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CERTIFICATE, SUSPENSION AND WITHDRAWAL

1.0 Purpose

To describe a procedure for issue of certificate, suspension and withdrawal of the certificate

2.0 Scope

This procedure covers overall activity for certificate issue, suspension and withdrawal of certificate for all types of certification activities done by us.

3.0 Responsibility

- 3.1 **Quality Manager (QM)** or his designee alternate is responsible for review and approval of certificates. He/she is responsible for issue of certificate to client. He/she is authorised to send suspension or withdrawal letters/e mails to client. He/she is supported by the support staff for all routine activities.
- 3.2 **Chief Executive (CE)** is responsible for approval of certificates. Certificate signature by Chief Executive and updating the registrar of firms. In absence of Chief Executive can sign the certificate.

4.0 Description of Activity

4.1 Receipt and review of Audit report

- 4.1.1 The team leader is responsible for submission of audit report documents. This contains at least client signed audit report, corrective action plan for non-conformances and assessor notes.

All audit reports (Stage 1, Stage 2, routine surveillances, follow-up, special audit, recertification etc) are reviewed at multiple stages.

- 4.1.2 The audit reports are reviewed at multiple stages.

Stage 1 includes administrative review. The submitted set of documents is reviewed for completion (also called administrative review) by Marketing Executive / Administration Manager (ME / AM). Audit Report Review Checklist (F34) is used to record the review. ME / AM issues a deviation note against the Team Leader (F35 Deviation note) if he finds one while administration review. ME / AM submits his findings to Quality Manager.

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Stage 2 includes technical review. The audit report (corrected if possible) along with Audit Report Review Checklist (F34) is submitted to Certification Committee member for technical review which includes review of the information provided by the audit team is sufficient with respect to certification requirements, scope of accreditation and effectiveness of corrections and corrective actions are effective for all non-conformances raised during the audit. Stage 2 shall be carried out by the auditor qualified for the specific EAC sector, provided he has not participated in the audit and has not declared any conflict with the client. The person responsible for technical review is identified during the Contract Review Report (F028). It is the responsibility of the auditor to pro-actively declare of any conflict. The technical review may lead to a Deviation Note (F35), which is issued against the Team Leader, if a deviation is found. All auditors are trained for the process review. In cases where Technical Expert is used for the audit, the Technical Reviewer may discuss with the Technical Expert on the NC / observations used. The reviewer may also discuss any particular part of the report with the team leader / specific auditor. The reviewer also identifies if correction to Deviation Note (F35) issued needs to be completed prior to Stage 3. In case the audit report does not require review by certification committee chairman, the report is returned to ME / AM for Stage 4.

Stage 3 includes decision making by Certification Committee Chairman. Any audit report requiring issue of certificate (Stage 2 audit, change in scope or address, triennial audit etc) requires review and approval by Certification Committee Chairman. For routine surveillance, the review by certification committee chairman is not required. The Technical Reviewer shall decide whether the report needs submission to Certification Committee Chairman. Certification Committee Chairman reviews the findings of Stage 1 and 2 in addition to review of audit report prior to taking the decision. Correspondence related to the client (e.g. Complaints received against the client, changes in scope, media reports etc) are also reviewed during recertification decision. The decision taken is recorded on F34 Audit Report Review Checklist. For Stage 1 audit, the Stage 2 audit may be planned after technical review, however the Certification Committee Chairman shall review the Stage 1 audit report along with Stage 2 audit before making his / her decision. The certification committee may ask for specific inputs from the client or send any auditor to the client to verify any part of the report.

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In case Certification Committee Chairman is involved in the audit or is not available or has declared conflict w.r.t. any client, any other members of Certification Committee review the audit report and take the decision. The change is recorded on F34 Audit Report Review Checklist.

Stage 4 includes further action by QM. QM reviews the decision taken by Technical Review Member and / or Certification Committee Chairman for the followings:

1. Preparing the certificate as per process detailed below.
2. Updating the client data base on the changes in client details, NC's issued in the audit, planning for next audit etc.
3. Filing the report in the client file along with all relevant papers like audit notes, corrective actions submitted by client etc. Auditor performance evaluation sheets etc are filed in respective files.
4. Verifying compliance to all **AKS** quality and certification requirements.

4.2 Certificate preparation and issue

- 4.2.1 This involves preparation and review of certificate, certificate signature by Chief Executive and updating the registrar of firms.

Certificates are issued to clients following initial audit, extension to accredited scope, triennial audit, upgrade on surveillance or change in company details (name, address etc).

The certificates will be numbered sequentially starting with xxx0001 followed by the global client code of **AKS**.

- 4.2.2 QM prepares the certificate:

- No certificate will be issued unless **AKS** has evidence that all non-conforming notices raised have been closed out.
- Select the appropriate blank certificate(s) based on the standard as indicated on the audit report. Be sure to check for any changes indicated on Comment Sheets attached to audit report.

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- Determine the certificate number for IAS accredited certificates by reviewing the Register of Approved Certificated Companies (F38).
- Set the issue date to be the date of approval by Certification Committee Chairman indicated on the F34 Audit Report Review Checklist. Set the expiration date to be three years later. (An issue date of 04/07/2016 would result in an expiration date of 04/07/2019).
- The expiry date may vary from above for transfer cases, where the expiry date shall be the same as earlier certificate. Also refer to any specific instructions given by Quality Manager with reference to expiry dates e.g. during transition to revised standard, the expiry of old standard may be pre-decided by the accreditation board.
- The initial registration date shall be the issue date for first 3-year cycle. In the triennial case, the initial registration date shall be the issue date of first certificate issued. The certificate number shall continue to be the same. The scope shall be the same as in earlier certificate.
- In case the client goes for second cycle but not as triennial (i.e. a gap between expiry of first cycle and second initial date), the certificate shall be considered as fresh and initial registration date shall be the same as issue date. The earlier certificate shall not be considered. A new certificate number shall be awarded.
- On each certificate to be issued, fill in the client organization's name, base office, address, standard (including issue year of standard), and scope, based on the information on the audit report. Be sure to check for any changes indicated on Comment Sheets included in the audit report.
- Have the Quality Manager review the certificate for any errors and submit the corrected and final certificate to Chief Executive for his / her signature.
- Multiple sites each operating a common system with the same scope of certification shall have all the addresses on the same certificate. The client may request for individual certificates. In such cases, each site is issued with its own certificate with the same certificate number and a suffix is added. The certificate number shall be xxx/0001A, xxx/0001B etc.

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- In cases of group of companies, the locations may have different scopes of certification or trading names, each is issued with respective names, addresses and scope. The certificate shall have the same certificate number with a suffix (as explained above).
- Clients may have integrated system where certificates for multiple standards are issued. In such cases, other accredited certificate may be issued as above. Rest of the certificates shall be issued by **AKS** using its own format and process. Necessary comment shall be added to the client file and client database for future reference / use.
- In the event of issuing any revised certification documents, then the original certificate number will have a suffix of revision number. e.g. I/001/07 – R1, for first revision. The expiry date of the certificate does not change and continues the same as the original. Issue date shall be the date of Certification Committee Chairman Approval. Initial Registration date shall be the same as original.

Client database is amended as per the database management process. The completed certificate with the audit report is reviewed by Quality Manager for correctness and completeness of the certificate.

4.2.3 The certificate with all attachments like logo rules, cover letter etc is submitted to Chief Executive for his / her signature. Chief Executive has no authority to reject / deny the issue of certificate. He/she may return the certificate to Chairman of Certification Committee clearly stating the reason for holding the issue. Chairman of Certification Committee shall review the reason and investigate on the same. However, if the Chairman has satisfied himself and re-sends the certificate to Chief Executive for approval, Chief Executive shall sign the certificate. A computer-generated signature may also be used. The above process can be carried out in absence of Chief Executive.

4.2.4 The signed certificate is sent to the client at hihe/her address or any other address he/she has specifically requested. The certificate shall not be issued to any other person without a written approval from the client. The certificate docket shall contain at least the following –

- Cover letter from **AKS**
- Certificate
- Soft copy of the logos
- Customer Satisfaction Survey Form (F37)

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- Rules for Use of Certificate Marks (F36)

A copy of the certificate together with all other documents supporting the approval shall be placed in the client's file or scanned in and stored on the doc server.

4.3 Change in Certificate

4.3.1 The client may request for change in certificate. This may be due to:

- Change in ownership;
- Change in name of **AKS**;
- Change in location;
- Increase or decrease in scope (products, services offered etc.);
- Increase or decrease in locations (opening / closing of site etc.).

4.3.2 Client may request for change in certificate or reduction / expansion in scope to Quality Manager. Quality Manager shall review the request and decide for a special audit if the next audit is not due in near future or if the next audit cannot be proposed. Quality Manager also determines if the changed scope is within accreditation scope of **AKS**.

4.3.3 In case of change in name of company or location without any change in management, the client shall submit ROC approval for the change. Where the management has changed, the details of R&A and O-C approval shall be submitted along with the request.

4.3.4 The duration for the special visit shall be decided by Quality Manager and communicated to the client. The audit team leader TL submits a descriptive report detailing the changes, justification for reduction / expansion of scope and review of the impact of change in the scope (use of logos etc). Where expansion of scope is requested, the compliance to QMS for the respective activities and impact on other processes is verified. In case the special visit is carried out as a part of routine surveillance, the descriptive report is added to the surveillance report.

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The report is reviewed as detailed in 4.1 and 4.2 above. A new certificate is issued with the same expiry date on successful completion of the above process. Quality Manager reviews the contract to determine change in contract with reference to duration for further visits etc.

4.4 Suspension and withdrawal or cancellation of certificates

4.4.1 This instruction covers suspension procedures through withdrawal or cancellation of the certification certificate and revision of the register of approved firms.

- Grounds for action are brought to the attention of the Quality Manager, who reviews the information and decides whether to proceed. Either way, the he/she issues a letter to the client via registered mail / courier advising them of the details of the grounds for action and the decision on whether to proceed.
- If the Quality Manager decides to proceed, the client must reply to **AKS** within fourteen days of receipt of letter.
- If the Quality Manager determines that the action or position contained in the client reply is satisfactory, he issues a letter stating this, and mails it to the client via registered mail.
- If actions are required, due dates must be set and Quality Manager must review the actions at those times to ensure that they are effectively completed in order to prevent suspension or cancellation.
- If the client does not reply in fourteen days, if the reply is not satisfactory, or if the actions required are not effectively completed in the allowed time, the Quality Manager determines whether to suspend or cancel certification.
- If the decision is made to cancel certification, the Chief Executive is responsible for suspending the client or canceling the client from the Register of Approved Certificated Companies, advising the client by registered mail / courier, and publicizing the cancellation, if necessary.

4.4.2 The following reasons are considered grounds for suspension or cancellation:

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- Major non-conformance(s) or effective corrective action not implemented within a specified time period;
- Improper use of the certificate, symbol or logo not remedied to the satisfaction of **AKS**;
- Client ceases to supply product or service of the certified quality system for an extended period of time;
- Client's certified management system has persistently failed to meet any of the requirements for certification including requirements for the effectiveness of the management system;
- Client fails to meet financial obligations to **AKS**;
- Client makes a formal request to withdraw certification;
- Infringement by the client of any contractual conditions between the client and **AKS**;
- Client is unable or unwilling to ensure conformance to revisions of standards;
- Existence of a Serious Complaint, or a large number of second- or third-party complaints, which indicate that the quality management system is not being maintained;
- Client does not allow routine surveillance to be conducted at the required frequency.

4.4.3 The suspension or cancellation can be initiated if the client does not allow the routine surveillance to be conducted at the required frequency. The routine surveillance is carried out not more than 12 months from the last certification audit.

The above are for special conditions like strike, natural calamities, business operations (case to case basis) etc.

4.5 Conditions for Suspension or Cancellation of Client Certification*

4.5.1 Subject to actions by the client, the following steps will be taken leading to possible suspension or cancellation of the client's certification:

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- Unless a reply is received to the letter accompanying notification within 14 days, certification will be suspended and a notification of suspension may be published at the discretion of **AKS**;
- The client's response to the accompanying letter will be reviewed and the proceedings may be put on hold while clarification is sought;
- Where mutually agreed-upon corrective action is to be implemented, a time period for implementation will be specified and a review of the corrective action undertaken at the appointed time. This may be the subject of a special surveillance visit or of review of submitted objective evidence, at the discretion of **AKS**. Should the corrective action not be considered adequate or not be completed by the appointed time, certification will be automatically suspended;
- In the case of serious circumstances, **AKS** may invoke suspension during the period pending the implementation of corrective action;
- Where suspension has been invoked, unless otherwise specified, the client must advise **AKS** every 14 days of the current situation of corrective action. Failure to meet this requirement will result in cancellation of the client's certification;
- Where suspension has been invoked due to failure to conduct surveillance audit, the client shall give justification for failure and offer suitable date. An additional day shall be added to routine surveillance days. The date shall not be later than 15 months from last audit. Failure to offer for audit within 15 months shall result in cancellation of certification;
- When corrective action to resolve the problem(s) taken by the client has been verified, certification will be resumed. The period of certification will not be revised to cover the period of suspension;
- Cancellation of certification will be invoked where, following suspension of certification, the client fails to respond to **AKS** communications within the 14-day grace period or fails to implement corrective action within the appointed time period;
- In extreme circumstances **AKS** may invoke the cancellation of certification with immediate effect without recourse to initial certification suspension;

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- Cancellation of certification will require the client to assume the status of non-approval and return all certification documentation to **AKS**;
- Use of certification documents, symbols, or logos by the client following certification cancellation may result in legal action being taken against the client;
- Re-approval after certification cancellation will be on the same basis, and follow the same process, as that of initial application for a new client. This will require a full assessment, with optional document review at the discretion of **AKS**;
- The de-certification will be published as a separate list and will be available at **AKS** office and made available upon request;
- The client has the right to appeal any decisions of **AKS** and a copy of the appeals procedures will be made available upon request;
- ME shall remove the companies where the certificate has been cancelled. During suspension, suspension remark shall be placed in the registered of approved firms;
- The client files for all cancelled cases shall be archived for a period of 3 months and then destroyed.

4.6 Reduction in scope of Certificates issued

AKS shall wherever applicable reduce the scope of certification if during the time of routine surveillance audits / Re-approval or Renewal audits it finds that the certified client has continually / seriously failed to meet the certification requirements for those parts of the scope of certification. The reduction in scope will be approved by the Quality Manager

5.0 Reference

5.1 ISO 19011 Auditing standard

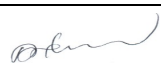
6.0 Enclosure Nil

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7.0 Formats / Exhibits

7.1	F33	Certificates Formats
7.2	F34	Audit Report Review Checklist
7.3	F35	Deviation Note
7.4	F36	Rules for Use of Certification Marks
7.5	F37	Customer Satisfaction Survey Form
7.6	F38	Register of Approved Certificated Companies / Withdrawn Companies / Suspended Companies

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