Procedure for Certification Process
EXQ CM-10

SUMMARY OF CHANGES

Issue No.	Issue Date	Approved by		
			Name / Position	Signature
Summary of change		1		
			EXQ GM	
		2		
		3		
		4		
		5		

Issue No.	Issue Date	Approved by		
			Name / Position	Signature
Revision No.	Revision Date			
Summary of change		1		
		2		
		3		
		4		
		5		

1.0 PURPOSE

The purpose of this procedure is to give more focusing on how and when to perform issue, reject, maintain, renew, suspend, restore or withdraw the certificate and to describe the process used by Excellence Qualite to investigate, review, expand, reduce the scope and take action to change the status of a client certificated system, either temporarily or permanently.

2.0 SCOPE

This procedure covers certification activities for all clients from the enquiry to the end of the process.

3.0 RESPONSIBILITIES

3.1 General Manager

3.2 Certification Manager

3.3 Technical Manager

3.4 QA Manager

3.5 Marketing Manager

3.6 Lead auditors

4.0 DEFINITIONS

4.1 Null

5.0 PROCEDURE

5.1 **Enquiry, Application and Application Review:**

5.1.1 All written coming inquiries are recorded in Enquiry Log F035. Marketing Manager shall send standard letter to the enquirer, with the certification process "Excellence Qualite Brochure" which explains the current assessment and certification regulations prior to any formal contract being agreed. However customized letter, fax or e-mail may be sent.

5.1.2 The Marketing Manager shall supply the potential client with an application F025 to obtain client information.

5.1.3 Certification Manager shall conduct a review of the application to ensure:

- The information included in the application is sufficient to develop an audit program.
- Differences in understanding between Excellence Qualite and applicant are resolved.
- Excellence Qualite has the competent and ability to conduct the certification activities.
- Any other points affecting the certification activities are taken into account.

5.1.4 When the Certification Manager declines an application for certification as a result of the review of the application, the reasons for declining an application shall be documented and made clear to the client through letter, fax or e-mail.

5.2 Naming of the auditors:

5.2.1 Based on application review, the Certification Manager shall determine the competences needs to include in its audit team; he appoints a lead auditor or an audit team to realize the certification audit. Moreover, if necessary, Excellence Qualite can also consult its commissioned professional experts.

5.2.2 The auditors commissioned to audit realization by Excellence Qualite are obliged to confidentiality and to strict neutrality. To ensure neutrality, only auditors are commissioned who have not performed any activities with or for the concerning client within the last two years before the assessment process. Form No. F 070 [Conflict of interests Declaration]

5.2.3 The Certification Manager select the audit team from Auditor Matrix Form F 026 and record them using quotation form number F 027

5.3 Calculation of audit time

5.3.1 Certification Manager calculates the required audit man days and justification for the man day calculation and record the calculated duration with the assigned auditors in the issued quotation F027 and sends it as mentioned to the Administration Department.

5.3.2 Calculation of audit time and audit duration is detailed in procedure EXQ CM 09.

5.4 Multi-Site Sampling

5.4.1 A multi-site organization need not be a unique legal entity, but all sites shall have a legal or contractual link with the central office and be subject to a common management system. The management system is laid down, established and subject to continuous surveillance and internal audits by the central office. This means that the central office has rights to ensure that the sites implement corrective actions when needed at any site.

5.4.2 The processes at all the sites have to be of the same kind and have to be operated to similar methods and procedures. Where some of the sites under consideration conduct similar, but fewer processes than others, they may be eligible for inclusion provided that the site or sites, which conduct most processes or critical processes, are subject to full audit . All the sites should be in the same country.

5.4.3 Organizations, which conduct their business through linked processes in different locations, are also eligible for certification under multi-site. Where processes in each location are not similar but are clearly linked, the sampling plan shall include at least one example of each processes conducted by the organization (e.g. fabrication of electronic component in one location, assembly of the same components – by the same company in several other locations)

5.4.4 The organization's management system shall be under a centrally controlled and administered plan and be subject to central management review. All the relevant sites including the central office shall be subject to the organization's internal audit program and all sites have been audited prior to certification audit.

5.4.5 The central office has established the management system in accordance with the relevant standard and the whole organization meets the requirements of the standard including relevant legal regulations.

5.4.6 The organization should demonstrate its ability to collect and analyze data (system documentation and changes, management review, complaints, corrective actions,

internal audit, legal requirements etc.) from all sites including the central office and its authority and also demonstrate its authority and ability to initiate organization changes if required.

5.4.7 If all the sites of an organization where the activity subject to certification is performed are not ready to be submitted for certification at the same time, the organization shall be required to inform Excellence Qualite in advance of the sites that it wants to be included in the certification and those which are to be excluded.

Nonconformities

5.4.8 Whenever any non-conformity is found at an individual site, either through the organizations internal auditing or auditing by Excellence Qualite, the organization shall investigate whether it leads to a system deficiency affecting all other sites or limited to the particular site only. If it is found a system deficiency correction and corrective action should be performed both at central office and at the individual sites. If the corrective action is limited to only the site where the nonconformity has been reported, the organization should be able to demonstrate to Excellence Qualite the justification for limiting its follow up corrective action.

5.4.9 At the time of the decision-making process, if any site has nonconformity pending the certification shall be denied to the whole network pending satisfactory corrective action.

5.4.10 It shall not be admissible that, in order to overcome the obstacle raised by the existence of non-conformity at a single site, the organization seeks to exclude from the scope the site during the certification process. Such exclusion can only be agreed in advance.

Certification Document

5.4.11 Excellence Qualite shall issue the certificate after completing the procedural requirements and the sites included in the certificate are either individually audited or audited as per a sampling scheme as defined in Excellence Qualite procedure.

5.4.12 Excellence Qualite shall withdraw the entire certificate if the central office or any of the sites does not fulfil the necessary provisions for the maintenance of the certification.

5.4.13 As the list of sites needs to be updated by Excellence Qualite, the organization shall inform Excellence Qualite about the closure of any of the sites covered by the certification. Failure to provide such information will be considered by Excellence Qualite as a misuse of the certification and Excellence Qualite shall initiate appropriate action for suspension.

5.4.14 Excellence Qualite shall grant additional sites to the existing certification either through the routine surveillance, special audit or re-certification audit.

Sampling

5.4.15 The number of sites selected for certification shall be based on the norms framed by Excellence Qualite to meet the requirements of the applicable mandatory document.

5.4.16 It is not necessary to select the sites before starting of the audit process, but can also be done after the audit of the central office.

Methodology

5.4.17 The sample should be partly selective based on the factors set out below and partly no selective, and should result in a representative range of different sites being selected, without excluding the random element of sampling.

5.4.18 At least 25% of the sample should be selected at random.

5.4.19 Taking into account the provisions mentioned below, the remainder should be selected so that the differences among the sites selected over the period of validity of the certificate is as large as possible.

5.4.20 The site selection may include among others the following aspects:

- Results of internal site audits and management reviews or previous certification audits;
- Records of complaints and other relevant aspects of corrective;
- Significant variations in the size of the sites;
- Variations in shift patterns and work procedures;
- Complexity of the management system and processes conducted at the sites;
- Modifications since the last certification audit;
- Maturity of the management system and knowledge of the organization;
- Environmental issues and extent of aspects and associated impacts for environmental management systems;
- Differences in culture, language and regulatory requirements; and
- Geographical dispersion.

5.4.21 This selection does not have to be done at the start of the audit process. It can also be done once the audit at the central office has been completed. In any case, the central office shall be informed of the sites to be included in the sample. This can be on relatively short notice, but should allow adequate time for preparation for the audit.

Size of Sample:

5.4.22 According to IAF Mandatory Document for the Certification of Multiple Sites

5.4.23 The certification body shall have records on each application of multi-site sampling justifying it is operating in accordance with this document.

5.4.24 The following calculation is an example based on the example of a low to medium risk activity with less than 50 employees at each site. The minimum number of sites to be visited per audit is:

- Initial audit: the size of the sample should be the square root of the number of remote sites: (y= Square Root of x), rounded to the upper whole number.
- Surveillance audit: the size of the annual sample should be the square root of the number of remote sites with 0.6 as a coefficient (y=0.6 Square Root of x), rounded to the upper whole number.
- Re-certification audit: the size of the sample should be the same as for an initial audit. Nevertheless, where the management system has proved to be effective over a period of three years, the size of the sample could be reduced by a factor0.8, i.e.: (y=0.8 Square Root of x), rounded to the upper whole number.

5.4.25 The certification body should define within its management system the risk levels of activities as applied above

5.4.26 The central office shall be audited during every initial certification and re-certification audit and at least annually as part of surveillance.

5.4.27 The size or frequency of the sample should be increased where the certification body's risk analysis of the activity covered by the management system subject to certification indicates special circumstances in respect of factors such as:

- The size of the sites and number of employees (e.g., more than 50 employees on a site);
- The complexity or risk level of the activity and of the management system;
- Variations in working practices (e.g., shift working);
- Variations in activities undertaken;
- Records of complaints and other relevant aspects of corrective;
- Any multinational aspects; and
- Results of internal audits and management review.

5.4.28 When the organization has a hierarchical system of branches (e.g., head (central) office, national offices, regional offices, local branches), the sampling model for initial audit as defined above applies to each level. Example:

- 1 head office: visited at each audit cycle (initial or surveillance or re-certification)
- 4 National offices: sample = 2: minimum 1 at random
- 27 regional offices: sample = 6: minimum 2 at random
- 1700 local branches: sample = 42: minimum 11 at random.

Audit Times:

5.4.29 The audit time to spend for each individual site is another important element to consider, and the certification body shall be prepared to justify the time spent on multisite audits in terms of its overall policy for allocation of audit time.

5.4.30 The number of man-days per site, including the central office, should be calculated for each site using the most recently published IAF MD 5 for the calculation of man days for the relevant standard.

5.4.31 Reductions can be applied to take into account the clauses that are not relevant to the central office and/or the local sites. Reasons for the justification of such reductions shall be recorded by the certification body.

5.4.32 Sites which carry out the most or critical processes are not subject to reductions.

5.4.33 The total time expended on initial assessment and surveillance is the total sum of the time spent at each site plus the central office and should never be less than that which would have been calculated for the size and complexity of the operation if all the work had been undertaken at a single site (i.e., with all the employees of the company in the same site).

Additional Sites:

5.4.34 On the application of a new group of sites to join an already certified multi-site network, each new group of sites should be considered as an independent set for the determination of the sample size. After inclusion of the new group in the certificate, the new sites should be added to the previous ones for determining the sample size for future surveillance or re-certification audits.

5.5 Audit Planning

5.5.1 upon issuing of the quotation and determining the audit man days, the certification manager issue the audit program for full cycle form F004A

5.5.2 The lead auditor assigned in the quotation form is responsible for issuing the audit plan form F004B and notify the client through the administrator.

5.6 Initial Audit "Stage 1"

5.6.1 In stage 1 the following review is carried out:

- Documentation of the available management system (document check): Manual, process descriptions, procedure instructions and working instructions etc.
- Product and location specific conditions
- The proof of the conducting of internal audit.
- The proof of providing a management review.

5.6.2 If the auditor / the audit team conclude that the management system of the client found fulfils the requirements of the respective standard(s) for certification, the audit stage 2 is initiated.

5.6.3 Stage 1 audit is as the following

No.	Procedure	Main activities	Remarks
1	Opening Meeting	- Arrive before starting audit - Conduct opening meeting according to the following procedure: o Express appreciation for the application for audit o Introduction of audit team o Conform the audit plan o Conform communication channels o Provide an opportunity for the auditee to ask questions o Explanation of audit performance o Explanation and adjustment of schedule o Check the safety and security area which can be influenced by auditor o Check the role and responsibility of guide o Request for support (meeting room, etc.) o Guide for closing meeting o Check the observance of confidentiality	
2	Conduct of Audit	- Individual auditor carries out audit according to the plan and records the objective evidence on the audit record. - First stage audit should be on-site audit. It should be noticed to client that 1st stage audit	

		if not conducting on site may be dangerous factors to second stage audit. - "Site" can include approaching to "internet site" having management system audit relevant information not only physical location (e.g. .factory). - At least, partial of 1st audit should be conducted on applicant organization. - Check point of 1st stage o Document of client's management system o Evaluation of customer location and status of each sites, discussion about decision for preparedness for 2nd audit with client o Review of standard requirement, identification of main result and aspects of management system, process, objective and operation related customer condition and interest	
3	Last audit day	- If it is the audit for two or more days, - If it isn't (No), go on to the fourth stage - If it is (Yes), go on to the sixth stage	
4	Audit team meeting	- The audit team summarizes and reports the result of audit to the head of audit team. - Decide information which needs to be explained to customer at daily arrangement meeting.	
5	Daily Meeting	- The head of audit team notices the process of audit including changed schedule and potential non-conformity to customer. - Daily arrangement meeting is held after the completion of daily audit or before starting the next day audit.	
6	Prepare closing meeting	- Prepare closing meeting including nonconformity	
7	Complete audit report	- Audit team and Team Leader of it make out Request form for corrective actions by preparing the discovered matters from audit based on the audit record	

8	Closing meeting	- Conduct closing meeting according to the procedure and distribute request form for corrective actions and audit record. And communicate the Audit record and finding to the client. - Audit finding Observations or NC are update to client and gives sufficient time to complete the issue of concerns. - Procedure ○ Expressing appreciation for the performance of audit ○ Recheck the coverage and standard ○ Explanation of how to conduct audit (pilot audit etc.) ○ Explanation of nonconformity ○ Explain the method of corrective actions ○ Discuss the scheduling of on-site audit ○ Recheck the observance of confidentiality	
9	Successive Activities	- Notice to client that audit result of 1st stage audit can lead delay or cancellation of 2nd stage audit - Identification of matters possible to be NC at 2 nd stage, providing the documented findings o f 1st stage audit to client - Terms between 1st stage and 2nd stage audit cannot be over 6 months. - When corrective actions are completed accord ing to the nonconformity correction process, e stablish the on-site audit plan. - If corrective actions aren't completed within the period, request for re-correction and if it isn't taken, audit can be nullified.	

5.6.4 The audit team leader should be responsible for the preparation of audit report and should refer the following:

- The audit objectives
- The audit scope, particularly identification of the organizational and functional units or processes audited and the time period covered.
- Identification of the audit client

- Identification of audit team leader and members
- The dates and places where the on-site audit activities were concluded
- The audit criteria
- The audit findings
- The audit conclusions
- The audit plan
- A list of auditee representatives
- A summary of the audit processes, including the uncertainty and or any obstacles encountered that could decrease the reliability of the audit conclusions
- Conformation that the audit objectives have been accomplished within the audit scope in accordance with the audit plan
- Any areas not covered, although within the audit scope
- Any unresolved diverging opinions between the audit team and the audtitees
- Recommendations for improvement, if specified in the audit objectives,
- Agreed follow-up action plans , if any
- A statement of the confidential nature of the contents
- The distribution list for the audit report

5.6.5 Audit check points

The check points in the process of audit at first stage audit shall include document audit, common check points, and check points for each relevant system.

5.6.6 Common check points

- Examine the understanding of significance of management system, status of customer organization relating to process, aim, and operation and understanding of the requirements for standard
- Check if it meets all the requirements relating to certification coverage, process of organization
- Discuss with the personnel of customer organization to evaluate the position, status/situation of each business workplace and determine the preparatory status for second stage audit
- Evaluate plan of internal audit and management review and whether they are conducted effectively and evaluate if they verify that conduction level meets the requirements for the preparation of receiving second audit
- Examine additional document and if preliminary knowledge is obtained
- Find out observance of law, regulations relating to the danger of organization
- Provided significant matters for the establishment of on-site audit plan by examining applicable regulations and agreement with governmental authority
- Check if process specified by organization is adequate to meet the goal and customer needs.
- Discuss details to conduct second stage audit and assign resources of audit

5.7 Initial Audit "Stage 2"

5.7.1 Stage 2 audit is as the following

No	Procedure	Main activities	Remarks
1	Arrive at customer's site	- Carry on site, arrive 10 minutes prior to the start of audit - Prepare opening meeting - Recheck audit plan - Check the numbers of estimated participants in opening meeting	
2	Opening Meeting	- Conduct opening meeting according to the procedure. - Procedure o Express appreciation for the application for audit o Introduction of audit team o Check the coverage and standard ❖ To conform the audit plan ❖ To conform communication ❖ To provide an opportunity for t he auditee to ask questions o Explanation of audit performance / summary (pilot audit etc.) o Explanation of major/minor nonconformity o Explanation and adjustment of schedule o Check the safety and security area which can be influenced by auditor o Request of guide o Request for support (meeting room, etc) o Guide for closing meeting o Check the observance of confidentiality	
3	Audit Conduct	- 2nd stage audit o Information and evidence about conformity to all requirements of the applicable management system standard or other normative document	

		○ Performance monitoring, measuring, reporting and reviewing against key performance objectives and targets ○ Observance relevant the client's management system and performance as regards legal compliance and the Operational controls and processes and its result. ○ Operating of customer process ○ Internal audit and management review ○ Management responsibility about customer policy ○ Normative requirement, policy, objective and target, legal requirement responsibility, personnel's competence, operating, procedure, result data, relation between NC findings in internal audit and the result - Individual auditor carries out audit according to the schedule and records the objective evidence on the audit record. - Nonconformity is issued, being divided into minor/major nonconformity. - Audit shall be conducted on-site.	
4	Last audit day	○ Head of audit team can supervise the following meetings based on the audit plan or if necessary ○ Daily arrangement meeting (applicable f or the audit for two or more days) ○ Audit team meeting	
5	Audit team meeting	- The audit team summarizes and reports the result of audit to the head of audit team. - Decide information which needs to be explained to customer at daily arrangement meeting.	
6	Daily Meeting	- The head of audit team notices the process of audit including changed schedule and potential non-conformity to customer.	

		- Daily arrangement meeting is held after the completion of daily audit or before starting the next day audit.	
7.	Major NC	- Based on the audit standard, the head of audit team determines whether major nonconformity exists. - If the opinions about the judgment of major/minor nonconformity don't correspond, the head make decision of it. - If major nonconformity exists (Yes), move on to 9 stage - If major nonconformity doesn't exist (No), move on to 10 stage	
8	Explain/ Discuss	- Explain about major nonconformity to the representative of Auditee Company - Contact with the manager of assessment management team or verification auditor of certification body and discuss customer dealing method and determine	
9	Reporting	- Audit team including head of it make out 'request for corrective action' based on audit record. - Audit team including head of it make out the audit record based on team information.	
10	Closing meeting	- Conduct closing meeting according to the procedure of audit or closing meeting in the guidelines to preparation and convey the matters checked (audit record). - Procedure of closing meeting ○ Expressing appreciation for the performance of audit ○ Recheck the coverage and standard ○ Explanation of how to conduct audit (pilot audit etc.) ○ Explanation and general review of discovered matters (including nonconformity and recommendations)	

		○ Explain the method of corrective actions (notify it shall be taken within one month) ○ In the case of major non-conformity, ask for corrective actions within one month to 3 months (conduct confirmation audit) ○ Propose recommendation of certification ○ Explain granting method of certificate ○ Explain how to use certification mark ○ Guide to next audit (surveillance audit etc.) ○ Question & answer ○ Recheck the observance of confidentiality	
11	Receive/ Confirm CA	- The head of audit team check the compatibility of corrective actions based on the submitted documents. (However, in the case of major non-conformity, the compatibility of corrective actions is checked through confirmation audit.) - If the result of corrective actions is acceptable (Yes), move on to 14 stage - If the result of corrective actions is unacceptable (No), move on to 13 stage - (It applies even if the due date for corrective actions isn't obeyed)	
12	Request of complement o r Warning	- If the result of corrective actions is unacceptable, ask for complement - If the corrective actions are delayed, send official warning notice	
13	Report Submission	- Submit all the report to the person in charge of certification	

5.8 **Certification Decision and Issue of Certificates:**

5.7.1 Lead auditor shall conduct the audit and submit audit report F031/ F032 with his recommendations to the Technical Manager to be reviewed.

5.7.2 Upon approval being granted by the Technical Manager, he sends the reviewed audit report with the review checklist F034 to the Certification Manager to make the certification decision, where all papers are reviewed and if more information needed, they re-send it back, after fulfilling all requirements the certification Manager sends approval with the certificate information F034 to the admin to print the certificate and submit it to the client.

5.7.3 The Certification Manager should approve the decision of granting, maintaining or renewal certificate, suspending certificate, withdrawal of certificate, restore of certificate or extension/reduction the scope of the client.

5.7.4 The certification Manager shall review the information provided by the Technical Manager to ensure that the information sufficient with respect to the certification requirements and the scope of certification.

5.7.5 The certification Manager shall ensure that any major nonconformity has reviewed, accepted and correction and corrective actions were verified

5.7.6 Each granted certificate shall carry a unique security identification number.

5.7.7 Details of each certificate valid, canceled or suspended shall be recorded in master client list F029.

5.7.8 In these processes, (including, decision of certification, issuing certificate, maintaining, renewal, suspend or withdrawn of certificate, restore certificate, non-accredited certificate, scope extension/reduction, use of certificate and logo, client rights and responsibilities) Quality Instructions for using logo and certificate instruction shall be sent to the approved certified client by Marketing Manager, then the certificate shall be released.

5.7.9 A format that shows content of certificate shall be retained on computer.

5.9 Maintaining and Validity of certificates:

5.8.1 Audits related to maintaining of certificates (surveillance and re-certification) shall be scheduled by the Certification Manager using Audit Program Form F004A

5.8.2 **Surveillance audits** to be conducted at least once a year. 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.

5.8.3 Surveillance activities shall include on-site audits assessing the certified client's management system's fulfillment of specified requirements with respect to the standard to which the certifications granted.

5.8.4 Surveillance audits are on-site audits, but are not necessarily full system audits, and shall be planned together with the other surveillance activities so that the certification body can maintain confidence that the certified management system continues to fulfil requirements between re-certification audits.

5.8.5 Excellence Qualite shall maintain certification based on demonstration that the client continues to satisfy the requirements of the management system standard. It may maintain a client's certification based on a positive conclusion by the audit team leader F 032

5.8.6 For any nonconformity or other situation that may lead to suspension or withdrawal of certification, Excellence Qualite requires the audit team leader to report 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.

5.8.7 Competent personnel monitor surveillance activities, including monitoring the reporting by auditors, to confirm that the certification activities are operating effectively.

5.8.8 **A re-certification audit** shall be planned and conducted to evaluate the continued fulfilment of all of the requirements of the relevant management system standard or other normative document. The purpose of the re-certification audit is to confirm the continued conformity and effectiveness of the management system as a whole, and its continued relevance and applicability for the scope of certification.

5.8.9 Re-certification audit takes place on the third anniversary of the initial assessment, also if the client extends their scope of registration beyond the initial assessment and that the company's new scope (if any) and activities are in line with the requirements of the relevant standard.

5.8.10 A full reassessment may be conducted in the event of changes significantly affecting the activity and operation of the client, or if the analysis of a complaint or other information indicates that a client no longer complies with certification requirements. This may include the need for a stage 1 audit. The decision is taken by the Certification Manager.

5.8.11 The re-certification audit shall be conducted before expiry date of the certificate.

5.8.12 For any major nonconformity, Excellence Qualite shall define time limits for correction and corrective actions. These actions shall be implemented and verified prior to the expiration of certification, and then the expiry date of the new certification can be based on the expiry date of the existing certification. The issue date on a new certificate shall be on or after the re-certification decision.

5.8.13 If the certification body has not completed the re-certification audit or the certification body is unable to verify the implementation of corrections and corrective actions for any major nonconformity prior to the expiry date of the certification, then re-certification shall not be recommended and the validity of the certification shall not be extended. The client shall be informed by any means (Letter, Phone, Fax or e-mail) and the consequences shall be explained.

5.8.14 Following expiration of certification, the certification body can restore certification within 6 months provided that the outstanding re-certification activities are completed, otherwise at least a stage 2 shall be conducted. 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.

5.8.15 The re-certification audit shall consider the performance of the management system over the period of certification, and include the review of previous surveillance audit reports.

5.8.16 Re-certification 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 the management system is operating (e.g., changes to legislation).

5.8.17 When, during a re-certification audit, instances of nonconformity or lack of evidence of conformity are identified, the certification body shall define time limits for correction and corrective actions to be implemented prior to the expiration of certification.

5.8.18 **Special Audit** to be conducted if the client requests a change of scope from that already granted the Certification Manager will undertake a review to determine any audit activity necessary. This is normally conducted in conjunction with a surveillance visit.

5.8.19 If it becomes necessary to conduct an audit at short notice to either investigate a complaint, or in response to substantial changes, or as follow up to a suspended client, assessment and certification regulations will be forwarded to the client. In addition, assignment of the audit

team will take into account the lack of opportunity for the client to object to any of the auditors.

5.10 Suspension of certificates:

5.9.1 Certificates suspension has been performed following situations:

- After a written declaration to certified client about valid reason of received complaint.
- The client's certified management system has persistently or seriously failed to meet certification requirements, including requirements for the effectiveness of the management system.
- The certified client does not allow surveillance or re-certification audits to be conducted at the required frequencies.
- The certified client has voluntarily requested a suspension.
- In case of Breach of contract.

5.9.2 The decision to suspend a certificate shall be communicated to the client by a formal letter. The letter shall include:

- Statement on the decision to suspend the certificate including a proper description of the situation, argumentation and reference to objective evidences.
- The right to respond and appeal to the decision. Normally a 10 working days' notice for response and appeal are given.
- Start date of the suspension (normally from the date of receiving of the letter)
- Conditions and due date of required action in order to revoke the suspension, and the consequence if satisfactory actions are not performed.
- The means of follow-up by Excellence Qualite - The certification Manager verify that conditions have been met and needed corrective actions have been implemented
- Statement that the certificate is invalid during suspension and that use of all advertising matter containing a reference to Certification are prohibited during time of suspension
- Statement that both the client and Excellence Qualite - The certification Manager shall inform all enquirers that the certificate is suspended
- The certificate shall not be suspended for more than 6 months.

5.9.3 Where failure of the management system is related to a specific part of the organization specific products etc., Excellence Qualite - The certification manager may also consider a reduction in the scope of certification as an alternative to suspension. Excellence Qualite - The certification committee members may also choose to only give the client a warning that suspension is being considered.

5.9.4 Suspension period is limited for max 6 months.

5.9.5 According to Excellence Qualite policy, if the surveillance audit has not performed due date, Excellence Qualite will allow max two months for the client to be ready for the audit. If the audit has not been performed certificate will be suspended for Max.6 months and if the audit has not been performed during this period the certificate will be withdrawn.

5.9.6 If the client proves that they have closed up the non-conformity after the suspension, suspension decision abolished and the client gets informed by mail.

5.9.7 Suspension by client's request, certification relevant department investigates the reason for suspension and decides the suspension of certificate after talking with client again. If the

client requests the cancellation of certificate, certification department cancels the certificate and Excellence Qualite warns the client not to use any documents relevant to certification body.

5.9.8 Follow up:

- Excellence Qualite - The certification manager will verify that conditions are met and requested corrective actions are implemented.
- Dependent on this verification, Excellence Qualite - The certification manager will either:
  - Declare a positive result, revoke the suspension and declare a valid certificate
  - Declare a negative result due to failure to resolve the issues that resulted in suspension. This situation will normally result in permanent withdrawal of the certificate.
- In either case the client will receive a letter confirming the result.

5.11 Withdrawal:

5.10.1 Withdrawal of the certificate shall be initiated if:

- The customer does not meet the conditions of suspension
- A suspension is not considered to be an adequate action.
- If the client does not declare change of manufacturing / service activities or its address written on the certificate and if the change appears and determined in extraordinary visit of Excellence Qualite.
- In case of change in appellation-register No. Of client (even company owners are same) the old certificate is withdrawn and change of appellation- shall be applied.
- The certified client has voluntarily requested a withdrawn.
- If the surveillance audit does not conduct at the end of the suspension period the certificate is withdrawn.
- In case of Breach of contract.

5.10.2 Client's name whose certificate withdrawn will be ejected from the reference list of Excellence Qualite web site to make this information publicly accessible.

5.10.3 The decision to withdraw a certificate shall be formally communicated to the client including the requirements to:

- Terminate use of the certification mark and any reference to certification
- Return certificate(s) and copies to Excellence Qualite.
- The customer has a right to appeal.

5.11 Issue of Non – Accredited Certificates:

5.11.1 For being still not accredited, Excellence Qualite decides to issue non-accredited certificates under the condition that the client approved about the issue of a non-accredited certificate.

5.11.2 Certificates issued for non-accredited audits shall not carry Accreditation logos. The client shall be told that it is a non-accredited audit and that the certificate will not carry Accreditation logos.

5.12 Expansion or reduction of Certificate's Scope:

5.12.1 If the client requests an alteration on the certification scope to result from any modification of the production/service activities; a new assessment is performed.

5.12.2 Extension: If there is an application about the certification scope, review of the application has done and decide if can be changed or not. For Scope extension a new audit in site/organization is required. If there is any small change on the scope word (spelling, writing errors, etc.) on the certificate; at this situation a new audit is not performed. Certificate is issued with new date, but the certificate validity date stays same as the old certificate.

5.12.3 Scope Reduction: The client's certification scope should be restricted depend on the Management System Standard's clauses when they are failed to meet some part of certification specifications continuously or seriously.

5.12.4 According to reduced scope, the certificate should be reissued providing that the certificate date will be same. There will be no on-site audit in reduction.

5.13 Changing of Address:

5.13.1 If the service/production location changes a new certification audit is performed certainly.

5.14 Changing of Appellation of the firm:

5.14.1 If there is an Appellation change (for example ltd. company to corporation) On the Registration paper; a new audit is not necessary.

5.14.2 If the owner of the firm is the same, the firm that has new registration number and new appellation is audited again. The firm is assessed as a new client. Certificate is renewing in new date but surveillance audit date and certificate validity does not change (same as the old one).

6.0 FORMS

6.1 F 004-A Audit program
6.2 F 004-B Audit plan
6.3 F 014 Audit Schedule
6.4 F 025 Application
6.5 F 027 Quotation
6.6 F 029 Master Client List
6.7 F 031 A Stage-1 QMS,B, C and D
6.8 F 032 A Stage-2 QMS,B, C and D

F 034 Audit Report Review and Decision Making