***PROCEDURE NO***  24

***ISSUE***  1

**ISSUE & WITHDRAWAL OF CERTIFICATES OF APPROVAL**

**CONTENTS**

|  |  |
| --- | --- |
| **1** | **Purpose** |
| **2** | **Scope** |
| **3** | **References** |
| **4** | **Definitions** |
| **5** | **Procedure**5.1 Lead Auditors approval/rejection of certification 35.1.1 ISO9001 QMS 35.1.2 ISO14001 EMS 45.1.3 ISO 18001 OHSAS 45.2 Review of Lead Auditors recommendations 65.3 Governing Boards review and approval 65.3.1 Decision taken in relation to certificationFunction 65.4 Issue of certificates 75.5 Suspension and cancellation of Certificates 75.6 Non accredited certificates 85.7 Cancellation of certificate by client 8 |
| **6** | **Quality Records** |

**1 Purpose**

To ensure that the Certification Body's Certificates of Quality Approval are;

* correctly approved and issued when the organisation/site demonstrates

compliance with ISO9001 through thecertification audit process.

* correctly withdrawn when the organisation/site is found no longer to comply

with ISO 9001 for any element of thestandard.

* the certificated client complies with the conditions governing the use of the

Certificate of Quality Approval and the mark/symbol ofthe Certification Body.

**2 Scope**

All Certificates of Quality Approval issued by the Certification Body.

**3 References**

Reference ISO 17021

**4 Definitions**

None

**5 Procedure**

**5.1**  **Lead Auditors approval/rejection of certification**

For each certification audit and re-audit the Auditor shall submit to the certification

body the certification audit report containing written reasons for recommendation or

rejection for certification or re certification. The Lead Auditors recommendation shall

be based upon the auditees Quality Management System meeting the following criteria:

**5.1.1** **ISO9001 Quality Management System (QMS):**

For a recommendation to certificate an operator with a newly introduced or re-audited

quality management system, the following degree of development or maintenance

must have been achieved;

i) To be certified an organisation has to demonstrate that the QMS functions and

the various control mechanisms are properly operational. In practice this means

in particular that:

* the QMS has been operational for a minimum of three months;
* the internal audit system is fully operational and can be shown to be effective;
* one management review has been conducted.

ii) A QMS certificate can only be issued or re-issued if, in particular:

* any non conformities identified have been addressed and any major non

conformities have been eliminated;

the certification body has justified confidence that all provisions in the QMS

standard have been met, and in particular that provision for compliance with

theorganisation's policy objectives and quality requirements is effective.

* all staff have been made aware of the organisation's policy objectives and

quality requirements.

* all key staff (those involved in managing quality requirements) have

**5.1.2 ISO 14001 Environmental Management System (EMS):**

For a recommendation to certificate an operator with a newly introduced

environmental management system, the following degree of development must have

been achieved;

i) To be certified an organisation has to demonstrate that the EMS functions and

the various control mechanisms are properly operational. In practice this means

in particular that:

* the EMS has been operational for a minimum of three months;
* the internal audit system is fully operational and can be shown to be effective;
* one management review has been conducted

.

ii) An EMS certificate can only be issued if, in particular:

* any non conformities identified have been addressed and any major non

conformities have been eliminated;

* he certification body has justified confidence that all provisions in the EMS

standard have been met, and in particular that provision for compliance with

theorganisation's policy objectives including regulatory requirements is

effective.

* one management review has been conducted.

ii) An EMS certificate can only be issued if, in particular:

* any non conformities identified have been addressed and any major non

conformities have been eliminated;

* the certification body has justified confidence that all provisions in the EMS

standard have been met, and in particular that provision for compliance with

theorganisation's policy objectives including regulatory requirements is

effective.

* the principle of 'continuous improvement' of environmental performance has

been made concrete in an environmental programme and is being adhered to.

* all staff have been made aware of the organisation's environmental effects,

objectives, and the system.

* all key staff (those involved in managing significant effects) have undersigned

a training needs analysis, and have received training accordingly.

**5.1.3 OHSAS18001 Occupational Health and safety Management System (OHSAS ):**

For a recommendation to certificate an operator with a newly introduced OHSAS

management system, the following degree of development must have been achieved;

i) To be certified an organisation has to demonstrate that the OHSAS functions

and the various control mechanisms are properly operational. In practice this

means in particular that:

* the OHSAS has been operational for a minimum of three months;
* the internal audit system is fully operational and can be shown to be effective;
* one management review has been conducted.

ii) An OHSAS certificate can only be issued if, in particular:

* any non conformities identified have been addressed and any major non

onformities have been eliminated;

* the certification body has justified confidence that all provisions in the OH&S

standard have been met, and in particular that provision for compliance with

theorganisation's policy objectives including regulatory requirements is

effective.

the principle of 'continual improvement' of OHSAS performance has been

made concrete in an OHSAS programme and is being adhered to.

* all staff have been made aware of the organisation's OHSAS objectives, and

the system.

•all key staff (those involved in managing objectives) have undersigned a

training needs analysis, and have received training accordingly.

**5.2**  **Review of Lead Auditors recommendations**

*The QAL Quality Incharge shall submit the documents of the lead auditors report and*

*associated material for technical review.The audit documents are reviewed by the scope*

*approved auditor and technical experts.Then the report of the technical review and*

*associated audit documents are submitted to the review committee for certification*

*approval*. *KAL will ensure the persons who make the technical review are different to*

*those who carried out the audit.*

**5.3. Governing Board Review and Approval**

The Governinng Board has authorized the KAL Managing Director as the approver for certifications conducted

by overseas where he is scope approved, peer approval may be needed for other

scopes.

**ISO9001/14001/ OHSAS18001**

For ISO 9001/14001/ OHSAS18001 certification conducted by overseas Offices the

KAL MD shall be authorised to peer

review, approve and issue ISO 9001/14001and OHSAS18001 certificates subject to

the results of the Peer Review ( if needed.)

**5.3.1** **Review Committee**

 *The review committee, which takes the decision on granting/withdrawing, suspension,*

*extension and reduction of a certificate within the certification body, should*

*incorporate a level of knowledge and experience in all areas, other than audit*

*experience, which is equivalent to that of the lead auditor enabling a decision to be*

*made based on the review of objective evidence in the audit file.*

*KAL* *will ensure the persons or committees that make the certification or re-*

*certification decision are different to those who carried out the audit.*

*KAL will confirm, prior to making a decision, that:*

*a. the information provided by the audit team is sufficient with respect to the*

*certification requirements and the scope of certification.*

*b. it has reviewed, accepted and verified the effectiveness of correction and*

*corrective actions for all non conformities that represent*

*1.failure to fulfil of one or more requirements of the management system*

*standard, or*

*2.a situation that raises significant doubts about the ability of the client’s*

*management system to achieve its intended outputs:*

*c****.*** *it has reviewed and accepted the client’s planned correction and corrective*

*action for any other non-conformities.*

 *The Quality Incharge shall verify each certification audits or re-audit process, the*

*reports, any relevant material and endorse the recommendation for approval or*

*rejection. The review committee shall grant approval for a certificate of Quality,*

*Environmental and /or OHSAS Approval providing that*:

* the Lead Auditor has recommended certification in a report and this has been

approved by the BVSPL Quality Incharge.

* there are no outstanding major non compliance's
* Ensures that the coverage of QMS ,EMS and/or OHSAS certificates granted to

anorganisation shall be defined in terms of the activity/activities, location and

effective control of the management system..

The approvals pack will contain copies of;

* Application
* Contract review
* Document review
* Auditor appointment
* Auditor Notes ,
* Audit report.
* CARs (corrective action requests)
* Certification Report form.

***From overseas offices this will be in an electronic Xcel file.***

**5.4**  **Issue of Certificates**

*Upon approval being granted by the review committee the KAL Quality Incharge shall verify the clients details*

*including the audit scope of supply and prepare the Certificate of Quality and/*

*Environmental /OHSAS approval. The KAL HOC shall sign the*

*certificate for authorisation..*

 *The effective date on the certificate shall be not before the certification decision.*

*Ea*ch Certificate shall carry a unique identification number. Details of each certificate

used, cancelled or destroyed shall be recorded in a Certificate Register.

The Administrator shall update the Client file, Client Certification register and then

contact the client about any arrangements for the delivery of the certificate and any

presentations required by the certification body.

The Administrator shall send a controlled copy of the Certification Conditions of

Contract form P24/02 to the approved certified client

A copy of the Certificate shall be retained on the Clients file.

An electronis image of the Certification Body mark/symbol shall be forwarded to the

client on issue of the certificate.

*If the certificate is revised with any changes then the information is recorded in form*

*P24/10 as a means to distinguish the revised document.*

 *Then the reissued certificate are identified by the letter R – in the certificate number.*

**5*.5.Maintaining Certification:***

*The certification is maintained for a period of 3 years under the following conditions:*

*(a) Surveillance audits are conducted once in a year to ensure continuance of certification*

*and to maintain validity of the certificate.*

*(b) The date of the Ist surveillance audit following the initial certification shall not be*

*more than 12 months from the last date of stage II audit.*

*(c) The quality system is maintained by the certified client and all non-conformances*

*raised during surveillance are closed to the satisfaction of KALassessments within the*

*time frame agreed.*

*(d) The internal audit and the management reviews are conducted as scheduled and there*

*are no issues pending.*

(e) *The client shall maintain suitable records of customer complaints and keep the*

*records of investigation and remedial actions taken with respect to such complaints*

*for verification by the* ***KAL****assessments*.

*The certification body should be able to adapt its surveillance programme to the quality issues*

*related to the activities of the organisation/site and justify this programme. It may maintain a*

*clients certification based on a positive conclusion by the audit team leader without further*

*independent review, provided that*

*a)* *For any nonconformity or other situation that may lead to suspension or*

*withdrawal of certification, the certification body has a system that the audit team*

*leader to report to the certification body the need to initiate a review by*

*appropriately competent personnel , different from those who carried out the audit,*

*to determine whether certification can be maintained, and*

*b)* *Competent personnel of the certification body monitor its surveillance activities,*

*includingmoitoring the reporting by its auditors, to confirm that the certification*

*activity is operating effectively.*

**5.6.Suspension and withdrawal of certificate approval**

If the Client/certificate holder fails to maintain compliance with the requirements of

ISO9001, 14001 and/or OHSAS18001, those requirements detailed in Certification

Conditions Document form P24/02 and those commercial and operating requirements

of the certification body then;

 The client/certificate holder is formally informed in writing/fax/email about the

failure of compliance to the above conditions and asked to detail corrective action.

 If the client refuses to respond to correct the failure of non-compliance to the above

conditions then the KAL

*The certification is suspended based on the following conditions:*

*(a)Failure of the client to maintain its Quality system to the requirements of the standard.*

*(b)Failure of the clients to observe the scheduled surveillance.*

*(c)* *No / ineffective corrective actions in response to the non-conformances raised during*

*surveillance or re-assessment.*

*(d)Any willful misuse of logos of the certification and accreditation bodies.*

 *(e) Non-compliance to certification agreement*

 Quality Incharge shall contact the client and inform the client that the certificate

may be suspended initially for 6 months and after 6 months the client is informed

that the certificate is cancelled and would the client return the certificates and cease

to use and distribute any literature, stationary, etc., referencing the certificate of

Certification Body mark/symbol.

***5.7.Suspending, withdrawing or reducing the scope of certification***

*The* ***KAL****shall have a policy and documented procedure(s) for suspension, withdrawal*

*or reduction of the scope of certification, and shall subsequent actions by the Quality*

*Incharge*

*5.7.1.The****KAL*** *shall suspend certification in cases when, for example,*

- *the client certified management system has persistently or seriously failed to meet*

*certification requirements, including requirements fir the effectiveness of the*

*management system,*

- *the certified client does not allow surveillance or recertification audits to be conducted*

*at the required frequencies, or*

- *the certified client has voluntarily requested a suspension.*

*5.7.2.Under suspension, the client’s management system certification is temporarily invalid.*

*The* ***KAL*** *shall have enforceable arrangements with its client’s to ensure that in case of*

*suspension the client refrains from further promotion its certification. The* ***KAL*** *shall*

*make the suspended status of the certification publicly accessible and shall take any other*

*measures it deems appropriate.*

*- Failure to resolve the issues that have resulted in the suspension in a time established by*

*the****KAL*** *shall result in with drawl or reduction of the scope of certification.*

*5.7.3. The* ***KAL*** *shall reduce the client’s scope of certification to exclude the parts not*

*meeting the requirements, when the client has persistently or seriously failed to meet the*

*certification that the client discontinues its use of all advertising matter that contains any*

*reference to a certified status.*

*5.7.4.The****KAL*** *shall have enforceable arrangements with the certified client concerning*

*conditions of withdrawal ensuring upon notice of withdrawal of certification that the client*

*discontinues its use of all advertising matter that contains any reference to a certified status.*

*- Upon request by any party, the* ***KAL****shall correctly state the status of certification of a*

*client’s management system as being suspended, withdrawn or reduced*.

***5.8.Extending the scope:***

 *Upon client’s request for extending scope KAL has to ensure the availability of*

*scope and competence level and advise for audit considering the auditor time. The audit time*

*may be extended after seeing the actual process of the extended part of scope. The certificate*

*will be re-issued incorporating the new scope. This type of scope extension may be clubbed*

*with surveillance audit or it can be carried out separately through Special Audit .*

**5.9**.If the Certification Body decides to issue a non accredited certificate the KAL Quality Inchargeshall record the issue of a non accredited certificate in the certificate register, detailing when the certificate was issued, the scope of the certificate and reasons for issue.

Certificates issued for non accredited audits shall not carry the accreditation body logo. The

client shall be told that it is a non accredited audit and that the certificate will not carry the

accreditation body logo

6.0 When a client does not want to continue their certification to ISO the validity of the

certificate is only until the last full surveillance visit therefore cancellation is from the

date of the last surveillance visit

**6Quality Records**

|  |  |  |  |
| --- | --- | --- | --- |
| **Quality Record****Number** | **Quality Record Title:** | **Type of File** | **Retention****Time** |
|  | Certificate of Quality Approval | With Client | 3 years |
|  | Certified Suppliers List | Operationscomputer file | Current &PreviousIssue |
| P24/02 | ISO 9001 Certification Conditions | With Client | 3 years |
| P24/06 | Letter of suspension | With Client | 3 years |
| P24/07 | Letter of cancellation | With Client | 3 years |
| P24/08 | Mark and logo use  | With branch offices | On going |
| P24/10 | Certification Revision Sheet | Operation | 3 years |
| P24/11 | فرم نظرسنجی |  |  |