certification** | |
|  | **9.6.3.1** | **Recertification audit planning** | |
|  | **9.6.3.1.1** | 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 (in effect all aspects of the management system will be examined as per stage 2). 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.*** | |
|  | **9.6.3.1.2** | The recertification audit will consider the performance of the management system over the period of certification, and include the review of previous surveillance audit reports. | |
|  | **9.6.3.1.3** | Recertification audits may require to have 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 to legislation). | |
|  | **9.6.3.2** | **Recertification audit (Triennial audit)** | |
|  | **9.6.3.2.1** | The recertification audit includes an onsite audit that addresses the following:   1. 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. 2. Demonstrated commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance. 3. Whether the operation of the certified management system contributes to the achievement of the organisations policy and objectives. | |
|  | **9.6.3.2.2** | When, during a Recertification audit, instances of nonconformity (major) or lack of evidence of conformity are identified, **Accorp Partners Cert Inc.** will define the time limits for correction and corrective actions to be implemented prior to the expiration of certification. **Accorp** requires evidence that all non–conformances raised at the recertification audit have been closed out prior to the new certificate being re–issued i.e. they must be closed out prior to the expiry date of the existing certificate. | |
|  | **9.6.3.2.3** | ***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.*** | |
| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **9.6.3.2.4** | If Accorphas not completed the recertification audit or the **Accorp** 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 for such case. | |
|  | **9.6.3.2.5** | Following expiration of certification, **Accorp** 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. | |
|  | **9.6.4** | **Special Audits** | |
|  | **9.6.4.1** | **Extension of scope: Accorp Partners Cert Inc.** will, in response to an application for extension to scope of a certificate already granted, undertake a review of the application (contract review) and determine any audit activities necessary to determine whether or not the extension may be granted, including the requirement to conduct a visit. This may be conducted in conjunction with a surveillance visit.  The certification decision maker will be responsible for granting an extension to scope based upon the information supplied. The process is the same as for initial certification following a stage 2 audit. | |
|  | **9.6.4.2** | **Short notice audits: Accorp Partners Cert Inc.** may when necessary conduct short notice audits ***or unannounced*** to investigate complaints, or in response to changes, or as follow up to suspended clients. In such cases:   1. **Accorp Partners Cert Inc.** will describe and make known in advance to the certified clients, the conditions under which these short notice visits are to be conducted, and 2. **Accorp Partners Cert Inc.** will exercise additional care in the assignment of the audit team because of the lack of opportunity for the client to object to team members.   **Reference-**   1. Accorp-QP-03 Quality Procedure for Contract review and Audit programming 2. Accorp-QP-17 Quality Procedure for issue of certificate, suspension, reduction and withdrawal | |

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| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **9.6.5** | **Suspending, withdrawing or reducing the scope of certification** | |
|  | **9.6.5.1** | **Accorp Partners Cert Inc.** has a policy and procedure for suspension, withdrawal or reduction of the scope of certification, and has specified the subsequent actions to be taken. | |
|  | **9.6.5.2** | **Accorp Partners Cert Inc.** suspends certification in cases when:   * The client’s certified management system has persistently or seriously failed to meet the certification requirements, including requirements for the effectiveness of the management system. * The certified client does not allow surveillance or recertification audits to be conducted at the required frequency, or has failed to pay the due fees. * The certified client has voluntarily requested a suspension. * In order to comply with regulations, including regulations applicable to specific industry sectors. | |
|  | **9.6.5.3** | Under suspension, the client’s management system certification is temporarily invalid. **Accorp Partners Cert Inc.** has enforceable arrangements with its clients to ensure that in case of suspension the client refrains from further promotion of its certification. **Accorp** will make the suspended status of the certification publicly accessible and shall take any other measures deemed necessary. In most of the cases the suspension will not normally exceed 6 months. The client will be notified in writing of the decision. | |
|  | **9.6.5.4** | ***Accorp shall restore the suspended certification if the issue that has resulted in the suspension has been resolved.*** Failure to resolve the issues that have resulted in the suspension in the time established by **Accorp Partners Cert Inc.** shall result in withdrawal (deregistration) or reduction of the scope of certification.  A certification decision maker / competent person will review clients under suspension and where withdrawal or reduction in the scope of certification is being considered. | |
|  | **9.6.5.5** | **Accorp Partners Cert Inc.** reduce the client’s scope of certification to exclude the parts not meeting the requirements, when the client has persistently or seriously failed to meet the requirements of the standard used for certification. At the client’s request or following recommendations by the auditor, the scope of certification may be reduced to reflect the change of circumstances or activities. Any such reduction shall be in line with the requirements of the standard used for certification. | |
| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **9.7** |  | **Appeals** | |
|  | **9.7.1** | **Accorp Partners Cert Inc.** has a documented process to receive evaluates and makes decisions on appeals. The appeals handling process will be publicly available. | |
|  | **9.7.2** | Appeal committee of **Accorp** is responsible for all decisions at all levels of the appeals handling process. The **Accorp** ensures that the persons engaged in the appeals handling process are different from those who carried out the audits and made the certification decisions | |
|  | **9.7.3** | Accorp ensures that any submission, investigations and decisions on appeals shall not result in any discriminatory actions against the organization or person making the appeal (appellant). | |
|  | **9.7.4** | The appeals handling process includes at least the following elements and methods;   1. The process for receiving, validating and investigating the appeal, and for deciding what actions are to be taken in response to it, taking into account the results of any similar appeals 2. Tracking and recording appeals, including actions undertaken to resolve them 3. Ensuring that any appropriate correction and corrective action are taken. | |
|  | **9.7.5** | ***Accorp receiving the appeal shall be responsible for gathering and verifying all necessary information to validate the appeal.*** | |
|  | **9.7.6** | **Accorp** ensures that receipt of the appeal is acknowledged and will provide the appellant with progress reports and the outcome. | |
|  | **9.7.7** | The decision to be communicated to the appellant shall be made by, or reviewed and approved by, individual(s) not previously involved in the subject of the appeal. | |
|  | **9.7.8** | **Accorp** gives formal notice to the appellant of the end of the appeals handling process. | |

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| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **9.8** |  | **Complaints** | |
|  | **9.8.1** | **Accorp** ensures that the complaints handling process is publicly available and **Accorp** shall responsible for all decisions at all levels of the complaints handling process. | |
|  | **9.8.2** | **Accorp** ensures thesubmission; investigation and decision on complaints should not result in any discriminatory actions against the complainant. | |
|  | **9.8.3** | On receipt of a complaint **Accorp Partners Cert Inc.**. establish and confirm whether the complaint relates to certification activities that it is responsible for and, if so, dealt with it. If the complaint relates to a certified client, then the examination of the complaint considers the effectiveness of the certified management system. | |
|  | **9.8.4** | Any ***valid*** complaint about a certified client shall also be referred by **Accorp** to the certified client in question at an appropriate time. | |
|  | **9.8.5** | **Accorp** has a documented process to receive, evaluate and make decisions on complaints. The process is subject to requirements for confidentiality, as it relates to the complainant and to the subject of the complaint. | |
|  | **9.8.6** | The complaints handling process includes at least the following elements and methods:   1. The process for receiving, validating, investigating the complaint, and for deciding what actions are to be taken in response to it, 2. Tracking and recording complaints, including actions undertaken in response to them, 3. Ensuring that any appropriate correction and corrective actions are taken, | |
|  | **9.8.7** | **Accorp** will ensure that it gathers and verifies all necessary information to validate and process the complaint. | |
|  | **9.8.8** | **Accorp** will wherever possible acknowledge receipt of the complaint, and provides the complainant with progress reports on the outcome as a result of complain. | |
|  | **9.8.9** | The decision regarding the complaint is made, reviewed, approved and communicated by individuals not previously involved in the subject of the complaint. | |
|  | **9.8.10** | Wherever possible, **Accorp Partners Cert Inc.** will give formal notice of the end of the complaints handling process to the complainant. | |
|  | **9.8.11** | **Accorp** will determine, together with the client and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution is made to public. | |

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| **Title: Process Requirement** | | | **Section: 9.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **9.9** |  | **Client Records** | |
|  | **9.9.1** | **Accorp Partners Cert Inc.** will maintain records on the audit and other certification activities for all clients, including all organisations that submitted applications, and all organisations audited, certified or with certification suspended or withdrawn. | |
|  | **9.9.2** | Records on certified clients includes followings as minimum:   1. Application information and initial, surveillance and recertification audit reports 2. Certification agreement 3. Justification of the methodology used for sampling ***of sites***, as appropriate 4. Justification for auditor time determination 5. Verification of correction and corrective actions 6. Records of complaints and appeals, and any subsequent correction or corrective actions 7. committee deliberations and decisions, if applicable 8. Documentation of the certification decisions 9. Certification documents, including the scope of certification with respect to product, process or service, as applicable 10. Related records necessary to establish the credibility of the certification, such as evidence of the competence of auditors and technical experts. 11. ***Audit programmes***   **Reference-**   * Accorp-QP-05 Quality Procedure for control of Records | |
|  | **9.9.3** | **Accorp Partners Cert Inc.** will ensure that it keeps the records on applicants and clients secure to ensure that the information is kept confidential. Records will be transported, transmitted or transferred in a way that ensures that confidentiality is maintained. | |
|  | **9.9.4** | **Accorp Partners Cert Inc.** has established a procedure on the retention of records. Record ***of certified clients and previously certified client*** shall be retained for the duration of the current cycle plus one full certification cycle. Retention of records will also adhere to the requirements of legislation or regulation. Law of Land supersedes. | |
| **Title: Management System Requirements** | | | **Section: 10.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
| **10.0** |  | **Management System Requirement** | |
| **10.1** |  | **Accorp Partners Cert Inc.** has established and maintains a management system which supports and demonstrates the consistent achievement of the requirements of this International Standard. In addition to meeting the requirements of clauses 5 to 9,  **Accorp Partners Cert Inc.** has implemented a management system in accordance with the requirements for general management systems as determined in clause 10.2 (option A). Clause 10.3 (option B) has not been addressed in this Quality Manual and has been omitted. | |
| **10.2** |  | **Option A: General management system requirement**  **Accorp Partners Cert Inc.** has selected Option A, hence the requirements given in the clause no. 10.3 and its sub–clauses are not applicable. | |
|  | **10.2.1** | **Accorp Partners Cert Inc.** has documented, implemented and maintains a management system that supports and demonstrates the consistent achievement of the requirements of this standard.  C.E.O of **Accorp Partners Cert Inc.** have established and documented policies and objectives for its activities. The C.E.O can provide evidence of their commitment to the development and implementation of the management system in accordance with the requirements of this standard. C.E.O ensures that the policies are understood, implemented and maintained at all levels within **Accorp Partners Cert Inc..**  C.E.O have appointed a member of management **(Quality Manager)** who, irrespective of other responsibilities will have responsibility and authority that include:   1. Ensuring that processes and procedures needed for the management system are established, implemented and maintained, and 2. Reports to the C.E.O on the performance of the management system and any need for improvement. | |

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| **Title: Management System Requirements** | | | **Section: 10.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **10.2.2** | **Management System Manual:** The requirements of the International Standard (ISO/IEC 17021-1:2015 and IAF Regulatory Documents) have been addressed in the Quality Manual and in associated procedures, policies and documents, all of which are accessible to all personnel. | |
|  | **10.2.3** | **Control of documents: Accorp** has established a procedure which details how documents are controlled (internal and external) that relate to the fulfilment of this International Standard. The procedures define the controls needed:   1. To approve documents for adequacy prior to issue 2. To review and update as necessary and re–approve documents 3. To ensure that changes and the current revision status of documents 4. To ensure that relevant versions of applicable documents are available at point of use 5. To ensure that documents remain legible and readily identifiable 6. To ensure that documents of external origin are identified and their distribution controlled, and 7. To prevent the unintended use of obsolete documents, and to apply suitable identification to them if they are retained for any purpose.   **Reference-**   * Accorp-QP-04 Quality Procedure for control of Documents | |
|  | **10.2.4** | **Control of records:** Accorp Partners Cert Inc. has established procedures to define the controls needed for the identification, storage, protection, retrieval, retention time and disposition of its records related to the fulfilment of this International Standard. **Accorp** has also included in the procedure retention consistent with legal and contractual obligations. Access to records will be consistent with confidentiality arrangements.  **Reference-**   * Accorp-QP-05 Quality Procedure for control of Records | |
|  | **10.2.5** | **Management review** | |
|  | **10.2.5.1** | **General**  C.E.O have established procedures to review its management system at planned intervals to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of this International Standard. The reviews will be conducted **at least once per year.** | |

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| **Title: Management System Requirements** | | | **Section: 10.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **10.2.5.2** | **Review Inputs**  The input to the management review includes followings as minimum:   1. Results of internal and external audits 2. Feedback from clients and interested parties related to the fulfilment of this International Standard 3. Feedback from the Impartiality Committee (responsibility for safeguarding impartiality) 4. The status of preventive and corrective actions 5. Follow up actions from previous management reviews 6. The fulfilment of objectives 7. Changes that could affect the management system, and 8. Appeals and complaints | |
|  | **10.2.5.3** | **Review outputs**  The output from the management review includes decisions related to:   1. Improvement of the effectiveness of the management system and its processes 2. Improvement of the certification services related to the fulfilment of this International Standard, and 3. Resource needs   **Reference-**   1. Accorp-QP-12 Quality Procedure for Management Review | |
|  | **10.2.6** | **Internal audits** | |
|  | **10.2.6.1** | **Accorp** has established procedures for conducting Internal Audits to verify that it fulfils the requirements of this International Standard and that the management system is effectively implemented and maintained. | |
|  | **10.2.6.2** | An audit programme is planned (covering all activities and all clauses of ISO 17021), taking into consideration the importance of the processes and areas to be audited, as well as the results of previous audits. | |
|  | **10.2.6.3** | Internal audits will be performed **at least once per year**. The frequency of internal audits may be reduced if **Accorp** demonstrates that its management system continues to be effectively implemented according to this International Standard and has proven stability. | |

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| **Title: Management System Requirements** | | | **Section: 10.0** |
| **Sec.** | **Sub. Sec.** | **Description** | |
|  | **10.2.6.4** | **Accorp** will ensure that:   1. Internal audits are performed by qualified personnel knowledgeable in certification, auditing and the requirements of this International Standard. 2. Auditors do not audit their own work 3. Personnel responsible for the area audited are informed of the outcome of the audit 4. Any actions resulting from internal audits are taken in a timely and appropriate manner, and 5. Any opportunities for improvements are identified.   **Reference**   1. Accorp-QP-11 For Conducting Internal audit | |
|  | **10.2.7** | **Corrective actions: Accorp** has established procedures for identification and management of nonconformities in its operations. **Accorp** shall also, where necessary, take actions to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions shall be appropriate to the impact of the problems encountered. The procedure defines requirements for:   1. Identifying nonconformities arising from whatever source (e.g. from complaints or internal audits) 2. Determining the causes of nonconformity 3. Correcting nonconformities 4. Evaluating the need for actions to ensure that nonconformities do not recur 5. Determining and implementing in a timely manner, the actions needed 6. Recording the results of actions taken, and 7. Reviewing the effectiveness of corrective actions   **Reference**   1. Accorp-QP-13 Quality Procedure for Corrective action | |