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# CERTIFICATION POLICY Wynleigh International Certification Services (PTY) Ltd.

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Reviewed and approved for use.	
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The definitive version of this manual is available to all staff and is maintained in .pdf format on a secure server.

Printed copies of this management system policy manual may be issued under controlled conditions and will be replaced in entirety when any changes or revisions are made.

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## **BACKGROUND**

The regulations for the control over the use and/or application of national standards, promulgated in terms of the Standards Act 8 of 2008, empower the Certification Body to assess the implementation of related management systems of organisations and control the certification of these systems.

Various standards are used that specify the requirements for a particular management system where an organisation needs to demonstrate its' ability to implement, maintain and provide evidence of the chosen systems' effectiveness.

## 1. SCOPE

This document covers the requirements relating to the implementation, control and maintenance of the system certification schemes administered by Wynleigh International Certification Services (PTY) Ltd. referred to in the rest of this document as Wynleigh ICS.

The provisions of this document are binding on all who work for or on behalf of Wynleigh ICS and are involved with the various management system certification schemes.

The term "shall" is used throughout this document to indicate those provisions which reflect the requirements of the relevant ISO/IEC documents that are mandatory.

This document is based on the requirements of ISO/IEC 17021, the International Accreditation Forum (IAF) Guidelines/Mandatory documents and other management system standards as relevant.

## 2. POLICY

## Operational Issues

- a) In order to fulfil its mission and vision, WYNLEIGH ICS shall in a non-discriminatory manner:
- b) Encourage organisations to introduce and apply in a cost-effective manner a management system.
- c) Follow prescribed procedures to conduct independent audits of such systems to determine and ensure continued compliance with the requirements of the relevant management system standard.
- d) Certify that the system of the certified organisation satisfies the requirements of the relevant management system standard and publish and update at regular intervals a publicly available register of such organisations;

  And
- e) Comply with the requirements of ISO/IEC 17021 and its associated guidance documents and shall maintain an acceptance of its management system certification scheme through accreditation by internationally recognized accreditation bodies and through appropriate international agreements.
- f) Not place any undue financial pressure or other conditions on a certificated organisation that may compromise the objectivity of the certification process, nor restrict access to certification services, nor place any undue financial pressure or other conditions on the certification personnel that provide the management certification scheme services; nor

limit access to applicants on any basis such as the size of the organisation, its membership of any representative association or group, or on the basis of the number of organisations or sub-units within the organisation or on the basis of sites already certified.

## Limitation of liability

WYNLEIGH ICS shall, on the basis of the initial audit and continued re-audits verify that the management system of the certificated organisation satisfies the requirements of the relevant management system standard. WYNLEIGH ICS shall not assume responsibility for or guarantee the outputs from the business processes relevant to the certificated management system.

## Organisation

The management structure of WYNLEIGH ICS is defined to reflect the functional and reporting structures of all personnel involved in the Management System Certification Schemes for all certification activities.

The Managing Director and Certification Manager have the ultimate accountability for the operation of the management system certification schemes.

The Certification Manager shall manage the effective performance of the audit and audit activities. Suitably qualified and experienced personnel shall perform audit activities for the purposes of certification.

Final decisions regarding management system certification are the responsibility of the Approval Board, which functions independently of the audit activities.

The Approval Board members shall understand the applicable standard and certification requirements and shall have demonstrated competence to evaluate the audit processes and related recommendations of the audit team.

To ensure impartiality, an Impartiality Committee for Certification has been established whose members should safeguard the impartiality of the activities undertaken by WYNLEIGH ICS certification.

All WYNLEIGH ICS personnel including any external contractors used for audit purposes, or committees, who could influence the certification activities, shall act impartially and shall not allow commercial, financial or other pressures to compromise impartiality.

Personnel involved with the certification activities, shall not have provided any consultancy on the audited management system, nor provided internal audits nor have worked for the organisation requesting certification within a period of two years prior to the audit.

WYNLEIGH ICS is a commercially orientated entity that is responsible for its own funding and finance and shall therefore operate on a profitable basis. The organisation shall be subject to the normal budgetary and financial audit processes, performance against which is reported monthly.

All financial transactions are processed and checked according to Generally Accepted Accounting Practices (GAAP) that is in turn audited annually by external financial auditors.

Certification audit fees shall be invoiced to the organisation as per the pricing policy. Certification fees shall be paid monthly / quarterly / biannually / annually as applicable. Organisations shall be notified of any revised fees at least 60 days before the next payment is due.

Should the need arise where a material risk arising from its certification activities is identified, WYNLEIGH ICS has adequate insurance to cover any consequent liabilities.

#### 3. DEFINITIONS AND ABBREVIATIONS

For the purposes of this document, the relevant definitions given in ISO/IEC 17021-1 shall apply:

**Audit:** A systematic and independent examination to determine whether quality activities and related results comply with planned arrangements and whether these arrangements are implemented effectively and are suitable to achieve objectives.

Certified client: organisation whose management system has been certified.

**External auditor**: a management system auditor, not permanently employed by WYNLEIGH ICS who has been appointed to assist WYNLEIGH ICS auditing teams during audits.

**Certification:** a procedure by which WYNLEIGH ICS certifies that an activity conforms to specified requirements

**Finding:** Results of the evaluation of collected evidence against audit criteria. Findings may either indicate conformity or nonconformity.

**Multi-site Organisation:** A multi-site organisation is defined as an organisation having an identified central function (normally, and hereafter referred to as a head-office) at which certain activities are planned, controlled or managed and a network of local offices or branches (sites) at which such activities are fully or partially carried out.

#### Nonconformities are classified as follows:

- Major nonconformity: A nonconformity that affects the capability of the management system to achieve the intended results.
   This status is true where:
  - the outputs of a process fail to satisfy requirements due to the nonconformity, e.g. the nonconformity will result in product or service not meeting requirements or the nonconformity will result in significant environmental impact;
  - a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity;
  - a legal noncompliance is identified.
- 2. Minor nonconformity is:

All other nonconformities not classified as major.

NOTE 1: In cases of conformity, opportunities may be identified.

NOTE 2: Audit findings that are nonconformities, shall not be reported as opportunities for improvement.

**Organisation**: the party that is responsible for the product, process or service and that has applied to WYNLEIGH ICS for certification / registration. This definition may apply to manufacturers, distributors, importers, assemblers and service organisation bodies that apply for certification:

**Registration:** The procedure by which relevant characteristics of a process or service, or particulars of a body or person are indicated in an appropriate publicly available list:

**EAC**: European Accreditation of Certification:

IAF: International Accreditation Form

**SAATCA:** Southern African Auditor and Training Certification Authority:

**SANAS:** South African National Accreditation System:

**SIC:** South African Standard Industrial Classification of All Economic Activities, Central Statistical Service, Pretoria:

## 4. REFERENCE SOURCES

In this manual, reference is made to the following WYNLEIGH ICS procedures

Terms of reference of the Impartiality Committees for Certification Schemes.

Selection, training and evaluation of auditors/senior auditors.

Composition and functions of the Approvals Board for certification schemes.

**Pricing Policy** 

**Document Control** 

**Record Control** 

Internal Audits

Corrective Action

Management review

**Auditing Procedure** 

Audit Process Description and forms.

Planning Process Description and forms.

Sales Process Descriptions and forms.

In this manual, reference is made to the following legislation, National and International Standards:

Standards Act, 2008 (Act 8 of 2008).

ISO 9000:2015; Quality Management Systems – Fundamentals and vocabulary.

ISO 9001:2015; Quality Management Systems – Requirements.

ISO 9004; Quality Management Systems – Guidelines for performance improvements.

ISO 14001:2015; Environmental management systems - Specification with guidelines for use.

ISO 17000: Conformity assessment – Vocabulary and general principles.

ISO/IEC 17021-1: Conformity assessment – Requirements for bodies providing audit and certification of management systems.

ISO/IEC 17021-2:2016 Conformity assessment – Requirements for bodies providing audit and certification of management systems – Part 2: Competence requirements for auditing and certification of environmental management systems

ISO/IEC 17021-3:2017 Requirements for bodies providing audit and certification of management systems – Part 3: Competence requirements for auditing and certification of quality management systems

ISO 50001 Energy management systems -Requirements with guidance for use

ISO 45001 Occupational Health and Safety Management Systems - Requirements

ISO 19011, Guidelines for quality and/or environmental management systems auditing

ISO 39001:2012 Road traffic safety (RTS) management systems - Requirements with guidance for use

#### 5. TECHNICAL AREAS

Technical Areas have different meanings for different types of management systems and these could be

- a) For quality management system, the phrase is related to the processes in context of fulfilling customer expectations of product, including service.
- b) For environmental management system, the phrase is related to the categories of products and processes in the context of environmental aspects affecting air, water and soil and use of resources.
- c) For Occupational Health & Safety management systems Occupational Health & Safety requirements.

## 6. RULES

#### 6.1 General

The management system certification schemes administered by WYNLEIGH ICS are available to all organisations of all types and sizes of industries whose systems comply with the requirements of the relevant system standard.

An audit and certification are two discrete processes, there shall be an Approvals Board that verifies the recommendations for certification, suspension and withdrawals of certificates.

Organisations outside the Republic of South Africa may also be accommodated in the system certification schemes. The Standards Act of South Africa shall not be applicable in such cases and certification can only be effected through formal certification agreements. For organisations outside of the Republic of South Africa, WYNLEIGH ICS shall keep an Index of the applicable legislation and auditors shall familiarise themselves with applicable legislation.

WYNLEIGH ICS reserves the right to decline an application for certification if any conflict with other policies, resources or impartiality exists.

One-person organisations can be certified, but only if an independent external auditor (i.e. other than WYNLEIGH ICS Certification) conducts the internal audit of the organisation's activities.

Organisations which have been certified by accredited certification bodies other than WYNLEIGH ICS and who wish to transfer such registration to WYNLEIGH ICS, shall formally apply to WYNLEIGH ICS for such transfer.

A transfer review of the status, stability and maturity of the organisation's management system before such transfer is affected. Certificates shall be current at the time of transfer.

The scope of certification shall be defined in terms of the relevant management system for which application is being made.

## 6.2 Resource Requirements

Certification body personnel and auditors shall have the necessary education and competencies as per WYNLEIGH ICS requirements, which are based on ISO/IEC 17021, and any other applicable requirements of the related standards.

In-house and on-the-job training are provided to improve the skills, knowledge, proficiency, competency and awareness of auditing, and administrative personnel, in the requirements of standards and guidance documents relevant to the Management Certification Schemes.

Detailed rules and requirements for the training, registration and records of certification personnel and external auditors are contained in accordance with SAATCA Requirements.

## 6.3 Outsourcing

WYNLEIGH ICS does not outsource any part of its certification activities to any other certification body. Decisions for granting, maintaining, renewing, extending, reducing, suspending or withdrawing certification shall not be outsourced.

## 6.4 Subcontracting

WYNLEIGH ICS may subcontract audit work related to certification/registration to a person (external auditor) who is not in the full-time employment of WYNLEIGH ICS. A documented agreement covering the arrangements, including competency, confidentiality and conflict of interests, shall be used.

When resources are considered to audit an organisation and no technical expert is available within WYNLEIGH ICS an external auditor or technical expert may be contracted by the department to augment the audit team.

When the services of a technical expert who is not registered by WYNLEIGH ICS as an auditor participates in an audit, they will be accompanied by a WYNLEIGH ICS registered auditor.

All external auditors shall be conversant in WYNLEIGH ICS procedures and methodologies of auditing, and auditor evaluation shall be conducted once in every three-year cycle. When changes are identified either in standards or in the methodology of auditing used by WYNLEIGH ICS, training shall be undergone by all auditors. Auditor evaluation shall be performed and recorded within one month of the signing of the initial contract.

When the external auditor's contract is renewed for a further contract period, the Auditor Evaluation shall be conducted, and related contract shall be renewed.

The services of an external auditor or technical expert shall be subject to the Auditor Evaluation process and WYNLEIGH ICS auditor contract.

The auditor contract shall be terminated on request by the contract auditor or technical expert, or where a lack of compliance with contractual conditions is identified. The Certification Manager is responsible to notify the Approvals Board for the removal of names from the external auditor register.

WYNLEIGH ICS shall take full responsibility for the external auditor's work and all related certification activities associated with it.

## 6.5 Information Requirements

Information describing the audit processes and certification processes for granting, maintaining, extending, renewing, reducing, suspending or withdrawing certification, and about the certification activities, types of management systems and geographical areas of operation is available in the Certification Agreement published under the 'Policies' of the Wynleigh ICS website.

Information, including advertising, provided to the marketplace shall be accurate and not misleading.

Information with regards to the certificates granted, suspended or withdrawn is available on request.

Where Wynleigh ICS identifies that organisations independent from Wynleigh ICS advertise misleading information, for example, promising links or implying that certification will be simpler, easier, faster or less expensive due to a relationship with Wynleigh ICS, action shall be taken to correct such misleading statements.

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## 6.6 Directory of Certified Clients

A list of organisations which have been certified by WYNLEIGH ICS is publicly accessible on request as advertised on the WYNLEIGH ICS website. Details of organisations whose management system have been suspended or withdrawn is available on request.

## 6.7 Reference to certification and use of marks

All requirements with respect to the processes of granting, suspending or withdrawal of certification, confidentiality, changes to client information, scope of certification and use of WYNLEIGH ICS logos shall be documented in the contract between WYNLEIGH ICS and the client.

There shall be no ambiguity in the use of WYNLEIGH ICS logos and marks or accompanying text. The organisation may not imply that the certification applies to activities that are outside of the scope of certification.

The organisations' use of WYNLEIGH ICS logos and marks in communication media such as the Internet, brochures, advertising, billboards, etc shall not make any statement that is misleading in any manner whatsoever.

WYNLEIGH ICS logos and marks shall not be used on a product or product packaging in any way that may be interpreted as denoting product conformity.

The following statement (or identifying relevant MS) may appear on company billboards or vehicles with the mark:

"A Wynleigh ICS: ISO 9001:2015 quality management system certified company".

The following statement (or identifying relevant MS) may appear on company billboards or vehicles with the mark:

"A Wynleigh ICS: ISO 9001:2015 quality management system certified company". No WYNLEIGH ICS logos or marks shall be applied to laboratory test, calibration or inspection reports, as such report are deemed to be products in this context.

When placed under suspension, the organisations' management system is temporarily invalid. Organisations shall for the period of suspension, refrain from further promotion of their certification.

Organisations certified by WYNLEIGH ICS are not entitled to use the logos of WYNLEIGH ICS accrediting bodies in any way i.e. no organisation may use the SANAS symbol in any form whatsoever.

Subsequent to the cancellation of its certification, the organisation shall discontinue all use of advertising material that contains any reference to a certified state.

WYNLEIGH ICS shall exercise proper control of ownership of its logos and marks and shall take action to deal with incorrect references to certification status or misleading use of certification documents, marks or audit reports.

## 6.8 Confidentiality

Any information gained in the course of certification activities about a particular commodity or organisation shall be confidential to the organisation and WYNLEIGH ICS and shall not be disclosed to a third party without the written consent of the organisation. Where the law requires information to be disclosed to a third party, the organisation shall be informed of the information provided as permitted by the law.

## 6.9 Information Exchange

Detailed information with respect to certification activities such as application, planning, conducting and maintaining certification is given to clients during the first visit and again before and during each audit.

Should the requirements for any standard change, WYNLEIGH ICS shall send and communicate correspondence in the form of a letter to all the relevant clients informing them of the intended change. The detail of transition from the old to new requirements shall also indicate how the phase-in shall be implemented.

## 6.10 Process Requirements

## 6.10.1 General

The audit program shall include a two-stage initial audit, surveillance audits in the first and second year, and a recertification audit in the third year prior to expiration of certification. An audit plan shall be established for each audit identified in the 3-year program to provide the basis for agreement regarding the conduct and scheduling of the audit activities. The audit duration shall be determined to accomplish an effective audit of the auditee's management system. Consideration shall be given to the relevant audit team leader and management scheme when determining the audit duration.

The following aspects shall also be considered:

- a. requirements of the relevant standard;
- b. size and complexity of the organisation;
- c. technological and regulatory context;
- d. any outsourcing of any activities included in the scope of the organisation;
- e. results of any prior audits and demonstrated level of management system effectiveness;
- f. number of sites and multi-site consideration.

## 6.10.2 Initial Audit and Certification

## 6.10.2 a) Application

The applicant organisation shall provide information concerning its activities, general features of the organisation, the desired scope of certification, the standard required, outsourced processes and information concerning any consultancy received in the establishment of the management system.

## 6.10.2 b) Application Review

The application shall be reviewed by the Certification Manager to ensure that:

- a. information about the applicant organisation and its management system is sufficient to conduct of the audit.
- b. the requirements for the certification are clearly defined and documented.
- c. other conditions are considered e.g. scope, location, language, safety conditions, threats to impartiality, multi- site registration etc.
- d. the required competency and ability to perform the certification activity is available and justified; and
- e. the applicant has completed the agreement correctly and the agreement makes reference to the relevant WYNLEIGH ICS scheme of certification.

## 6.10.2 c) Stage 1 audits

## The stage 1 audit shall be performed:

- a. To audit of the client's documentation.
- b. Evaluate the client's location, site-specific conditions and risks
- c. Review the client's status and understanding with respect to key performance areas or significant aspects, processes, objectives and operations of the management system.
- d. To collect necessary information regarding the scope of the management system, location, processes, risks and related statutory and regulatory requirements.
- e. To review the allocation of resources for the stage 2 audit.
- f. To provide a focus for planning the second stage of the audit.
- g. To evaluate if internal audits and management reviews are being planned and performed and to evaluate the organisations' readiness for stage 2.

Stage 1 audit findings shall be documented in the audit report and communicated to the client.

The Time period between stage 1 audit to stage 2 audit shall not exceed 6 months. The Stage 1 audit shall be repeated if a longer interval is required. It is important that the audit client is made aware that they are obliged to communicate where significant changes to the organisation would impact the management system. The Certification Manager will, under these circumstance, be responsible to decide if the Stage 1 audit needs to be repeated.

## Note: 1:

If it is not practically possible to conduct the stage 1 audit on site, the required information shall be directly obtained from the client or from a qualified second party, in which case it shall be verified and adjusted (if required) during the stage 2 audit. (This may apply in case of international enquiries).

## Note: 2:

For a multi-site certification it is not practical to conduct the stage 1 audit on all sites that are to be included as part of the stage 2 audit activities in addition to the Head Office, it may be required to visit one or two sites in order to collect necessary information regarding the scope of the management system, location, processes and related statutory and regulatory requirements.

Should the findings raised during an ISO 14001 and / or and ISO 45001 stage 1 audit (i.e. those nonconformities raised by a legal or other specialist) require a longer time frame for the effective implementation of the corrective actions, the team leader in conjunction with the certification manager may decide to grant up to a maximum of 12 months period between stage 1 and stage 2. The decision shall be documented and communicated to the organisation in writing. The stage 1 audit shall be repeated if a longer interval is required.

## 6.10.2 d) Stage 2 audits

The audit shall take place at the site and shall include at least the following:

- a) information and evidence about conformity to all requirements of the applicable management system standard or other normative documents;
- 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 audit client's management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements;
- d) operational control of the audit client's processes;
- e) internal auditing and management review;
- f) management responsibility for the audit client's policies.

After the clearance of any nonconformities identified at the Stage 2 audit, a recommendation on whether or not to grant certification shall be made based on all information and analysis of the audit evidence gathered during both stage 1 and stage 2 audits. Any number of observations and minor nonconformities shall not hinder the recommendation for certification.

## 6.10.3 Information for granting initial certification

The audit team shall analyse all information and audit evidence gathered during stage 1 and stage 2 to review the audit findings and agree on the audit conclusions.

The information provided by the audit team to the Approvals Board shall include all the relevant documents as identified on the checklist. (Doc Checklist ABC FRM 021)

The members of the Approvals Board making the certification decision shall be independent from those who carried out the audit.

The Approvals Board shall make the certification decision on the basis of an evaluation of audit findings and conclusions and any other relevant information.

At the time of the decision-making process, if major non-conformities have been identified, certification shall be denied to the organisation pending satisfactory corrective actions.

At the time of the decision-making process, if any site from a multi-site certification has major non-conformities identified, certification shall be denied to the whole network pending satisfactory corrective action.

#### 6.10.4 Certification

Certification decisions are taken by an Approvals Board consisting of the Certification Manager and Technical Specialists who are independent of the submission being presented for approval.

A process is in place to ensure the competence, impartiality, independence and integrity of the Approvals Board members and the Chairman.

The audit team leader/auditor having the relevant competency, shall make recommendations for certification, continued certification or re-certification of an organisation and the Certification Manager and/or Technical Expert with relevant industry knowledge shall verify the recommendation. The Technical Expert shall not be included in the approvals process except where required by the Approvals Board to give supplementary information that may have relevance to the specific submission.

The certification shall apply only to the particular services and to the premises (which may include single certification for organisations with a network of sites) as specified on the certificate and associated scope description.

Where certification is required by the organisation, a formal certification agreement shall be entered into by the organisation and WYNLEIGH ICS.

For certification purposes, it is intended that all requirements of the relevant standard be applied.

The scope of the activities of the organisation and the relevant accreditation body scope sectors shall be reflected on the auditee's certificate and made publicly available.

## 6.10.5 Surveillance

Surveillance audits are not necessarily full system audits and shall be planned together with other surveillance activities, which may include:

- a) Enquires from WYNLEIGH ICS to the organisation on aspects of certification.
- b) Reviewing any organisation's statement with respect to its operation (e.g. promotional material, website)
- c) Request to the client to provide documents and records.
- d) Other means of monitoring the certified organisation's performance, including interaction with the organisation's customers.

The surveillance audit programme shall include as a minimum:

- a) Internal audits and management review.
- b) A review of actions taken on nonconformities identified during the previous audit.
- c) Performance review of the audits conducted over the certification period.
- d) Functionality of the complaints handling processes.
- e) Management of activities relating to risks and opportunity.
- f) Effectiveness of the management system with regard to achieving the certified client's objectives.
- g) Progress of planned activities aimed at continual improvement.
- h) Continuing process control.
- i) Review of any changes.
- j) Use of marks and / or reference to certification.

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.

## 6.10.6 Maintaining Certification

Certificated organisations shall demonstrate, through regular surveillance audits and monitoring by competent personnel, continued compliance to the requirements of the relevant standard.

The surveillance auditing of a certificated organisation shall be such that, over a period of three years, the organisation's management system is audited at least once against all requirements of the relevant certification standard in all processes and sites as per sampling plan within the organisation's scope of certification.

#### 6.10.7 Recertification

The three-year certification cycle begins with the certification or recertification decision.

The recertification audit shall be scheduled in the third year prior to expiration of the certificate. Evaluation of past performance shall be conducted before scheduling a re-certification audit.

Recertification activities may need to have a 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 to legislation).

- a) The recertification audit shall plan for the following as a minimum:
  - i. The performance of the management system over the period of certification.
  - ii. Review of previous surveillance audit reports.
  - iii. Ensure that adequate on-site audit coverage was provided in the case of multisite and /or combination schemes.
- b) The recertification audit shall address the following as a minimum:
  - i. The on-going suitability and effectiveness of the organisation's management system.
  - ii. The accuracy of the certificated organisation's scope of certification; and
- c) Confirmation that all major nonconformities recorded at the recertification audit were addressed and actioned within the agreed time frames.
- d) Records of the audit trails shall be detailed to reflect the performance of the management system over the period of certification.

The decision to renew certification shall be based on the results of the recertification audit, as well as the results of the review of the system over the three-year period and shall take into account feedback and any complaints received from users of certification.

## 6.10.8 Validity of Certificates

The management system certificates are valid for a period of 3 years. Formal continuation of certification shall be subject to the annual surveillance and recertification audit after three years. The three-year certification cycle begins with the initial certification decision and the three-year cycle shall be maintained over the life span of the certificate.

When recertification activities are successfully completed prior to the expiry date of the existing certificate, the expiry date of the new certificate will be based on the expiry date of the existing certificate. The issue date on a new certificate shall be on or after the recertification decision.

If the recertification audit has not been completed or it is impossible to verify the implementation of corrective actions for any major nonconformity prior to the expiry date of the certificate, recertification shall not be recommended and the validity of the certificate shall not be extended. The audit client shall be informed and the consequences shall be explained.

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

## 6.10.9 Special Audits

Where a certificated organisation makes major modifications, whether reductions or extensions of scope, to its management system or if other "significant changes" take place that could affect the basis of the certification, the surveillance activities shall be reviewed and changed, if necessary, in light of these system changes.

The certificated organisation is responsible to notify WYNLEIGH ICS of such significant changes that affect the scope of certification.

## 6.10.10 Extensions or reduction to scope

When an auditor encounters significant changes during a surveillance audit or when it is reported by the organisation that changes have occurred in an organisation, the Certification Manager / Team Leader shall decide if it is necessary or not to undertake a Stage 1 audit in order to verify the extent of the changes before proceeding with the audit.

Extensions to scope may be performed in conjunction with a surveillance audit, or if the organisation wishes to have the extension verified prior to the next audit, a stage 2 audit shall be conducted on the new areas to be included in the scope of certification.

When the audited organisation persistently or seriously fails to meet certification requirements, the audit Team Leader may suggest a reduction in scope of certification. The requirements of this policy shall apply under circumstances of a change to the scope.

Once the organisation has notified WYNLEIGH ICS of any reductions in scope, the Certification Manager or Team Leader shall ensure that the database and relevant documentation is updated to reflect the changes. e.g. The reduction in scope may result in a reduction of man days and / or fees.

## 6.10.11 Short-Notice audits

It may be necessary to conduct audits at short notice, and these may include

- a) Investigation of complaints;
- b) Changes to the organisations' scope;
- c) Conducting of an on-site clearance of nonconformities visit;
- d) Conducting of a recertification audit after a suspension.

Where possible, the same team leader and / or a team member shall be allocated for the on-site clearance and recertification audits as was used when the problem was originally identified.

Where it is not possible to use a member of the original team to clear any nonconformity, the certification manager shall exercise additional care in selecting an auditor, since the company may not have sufficient time to object to the choice of auditor(s).

## 6.10.12 Multi-site certification

In the event where a company wants to certify more than one site (multi- site) under the same certificate the following shall apply:

- a) The scope of certification is in essence the same for all the sites.
- b) The organisation must have a site designated as a Head Office / Central Office, which must be audited at least annually and this site may not be included in the calculation of the sample size of sites to be audited.

- c) The head office must have a centrally administered management system which is common to all sites.
- d) The application review needs to identify the central office as well as identify the complexity and scale of activities at each of the sites.
- e) Temporary sites (e.g. construction, security, cleaning) are not part of the multi-site certification but shall be sampled for the purpose of confirming the activities of the organisation.
- f) At the time of the decision-making regarding recommendation for certification, if any site has a major non-conformance, certification shall be denied to the entire network, and the problematic site may not be excluded from the scope of certification in order for the rest of the sites to be certified.
- g) Should problems be identified which necessitate a suspension / withdrawal of certification for one site, certification shall be suspended / withdrawn for all sites.
- h) Calculations of sample size required for the initial, surveillance and recertification audits are included with the quote template.
- i) The rationale for the sampling plan shall be documented for each client.
- Certification of Multi-sites certification may be conducted for ISO 9001, ISO 14001 & ISO 45001.
- 6.11 Transfer of certification from another certification body to WYNLEIGH ICS
- 6.11.1 Only current certificates from an accredited certification body are eligible for a transfer. Organisations holding certification from a non-accredited body shall be treated as new clients.

A pre-transfer review shall be conducted. The following shall be covered during the review:

- a) Confirmation that the client's certified activities falls within the accredited scope of WYNLEIGH ICS.
- b) The reasons for seeking a transfer.
- c) That the site or sites wishing to transfer certification hold an accredited certificate that is valid in terms of authenticity, duration and scope of activities covered by the management system certification. If practical, the validity of certification and the status of outstanding nonconformities should be verified with the issuing certification body unless it has ceased trading. Where it has not been possible to communicate with the issuing certification body, WYNLEIGH ICS shall record the reasons.
- d) Consideration of the last certification or recertification audit reports, subsequent surveillance reports and any outstanding non-conformities that may arise from them. This consideration shall also include any other available, relevant documentation regarding the certification process i.e. handwritten notes, checklists. If the last certification, recertification or subsequent surveillance audit reports are not made available or if the surveillance audit is overdue then the organisation shall be treated as a new client;
- e) Complaints received and action taken.
- f) The stage in the current certification cycle.
- g) Any current engagement by the organisation with regulatory bodies in respect of legal compliance.
- 6.11.2 Submit the relevant documentation to Approvals Board.
- 6.11.3 A certificate shall be issued which maintains the pattern (3 year) of the previous certification cycle, unless an initial audit was performed.
- 6.12 Suspension of certification

An organisation may be suspended from the certification scheme under one or more of the following circumstances:

- a) The client's certified management system has persistently failed to meet certification requirements.
- b) The certified client does not allow surveillance or recertification audits.
- c) Major system non-compliance; and/or
- d) Non-compliance with the contract conditions of certification.
- e) Voluntary suspension.

When any nonconformity or other situation that may lead to suspension or withdrawal of a certificate is identified, the team leader shall submit documentation to the Approvals Board who, shall consider and approve or reject the request for suspension of the organisation from the certification scheme.

A letter must be sent to the organisation explaining the conditions for suspension and an Improvement Report shall be logged to monitor progress after suspension.

The relevant Certification Manager shall manage the suspension until a logical conclusion can be reached, e.g. to conduct a re-audit, perform a clearance of findings audit or initiate the withdrawal / cancellation of certification.

The suspension period for organisations subjected to two audits per year shall not exceed nine months from the date of the last audit. The suspension period for organisations subjected to one audit per year shall not exceed 15 months from the date of the last audit.

An audit shall be conducted to reinstate the company and re-instatement of suspension shall be routed through the Approvals Board.

A request from a company, subjected to two audits per year, to postpone a scheduled audit for longer than three months shall result in a suspension. A request from a company only subjected to one audit per year to postpone the audit longer than three months, shall result in a suspension.

Conditions for suspension are contained in the formal contract.

#### 6.13 Cancellation

## 6.13.1 Voluntary Cancellation

An organisation may voluntarily give up its certification, in which case the certificate shall be cancelled.

## 6.13.2 Cancellation by WYNLEIGH ICS

In the event of a certificated organisation continuing non-compliance after suspension, evidence of such non-compliance shall be submitted to the Approval Board who, after consideration of the submission, may order the withdrawal of the certificate and the removal of the organisation's name from the record of WYNLEIGH ICS certified organisations.

## 6.14 Appeals, complaints and disputes

Appeals against any certification decisions regarding the management scheme are dealt with in the contract between the Organisation and WYNLEIGH ICS.

Any person or organisation that feels aggrieved by a certification decision of WYNLEIGH ICS can raise an appeal. The operation of the complaints and appeal process is described separately. PRO 008 Complaints Procedure, PRO 009 Appeal Procedure.

#### 6.15 Documents and records

An index to the formal management system documentation for the accredited certification schemes of WYNLEIGH ICS has been placed on the WYNLEIGH ICS Sharepoint system that is maintained up-to-date.

16.15.1 Document Control

Refer to PRO 001

16.15.2 Records

Refer to PRO 005

16.15.3 Deviations

Managing Director may grant concessions when the requirements of the prescribed procedures cannot be complied with for a short period of time. If major changes are required in the operation of the management system certification schemes, the Certification Manager shall cause the relevant policies, rules and procedures to be reviewed and revised where necessary.

## 6.16 Management Review

The operation of the management system certification schemes shall be audited and reviewed at least once per annum.

## 7. REPLACEMENT AND WITHDRAWAL

Amendment of paragraph 6.13 on 06/01/2021 by A.J.Cunningham Correction of paragraph numbering inconsistency from 6.10.2 - 6.16