1.0 Purpose

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

The certification process consists of the phases:

a) Contract review and offer preparation,

b) Audit preparation,

c) Performance of audit stage 1,

d) Performance of audit stage 2,

e) Issue of the certificate, and

f) Surveillance of the certified management system.

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

2.0 Scope

This procedure applies to GTS Abu Dhabi and its external auditors.

3.0 Procedure

3.1 Certification Process for Marketing Office

3.1.1 Gulf Test Sales and Marketing team based on its marketing efforts does generate the Enquiries and Submit Questionnaire Form to GTS Abu Dhabi. GTS Abu Dhabi office does prepare Quotations based on the following information provided:

a) Desired scope of the certification;

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

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

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

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

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

3.1.2 The Marketing Team Role is only submitting the quotation to client and get it accepted. Once proposal is accepted and Agreement is signed, the acceptance will be acknowledged by GTS Abu Dhabi Office. And then onwards GTS Abu Dhabi will follow below procedure for certification.
3.2 Application

Gulf Test Safety Consultancies shall ask the clients’ authorized representative to fill Core questionnaire (GTS-MSC-FOR-13 Core Questionnaire General / GTS-MSC-FOR-14 Core Questionnaire Multisite) with necessary details for application.

3.3 Application Review

3.3.1 Application review is done by Gulf Test Safety Consultancies representative manually.

3.3.2 Once application is in review stage, If reviewer finds it as not acceptable- Manual check needs to be reviewed to check all the information are correct and send Application back to Draft Stage (Decline). Reviewer need to justify the reason for declining the same.

3.3.3 This review shall draw the following information but not limited to;

1. Contact details of client organization (address, contact person name etc.)
2. Scope of certification desired and how the organization wishes it to appear on the certificate (NOTE: minimal changes to the scope will be allowed after the contract has been finalized)
4. EA code(s) – EA codes are very important. They are used to identify and analyse the competence of Gulf Test certification personnel.
5. Description of premises of facility, number of employees, number of work shifts, current projects, yards, their dimensions, outsourced activities
6. Status of existing quality or other management system.
7. Language spoken, if the native language of the client is other than English, Gulf Test shall identify a suitable expert.
8. Number of sites, to enable Gulf Test to decide on sampling.
9. Total employees at each site and
10. Shift details at each site.
11. Details of Processes, aspects & impacts, risks, hazards and any other information necessary to identify the audit risk category and man days.

3.4 Contract Review

3.4.1 Upon Completion of Application Review a Contract Review (GTS-MSC-FOR-09 Contract Review) shall be carried out based on Auditor competence to perform audit for selected EAC/NACE or category for ISO standards will be allocated.

3.4.2 If the contract review is successful, an Audit Programme for full certification cycle is developed at quotation stage which covers the complete management system requirements. The Quotation includes man-day by taking consideration given in IAF Guidance or it can be risk based. For ISO Requirements (or specific scheme requirements, if any applicable) and consideration to take account of factors such as the requirements of the relevant management system standard, shift work, repetitive work, part time employees and the size and complexity of the operation eg. Design included or not.
3.4.3 Once all the questions have been answered the total number of employees is adjusted to give a total of equivalent full time employees; this figure is used to calculate the man-days required which maybe lesser or greater than that given by the less sophisticated tables in current IAF Guidance.

3.4.4 The man-days given will depend upon the standard, including the EA and NACE code for all Standards. Every NACE Code/Sub-Category has already been allocated a Risk Code from 1 (highest) to 4 (lowest). This assessment of every NACE Code ensures consistency between clients and reduces the time taken for risk assessment at contract review. Within any given NACE Code these Risk Codes can vary from Standard to Standard based on relevant technological and regulatory requirements.

3.4.5 This process is undertaken for each site in a multi-site operation. A combined quotation is prepared by Sales Executive, which takes account of the sampling rules in current IAF Guidance and scheme specific Guidelines. Once the Number of Man-days Decided, the quotation will be prepared manually in which will appear for complete 3 years cycle, Includes Document review audit, On Site audit, And Surveillance audits as per defined frequency (which is at least once in a calendar year) at application stage. And Recertification audit to be conducted prior to expiry date of certificate. The frequency for First year surveillance is decided based on certification decision and subsequent cycles begin with recertification decision.

3.4.6 Once the Certificate of client is Issued, The Job sheet for Next Cycle of Surveillance will be created which will appear with next due month of surveillance (which is within 12 months from date of certification). However, to accommodate the factors like Seasonal clients -Agriculture- where cropping is major activity, Gulf Test Safety Consultancies Office is allowed to adjust the Frequency of Surveillance audit.

3.4.7 For the Transfer clients, where Certificate from earlier CB is valid, audit is performed by another CB, but the evidence of audit and closure of NCs along with sufficient evidences available, then Gulf Test is allowed to justify and record the adjustment to the Audit programme (Modification to the Audit Time as originally required by IAF MD. Refer section 3.5.5 for adjustments).

3.4.8 If client operates in shifts, the shift activities to be considered while developing audit plan.

3.5 Determining Audit time

3.5.1 Gulf Test Safety shall follow IAF MD5:2015 Basis for Man-day Calculation to determine the Audit time and since ASCB is not a member of IAF, Gulf Test may also calculate the man days on risk based.

3.5.2 Based on consideration of following aspects.

- The requirements of management system standard
- Complexity of Client and its management system
- Technological and regulatory context
- Outsourced activity included in scope
- The result of prior audits
- Size of Organization and Number of sites, Geographical Location and Multi site considerations
- Risk Associated (Gulf Test defined this between Risk 1 (high) to Risk 4) with product, processes
- Integrated, Combined or Joint Audit
3.5.3 The duration of audit time based on specific scheme guidelines of IAF requirements. The audit plan does not count the time spent by audit team member who is not assigned an auditor (for eg. Observer or specialist).

3.5.4 Deviations (+ or -) to the required audit days shall be allowed by application reviewer after documenting justification. The reasons for reduction are recorded in application review form and may include the following:

**Reasons for reduction of Audit Man-Days:**

a) Companies performing basic activities  
b) If clause 8.3 is out of scope  
c) Maturity of Management System  
d) Availability of another system certification  
e) Combined audit of Integrated Management System  
f) Prior knowledge of client about Management System  
g) Availability of Automation for key / entire processes  
h) Significant staff working in “off location” (for example, Drivers)  
i) Similar processes / Repetitive activities (servicing activities)  
j) Repetitive processes within scope (significant staff perform similar simple function)  
k) Identical activities of low complexity performed in all shifts

**Reasons for addition of Audit Man-Days:**

a) Complex transport to the plant/site  
b) Number of employees speaking different languages in plant/site;  
c) Documentation provided in more than one language; Translator Required  
d) Very large site for the number of personnel  
e) High risk group/ High degree of regulation required by the management system  
f) Complexity of activities (Availability of complex system/ different kind of processes / higher number of unique activities / low complex)  
g) Certification in more than one plant/site  
h) Activities requiring visit for more than one plant/ site or visit of temporary sites  
i) Higher sensitivity of receiving environment  
j) Views of interested parties  
k) Indirect aspects (For EMS audits)  
l) Additional / unusual environmental aspects or regulated conditions for the sector (For EMS audits)  
m) Risks of environmental aspects, impacts arising or likely arising (For EMS audits)  
n) Consequences of incidents, accidents and potential emergency situations  
o) History of environmental problems contributed by the organization. (For EMS audits)  
p) Absence of certified relevant management system (in audit days)

3.5.5 All the above justification may not be applicable for all management system certification audits. Application reviewer shall verify the specific management system requirements and other applicable documents such as IAF MD 5, IAF MD 11 etc. to apply the deviations (+ or -). The documentation of the justification for the deviation (+ or -) applied is therefore considered important and Veritas Assurance shall communicate this information to the applicant.
3.5.6 For certifying specific management systems such as Information security management systems, audit day calculation is performed based on the requirements of relevant management system schemes and applicable annexes of guidance documents outlining specific requirements for certification bodies shall be addressed in addition the aforesaid requirements.

3.5.7 Audit days calculation shall not include the time spent on travelling (to and from audit sites), time spent by any team member who is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and trainee auditors). It shall be noted by the application reviewer that the use of translators, interpreters can necessitate additional time.

3.6 Multi-site Sampling

3.6.1 The procedure for selection of Man-days when client have multiple sites is followed as per IAF MD 01 guidelines.

3.6.2 Only the organizations fulfilling the definition of “multi-site organizations” will be eligible for sampling.

3.6.3 Sampling is applied based on the requirements of the specific management system for which the client is applied and as per the requirements of IAF Mandatory Document for the Certification of Multiple Sites based on Sampling - IAF MD 1.

3.6.4 The review shall identify if the client has recognized one central function location for its sites, where activities and other functional requirements are planned, controlled and managed for the management system of the whole organization.

3.6.5 It shall be noted by the application reviewer if the processes at all sites are identical or partiality identical except for the central office. If the activities of the sites are significantly dissimilar, then Gulf Test shall not apply sampling.

3.6.6 Addition of a new site to an existing multi-site requires Stage 1 and Stage 2 audits.

3.6.7 When the review identifies the sites of organization as temporary sites and if the scope of sites is included in the management system, the certification documents of Veritas Assurance shall identify the sites as “Temporary Sites”.

3.7 For Multi-site clients, where sampling can’t be applied

3.7.1 Gulf Test shall not apply sampling if the review identifies any situations involving the audit and certification of Management Systems operated by organization with a network of sites where application of site sampling is not appropriate. Such situations are not limited to:

- Activities of the sites identified in the application are of dissimilar.
- If the organization request an audit for each of its sites
- Requirements of specific management system that requires audit of each site
- Regulatory and or legal requirement for the conduct of systematic audits for each site.

3.7.2 Gulf Test shall apply the requirements of IAF MD 19 for the organizations where sampling is not permitted.
3.7.3 For specific management systems such as Information Safety Management Systems (ISMS) sampling shall be based on the standard requirements specifying these management systems.

3.8 Multiple management system standards

3.8.1 Application reviewer shall review the applicant organization's type of management system; Combined / Integrated Management System (For example, Quality, Environmental and Occupational management systems).

3.8.2 Based on the information provided by the applicant organization and the criteria set by Gulf Test, the application reviewer shall identify the organization’s level of integration of the management system and shall identify the nature of audit assignment and the number of man-days in which the audit of all systems can be covered effectively.

3.8.3 A combined audit is an audit of an organization’s management system(s) against two or more sets of audit criteria/standards conducted at the same time. An integrated management system results only when an organization uses a single management system to manage multiple aspects of organizational performance, to meet the requirements of more than one management system standard. Gulf Test applies the requirements of IAF MD 11 to determine audit time for an audit covering more than one management system.

3.9 Planning audits

3.9.1 Determining audit objectives, scope and criteria

3.9.1.1 Gulf Test defines Audit Objective, the scope and criteria of Audit after discussion with client.

3.9.1.2 Defined audit objective includes

- Determination of the conformity if clients' management system complies with the audit criteria.
- Determination of clients Management system to ensure that client meets applicable statutory, regulatory and contractual requirements
- Determination of the effectiveness of the management system to ensure the client expect to achieve specified objectives
- As Applicable, identification of areas for potential improvement of management system

3.9.1.3 Clients' audit scope is defined in a manner that it describes extent and boundaries of audit which includes sites, organization units, activities and processes to be audited.

3.9.1.4 The audit criteria should be used as a reference against which conformity is determined which should include

  ✓ The requirements of management system standard
  ✓ The defined processes and documents developed by client based on management system standard.
3.9.2 Audit team selection and assignments

3.9.2.1 Gulf Test follows the Procedure for ‘Human Resource and Competence’ for audit team selection GTS-MSC-QP-13 and for continuous review of audit team competence. As well ASCB requirements shall be considered in addition to Gulf Test Procedures.

3.9.2.2 The audit coordinator shall make use of the application review results to identify the technical sector, audit risk category of the client organization.

3.9.2.3 For every audit, the audit coordinator shall select the audit team members based on skills, experience and, special product expertise as needed for the client scope of registration. The selection shall be based on the following:

1) Scheme qualification
2) Level of impartiality
3) Specific industry experience
4) Language skill
5) Geography
6) Organization input

3.9.2.4 The required competence of Gulf Test personnel corresponding to the technical sector, audit risk category of the client organization (documented as results of application review) shall be selected by the audit coordinator using the Competency and skill matrix.

3.9.2.5 The audit coordinator shall identify the available competent auditors and shall constitute an audit team. In doing so, the audit coordinator shall ensure that the audit team has the totality of competences required to carry out the audit.

3.9.2.6 The size and composition of the audit team shall be designed considering the following:

- Audit scope, objective and time
- Whether audit is combined, Joint or integrated
- Overall competence of Audit team
- Certification Requirements – Statutory, regulatory and/or contractual requirements
- Language and culture

The following shall be other considerations:

a) For integrated management system audits, the in-depth knowledge of audit team leader selected in at least one of the standard and awareness of other standards used for the audit.

b) Need of technical experts, translators and interpreters who shall operate under direction of audit team leader to supplement the knowledge and skills of Gulf Test audit team

c) The criteria set by Gulf Test to select the technical experts

3.9.2.7 Auditors in training or whose performance needs to be monitored can be part of audit team, provided that a witness auditor who can take over the duties, responsibilities for the audit findings of trainee auditor or for the auditor who is under witness shall be part of the audit team.
3.9.2.8 In constituting the audit team, audit coordinator may consult the audit team leader in selection of audit team members required to audit specific processes, functions, sites, areas or activities in the audit. In general, the audit team is appointed and shall composed of auditors (and technical experts, as necessary) who, between them, have the competence to perform the certification of the applicant organization.

3.9.2.9 Technical experts can provide advice to the audit team for preparation, planning or audit. Experts can also assist/ advice audit team offsite by use of proper communication tools. In such cases, the auditors shall record the details of experts and details of input. Exceptions for such offsite participation of experts shall be for high risk codes (For example, Health, pharmaceuticals etc.), where onsite participation of experts concerned is mandatory.

3.9.3 Audit Plan

3.9.3.1 Audit Team Leader shall prepare an audit plan which includes

a) The audit Objective
b) The audit criteria
c) The audit scope
d) Date and sites where on site audit activity to be conducted (Includes Temporary site and remote site where applicable)
e) The expected duration of onsite audit activities
f) The roles and responsibilities of the audit team members and accompanying persons such as observers and interpreters.

3.9.3.2 Once the audit date is confirmed, audit plan is sent to client by email at least 1 week prior to audit.

3.9.4 Communication of audit team tasks

Each Auditor is communicated through emails, Outlook calendar.

3.9.4.1 Communication of audit plan

The audit date shall be agreed with client in advance over phone and/or mail confirmation and audit plan communicated to client by email.

3.9.4.2 Communication concerning audit team members

Gulf Test provides audit plan to client in advance which appears with names of audit team members and time designed for auditor for particular department/process audit, and provides Auditor profile to client (upon request).

The Submission of audit plan & auditor profile to client in advance enables the client to object audit the appointment of any particular team member and enables Gulf Test Safety Consultancies to reconstitute team in response to valid objection.
3.10 Initial certification

3.10.1 Stage 1 Audit

3.10.1.1 The Document review audit is planned in a manner that the Objective of Stage 1 Audit should be met which includes:

- Review of Clients’ Management system documented information
- Evaluate the site- specific conditions and discuss preparedness for certification audit
- Review Clients’ status and Understand the Standard requirements
- Obtain necessary information regarding scope of management system- clients sites, Process and equipment’s, levels of controls , applicable regulatory/statutory requirements
- Review the allocation of resources for stage 2 audit
- Planning of Stage 2 audit based on understanding of clients’ management system
- Evaluation of IA and MRM planning

3.10.1.2 Upon completion of stage 1 audit, Audit report should be submitted to client within 5 working days, which includes and potential nonconformities identified at stage 1 (if any) and the recommendation for readiness for stage 2 audit.

3.10.1.3 Stage 2 date will be decided between and client and organization based on consideration of time required for closure of potential nonconformities raised at stage 1 audit. Based on Auditor Recommendation, it may require repeating stage 1 audit.

3.10.1.4 Along with Report Client should be informed for postponement or cancellation of Stage 2 audit (if required) if Stage 2 audit is planned in advance

3.10.1.5 For ISO Certification – document review must cover below points.

Documents to be reviewed but not limited to:

- Quality Manual
- Quality Objectives
- Operational Control Procedure
- Procedure for determining context of the organization and interested parties
- Procedure for addressing risks and opportunities
- Procedure for competence, training and awareness
- Procedure for equipment maintenance and measuring equipment
- Procedure for document and record control
- Sales procedure
- Procedure for design and development
- Procedure for production and service provision
- Warehousing procedure
- Procedure for management of nonconformities and corrective actions
- Procedure for monitoring customer satisfaction
- Procedure for internal audit
- Procedure for management review
3.10.2 Stage 2 Audit

3.10.2.1 Stage 2 audits is planned for evaluation of implementation and effectiveness of clients’ Management system which covers auditing of at least:

- Information and evidence about conformity of management system standard requirements
- KPIs and Objectives- Performance monitoring, Measurement, reporting and reviewing
- Client management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements
- Operation control of clients’ processes
- Management responsibility for clients’ policies

Mandatory Records to be verified but not limited to:

- Risk assessments Evidence
- Quality Objective and action plan to achieved them
- Planning and Controlling details
- Monitoring and measuring equipment calibration records
- Records of training, skills, experience and qualifications
- Product/service requirements review records
- Record about design and development outputs review
- Records about design and development inputs
- Records of design and development controls
- Records of design and development outputs
- Design and development changes records
- Characteristics of product to be produced and service to be provided
- Records about customer property
- Production/service provision change control records
- Record of conformity of product/service with acceptance criteria (clause 8.6)
- Record of nonconforming outputs
- Monitoring and measurement results
- Internal audit program
- Results of internal audits
- Results of the management review
- Results of corrective actions

Audit conclusions shall be decided based on analyzing all the audit evidences gathered during stage 1 and stage 2 audits.

3.11 Conducting Audit

3.11.1 Auditor follows AFM (Auditor Field Manual) while conducting audit.

3.11.2 If any part of audit to be done by Electronic means or where site to be audited is virtual, Gulf Test ensures that it should be done by auditor will appropriate competence.
3.11.3 Opening Meeting

A Formal opening meeting should be held with clients’ management and usually conducted by Audit team leader to provide the short explanation of audit activities to be undertaken. Opening meeting should be conducted in accordance with AFM.

3.11.4 Communication during the audit

Refer AFM (Auditor field manual)

3.11.5 Obtaining and verifying information

- Audit should obtain the Information relevant to Audit objectives, scope and criteria by appropriate sampling and should be verified to become audit evidence.
- During the audit, auditor can get the information through interviews, observations of processes and activities and/or review of documents and records.

3.11.6 Identifying and recording audit findings

- Definitions of findings are available in AFM
- Audit findings summarizing conformity and non confirmatory should be identified, classified and recorded to enable an informed certification decision to be made or certification to be maintained.
- Opportunity for Information should be identified and recorded.
- A finding of Non conformity should be recorded against specific requirement, and should contain clear statement of non conformity, identifying in detail the objective evidence on which the NC is based. Non conformities should be discussed with client to ensure that evidence is accurate and non conformity is well understood.
- The audit team leader should attempt to resolve any diverging options between audit team and client concerning audit evidence or findings and unresolved points should be recorded.

3.11.7 Preparing Audit conclusions

- Recording of findings followed as per AFM
- As it is a requirement that NCs etc. be tied to a clause of the standard being audited and/or the documented management system declared by the client, it follows that the Auditor must have an up to date copy of the relevant standard(s) during the audit.
- The Audit team under the responsibility of audit team leader, prior to the closing meeting, shall follow as below and record the findings in audit report, as necessary:
  a) review the audit findings, and any other appropriate information collected during the audit, against the audit objectives and audit criteria and classify the non conformities;
  b) agree upon the audit conclusions, taking into account the uncertainty inherent in the audit
process;

c) identify any necessary follow-up actions;

d) Confirm the appropriateness of the audit program me or identify any modification required for future audits (e.g. scope, audit time or dates, surveillance, recertification, frequency, competence).

3.11.8 Conducting Closing Meeting

- Closing meeting should be conducted in accordance with AFM
- The Purpose of closing meeting is usually conducted by audit team leader to present audit conclusions and recommendation.
- Attendance of closing meeting shall be recorded and should be held in presence of clients’ management.
- Any Non conformity should be presented in a manner that is understood by client and timeframe responding for the same should be agreed.
- The Client should given opportunity to ask questions. Any diverging opinions regarding the audit findings and conclusion between audit team and client should be discussed and resolved where possible. Any non resolved diverging opinions shall be recorded and referred to Gulf Test Safety Consultancies office.

3.11.9 Audit Report

3.11.9.1 Audit report should be provided to client within 5 working days after completion of audit

3.11.9.2 The audit team may identify the opportunities for improvement but should not recommend specific solution. Ownership of the audit report should be maintained by Gulf Test. Hence Gulf Test has specific format of Report format.

3.11.9.3 Audit team leader should ensure that Audit report is prepared and he is responsible for the content. The audit report should be accurate, concise and clear record.

3.11.9.4 Gulf Test Safety Consultancies report format includes

- Identification of CB (Logo)
- Name and address of client and representative
- Type of Audit (i.e. Report Ref No- 12345/2019/ SU1)
  - Where- DR1- Document review
  - OA1- Onsite audit
  - SU1- Surveillance audit 1/2
  - RC1- recertification Audit
  - SP1- Special Audit
  - PL1- Pre Assessment Audit
- The Audit Criteria
- The Audit Objective
- Scope of Audit
- Deviation from Audit Plan with reasons (Should be mentioned on Summary page if applicable)
- Any Significant Issues impacting audit programme (Should be mentioned on Summary page if applicable)
- Identification of Audit Team leader, team Member and Accompany persons
3.11.10 Cause Analysis of Non Conformities

Gulf Test should ask client to analyze the cause and describe specific correction and corrective action taken or planned to be taken to eliminate detected nonconformities within define timeframe.

3.11.11 Effectiveness of Corrections and Corrective actions

Gulf Test auditor reviews the corrective action plan along with evidences submitted by client to determine if it's accepted. The result of review shall be recorded and informed to client. Gulf Test operations informs to client if additional full audit or documented evidence required verifying effective corrective action.

3.12 Certification Decision

3.12.1 Gulf Test has procedure for Selection of Decision maker, which ensures that Decision maker should not be part of audit team.

- The Person Assigned for Decision making should be employed by Gulf Test or should be under legally enforceable agreement with Gulf Test or under organization control of Gulf Test.

- The Decision maker employed by any means mentioned above should fulfil requirements of ISO 17021

- The decision of certification including any additional information or clarification should be recorded in Report review checklist.

3.12.2 Actions prior to making Decision

Gulf Test has procedure to conduct effective review by filling Report review checklist for each client prior to making decision for decision for granting or refusing Certification, expanding or reducing scope of certification, suspending or restoring scope of certification, Withdrawing or renewing certification.
3.12.3 Information for Granting Certification

3.12.3.1 The Information provided by Audit team to Certification Manager should include – (Report)
- Audit report,
- Comments on NCs and corrections and corrective action plan (where applicable),
- Confirmation on information provided by client at application stage (i.e. No of employees, scope of certification etc.),
- Confirmation on audit objectives achieved,
- Recommendation to grant or not certification along with conditions and observations.

3.12.3.2 If any major nonconformance recorded during certification audit, and client is not able to submit Correction and corrective action within 6 months from completion of audit, Stage 2 audit should be repeated prior to recommendation for certificate issuance.

3.12.3.3 Gulf Test should make the decision for renewing certification based on the result if recertification audit and the result of review of system over the period of certification and complaints received from users; this is part of Report review checklist.

3.13 Maintaining Certification

3.13.1 If client continues to satisfy the requirement of management system standard, certificate of client should be maintained, Provided

A) Auditor confirms that there is no situation which may lead to suspension or withdrawal of certificate
B) Surveillance Audit conducted and report of Audit is verified by reviewer and confirmation on effectiveness of operation of client related to management system certification is accepted.

3.13.2 Surveillance Activities

3.13.2.1 Gulf Test has provision in agreement to confirm the surveillance audit at regular intervals within 3 years cycle of certification. The frequency should be at least one Surveillance audit within 12 months from date of Certification audit and to be conducted to monitor and verify the scope of certification.

3.13.2.2 Surveillance audit is to confirm that the clients’ management system continues to meet requirements of Management system certification.

3.13.2.3 Surveillance audits are conducted on site at the prescribed periodicity.

3.13.2.4 More than a month before surveillance audit becomes due, client is informed / reminded about it and sought for the convenient date, when confirmed, allocation done to appropriate auditor / auditing team as the case may be and intimation about it sent to the client.

3.13.2.5 Generally all functions are covered at each surveillance, but it’s not necessary to have full system audit. In addition, surveillance audit includes at least the following:
• Internal audit and Management review
• Follow up action on findings, if any
• Complaint Handling System of client
• Effectiveness of the Management system with regards to achieving the certified clients’ objectives and Intended results of respective management system
• Progress of planned activities aimed at continual improvement
• Continuing operational Control
• Review of changes, if any, since last audit and its impact on management system and whether it calls for any action
• Use of logo of Gulf Test Safety Consultancies and AB (where applicable) and other references to certifications

3.13.2.6 In case any other aspect needs to be verified in addition to system audit (such as investigation of complaint received by Gulf Test Safety Consultancies, change of scope, any pending request with the client, any other means of monitoring performance etc), auditors are informed suitably.

3.13.2.7 In case client does not get surveillance audit conducted by due date, case is processed for suspension of certificate by following Gulf Test Safety Consultancies Procedure.

3.13.3 Delayed surveillance

3.13.3.1 There may be times when a scheduled surveillance audit cannot be conducted as planned. In such circumstances, auditors must be aware of the implications of such a delay. For example, there may be a risk that the client has not been maintaining their systems in accordance with the relevant standard(s).

3.13.3.2 Auditors must therefore, when conducting delayed surveillance audits, evaluate the client’s systems for continuing compliance.

3.13.3.3 Some activities that need to be given attention would be:

• Have there been any changes to processes?
• Are changes to the documented system being made to ensure they reflect actual practices (new/changes processes)
• Are there any changes to top management and/or key personnel?
• Are competence records being updated for new staff (and any new processes introduced)
• Significant increase or decrease in employee numbers
• Are there reasons for increases/decreases? Has the company been having problems or have they increased their business levels (increase in business levels increases the risk of controls not being managed effectively)
• Customer complaints and feedback – may be an indication of the ‘health’ of the company in the eyes of their customers
• Internal performance data – below target results may indicate system problems
• Internal audits and management reviews – if not being conducted as scheduled, it could be an indication of lack of resources

✓ The above is not an exhaustive list.
✓ If extra time is needed on the next audit because of problems identified, this must be noted on the Admin page of the report.
If there are any problems, NCs/Ds must be recorded as normal.
The next audit must be planned to bring it in line with the audit cycle (scheduled on CMS). Notify the client of this

### 3.13.4 Recertification

3.13.4.1 Recertification audit is to confirm that the clients’ management system continues to meet requirements of Management system certification.

3.13.4.2 Approximately 60 Days before the certificate is due to expire, the client shall be informed of it and requested to apply for re-certification well in advance. Where necessary, appropriate follow up action will be taken to ensure that application for recertification is received and processed expeditiously to ensure that recertification audit and other associated activities are completed well in time so that decision about recertification takes place before the expiry date.

3.13.4.3 The Recertification should include the Review of Previous Surveillance audit reports and should consider the performance of clients’ management system over recent certification cycle.

3.13.4.4 During the COVID-19 crisis, if a CAB conducts a part of the recertification of a management system with remote audit activities and plans to complete the remainder of the audit onsite within six months, it is possible to reissue the certificate at the conclusion of the remote audit activities based on Ref GTS-MSC-QP-23

3.13.4.5 If the CAB is not able to perform evaluation activities physically or when these cannot fully be replaced with evaluation activities as per IAF MD 4, then the normal scheduled recertification activities may be postponed for up to 6 months.

3.13.4.6 A certificate can only be renewed if the CAB is able to evaluate all the applicable requirements of ISO/IEC 17021-1 (9.6.3.2) through a complete and effective audit of the client’s management system, followed by a successful review and decision making activities.

3.13.4.7 Auditors may need to conduct and record a Stage 1 audit of the client’s Management System as part of the Triennial Recertification process 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), unless a review of changes has been recorded during the surveillance visits of the last three years. This requirement will be communicated to the Auditor via the email.

If such changes occur any time during Certification cycle, it may require arranging special audit.

3.13.4.8 The recertification audit must done on site and Should cover all clauses of the standard or scheme and must address the following:

- 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;
- demonstrated commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance;
- the effectiveness of management system to the achievement of the organization's objectives and intended results of certified management system.
3.13.4.9 When, during a recertification audit, D’s or NC’s are raised, the Auditor must inform the client that corrective action plans and, where applicable, objective evidence of closure must be completed and submitted at least 2 weeks prior to the expiration of their existing certification. So that it can and verified and Certificate can be generated before expiration of their existing certification.

3.13.4.10 When Recertification activities are successfully completed prior to expiry date of existing certification, the expiry date of the new certification can be based on Expiry date of existing certification. The Issue date on new certificate should be after the Recertification decision.

3.13.4.11 If the Recertification audit is not completed, or CAPs not verified and accepted prior to the expiry date of certification, then re-certification should not be recommended and the validity of certificate cannot be extended.

3.13.4.12 Following Expiry date of certification, Certificate of client can be restored within 6 Months, provided That the outstanding recertification activities are completed or stage 2 conducted. The effective date on the certificate should be on or after the decision and Expiry date should be based on Prior certification cycle.

3.13.5 Special Audits

In addition to routines visits, sometime special audits/ visits may be required to be carried out. Some of the circumstances for such special visits are:

3.13.5.1 Expanding Scope

In response to application from client for extension of scope already granted, Special Visit Should be conducted to decide whether Scope extension can be granted or not. This audit can be coupled with Surveillance audit.

Ref GTS-MSC-FOR-08, CCR Form – Related to certificate reissuance

3.13.5.2 Short Noticed audits

Special Audit May include Short Notice audit or Un- announced audit in circumstances as below.

- Investigation of complaints received, if warrant to do so
- The findings during a previous certification/Surveillance/ recertification/audit are so serious or numerous that a revisit is deemed necessary to confirm that corrective action has been taken and is effective.
- The workforce numbers have increased so much, as compared with the original quotation, that extra man-days are required to cover all activities. The extra man-days will be allocated as SVs until the next Triennial Review when the man-days total will be revised and re-quoted. This must be explained to the client.
- Transition to revised version of Standard (for example ISO 9001:2008 to ISO 9001:2015) as per guidelines of IAF / AB.
- For revocation of suspension of certification.
The Client Requests a Special Visit.

Even though some of such audits may be required to be carried out at relatively short notice, the client should be informed in advanced for the conditions under which such audits will be conducted, and care to be taken in choosing the audit team as the lack opportunity for client to object the audit team member(s).

3.14 Suspending/ Withdrawing or reduction in scope of certification.

3.14.1 During operational period of certificate, it is ensured, through various controls that clients continue to satisfy requirements of Management System Standard. In general, if during the operation, Gulf Test comes across any non-conformities or lack of evidence, in the first instance, these are pointed out to the client and importance of making correction and taking corrective action is emphasized on them. However, if the failure to meet system requirements persists or is otherwise serious in nature, it is the policy of Gulf Test to exercise controls through other means; such as suspensions, reduction of scope or even withdrawal of certificates, if warranted. Further also, it is the policy to proceed for such actions in a cautious, non-discriminatory, but in a firm manner, based on facts collected through appropriate means, including special audit / visit, investigations, as appropriate and by giving reasonable notice / opportunity to the client to make amends for achieving the conditions of certification within a reasonable stipulated time period. Moreover, it is also the policy that such decisions shall be taken on the merits of the case and processing or result of any appeal by a client shall not influence the decision under these controls or result in any other discriminatory actions against the client.

3.14.2 Controls and Procedures

Some of the controls exercised for this purpose are described in the subsequent clauses below, which supplement the various stipulations in regulations and other relevant procedures / processes:

- As provided in the regulations, certification, during its validity period, may be suspended (not exceeding 6 months) or the scope of certification reduced by order of the designated authority in line with the policy on this aspect, if the conditions so warrant, such as the following:

  1. Organization does not agree or allow to get surveillance audit / recertification audit conducted within due date at the prescribed frequency.
  2. Financial issues, such as non-payment of dues.
  3. As a result of special visit, it is observed that correction or corrective actions taken by the client against findings/complaints are not appropriate. As a result, there is serious or persisting failure in maintaining Management System.
  4. Failure to meet certification requirements including the requirement to maintain effectiveness of the certified management system.
  5. Client (certified organization) requests itself, provided suspension sought is for a limited period (say not exceeding six months) for any reason, such as strike at work of operation, temporary lock out, financial crises, major changes being taken up in the system during which they may not be able to comply with the system.
  6. As a result of investigation of complaint, where the findings so warrant.

- On any of the conditions such as above occurring, the case will be submitted to the designated authority, who will review the situation and take decision about suspension of certificate or
otherwise. The decision about suspension/ reduction of scope will be intimation to the client. GTS-MSC-09

- For other Points Decision will be taken based on Gulf Test Safety Consultancies procedure, when required for such case like point 5 &6, Director/Committee approval to be recorded.

- During suspension period, Clients’ Management system is temporary invalid and client is not permitted to resort to further promotion of certification. GTS-MSC-QP-12

- On receipt of confirmation about action taken, it will be reviewed whether a special visit is required and if so, it will be arranged accordingly.

- An overall review shall be made of the action taken by the client and where applicable, of special visit findings and decision taken, which may take the following forms:
  ✓ Suspension is revoked (restore the Suspended certificate)
  ✓ Scope is reduced / modified

- Revocation of suspension is not agreed and the case is processed for withdrawal of certification.

- If the organization is not able to maintain system for a part of scope covered, but is able to comply with the system for remaining portion of scope, the authority may decide to reduce scope, instead of suspending the certificate. Any such reductions will be in line with requirements of standard of certification.

- Records about suspension / reduction of scope / revocation, as applicable shall be updated at appropriate stages.

3.14.3 WITHDRAWAL OF CERTIFICATE

- In some extreme cases, it may become necessary to withdraw certification during its validity period, such as follows:
  ✓ Client request for Voluntary cancellation because of No operations, or such other issue
  ✓ Consistence and / or serious failure of client to meet certification requirements based on assessment of performance. In such a case, normally initial action would be to suspend the certificate as per the relevant procedure.
  ✓ After suspension, client does not take action within the stipulated period or action taken is not adequate to revoke the suspension of certification

- All such cases shall be submitted to the concerned authority, who will review the case and take decision to withdraw the certificate or otherwise.

- On withdrawal, client will be informed about it and will be asked to return the certificate and amend or discontinue any reference to the certificate in all advertising matter or claims otherwise.

- In case client does not get the certificate renewed, it is automatically taken as lapsed and no more valid after the expiry date of certification.
Certification Process Chart

Certification Key Processes

APPLICATION

Stage 1 Audit (Readiness Audit)

Pre-Assessment *Optional

Stage 2 Audit (Certification Audit)

Evidence of compliance to requirements satisfied

2 SURVEILLANCE VISITS

12-monthly

Award of Certificate

Reports reviewed

On 4th Year

Re-Certification

RECOMMENDATION

Findings closed
Recommendation for approval

Documentation reviewed
Key processes identified
Readiness for Stage 2 confirmed Stage 2 Plan agreed

GULF TEST SAFETY CONSULTANCIES
Certification Process for Audits

Document No: GTS-MSC-QP-08

Revision No. 00

Revision Date 10-10-2019

Uncontrolled Document if printed

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