

RIQC CERTIFICATION PROCESS

ISO 9001
ISO 14001
OHSAS 18001
ISO 50001

COPY NUMBER:

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1. Description of the Certification Process

1.1 Introduction

This document describes the various stages of the certification process operated by RIQC.

The process is designed to ensure Organisations awarded certification have a documented management system which complies with either, ISO 9001, ISO 14001, OHSAS 18001 or ISO 50001 (or an integrated combination).

The Certificate is valid for three years and during this period the Organisation is required to demonstrate that the management system is being maintained in accordance with the relevant standard. This is done by carrying out regular surveillance visits.

1.2 Stage 1 Audit

1.2.1 The purpose of the Stage 1 Audit:

- a) Before the Stage 2 initial System Audit is undertaken an appraisal of the management system documentation will take place. This is to ensure compliance with the relevant standards, evaluate the client's location and site specific conditions and to undertake discussions with the client's personnel to determine the preparedness for the Stage 2 audit. (This is called a Stage 1 Audit);
- b) 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;
- c) to collect necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory aspects and compliance (e.g. quality, environmental, legal aspects of the client's operation, associated risks, etc.);
- d) to review the allocation of resources for stage 2 audit and agree with the client on the details of the stage 2 audit;
- e) to provide a focus for planning the stage 2 audit by gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects;
- f) to evaluate if the internal audits and management review are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for the stage 2 audit.

For most management systems, RIQC may require that at least part of the Stage 1 Audit be carried out at the client's premises in order to achieve the objectives stated above. Should the client's organisation or processes significantly change leading up to re-certification then it may be necessary for RIQC to carry out a further Stage 1 Audit.

Where non-compliance is identified, these are noted and will be presented to the Organisation in the form of Corrective Action Requests Requests (CARs) (see 1.8 Corrective Action

Requests). Observations may also be raised during the audit, which signify that, whereas non-compliance could not be identified, an improvement was considered necessary. However there is no mandatory requirement to address observations. CARs would normally be expected to be closed out at the Stage 2 Audit.

The Stage 1 Audit also includes a requirement for details to be established about the Organisation to enable the resources and timescale for the Stage 2 Audit to be confirmed. The determination of the audit programme and any subsequent adjustments shall consider the size of the client organisation, 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. This will enable the programme for the Stage 2 Audit to be prepared and agreed. The scope of supply will be reviewed and the Organisation will be requested to identify any relevant product standards, legal and statutory requirements.

Following the Stage 1 Audit a date for the Stage 2 Audit can be agreed. This will normally be within three months of the Stage 1 Audit to ensure that data does not become out of date. Should the Stage 2 Audit be more than three months from the Stage 1 Audit the Certification Body Manager will assess the situation and the agreed duration for the Stage 2 Audit may need to be adjusted to allow for a review of the Stage 1 Audit findings.

1.3 Stage 2 Audit

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

- a) information and evidence about conformity to all requirements of the applicable management system standard or other normative document;
- b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);
- c) the Organisation's management system and performance as regards legal compliance;
- d) operational control of the Organisation's processes;
- e) internal auditing and management review;
- f) management responsibility for the Organisation's policies
- g) links between the normative requirements policy, performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.

In the same way as the Stage 1 Audit, any non-compliance will be presented as CARs and also Observations may be raised.

For a Certificate of Approval to be issued the Organisation's management system shall comply with the recognised standard. Therefore any outstanding major or minor NCRs will have to be closed before a Certificate can be issued. If the Organisation is not in a position for a Certificate to be issued within six months of the Stage 2 Audit the Certification Body Manager will assess if another Stage 2 Audit is required.

Following the Stage 2 Audit a report is prepared by the Lead Auditor, which forms the basis of the recommendation to RIQC whether to issue a Certificate. Ownership of the audit report shall be maintained by RIQC.

The Certificate of Approval will only cover the site(s) operating the management system as audited and producing the goods or service designated in the scope of supply.

1.4 Surveillance Audit

Following certification, surveillance audits are undertaken at a six-month or twelve month periodicity depending on the size and complexity of the Organisation's operations. The process followed for surveillance audits and the rules associated with the closure of NCRs raised at surveillance audits are outlined in 1.4.1 below.

The scheduled dates for surveillance audits should be kept to as closely as possible. Should, for example, the Organisation be in the process of reorganising the management system the surveillance audit shall take place as scheduled and the Auditor shall review the changes taking place. Should surveillance audits be delayed by the Organisation the status of the management system becomes unknown and therefore the Certificate may have to be withdrawn.

NB: Surveillance audits must be conducted at least once a year and the date of the first surveillance audit following Initial Certification shall not be more than 12-months from the last day of the Stage 2 audit or Re-certification audit. Subsequent surveillance audits shall not be more than 12-months from the last day of the previous surveillance.

Surveillance audits will always include:

Quality	Environment
<ul style="list-style-type: none"> ▪ Changes to the Quality System ▪ Management Review ▪ Internal Audits ▪ Corrective and Preventive Action and Complaints ▪ Effectiveness of the system with regards to the achievement of clients objectives ▪ Use of the Certificate and RIQC's Mark/Symbol 	<ul style="list-style-type: none"> ▪ Changes to the Environmental System ▪ Management Responsibility ▪ Internal Audits ▪ Corrective and Preventive Action and Communications ▪ Effectiveness of the system with regards to the achievement of clients objectives ▪ Use of the Certificate and RIQC's Mark/Symbol ▪ Breaches of Environmental legislation.

Health and Safety	Energy Management
<ul style="list-style-type: none"> ▪ Changes to the Health and Safety System ▪ Management Responsibility ▪ Internal Audits ▪ Incidents ▪ Effectiveness of the system with regards to the achievement of clients objectives ▪ Use of the Certificate and RIQC's Mark/Symbol ▪ Breaches of Health & Safety legislation 	<ul style="list-style-type: none"> ▪ Changes to the Energy management System ▪ Management Responsibility ▪ Internal Audits ▪ Effectiveness of the system with regards to the achievement of clients objectives ▪ Energy Review ▪ Use of the Certificate and RIQC's Mark/Symbol ▪ Legal and other requirements

RIQC also requires the Organisation to maintain records of customer complaints and remedial actions, compliance with environmental consents and health and safety incidents. These records shall be available for review as part of the relevant surveillance activities and additionally shall be made available on request to authorised representatives of the body responsible for the accreditation of RIQC.

1.4.1 Six and Twelve Monthly Surveillance

The period between six monthly or annual surveillances, as contractually agreed, will be kept as close as possible.

The Organisation will be contacted and a mutually acceptable date arranged.

The Audit Plan shall normally be that identified at the previous visit.

At the end of the audit the Organisation will be presented with the Lead Auditor's report and agree future actions.

Major CARs have to be closed out within an agreed timescale, not greater than three months, and a close out visit is normally required (A Desk Top Close Out may be appropriate depending upon the supporting evidence required). If major NCRs are not closed out in the three-month time scale the Certificate may be withdrawn.

Minor CAR's (where six-monthly surveillances are contractually agreed), can be left open until the next visit but if not closed out at this visit they may be elevated to major status thus requiring a close out visit.

Minor CAR's (where annual surveillances are contractually agreed), have to be closed out within an agreed timescale, not greater than three months, and a close out visit is normally required (A Desk Top Close Out may be appropriate depending upon the supporting evidence required).

1.5 Recertification Audits

Re-Certification Audits shall, whenever possible, be undertaken prior to the expiry of the existing certification to enable Certificates to run consecutively. Should this not be possible the new Certificate will be dated from the Director's or Certification Body Manager's authorisation of the new Certificate.

The process of re-audit shall be generally the same as that described in Section 1.3 Stage 2 Audit.

However, recertification audit activities may need 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 in which the management system is operating, such as changes to legislation.

The Re-audit will then be scheduled for three months following the final surveillance audit i.e. three months before the expiry of the Certificate. This gives the Organisation the opportunity to take any corrective action prior to the expiry of the Certificate.

If the certification body has not completed the recertification audit or the certification body is unable to verify the implementation of 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.

Should the certification lapse due to outstanding Corrective Actions, or the re-audit being unable to be completed prior to expiry of current certification, then the client has 6 months to provide RIQC Ltd with evidence to close any outstanding actions, otherwise at least a Stage 2 audit shall be conducted. Certification shall be granted from the date of re-certification decision by RIQC Ltd. The effective date on the certificate shall be on or after the re-certification decision and the expiry date shall be based on prior certification cycle. Where a stage 2 has been invoked then certification details shall reflect a lapse within this certification history.

1.6 Additions to Scope

Should an addition to the scope of supply be requested during the period of validity of the Certificate, then the relevant part of the management system will be audited to ensure control of the amended scope is effective. This may need an additional visit or may be added to a normal surveillance visit with a possible increase in the time of the surveillance visit.

Any CAR's appertaining to the scope addition will need to be closed before a Certificate incorporating the new scope can be issued.

1.7 Changing Certification Body to RIQC

Should an Organisation have an existing accredited certificate and wishes to change from their present certification body to RIQC, a full system audit is not required. When carrying out an audit in these circumstances it is important that RIQC is fully confident that the management system is compliant with the requirements of the relevant standard before issuing a certificate.

The aspects of the organisation's management system that will be included in the audit are:

Should any of the outstanding corrective action requests still require actions to be put into place then RIQC corrective action requests will be raised to cover the non compliances.

As with any systems audit the same rules apply with regard to outstanding CAR's i.e. the issue of an RIQC certificate cannot take place until all RIQC corrective action requests have been addressed and closed.

The date of expiry of the RIQC certificate will be the same as the existing certificate with the re-audit taking place as normal i.e. 3 months prior to expiry. If the certificate does not have an expiry date the expiry will be 3 years from the date of the last system audit carried out by the previous certification body.

1.8 Corrective Action Requests

These are written notification to an Organisation of non-compliance identified during an audit and will be classified either major or minor.

Major - The absence or lack of implementation of a clause of the standard, or the total breakdown in complying with such a clause of the management system.

Minor - An isolated or sporadic lapse in the content or implementation of the management system against a clause of the audit standard.

A number of minor non-compliances against the same clause of the standard or a large number of minor non-compliances across the whole system can effectively demonstrate a breakdown of the management system and can result in a major corrective action request.

Within twenty five working days of the audit the Organisation is required to respond in writing to each CAR's outlining the root cause analysis and corrective action to prevent recurrence of the problem. These will be reviewed to ensure that the actions proposed are acceptable. Should the proposed actions not be acceptable the Organisation will be informed.

1.9 Close-out of Corrective Action Requests

If the Organisation is able to provide documentary evidence to demonstrate that non-compliance has been adequately addressed minor NCRs may be closed out without the need for a close-out visit. Major CAR's will always require a close-out visit.

The circumstances that determine whether a separate or additional visit is required to close out CAR's are described under the headings of each type of audit. However, when a close out visit is required this enables the Organisation to demonstrate to RIQC that the measures implemented in response to the CAR's are effective.

The Lead Auditor can downgrade a major CAR's to minor if the CAR's has only been partially addressed and minor CAR's can be upgraded to major if not closed out.

1.10 Suspension or Reducing Scopes of Certification.

If conditions dictate, RIQC Limited reserves the right to suspend or reduce a scope of certification until satisfactory corrective actions have been put in place by the customer, to correct the situation.

1.11 Complaints

1.11.1 Complaints Regarding RIQC

An Organisation has the right to complain about the manner in which an audit was conducted or if the process was not carried out in accordance with this publication.

Complaints must be submitted in writing to the Certification Body Manager at the address shown in section 1.21 within 20 working days of an audit taking place.

The Certification Body Manager will investigate complaints and the Organisation advised of the outcome in writing within 20 working days of the receipt of the complaint.

Should the Organisation be dissatisfied with the outcome the Organisation can request that RIQC's Impartiality Committee considers the complaint.

1.11.2 Complaints Regarding the Organisation

As stated in section 1.4 RIQC requires certificated Organisations to keep records of customer complaints and remedial actions. However, if RIQC receives a complaint from any source about a certificated Organisation the Certification Body Manager shall investigate the nature of the complaint and decide what action is required. This may involve an unscheduled audit covering the relevant aspects of the Organisation's management system.

Following an unscheduled audit the Certification Body Manager shall review the audit findings and inform the Organisation on the course of action, if any that is required to satisfy the complaint.

1.12 Appeals

In the event of an Organisation wishing to appeal against any decision affecting certification they can, within 20 working days after being notified of the decision, give written notice at the address shown in section 1.21 to the Director of RIQC of their desire to appeal.

The appellant must provide factual information giving grounds for the appeal, which will be passed, to the Appeals Panel appointed by the Impartiality Committee. The appellant will be informed of the members of the Appeals Panel and has the right to make any reasonable objections.

The decision of RIQC shall stand pending the meeting of the Appeals Panel, which will normally be within 30 working days of the receipt of the appeal.

At such a meeting both the appellant and a representative of RIQC shall be entitled to be heard in confidence. The decision of the majority of the Appeals Panel, as declared by the Chairman, shall be final.

1.13 Confidentiality and Impartiality

Access to confidential information is strictly limited and controlled. All persons, other than the Organisation, who are involved with the certification process are required to sign an RIQC Confidentiality and Impartiality Statement.

Access to confidential information may be provided to representatives of the bodies associated with the accreditation of RIQC as a Certification Body but only when they have signed a Confidentiality and Impartiality Statement.

RIQC shall inform the client, in advance, of any information it intends to place in the public domain (Upon request by any party typical information that shall be made immediately available would include the RIQC certification process, complaints and appeals process and certificates granted, suspended, withdrawn or reduced). All other information, except for information that is made publicly accessible by the client, shall be considered confidential.

Access to confidential information by any other person or body can only be given with the express permission of the Organisation.

There are also safeguards in place to ensure that personnel involved in the process can operate without commercial or financial pressures and can act impartially.

RIQC understands the importance of impartiality in carrying out its management system certification activities and ensures that these are conducted in an objective, unbiased manner.

A copy of RIQC's Confidentiality and Impartiality Statement is available on request.

1.14 Audit Language

The language used during the audit activity shall be English. In the situation where either the documentation is not in English, or the Organisation's staff selected for audit do not speak English then an interpreter will be required; this will normally be at the Organisation's expense unless otherwise agreed. The interpreter shall be competent in written and oral interpretation. It should be able to be demonstrated that the interpreter is independent of the process or activity being audited.

1.15 Short Notice Audits

It may be necessary for RIQC to conduct audits of certified clients at short notice to investigate complaints, or in response to changes, or as follow up on suspended clients. In such cases RIQC shall provide an Audit Plan in advance outlining the specific criteria.

1.16 Notice of Changes to the RIQC Certification Process

RIQC shall give its certified clients due notice of any changes to its requirements for certification. RIQC shall verify that each certified client complies with the new requirements.

1.17 Notice of Change by the Organisation

The Organisation shall inform RIQC, without delay, of matters that may affect the capability of the management system to continue to fulfil the requirements of the standard(s) used for certification. These include, for example, changes relating to:

- a) the legal, commercial, organisational status or ownership;
- b) organisation and management (e.g. staff levels; key managerial; decision-making or technical staff;
- c) contact address and sites;
- d) scope of operations under the certified management system, and
- e) major changes to the management system and processes.

1.18 Notification of Audit Team

RIQC shall provide the name of, and when requested, make available background information on each member of the audit team, with sufficient time for the Organisation to object to the appointment of any particular auditor or technical expert and for RIQC to reconstitute the team in response to any valid objection. The Organisation must give sufficient notification of the objection otherwise RIQC's cancellation policy shall be imposed.

1.19 Breaches of Legislation

Any breaches of legislation or regulations affecting the scope of certification must be communicated immediately to RIQC for consideration.

1.20 Accommodation of Observers

The Organisation shall make provisions as required to accommodate observers (e.g. accreditation auditors (UKAS) or trainee auditors).

1.21 Address for Correspondence

RIQC Ltd
2 St. George's House
Vernon Gate
Derby
DE1 1UQ

2.0 Conditions for the use of the Certificate, Mark and Symbol

2.1 Introduction

When awarded a Certificate, the Organisation is required to comply with the following conditions governing the use of the Certificate of Approval, mark and symbol of RIQC.

Media for the mark and symbol are available free of charge to certificated Organisations on request and should not be reproduced from the examples shown in this document.

2.2 The Certificate

Up to a maximum of two certificates shall be issued to the client by RIQC. Any additional certificates requested shall be charged at the prevailing rate, as detailed within the contractual arrangements.

- The Certificate shall remain the property of RIQC.
- Certificates are valid for three years from the date of issue, subject to satisfactory surveillance audits.
- Certificates are not transferable.
- The Certificate shall only be displayed at the location applicable to the certificated scope of supply.

- The Certificate shall not be used to imply certification of any location or activities other than those detailed on the Certificate.
- The Certificate shall not be used in any way to imply product (including service) or process approval.
- The certificated Organisation must advise RIQC of any changes that may affect the scope of supply.
- The client shall amend all advertising matter accordingly when the scope of certification has been reduced.
- The client shall not make or permit any misleading statement regarding their certification.
- The client shall not use or permit the use of their certification document or any part thereof in a misleading manner.
- The client shall not use their certification in such a manner that would bring RIQC and/or certification system into disrepute and lose public trust.

2.3 The RIQC Certification Symbol and the Accreditation Mark (Tick and Crown)

- The Certification Symbol and the Accreditation Mark (the mark) shall only be used if the certificated scope of supply is within the accredited scope of RIQC.
- The mark may be reproduced in any size and shall normally have a minimum height (excluding the accreditation number) of not less than 20 millimetres high, provided it remains legible with no infilling. The mark shall be of a single colour that may be red, brown, black, dark blue or gold or in the case of pre-printed letterhead paper, the predominant colour of the letterhead. However, the configuration must be strictly adhered to, including the surrounding frame. Any enlargement or reduction shall retain the same proportions as those depicted within this procedure.
- The mark may be used on stationery, such as headed letter paper, the internet, advertising brochures and other documents and only in connection with the international management system standard and scope of approval stated on the Certificate. The mark should be depicted no more than once for each UKAS accreditation.
- The mark shall not be used on flags, buildings, vehicles, packaging, directly on products, nor on promotional material such as calendars, diaries or coasters etc.
- The mark shall not be used in any way to imply product approval, neither on documentation such as test certificates and certificates of conformity.
- The certificated Organisation shall, upon reasonable notice, discontinue any use of the mark that is considered to be unacceptable to RIQC.
- Upon termination of the certification, for whatever reason, the Organisation shall discontinue all use of the mark immediately.

2.4 The RIQC Symbol

- The symbol shall not be used in any way to imply product approval.
- The symbol shall not be used to imply certification exists other than that defined in the scope of approval stated on the Certificate.
- The symbol may be reproduced in any single colour or in the corporate colours of RIQC which are available on request.

- The certificated Organisation shall, upon reasonable notice, discontinue any use of the symbol, which is considered to be unacceptable by RIQC.
- Upon termination of the Certification, for whatever reason, the Organisation shall discontinue all use of the symbol immediately.
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2.5 Failure to Comply

If the Organisation fails to comply with the conditions for the use of the Certificate, Mark or Symbol or fails to inform RIQC as to their inability to comply, then RIQC may:

- a) withdraw the Certificate of Approval.
- b) refuse to renew the Certificate of Approval.

Such decisions and the grounds for them shall be communicated in writing to the Organisation and shall stand until the Organisation can demonstrate compliance. In the event that the Certificate is withdrawn the Organisation shall immediately cease using the Mark and/or Symbol and where necessary withdraw any material carrying them.

RIQC Certification Symbol & Accreditation Mark



RIQC Symbol



The appropriate Mark and Symbol are available by request from RIQC and should not be reproduced from the examples shown above.