

SADCAS Ref. No:

CHECKLIST ISO/IEC 17021-1:2015

Conformity Assessment –Requirements for Bodies Providing Audit and Certification of Management Systems

Date(s) of Evaluation:						
Team Leader						
Organization:					Department	
Area/Field of Operation:						
Sub-scopes	QMS <input type="checkbox"/>	EMS <input type="checkbox"/>	OHSMS <input type="checkbox"/>	FSMS <input type="checkbox"/>	HACCP <input type="checkbox"/>	Other (specify) <input type="checkbox"/>
Applicable Level 4 & 5 Standard(s) for the Sub-scopes						
Technical Assessor(s) / Experts & Observer(s). Indicate for each sub-scope and Technical Areas i.e. IAF Code as applicable						
Organization's Representative:						

The report covers the following:				
Document Review <input type="checkbox"/>	Preassessment <input type="checkbox"/>	Initial Assessment <input type="checkbox"/>	Periodic Assessment <input type="checkbox"/>	Re-assessment <input type="checkbox"/>

ISO/IEC 17021-1 REQUIREMENTS		IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
5	General requirements			
5.1	Legal and contractual matters			
5.1.1	Legal responsibility			

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<p>Legal entity or a defined part of a legal entity can be held legally responsible. (Pty) Ltd, CC or other?</p> <p>Verify registration with Registers of Companies</p> <p>Governmental CB is a legal entity based on its governmental status. Identity department.</p>			
<p>5.1.2 Certification agreement</p> <p>Legally enforceable agreement (contract) for provision of certification activities to customer?</p> <p>Are multiple offices of a CB or multiple sites of a certified customer covered by the agreement?</p> <p>Are all the sites covered by the scope of the certification?</p>	MD1		
<p>5.1.3 Responsibility for certification decisions</p> <p>Does CB retain authority and responsibility for its decisions relating to certification? e.g. granting, maintaining, renewing, extending, reducing, suspending and withdrawing.</p>			
<p>5.2 Management of impartiality</p> <p>5.2.1 Is CB top management commitment to impartiality?</p> <p>Is there a publicly accessible statement? Does it cover:</p> <ul style="list-style-type: none"> Importance of impartiality; 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> • Conflict of interest; and • Is the CB carrying out its conformity assessment activities impartially? Is the CB taking responsibility of impartiality for its conformity activities and not allowing commercial, financial or other pressures to compromise impartiality? 			
<p>5.2.2 Does the CB have top management commitment to impartiality in management system certification activities?</p> <p>Does the CB have a policy:</p> <ul style="list-style-type: none"> • Concerning the importance of impartiality in carrying out management system certification activities; • To manage the conflict of interests; and • To ensure the objectivity of the management system certification activities 			
<p>5.2.3 Are risks related conflict of interests identified, Analysed and documented and managed through the system?</p> <p>Are relationships posing a threat to impartiality documented?</p> <p>How does the CB demonstrate that it eliminates or minimizes such threats?</p> <p>Information made available to the impartiality Committee?</p> <p>Does top management review any residual risk?</p>			

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<p>Does the risk assessment process include identification and consultation with appropriate interested parties to advise on matters affecting impartiality including openness and public perception?</p> <p>Not offering certification when relationships that threaten impartiality cannot be eliminated or minimized.</p> <p>Note 1: A relationship that threatens the impartiality of the CB can be based on ownership, governance, management, personnel, shared resources, finances, contracts, marketing and payment of a sales commission or other inducement for the referral of new clients, etc.</p>			
<p>Note 2: Interested parties can include personnel and clients of the CB, customers and organizations whose systems are certified, representatives of industry trade associations, representatives of governmental regulatory bodies or other governmental services, or representatives of non-governmental organizations including consumer organizations.</p> <p>Note 3: One way of fulfilling the consultation requirement is by the use of a Committee of these interested parties.</p>			
<p>5.2.4 Does the CB offer certification for another CB's management system</p> <p>See Note 1</p>			
<p>5.2.5 Does the CB and any part of the same legal entity offer or provide management system consultancy?</p>	MD22		

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<p>This applies also to that part of government identified as the CB.</p> <p>See Note 1</p>			
<p>5.2.6 Does the CB any part of the same legal entity provide internal audits to its certified customers?</p> <p>Does the CB certify a management system on which it provided internal audits within 2 years following the end of the internal audits?</p> <p>This applies also to that part of government identified as CB.</p> <p>See Note 1</p>			
<p>5.2.7 Does the CB certify a customer when the CB's relationship with a management system consultancy or internal audits, poses an unacceptable threat to the impartiality of the CB?</p> <p>See Notes 1,2,3</p>	MD22		
<p>5.2.8 Does the CB outsource audits to a management system consultancy organization? (Unacceptable threat to impartiality. See 7.5).</p> <p>This clause does not apply to individuals contracted as auditors covered in 7.3</p>			
<p>5.2.9 Are the CB's activities marketed or linked with management system consultancy? CB takes action to correct inappropriate claims by any consultancy organization?</p>	MD22		

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Are there any implications by CB that certification would be simpler, easier, faster or less expensive if a specified consultancy organization is used?			
5.2.10 Does CB ensure no conflict of interest of personnel? Two years rule applied, how effective is the process?			
5.2.11 Is action taken to respond to any threats to CB's impartiality arising from the actions of other persons, bodies or organizations?			
5.2.12 Does all CB personnel, internal, external or committees act impartially and does the CB allow commercial, financial or other pressure to compromise impartiality?			
5.2.13 Does the CB require all personnel to reveal any conflict of interest situations? Information used as input to identifying threats to impartiality?			
5.3 Liability and Financing			
5.3.1 Is the CB able to demonstrate that it has evaluated risks arising from its certification activities and that it has adequate arrangements (e.g. insurance or reserves) to cover liabilities arising from its operations in each of its field of activities and the geographic areas in which it operates?			
5.3.2 Does the CB evaluate its finances and sources of income and demonstrate to the committee specified in			

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6.2 that initially and on an ongoing basis, commercial, financial or other pressures do not compromise its impartiality?			
6. Structural requirements			
6.1 Organizational structure and top management			
6.1.1 Organizational structure documented including duties, responsibilities and authorities for personnel and committees; and relationships to other parts within the same legal entity?			
6.1.2 Are the certification activities structured and managed so as to safeguard impartiality ?			
6.1.3 Does the CB identify the top management (board, group of persons, or person) having overall authority and responsibility for each of the following:			
<ul style="list-style-type: none"> a) development of policies relating to the operation of the body? b) supervision of the implementation of policies and procedures? c) ensuring impartiality? d) supervision of the finances of the body? e) development of management system certification services and schemes? f) performance of audits and certification and responsiveness to complaints? g) decisions on certification? 			

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<ul style="list-style-type: none"> h) delegation of authority to committees or individuals, as required, to undertake defined activities on its behalf? i) contractual arrangements? j) providing adequate resources for certification activities? 			
6.1.4 Formal rules for the appointment, terms of reference and operation of any committees involved in the certification activities?			
6.2 Operational Control 6.2.1 Does the CB have a process for the effective control of certification activities delivered by branch offices, partnerships, agents, franchisees, etc., irrespective of their legal status, relationship or geographical location? Does the CB consider the risk that these activities pose to the competence, consistency and impartiality of the CB?			
6.2.2 Does the CB consider the appropriate level and method of control of activities undertaken including its processes, technical areas of CBs' operations, competence of personnel, lines of management control, reporting and remote access to operations including records?			

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7	Resource requirements	MD16		DURING PERIODIC ASSESSMENTS PLEASE ASSESS CLAUSE 7 USING F61g
7.1	Competence of personnel			
7.1.1	General considerations Does a CB have a process to ensure that personnel have appropriate knowledge and skills relevant to the types of management systems and geographical areas in which it operates?			
7.1.2	Determination of competence criteria Is competence required for each technical area and for each function in the certification activity determined for each technical area? Is the means for the demonstration of competence determined? Are competence requirements determined for all CB personnel and is this as per documented process? Is the documented process as per or as per certification scheme? - ISO/IEC TS 17021-3 (QMS) – Annexure A - ISO/IEC TS 17021-2 (EMS) – Annexure B - ISO/IEC TS 17021-10 (OHMS) – Annexure C - ISO 22003-1 (FSMS) – Annexure D (Delete each inapplicable Appendix)			

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<p>7.1.3 Evaluation processes</p> <p>Does the CB have documented processes for the initial competence evaluation and on-going monitoring of competence and performance of all personnel involved in the management and performance of audits and certification?</p> <p>Are these methods effective?</p>			
<p>7.1.4 Other considerations</p> <p>Does the CB have access to the necessary technical expertise for technical areas, types of management system and geographic areas in which it operates?</p>	MD22		
<p>7.2 Personnel involved in the certification Activities</p> <p>7.2.1 Does the CB as part of its own organization. have personnel with sufficient competence for managing the type and range of audit programmes and other certification work performed?</p> <p>7.2.2 Does the CB employ or have access to a sufficient number of auditors including audit team leaders and technical experts to cover all activities and volume of work?</p>			
<p>7.2.3 Does the CB make clear to each person concerned duties, responsibilities and authorities?</p>			

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7.2.4 Does the CB have defined processes for: <ul style="list-style-type: none"> • Selecting • Training • Formally authorizing auditors and • Selecting technical experts? 			
Does the initial competence evaluation of an auditor include the ability to apply required knowledge and skill during audits, as determined by a competent evaluator observing (witnessing) the auditor conducting an audit?	MD17, MD16		
7.2.5 Does the CB have a process to achieve and demonstrate effective auditing, including the use of auditors and audit team leaders possessing generic auditing skills and knowledge as well as skills and knowledge appropriate for auditing in specific technical areas?			
7.2.6 Are auditors and technical experts knowledgeable of the CB's audit processes, certification scheme and its requirements and other relevant requirements? Does the CB give auditors and technical experts access to an up-to-date set of documented procedures giving audit instructions and all relevant information on the certification activities?			
7.2.7 Are auditors and technical experts used in these activities where they have demonstrated competence? Are training needs identified for functions performed?			

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Where there is need, is training offered or provided?			
7.2.8 Are person(s) taking the certification decisions knowledgeable on the : <ul style="list-style-type: none"> • applicable standard; • certification requirements; • have demonstrated competence to evaluate the audit processes; and related recommendations of the audit team? 			
7.2.9 Does documented procedures and criteria for monitoring and measurement of performance of all personnel exist? Competence reviewed to identify training needs?			
7.2.10 Does the CB monitor each auditor considering each type of management system? The documented monitoring process shall include a combination of onsite evaluation, review of audit reports and feedback from clients or from market.			
7.2.11 Does the CB periodically observe the performance of each auditor on-site? Is the frequency of on-site observations based on need determined from all monitoring information available?			
7.3 Use of individual external auditors and external technical experts			

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<p>Does a CB have a written agreement with external auditors and external technical experts in place by which they commit themselves to comply with applicable policies and procedures as defined?</p> <p>Does the agreement address all relevant aspects?</p>			
<p>7.4 Personnel records</p> <p>Does the CB maintain up-to-date personnel records including:</p> <ul style="list-style-type: none"> • Relevant qualifications; • Training; • Experience; • Affiliations; • Professional status; and • Competence? <p>Does this include management and administrative personnel in addition to those performing certification activities?</p>			
<p>7.5 Outsourcing</p>			
<p>7.5.1 Does the CB have a process in which it describes the conditions under which outsourcing may take place?</p> <p>Legally enforceable agreement with each body that provides outsourced services?</p> <p><i>See Notes</i></p>			

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7.5.2	Is the CB outsourcing certification decisions?			
7.5.3	Does the CB:			
	a) take responsibilities for all activities outsourced?			
	b) ensure that the body that provides outsources activities: <ul style="list-style-type: none"> conforms to the CB's requirements conforms to the applicable provisions of this international standard including competence, impartiality and confidentiality? 			
	c) ensure that the outsourced services are not involved in any way that impartiality could be compromised?			
7.5.4	Documented procedures for the qualification and monitoring of all outsourced services used for certification activities? Records of the competence of auditors and technical experts maintained? <i>See Notes</i>			
8	Information requirements			
8.1	Publicly accessible information			
8.1.1	Does the CB maintains and make publicly accessible or without request information describing: <ul style="list-style-type: none"> a) audit processes; b) certification processes; 			

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<ul style="list-style-type: none"> c) types of management systems and certification schemes in which it operates, d) the use of the CB's name and certification mark and logo, e) processes for handling requests for information, complaints and appeals, and f) policy on impartiality 			
<p>8.1.2 Does the CB provide upon request information describing:</p> <ul style="list-style-type: none"> a) geographical areas in which it operates; b) the status of a given certification; and c) the name, related normative document, scope and geographical location of specific certified client. <p><i>See Notes</i></p>	<p>MD28</p> <p>MD2</p>		
<p>8.1.3 Is the information provided by the CB to any client or to the market place including advertising accurate and not misleading?</p>			
<p>8.2 Certification documents</p> <p>8.2.1 Does the CB provide certification documents to the certified client by any means it chooses?</p>	MD1		
<p>8.2.2 Does the certification document(s) identify the following:</p> <ul style="list-style-type: none"> a) the name and geographic location of each client and any sites within the scope of a multi-site certification? 	MD1		

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<ul style="list-style-type: none"> b) the dates of granting, extending or renewing certification? c) the expiry date or re-certification due date consistent with the re-certification cycle? d) a unique identification code? e) the standard and/or other normative document including issue number and/or revision used for the certified customer? f) the scope of certification with respect to product (including service), process, etc., as applicable at each site? g) the name, address and certification mark of the CB, other marks (e.g. accreditation symbol)? 	MD1		
<ul style="list-style-type: none"> h) any other information required by the standard and/or other normative document used for certification? i) in the event of issuing any revised certification documents, a means to distinguish the revised documents from any prior obsolete documents? 			
8.3 Reference to certification and use of marks			
8.3.1 Does the CB have rules governing any mark that it authorizes certified customers to use? Is the mark used on a product or product packaging seen by the consumer?			
8.3.2 Does the CB permit its mark to be applied to laboratory test, calibration or inspection reports or certificates?			

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<p>8.3.3 Does the CB have rules governing the use of any statement on product packaging or in accompanying information that the certified client has a certified management system?</p> <p>Does the statement include reference to:</p> <ul style="list-style-type: none"> a) identification (e.g. brand or name) of the certified client; b) the type of management system (e.g. quality, environment) and the applicable standard; c) the certification body issuing the certificate. 			
<p>8.3.4 Does the CB require that the client organization:</p> <ul style="list-style-type: none"> a) conforms to the requirements of the CB when making reference to its certification status in communication media? b) does not make or permit any misleading statement regarding its certification? c) does not use or permit the use of a certification document or any part thereof in a misleading manner? d) upon suspension or withdrawal of its certification discontinues its use of all advertising matter that contains a reference to certification, as directed by the CB? (See 9.6.5) 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> e) amends all advertising matter when the scope of certification has been reduced? f) does not allow reference to its management system certification to be used to imply that the CB certifies a product (including service) or process? g) does not imply that the certification applies to activities that are outside the scope of certification? h) does not use its certification in such a manner that would bring the CB and/or certification system into disrepute and lose public trust? 			
<p>8.3.5 Does the CB exercise proper control of ownership and take action to deal with incorrect references to certification status or misleading use of certification marks or audit reports?</p> <p><i>See Note</i></p>			
8.4 Confidentiality			
<p>8.4.1 Does the CB through legally enforceable agreements have arrangements to safeguard the confidentiality of the information at all levels of its structure, including committees and external bodies or individuals acting on its behalf?</p>			
<p>8.4.2 Client informed by the CB of the information it intends to place in the public domain?</p>			
<p>8.4.3 Except as required in this international standard, is information about a particular client or individual</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
disclosed to a third party without the written consent of the client or individual concerned?			
8.4.4 Where the CB is required by law to release confidential information to a third party, is the customer or individual concerned, unless regulated by law, notified in advance of the information provided?			
8.4.5 Is information about the client treated as confidential, consistent with the CB's policy?			
8.4.6 Do all personnel acting on the CB's behalf keep confidential all information obtained or created during the performance of the CB's activities?			
8.4.7 Does the CB have processes and where applicable equipment and facilities that ensure the secure handling of confidential information?	MD4		
8.5 Information exchange between a CB and its clients			
8.5.1 Information on the certification activity and requirements Does the CB provide and update clients on the following: a) a detailed description of the initial and continuing certification activity including the application, initial audits, surveillance audits and the process for granting, maintaining, reducing, extending, suspending, withdrawing certification and re-certification?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>b) The normative requirements for certification?</p> <p>c) Information about the fees for application, initial certification and continuing certification?</p> <p>d) The CB's requirements for clients to:</p> <ol style="list-style-type: none"> 1 comply with certification requirements? 2 make all necessary arrangements for the conduct of the audits including provision for examining documentation and the access to all processes and areas, records and personnel for the purposes of initial certification, surveillance, recertification and resolution of complaints, and? 3 make provisions where applicable to accommodate the presence of observers (e.g. accreditation auditors or trainee auditors)? 			
<p>e) Documents describing the rights and duties of certified clients including requirements when making reference to its certification in communication of any kind in line with the requirements in 8.3?</p> <p>f) Information on processes for handling complaints and appeals?</p> <p>8.5.2 Notice of changes by a CB</p>			

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<p>Does the CB give its certified clients due notice of any changes to its requirements for certification?</p> <p>Does the CB verify that each certified client complies with the new requirements?</p>			
<p>8.5.3 Notice of changes by a client</p> <p>Legally enforceable arrangements to ensure that the certified customer informs the CB of matters that may affect the management system's ability to continue to fulfil the requirements of the standard used for certification?</p> <p><i>See examples a) to e) in the standard</i></p>			
<p>9 Process requirements</p> <p>9.1 Pre-certification activities</p> <p>9.1.1 Application</p> <p>Does the CB require an authorized representative to provide the necessary information to enable the CB to establish the following :</p> <p>a) scope of the certification,</p>	<p>MD16</p> <p>MD1, MD2, MD5, MD11, MD16</p>		<p>DURING PERIODIC ASSESSMENTS PLEASE ASSESS CLAUSES 9.1 to 9.6.4 USING F61g</p>

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<ul style="list-style-type: none"> b) relevant details of the applicant organization as required by the specific certification scheme, including its name and address(es) of its site(s), its processes and operations, human and technical resources, functions, relationships and any relevant legal obligations, c) identification of outsourced processes used by the organization that will affect conformity to requirements, d) the standards or other requirements for which the applicant organization is seeking certification, 			
<ul style="list-style-type: none"> e) whether consultancy relating to the management system to be certified has been provided and, if so, by whom. 			
<p>9.1.2 Application review</p> <p>9.1.2.1 Does the CB conduct a review of the application and supplementary information for certification to ensure that:</p> <ul style="list-style-type: none"> a) the information about the applicant organization and its management system is sufficient to develop an audit programme (See 9.1.3), b) any known difference in understanding between the CB and the applicant organization is resolved, c) the CB has the competence and ability to perform the certification activity, 			

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d) the scope of certification sought, the site(s) of the applicant organization's operations, time required to complete audits and any other points influencing the certification activity are taken into account (language, safety conditions, threats to impartiality, etc.)			
9.1.2.2 Following the review of the application, does the CB either accept or decline an application for certification? When the CB declines an application, does the CB document the reasons for declining an application and make clear to the client?			
9.1.2.3 Based on the review of the application, does the CB determine the competences it needs to include in its audit team and for the certification decision?			
9.1.3 Audit programme 9.1.3.1 Is the audit programme for the full certification cycle developed and does it clearly identify the audit activity(ies) required for certification to the selected standard(s) or other normative documents?	MD1. MD2		
9.1.3.2 Does the audit programme include a two-stage initial audit, surveillance audits in the 1st and 2nd years and a re-certification audit in the 3rd year prior to expiration of certification? (The certification cycle begins with the certification or recertification decision). See 9.6.3.2.3 <i>See Notes 1,2,3</i>	MD11		

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<p>9.1.3.3 Does the CB conduct surveillance audits at least once a calendar year, except in recertification years.</p> <p>Does the CB ensure that the first surveillance audit following the initial certification is carried out not more than 12 months from the decision date?</p> <p><i>See Note</i></p>			
<p>9.1.3.4 Where a CB is taking account of certification or other audits already granted to the customer, does it collect sufficient, verifiable information to justify and record any adjustments to the audit programme?</p>			
<p>9.1.3.5 Where the client operates shifts, does the CB consider activities that take place during shift working when developing the audit programme and audit plans?</p>	MD5		
<p>9.1.4 Determining audit time (see ISO 22003-1 as applicable)</p> <p>9.1.4.1 Does the CB have documented procedures for determining audit time need to plan and accomplish a complete and effective audit?</p>	MD1, MD4, MD11 MD5		
<p>9.1.4.2 In determining the audit time, does the CB consider among other things the following aspects:</p> <ul style="list-style-type: none"> a) The requirements of the management system standard? b) Complexity of the client and its management system? 	MD5, MD11		

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c) Technological and regulatory context? d) Any outsourcing of any activities? e) The results of any prior audits? f) Size and number of sites and multi-site considerations? g) The risks associated with the products, processes or activities of the organization? h) Whether audits are combined, joint or integrated? See Notes 1,2			
9.1.4.3 Does the CB record the duration of the audit and its justification?	MD5		
9.1.4.4 Does the CB include time spent by any team member that is not assigned as an auditor?			
9.1.5 Multi-site sampling Where multi-site sampling is utilized, did the CB develop an adequate sampling programme to ensure proper audit of the management system? Is the rationale for the sampling plan documented? (IAF guidance applies)	MD1, MD5		
9.1.6 Multiple management system standards	MD11		

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When the CB provide certification based on multiple management standards, does the planning for the audit ensure adequate on-site auditing?				
9.2	Planning audits	MD4		
9.2.1	Determining audit objectives, scope and criteria	MD11, MD16, MD22		
9.2.1.1	Does the CB determine the audit objectives? Is the audit scope and criteria including changes established by the CB after discussions with the client?			
9.2.1.2	Are audit objectives describing what is to be accomplished by the audit and does it include the following: a) determination of the conformity of the client's management system, or parts of it, with the audit criteria b) evaluation of the ability of the management system to ensure the client organization meets applicable statutory, regulatory and contractual requirements: See note c) evaluation of the effectiveness of the management system to ensure the client organization is continually meeting its specified objectives			
	d) as applicable, identification of areas of potential improvement of the management system			
9.2.1.3	Does the audit scope describe the extent and boundaries of the audit? Where the initial or re-certification process consists of more than one			

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audit, are total audits consistent with the scope in the certification?			
9.2.1.4 Is the audit criteria used as a reference against which conformity is determined and does it include: <ul style="list-style-type: none"> The requirements of a defined normative document on management systems The defined processes and documentation of the management system developed by the client 			
9.2.2 Audit team selection and assignments 9.2.2.1.1 Process in place for selecting and appointing the audit team taking into account the competence needed to achieve the objectives of the audit? Where there is only one auditor, is the auditor competent to perform?	MD4		
9.2.2.1.2 In deciding the size and composition of the audit team was the following considered: <ol style="list-style-type: none"> audit objectives, scope, criteria and estimated time of the audit whether the audit is a combined, integrated or joint audit the overall competence of the audit team needed to achieve the objectives of the audit 			

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d) certification requirements (including any applicable statutory, regulatory or contractual requirements? e) Language and culture See Note	MD22 MD11		
9.2.2.1.3 Where the necessary knowledge and skill of the audit team leader and auditors was supplemented by technical experts, translators and interpreters, were they selected such that they do not unduly influence the audit? See Note			
9.2.2.1.4 Where auditors-in-training are included in the audit team as participants, was an evaluator appointed? Was the evaluator competent to take over the duties and have final responsibility for the activities and findings of the auditor-in-training?			
9.2.2.1.5 Does the audit team leader, in consultation with the audit team assign to each team member responsibility for specific processes, functions, sites, areas or activities and are such assignments taking into account the need for competence? Were changes to assignments made to ensure achievement of the audit objectives?			
9.2.2.2 Observers, technical experts and Guides	MD11		

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9.2.2.2.1 Observers Prior to the conduct of the audit does the client agree to the presence and justification of observers during an audit activity? <i>See Note</i>			
9.2.2.2.2 Technical experts Prior to the conduct of the audit does the client agree to the presence and justification of technical experts during an audit activity? <i>See Note</i>			
9.2.2.2.3 Guides Is each auditor accompanied by a guide, unless otherwise agreed to by the audit team leader and the client? Does the audit team ensure that guides do not influence or interfere in the audit process or outcome of the audit? <i>See Notes 1,2</i>			
9.2.3 Audit Plan 9.2.3.1 General	MD1, MD4, MD5, MD11		

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>Is an audit plan established for each audit to provide the basis for agreement regarding the conduct of the audit?</p> <p><i>See Note</i></p>			
<p>9.2.3.2 Preparing the audit plan</p> <p>Is the audit plan appropriate to the objectives and the scope of the audit and the scope of the audit?</p> <p>Does it at least include or refer to the following:</p> <ul style="list-style-type: none"> a) The audit objectives; b) The audit criteria; c) The audit scope including identification of the organizational and functional units or processes to be audited; 			
<ul style="list-style-type: none"> d) The dates and sites where the on-site audit activities are to be conducted including visits to temporary sites, as appropriate; e) The expected duration of on-site audit activities f) The roles and responsibilities of the audit team members and accompanying persons, such as observers and interpreters. <p><i>See Note</i></p>			
<p>9.2.3.3 Communication of audit team tasks</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>Are the tasks given to the audit team defined and make known to the client?</p> <p>Does the audit team:</p> <ul style="list-style-type: none"> a) Examine and verify the structure, policies, processes, procedures, records and related documents of the customer organization relevant to the management system? b) Determine that these meet all the requirements relevant to the intended scope of certification? c) Determine that the processes and procedures are established, implemented and maintained effectively, to provide a basis for confidence in the client management system? and d) Communicate to the customer, for its action, any inconsistencies between the client's policy, objectives and targets? 			
<p>9.2.3.4 Communication concerning audit team members</p> <p>Prior to the conduct of the audit does the CB communicate the audit plan and agree with the client the dates of the audit?</p>			
<p>9.2.3.5 Communication concerning audit team members</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
Does the CB provide the name and, when requested, make available background information of each member of the audit team with sufficient time for the client organization to object to the appointment of any particular auditor or technical expert and for the CB to reconstitute the team in response to any valid objection?			
9.3 Initial certification 9.3.1 Initial certification audit			
9.3.1.1 General Is the initial certification audit of a management system conducted in two stages – Stage 1 and Stage 2			
9.3.1.2 Stage 1 audit 9.3.1.2.1 Does the planning ensure that the objectives of stage 1 can be met? Does the client be informed of any “on-site” activities during stage 1 <i>Note : Stage 1 does not require a formal audit plan (see 9.2.3)</i>			
9.3.1.2.2 Is the stage 1 audit performed: a) to audit the clients management system documentation?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> b) to evaluate the client's site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for the Stage 2 audit? c) to review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system? d) to collect necessary information regarding the scope of the management, including the client's site(s), processes and equipment used, levels of control established, applicable statutory and regulatory requirements? e) to review the allocation of resources for Stage 2 audit and agree with the client on the details of the Stage 2 audit? f) to provide a focus for planning the Stage 2 audit by gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects? g) to evaluate if the initial audits and management review are being planned and performed and that the level of implementation of the management system substantiates that the client is ready for the Stage 2 audit? 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
For most management systems it is recommended that at least part of the Stage 1 audit be carried out at the client's premises in order to achieve the objectives stated above.			
9.3.1.2.3 Are Stage 1 audit findings documented and communicated to the client organization including identification of any areas of concern that could be classified as nonconformity during Stage 2 audit?			
9.3.1.2.4 In determining the interval between Stage 1 and Stage 2, is consideration given to the needs of the client to resolve areas of concern identified during the Stage 1 audit? The CB may also need to revise its arrangement for Stage 2			
9.3.1.3 Stage 2 audit The purpose of the Stage 2 audit is to evaluate the implementation including effectiveness of the client's management system. Is the Stage 2 audit taking place at the site(s) of the client? Does it include at least the following: a) Information and evidence about conformity to all requirements of the applicable management system standard or other normative document?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets? c) the client's management system and performance as regards legal compliance? d) operational control of the client's processes? e) internal auditing and management review? f) management responsibility for the client organization's policies? 			
<p>9.3.1.4 Initial certification audit conclusions</p> <p>Does the audit team analyze all information and audit evidence gathered during the Stage 1 and Stage 2 audits to review the audit findings and agree on the audit conclusions?</p>			
<p>9.4 Conducting audits</p> <p>9.4.1 General</p> <p>On-site audits?</p> <p>Does the process include opening meeting at the start of the audit and closing meeting at the conclusion of the audit?</p>	MD4, MD5		

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>Where any part of the audit is made by electronic means or where the site to be audited is virtual, does the CB ensure that such activities are conducted by personnel with appropriate competence.</p> <p><i>See Note</i></p>			
<p>9.4.2 Conducting the opening meeting</p> <p>Does the audit team have a formal opening meeting with the client's management and those responsible for the functions or processes to be audited?</p> <p>Is the opening meeting conducted by the Lead auditor?</p> <p>Are audit activities explained including the following:</p> <ul style="list-style-type: none"> a) Introduction of the participants including an outline of their roles; b) Confirmation of the scope of certification; (including type and scope of audit, objectives and criteria), any changes and other relevant arrangements with the client such as the date and time for the closing meeting, interim meetings between the audit team and client's management; d) Confirmation of formal communication channels between the audit team and the client; 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> e) Confirmation that the resources and facilities needed by audit team are available; f) Confirmation of matters relating to confidentiality g) Confirmation of relevant work safety, emergency and security procedures for the audit team; h) Confirmation of the availability, roles and identities of any guides and observers; 			
<ul style="list-style-type: none"> i) The method of reporting including any grading of audit findings; j) Information about the conditions under which the audit may be prematurely terminated; k) Confirmation that the audit team leader and audit team representing the CB is responsible for the audit and shall be in control of executing the audit plan including audit activities and audit trails; l) confirmation of the status of findings of the previous review or audit, if applicable; m) methods and procedures to be used to conduct the audit based on sampling; n) confirmation of the language to be used during the audit; 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>o) confirmation that during the audit the client will be kept informed of audit progress and any concerns; and</p> <p>p) opportunity for the client to ask questions.</p>			
<p>9.4.3 Communication during the audit</p> <p>9.4.3.1 During the audit does the audit team periodically assess audit progress and exchange information and does the team leader re-assign work as needed between the audit team members and periodically communicate the progress of the audit and any concerns to the client?</p>			
<p>9.4.3.2 Does the audit team leader report to the client and where possible to the CB the presence of an immediate and significant risk (e.g. safety)?</p> <p>Is the outcome of the action taken reported to the CB?</p>			
<p>9.4.3.3 Does the team leader review with the client any need for changes to the audit scope which becomes apparent as on-site auditing activities progress and report this to the CB?</p>			
<p>9.4.4 Obtaining and verifying information</p> <p>9.4.4.1 Is information relevant to the audit objective, scope and criteria obtained by appropriate sampling and verified to become audit evidence?</p>			
<p>9.4.4.2 Are methods to obtain information included?</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
a) interviews b) observation of processes and activities c) review of documentation and records			
9.4.5 Identifying and recording audit findings 9.4.5.1 Are audit findings summarizing conformity and detailing nonconformity audits and its supporting evidence recorded and reported?			
9.4.5.2 Where opportunities for improvement are not prohibited by the requirements of a management system scheme, are they identified and recorded?			
9.4.5.3 Is a finding of non-conformity recorded against a specific requirement of the audit criteria and does it contain a clear statement of the non-conformity and identify in detail the objective evidence on which the non-conformity is based? Are non-conformities discussed with the client to ensure that the evidence is accurate and that the non-conformities are understood?			
9.4.5.4 Does the audit team leader attempt to resolve any diverging opinions between the audit team and the client concerning audit evidence on findings and are unresolved points recorded?			
9.4.6 Preparing audit conclusions Prior to the closing meeting does the audit team:			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> a) review the audit findings and any other appropriate information collected during the audit against the audit objectives. b) agree upon the audit conclusions taking into account the uncertainty inherent in the audit process. c) identify any necessary follow-up actions. d) confirm the appropriateness of the audit programme or identify any modification required (e.g. scope, audit time or dates, surveillance frequency, competence). 			
<p>9.4.7 Conduct the closing meeting</p> <p>9.4.7.1 Does the team hold a formal closing meeting with management and are nonconformities presented in such a manner that they are understood, and are timeframes for responding agreed? Is attendance recorded?</p>			
<p>9.4.7.2 Does the closing meeting include the following:</p> <ul style="list-style-type: none"> a) advising the client that the audit evidence obtained was based on sample of the information, thereby introducing an element of uncertainty; b) the method and timeframe of reporting including any grading of audit findings; c) the certification body's process for handling nonconformities including any consequences relating to the status of the client's certification; 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>d) the timeframe for the client to present a plan for correction and corrective action for any nonconformities identified during the audit;</p> <p>e) the CB's post audit activities; and</p> <p>f) information about the complaint handling and appeal processes.</p>			
<p>9.4.7.3 Is the client given opportunity for questions?</p> <p>Are diverging opinions regarding the audit findings or conclusions discussed, resolved where possible?</p> <p>Are unresolved diverging opinions recorded and referred to the CB?</p>			
<p>9.4.8 Audit report</p> <p>9.4.8.1 Does the CB provide a written report for each audit and is ownership of the report maintained by the CB?</p> <p>If the audit team identifies opportunities for improvement, do they recommend specific solutions?</p>			
<p>9.4.8.2 Does the team leader ensure that the report is prepared and takes responsibility of the content of the report?</p> <p>Does the report provide accurate, concise and clear record of the audit and does it include the following:</p> <p>a) identification of the certification body;</p>	MD11		

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> b) name and address of the client's management representative; c) type of audit (e.g. initial, surveillance or recertification or special audits; d) audit criteria; e) audit objectives; 			
<ul style="list-style-type: none"> f) audit scope, particularly identification of the organizational of functional units or processes audited and the time of the audit; g) any deviation from the audit plan and their reasons; h) any significant issues impacting on the audit programme; i) identification of the audit team leader, audit team members and any accompanying persons; j) dates and places where the audit activities (on-site or offsite) were conducted; k) audit findings, evidence and conclusions, consistent with the requirements of the type of audit; l) significant changes affecting the management system of the client since the last audit took place; m) any unresolved issues, if identified; n) where applicable, whether the audit is combined, joint or integrated; 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> o) disclaimer statement indicating that auditing is based on a sampling process of the available information; p) recommendation from the audit team; q) audited client effectively controlling the use of certification documents and marks, if applicable; and r) verification of effectiveness of corrective taken regarding previously identified nonconformities, if applicable. 			
9.4.8.3 Does the audit report contain the following: <ul style="list-style-type: none"> a) Statement on the conformity and effectiveness of the management system together with a summary of the evidence relating to the capability of the management system to meet applicable and expected outcomes, the internal audit and management review process; 			
<ul style="list-style-type: none"> b) Conclusion on the appropriateness of the certification scope; and c) Confirmation that the audit objectives have been fulfilled. 			
9.4.9 Cause analysis of nonconformities	MD1		

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>Does the CB require the client to analyse the cause and describe the specific correction and corrective actions taken or planned to be taken to eliminate detected non-conformities within a define timeline?</p>			
<p>9.4.10 Effectiveness of corrections and corrective actions</p> <p>Does the CB review the corrections, identified causes and corrective actions submitted by the customer to determine if these are acceptable?</p> <p>Does the CB verify the effectiveness of any correction and corrective action taken?</p> <p>Is the evidence obtained to support the resolution of non-conformities recorded?</p> <p>Does the client get informed of the result of the review and verification?</p> <p><i>See Note</i></p>	MD1		
<p>9.5 Certification decision</p> <p>9.5.1.1 Does the CB ensure that the persons or committees that make the certification or recertification decisions are different from those who carried out the audits?</p>			
<p>9.5.1.2 Does the persons assigned by the CB to make a certification decision employed or under legally enforceable arrangement with either the CB or an entity under the organizational control of the CB ?</p> <p>See type of organizational control defined from a) to c)</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
9.5.1.3 Does the persons employed by or under contract with entities under organizational control fulfil the same requirements of this standard as persons employed by or under contract with the CB ?			
9.5.1.4 Does the CB record each certification decision including any additional information or clarification sought from the audit team or other sources ?			
9.5.2 Actions prior to making a decision Does the CB 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 corrections and corrective actions for all major non-conformities? c) It has reviewed, accepted the client's plan for corrections and corrective actions for all minor non-conformities?			
9.5.3 Information for granting initial certification			
9.5.3.1 Does the information provided by the audit team to the CB for the certification decision include as a minimum: a) the audit reports?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<ul style="list-style-type: none"> b) comments on the nonconformities and, where applicable, the correction and corrective actions taken by the client? c) confirmation on the information provided to the certification body used in the application review? (See 9.1.2) and d) confirmation that the audit objectives have been achieved? e) a recommendation whether or not to grant certification together with any conditions or observations? 			
<p>9.5.3.2 If the CB is not able to verify the implementation of corrections and corrective actions of any major nonconformity within 6 months after the last day of stage 2, does the CB conduct another stage 2 prior recommending certification?</p>			
<p>9.5.3.3 When a transfer of certification is envisaged from one CB to another, does the accepting CB have a process for obtaining sufficient information in order to take decision on certification ?</p>	MD2		
<p>9.5.4 Information for granting recertification</p> <p>Does the CB take decisions on renewing certification based on the results of the results of the recertification audit, as well as the results of the system over the period of certification and complaints received from users of certification.</p>			
<p>9.6 Maintaining certification</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>9.6.1 General</p> <p>Does the CB maintain certification based on demonstration that the client continues to satisfy the requirements of the management system standard?</p> <p>Does the CB maintain an organization's certification based on a positive recommendation by the audit team leader without further independent review provided that:</p> <p>a) For any nonconformity or other situation that may lead to suspension or withdrawal of certification, the CB needs to initiate a review by appropriately competent personnel different from those who carried out the audit to determine whether certification can be maintained? (See 7.2.8); and</p> <p>b) Competent personnel of the CB monitor its surveillance activities, including monitoring the reporting by its auditors, to confirm that the certification activity is operating effectively?</p>			
<p>9.6.2 Surveillance activities</p> <p>9.6.2.1 General</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
9.6.2.1.1 Did the CB develop its surveillance activities so that representative areas and functions covered by the scope of the management system are monitored on a regular basis and take into account changes to its certified client and its management system?			
9.6.2.1.2 Do surveillance activities include on-site audits assessing the certified client's management system fulfilment of specified requirements with respect to the standard to which the certification is granted? Other surveillance activities may include: <ul style="list-style-type: none"> a) Enquiries from the CB to the certified client on aspects of certification; c) Reviewing any client's statements with respect to its operations (e.g. promotional material, website); 	MD4		
d) Requests to the client to provide documents and records (on paper or electronic media); and			
e) Other means of monitoring the certified client's performance.			
9.6.2.2 Surveillance audit Are on-site audits planned with other surveillance activities, so that the CB can maintain confidence that the certified management continues to fulfil requirements in between re-certification audits?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>Does the surveillance audit programme include at least:</p> <ul style="list-style-type: none"> a) Internal audits and management review? b) Review of action taken on non-conformities identified during the previous audits? c) Treatment of complaints? d) Effectiveness of the management system with regard to achieving the certified client's objectives? And the intended results of the respective management system? e) Progress of planned activities aimed at continual improvement? f) continuing operational cost? g) review of any changes? and h) use of marks and/or any other reference to certification? <p>9.6.3 Recertification</p> <p>9.6.3.1 Recertification audit planning</p> <p>9.6.3.1.1 Is a recertification audit planned and conducted to evaluate the continued fulfilment of all the requirements of the relevant management system standard or other normative document?</p>			
9.6.3.1.2 Does the recertification audit consider the			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
performance of the management system over the period of certification and include the review of previous surveillance audit reports?			
9.6.3.1.3 In situations where they have been significant changes (e.g. changes to legislation, management, processes, etc.) do the recertification audit activities include a Stage 1 audit? <i>See Note</i>			
9.6.3.2 Recertification audit			
9.6.3.2.1 Does the re-certification audit include an on-site audit that addresses the following: a) the effectiveness of the management system? b) demonstrated commitment to maintain the effectiveness and improvement? c) whether the operation of the certified management system contributes to the achievement of the organization's policy and objectives?			
9.6.3.2.2 When during a re-certification audit instances of nonconformity or lack of evidence of conformity are identified, does the CB define time limits for correction and corrective actions to be implemented prior the expiry of certification?			

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<p>9.6.3.2.3 When recertification activities are successfully completed prior to the expiry date of the existing certification, does the expiry date of the new certification based on the expiry date of the existing certification?</p> <p>The issue date on a new certificate shall be on or after the recertification decision.</p>			
<p>9.6.3.2.4 Does the CB make recommendation and extend the validity of the certification if the CB has not completed the recertification audit or is unable to verify the implementation of corrections and corrective actions for any major nonconformities?</p> <p>Does the CB inform the client about the consequences?</p>			
<p>9.6.3.2.5 Following expiration of certification, does the CB restore certification within 6 months provided that the outstanding recertification activities are completed or at least conduct a stage 2 audit?</p> <p>The effective date on the certificate shall be on or after the recertification decision and the expiry date shall be based on prior certification cycle.</p>			
<p>9.6.4 Special audits</p> <p>9.6.4.1 Expanding scope</p>	MD17		

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
Does the CB in response to an application for expanding the scope of a certification already granted, undertake a review of the application and determine any audit activities necessary to decide whether or not the extension may be granted? (This may be conducted in conjunction with a surveillance audit)			
9.6.4.2 Short-notice audits If it is necessary for the CB to conduct audits of certified clients at short notice or unannounced to investigate complaints or in response to changes or as follow up on suspended clients: a) Does the CB describe and make known in advance to the certified clients (e.g. in documents as described in 8.5 1) the conditions under which these short notice visits are to be conducted? and b) Does the CB exercise additional care in the assignment of the audit team because of the lack of opportunity for the client to audit team members?			
9.6.5 Suspending, withdrawing or reducing scope of certification 9.6.5.1 Does the CB have a policy and documented procedure(s) for suspension, withdrawal or reduction of the scope of certification and does it specify the subsequent actions by the CB?	MD16		

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>9.6.5.2 Does the CB suspend certification in cases when for example:</p> <ul style="list-style-type: none"> 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 recertification audits to be conducted at the required frequencies? or The certified client has voluntarily requested a suspension? <p>9.6.5.3 Under suspension the client's management system certification is temporarily invalid.</p>			
<p>9.6.5.4 Does failure to resolve the issues that have resulted in the suspension in a time established by CB result in withdrawal or reduction of the scope of certification?</p> <p><i>See Note</i></p>			
<p>9.6.5.5 Does the CB 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 requirements for those parts of the scope of certification?</p>			
<p>9.7 Appeals</p>			
<p>9.7.1 Does the CB have a documented process to receive, evaluate and make decisions on appeals?</p>			

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9.7.2 Is the CB responsible for all decisions at all levels of the appeals handling process? Does the CB ensure that the persons engaged in appeals handling process are different from those who carried out the audits and made the certification decisions?			
9.7.3 Do submission, investigation and decision on appeals result in any discriminatory actions against the appellant?			
9.7.4 Does the appeal handling process include at least the following elements and methods: a) an outline of the process for receiving, validating, investigating the appeal and for deciding what actions are to be taken in response to it, taking into account the results of previous similar appeals; b) tracking and recording appeals including actions undertaken to resolve them; c) ensuring that any appropriate correction and corrective action is taken.			
9.7.5 Does the CB receiving the appeal responsible for gathering and verifying all necessary information to validate the appeal?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
9.7.6 Does the CB acknowledge receipt of the appeal and provide the appellant with progress reports and the outcome?			
9.7 Are the decision to be communicated to the appellant made by, or reviewed and approved by, individual(s) not previously involved in the subject of the appeal?			
9.7.8 Does the CB give formal notice of the end of the appeal handling process to the appellant?			
9.8 Complaints			
9.8.1 Is the CB responsible for all decisions at all levels of the complaints-handling process?			
9.8.2 Does the process followed on submission, investigation and decision on complaints not result in any discriminatory actions against the complainant?			
9.8.3 Upon receipt of a complaint does the CB confirm whether the complaint relates to certification activities that is responsible for and, if so, deals with?			
If the complaint relates to a certified client does the examination of the complaint consider the effectiveness of the certified management system?			
9.8.4 Is a complaint about a certified client also referred by the CB to the certified client in question at an appropriate time?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>9.8.5 Does the CB have a documented process to receive, evaluate and make decisions on complaints?</p> <p>Is this process subject to requirements for confidentiality as it relates to the complainant and to the subject of the complaint?</p>			
<p>9.8.6 Does the complaints handling process include at least the following elements and methods:</p> <ul style="list-style-type: none"> a) an outline of the process for receiving, validating, investigating the complaint and for deciding what actions are to be taken in response to it? b) tracking and recording complaints including actions undertaken to resolve them? c) ensuring that an appropriate correction and corrective actions are taken? <p><i>See Note</i></p> <p>9.8.7 Is the CB receiving the complaint responsible for gathering and verifying all necessary information to validate the complaint?</p>			
<p>9.8.8 Whenever possible does the CB acknowledge receipt of the complaint and provide the complainant with progress reports and the outcome?</p>			
<p>9.8.9 Is the decision to be communicated to the complainant made by, or reviewed and approved by, individual(s) not previously involved in the subject of the complaint?</p>			
<p>9.8.10 Whenever possible does the CB give formal notice of the end of the complaint handling process to the</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
complainant?			
9.8.11 Does the CB determine together with the client and the complainant whether and, if so to what extent, the subject of the complaint and its resolution shall be made public?			
9.9 Client records			
9.9.1 Does the CB maintain records on the audit and other certification activity for all clients including all organizations that submitted applications and all organizations audited, certified or with certification withdrawn?			
9.9.2 Do the records on certified clients include the following: <ul style="list-style-type: none"> a) application information and initial, surveillance and re-certification audit reports? b) certification agreement? c) justification of the methodology used for sampling? <i>See Note</i> d) justification for auditor time determination? (See 9.1.4) e) verification of correction and corrective actions? f) records of complaints and appeals and any subsequent correction and corrective actions? 			

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g) committee deliberations and decisions, if applicable? h) documentation of the certification decisions? i) certification documents including the scope of certification with respect to product, process or services as applicable? j) related records necessary to establish the credibility of the certification such as evidence of the competence of auditor and technical expert? k) audit programmes			
9.9.3 Does the CB keep the records on applicants and clients secure to ensure that the information is kept confidential?			
Are records transported, transmitted or transferred in a way that ensures that confidentiality is maintained?			
9.9.4 Does the CB have a documented policy and documented procedures on retention of records? Are records retained for the duration of the current cycle plus one (1) full certification cycle? <i>See Note</i>			

ISO/IEC 17021-1 REQUIREMENTS		IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
10	Management system requirements for CBs			
10.1	Options In addition to meeting the requirements of clauses 5 to 9 does the CB implement a management system in accordance with either: a) General management system requirements (see 10.2)? or b) Management system requirements in accordance with ISO 9001 (see 10.3)?			
10.2	Option A: Management system Requirements			
10.2.1	General Does the CB establish, Document, implement and maintain a management system capable of supporting and demonstrating the consistent achievement of the requirements of the standard? Does the CB's top management establish and document policies and objectives for its activities? Does the CB's top management provide evidence of its commitment to the development and implementation of the management system in accordance with the requirements of the standard?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
<p>Does the CB's top management ensure that policies are understood, implemented and maintained at all levels of the CB's organization?</p> <p>Does the CB's top management assign responsibility and authority for:</p>			
<p>a) ensuring that processes and procedures needed for the management system are established, implemented and maintained?</p> <p>b) Reporting to the top management on the performance of the management system and any need for improvement?</p>			
<p>10.2.2 Management system manual</p> <p>Are all applicable requirements of the standard addressed in a manual or in associated documents and accessible to all relevant personnel?</p>			
<p>10.2.3 Control of Documents</p> <p>Did the CB establish procedures to control the documents (internal and external) that relate to the fulfilment of this international standard?</p> <p>Do the procedures define the controls needed to:</p> <p>a) To approve documents for adequacy prior to issue?</p> <p>b) To review and update as necessary and approve documents?</p>			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
c) To ensure that changes and the current revision status of documents are identified?			
d) To ensure that relevant versions of applicable documents are available at points of use?			
e) To ensure that documents remain legible and readily identifiable?			
f) To ensure that documents of external origin are identified and their distribution controlled? and			
g) To prevent the unintended use of obsolete documents and to apply suitable identification to them if they are retained for any purpose?			
<i>See Note</i>			
10.2.4 Control of records Does the CB establish procedures to define the controls needed for the identification, storage, protection, retrieval, retention time and disposition of its records related to the fulfilment of this international standard?			
Does the CB establish procedures for retaining records for a period consistent with its contractual and legal obligations? Is access to these records consistent with the confidentiality arrangements? <i>See Note</i>			
10.2.5 Management review			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
10.2.5.1 General Did the CB's top management establish procedures to review its management system at planned intervals to ensure its continuing suitability, adequacy and effectiveness including the stated policies and objectives related to the fulfilment of this international standard?			
Are these reviews conducted at least once a year?			
10.2.5.2 Review inputs Does the input to management review include information related to: <ul style="list-style-type: none"> a) Results of internal and external audits? b) Feedback from clients and interested parties related to the fulfilment of this international standard? c) safeguarding impartiality? d) Status of corrective actions? e) status of actions to address risk? 			
<ul style="list-style-type: none"> f) Follow-up actions from previous management reviews? g) Fulfilment of objectives? h) Changes that could affect the management? and 			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
i) Appeals and complaints?			
10.2.5.3 Review outputs Do the outputs from the management review include decisions and actions related to: <ul style="list-style-type: none"> a) Improvement of the effectiveness of the management system and its processes? b) Improvement of the certification services related to the fulfilment of this international standard? 			
<ul style="list-style-type: none"> c) Resource needs? And d) Revisions of the organization's policy and objectives? 			
10.2.6 Internal audits 10.2.6.1 Does the CB establish procedures for internal audits to verify that it fulfils the requirements of this international standard and that the management system is effectively implemented and maintained? <i>See Note</i>			
10.2.6.2 Is an audit programme planned taking into consideration the importance of the processes and areas to be audited as well as the results of previous audits?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
10.2.6.3 Are internal audits performed at least once every 12 months?			
10.2.6.4 Does the CB ensure that: <ul style="list-style-type: none"> a) Internal audits are conducted by qualified personnel knowledgeable in certification, auditing and the requirements of this international standard? b) Auditors shall not audit their own work? c) Personnel responsible for the area audited are informed of the outcome of the audit? d) Any actions resulting from internal audits are taken in a timely and appropriate manner? and e) Any opportunities for improvement are identified? 			
10.2.7 Corrective actions Does the CB establish procedures for identification and management of nonconformities in its operations? Does the CB also, where necessary, take actions to eliminate the causes of nonconformities in order to prevent recurrence? Are corrective actions appropriate to the impact of the problem encountered?			

ISO/IEC 17021-1 REQUIREMENTS	IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
Do the procedures define requirements for:			
a) Identifying non-conformities (e.g. from complaints and internal audits)?			
b) Determining the causes of non-conformity?			
c) Correcting non-conformities?			
d) Evaluating the need for actions to ensure that non-conformities do not recur?			
e) Determining and implementing in a timely manner the actions needed?			
f) Recording the results of actions taken? And			
g) Reviewing the effectiveness of corrective actions?			
10.3 Option B : Management system requirements in accordance with ISO 9001			
10.3.1 General Does the CB establish and maintain a management system in accordance with the requirements of ISO 9001, capable of supporting and demonstrating the consistent achievement of the requirements of the standard, amplified by 10.3.2 to 10.3.4?			
10.3.2 Scope Does the scope of the management system include the design and development requirements of its certification services?			

ISO/IEC 17021-1 REQUIREMENTS		IAF MD	CB'S REFERENCES	COMMENTS BY ASSESSOR
10.3.3	Customer focus When developing its management system, does the CB consider the credibility of certification and address the needs of all parties (as set out in 4.1.2) that rely upon its audit and certification services, not just its clients?			
10.3.4	Management review Does the CB include as input for management review information on relevant appeals and complaints from users of certification activities and a review of impartiality?			
	Additional /General Comments (This space may be used to expand on comments in specific sections)			

ANNEXURE A: ISO/TS 17021-3: 2017 - REQUIREMENTS FOR BODIES PROVIDING AUDIT AND CERTIFICATION OF QUALITY MANAGEMENT SYSTEMS

ISO/TS 17021-3 - QMS auditor competence requirements:	CB'S REFERENCES	COMMENT BY ASSESSOR
Does the individual responsible for QMS auditing have the necessary knowledge described in ISO/IEC 17021 and QMS knowledge described in section 5.2 to 5.6 of ISO/IEC TS 17021-3?		

ISO/TS 17021-3 - QMS auditor competence requirements:	CB'S REFERENCES	COMMENT BY ASSESSOR
Does the audit team have the collective competence sufficient to achieve audit objectives?		
Quality management terminology, principles, practices, techniques, standards and normative documents: Does the individual involved in QMS auditing have knowledge of: <ul style="list-style-type: none"> • QMS related terms and definitions; • quality management principles and the application thereof; • the application of PDCA (plan, do, check, act) and the process approach; • documentation structures, hierarchy and interrelationships specific to quality management; • scopes and the applicability of exclusions; • Quality management related tools, methods, techniques and their application. • relevant QMS standards and other normative documents used in the certification process and their application; the interaction between the elements of the QMS standards and other relevant documents.		
Business management practices Does the individual involved in QMS auditing have knowledge of: <ul style="list-style-type: none"> • general business management concepts, practices and the inter-relationship between policy, objectives and results; Management processes and related terminology.		
Client Business sector Does the individual involved in QMS auditing have knowledge of: <ul style="list-style-type: none"> • generic terminology, processes and technologies related to the client business sector 	MD22	

ISO/TS 17021-3 - QMS auditor competence requirements:	CB'S REFERENCES	COMMENT BY ASSESSOR
the relevant business sector practices		
Client products, processes and organization Does the individual involved in QMS auditing have knowledge of: <ul style="list-style-type: none"> terminology and technology specific to the technical area; statutory and regulatory requirements applicable to the product or service specific to the technical area; characteristics of processes, products and services specific to the technical area; the infrastructure and work environment affecting product and service quality; the concept of outsourcing; the impact of organization type, size, governance, structure, functions and relationships on development and implementation of the quality management system and certification activities.		
2. Competence requirements for personnel conducting the application review to determine the audit team competence required, to select the audit team members and to determine the audit time (hereafter referred to as audit planning)		
Is the individual (or group) responsible for audit planning (and other certification functions) competent in the requirements as set out in ISO/IEC 17021 and the QMS knowledge described in section 6.2 and 6.3 of ISO/IEC TS 17021-3.		
Quality management system standards and normative documents Does the individual responsible for audit planning have knowledge of relevant quality management system standards and other normative documents used in the certification process?		

ISO/TS 17021-3 - QMS auditor competence requirements:	CB'S REFERENCES	COMMENT BY ASSESSOR
Client business sector Does the individual responsible for audit planning have knowledge of generic terminology and processes related to the relevant business sector practices?		
Client products, processes and organization Does the individual responsible for audit planning have knowledge of client products, processes and organization types, size, governance, structure, including outsourcing functions?		
3. Competence of personnel reviewing audit reports and making certification decisions		
Is the individual responsible for audit planning and certification decisions, competent in the requirements as set out in ISO/IEC 17021 and the QMS knowledge described in section 6.2 and 6.3 of ISO/IEC TS 17021-3.		
Quality management terminology, principles, practices, techniques, standards and normative documents Does the individual responsible for reviewing audit reports and making certification decisions have knowledge of: <ul style="list-style-type: none"> terms and definitions related to quality management; scopes and the applicability of exclusions; The impact of the quality management related tools, methods, techniques and their application on the certification process. Relevant quality management system standards and other normative documents used in the certification process.		
Client Business sector Does the individual responsible for audit reports and certification decisions have knowledge of generic terminology and processes relevant business sector practices?		

ANNEXURE B: ISO/TS 17021-2: 2017 - REQUIREMENTS FOR BODIES PROVIDING AUDIT AND CERTIFICATION OF ENVIRONMENTAL MANAGEMENT SYSTEMS

COMPETENCE EVALUATION KEY POINTS

Organogram

Verify organogram and understand different certification functions and responsibilities

EMS Technical areas

- Verify the certification body's EMS Technical Areas as this will highlight clarify related to competence of auditors per technical area.
- Verify that when personnel leave the employment of the CB, the CB performs an evaluation of the impact this has on the overall competence of the CB. For example, it is possible that an auditor, competent in a specific EMS technical area, leaving the employment of a CB could result in it no longer being able to demonstrate competence in that particular technical area. Under such circumstances SADCAS shall seek evidence that the CB has identified the limitations to its overall competence and the effect on existing certifications.

CRITERIA: ISO/TS 17021-2:2017	CB'S REFERENCES	COMMENT BY ASSESSOR
<p>Competence requirements for EMS Auditors</p> <p>Has the CB defined relevant EMS Technical Areas for its certification activities?</p> <p>Has the CB defined competence requirements for each relevant EMS Technical Area?</p> <p>Do competence requirements defined for each relevant EMS technical area include knowledge of the following by EMS Auditors?;</p> <ol style="list-style-type: none"> 1. Environmental Terminology 2. Environmental Metrics 3. Environmental monitoring and measuring techniques appropriate to the aspects and EMS Technical area 4. Techniques for identification and evaluation of environmental aspects and impacts and their environmental significance 5. Environmental aspects of design 6. Environmental Performance Evaluation 		

CRITERIA: ISO/TS 17021-2:2017	CB'S REFERENCES	COMMENT BY ASSESSOR
7. Legal and other requirements 8. Emergency preparedness and response 9. Operational control Factors related to site		
During the appointment of audit team members, does the Certification Body ensure that the composition of auditors (and technical experts as necessary) has the collective competence to undertake the audit?		
Aspect-Specific Competence Requirements for EMS auditing Has the Certification Body defined the specific competence criteria related to each aspect appropriate to the EMS technical area(s) in which it operates? Are defined aspect -specific competence requirements consistent with the following? <ol style="list-style-type: none"> For Emissions to Air, knowledge of <ul style="list-style-type: none"> Gases and particulate matter Operational control Monitoring and measurement techniques For Releases to Land, knowledge of <ul style="list-style-type: none"> Liquid of solid releases Operational control Monitoring and measurement techniques For Releases to Water, knowledge of <ul style="list-style-type: none"> Surface and ground water flows and characteristics Operational control Monitoring and measurement techniques Monitoring and measurement techniques For Uses of Raw Materials, Energy and Natural Resources, 		

CRITERIA: ISO/TS 17021-2:2017	CB'S REFERENCES	COMMENT BY ASSESSOR
<p>knowledge of</p> <ul style="list-style-type: none"> - Upstream and downstream management techniques - Operational control - Monitoring and measurement techniques <p>5. For Energy Emitted, knowledge of</p> <ul style="list-style-type: none"> - Sources of energy emissions - Operational control <p>6. For Waste, knowledge of</p> <ul style="list-style-type: none"> - Sources of waste - Operational control <p>7. For Physical attributes, knowledge of</p> <p>The interactions of the physical attributes (size, shape and colour) of buildings, structures and equipment with the local environment.</p>		
<p>Competence requirements for other personnel</p> <p>Has the Certification Body defined the competence requirements for other personnel involved in certification activities to at least include the following;</p> <p>1. For personnel conducting application review, selection of audit team and determination of audit time: knowledge of</p> <ul style="list-style-type: none"> - Environmental terminology (terms and definitions) - Techniques for the identification and evaluation of environmental aspects and impacts and their environmental significance - Factors related to site such as proximity to sensitive environments(e.g. wetland, flora, fauna and human communities) <p>2. For personnel reviewing audit reports and making certification decisions: knowledge of</p> <ul style="list-style-type: none"> - Environmental terminology (terms and definitions within the EMS technical area) 		

CRITERIA: ISO/TS 17021-2:2017	CB'S REFERENCES	COMMENT BY ASSESSOR
<ul style="list-style-type: none"> - Techniques for the identification and evaluation of environmental aspects and impacts and their environmental significance - Environmental performance evaluation <p>Legal and other requirements</p>		

ANNEXURE C: ISO/TS 17021-10: 2018 - REQUIREMENTS FOR BODIES PROVIDING AUDIT AND CERTIFICATION OF OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT SYSTEMS

Competence evaluation key points are based on Table A.1 of ISO/TS 17021-10:2018. Minimum required knowledge is identified for each certification function, requirements of which shall be reviewed in the applicable indicated sub-clause.

The facility shall indicate CAB's references, and the assessors shall comment in the indicated boxes.

KNOWLEDGE CERTIFICATION FUNCTIONS	X (see 7.1)	X (see 6.1)	X (see 5.2)
CONDUCTING THE APPLICATION REVIEW TO DETERMINE AUDIT TEAM COMPETENCE REQUIRED, TO SELECT THE AUDIT TEAM MEMBERS, AND TO DETERMINE THE AUDIT TIME REVIEWING AUDIT REPORTS AND MAKING CERTIFICATION DECISIONS	CAB's References:	CAB's References:	CAB's References:
AUDITING AND LEADING THE AUDIT TEAM OH&S terminology, principles, processes and concepts	Comments by Assessor:	Comments by Assessor:	Comments by Assessor:
Context of the organization	X (see 7.2)	X (see 6.2)	X (see 5.3)
	CAB's References:	CAB's References:	CAB's References:
	Comments by Assessor:	Comments by Assessor:	Comments by Assessor:
Leadership, consultation and participation of workers		X (see 6.3)	X (see 5.4)
		CAB's References:	CAB's References:

		Comments by Assessor:	Comments by Assessor:
Legal requirements and other requirements		X (see 6.4)	X (see 5.5)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:
OH&S risks, OH&S opportunities and other risks and other opportunities		X (see 6.5)	X (see 5.6)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:
Hazard identification		X (see 6.5.1)	X (see 5.6.2)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:
Assessment of OH&S risks		X (see 6.5.2)	X (see 5.6.3)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:
OH&S opportunities		X (see 6.5.3)	X (see 5.6.4)
		CAB's References:	CAB's References:

		Comments by Assessor:	Comments by Assessor:
Emergency preparedness and response			X (see 5.7)
			CAB's References:
			Comments by Assessor:
Performance evaluation		X (see 6.6)	X (see 5.8)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:
Eliminating hazards and reducing OH&S risks		X (see 6.7)	X (see 5.9)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:
Incident investigation		X (see 6.8)	X (see 5.10)
		CAB's References:	CAB's References:
		Comments by Assessor:	Comments by Assessor:

ANNEXURE D: ISO 22003-1:2022: FOOD SAFETY MANAGEMENT SYSTEMS - REQUIREMENTS FOR BODIES PROVIDING AUDIT AND CERTIFICATION OF FOOD SAFETY MANAGEMENT SYSTEMS

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
7.1.2	Determination of competence criteria		
	<p>ISO/IEC 17021-1:2015, 7.1.2, shall be followed. Technical areas shall be defined using Annex A. The competence criteria, specifying required knowledge and skills, in Annex C shall apply.</p> <p>NOTE 1 Annex D provides guidance to the certification body on many of the generic certification functions identified in ISO/IEC 17021-1:2015, Annex A, for which competence criteria need to be determined for personnel involved in the audit and certification of an FSMS</p> <p>NOTE 2 Qualification(s) and experience can be used as part of the criteria; however, competence is not based on these alone, as it is important to ensure that a person can demonstrate the ability to apply the specific knowledge and skills that one would expect a person to have after completing a qualification or having a certain amount of industry experience.</p>		
7.1.3	Evaluation Process		
	<p>ISO/IEC 17021-1:2015, 7.1.3, shall be followed.</p> <p>The certification body shall evaluate, in particular, the individual's knowledge relating to food safety, including knowledge of specific prerequisite programmes (PRPs), food safety hazards and control measures related to the categories within which the certification body personnel operate. These shall have been identified for these categories under the requirements of 7.1.2.</p>		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>Evaluators shall have knowledge of (one or more) evaluation methods (see ISO/IEC 17021-1:2015, Annex B) and shall demonstrate the ability to apply them.</p> <p>NOTE ISO/IEC 17021-1:2015, 7.1.3, requires the certification body to demonstrate the effectiveness of the evaluation methods used to evaluate personnel against identified competence criteria.</p>		
8	Information requirements		
8.1	ISO/IEC 17021-1:2015, Clause 8, shall be followed except where as amended in 8.2, 8.3 and 8.4.		
8.2	The certification documents shall identify in detail the categories and subcategories in Table A.1 to which the FSMS applies.		
8.3	A certification body shall not authorize the use of the FSMS certification mark on the product nor the product packaging. In the context of this document, product packaging referred to in ISO/IEC 17021-1:2015, 8.3, shall cover all product packaging, both primary packaging (which contains the product) and any outer or secondary packaging.		
8.4	A certification body shall not permit the use of any statement on product packaging that the client has a certified FSMS. This includes all product packaging, both primary packaging (which contains the product) and any outer or secondary packaging		
9	Process requirements		
9.1	Pre-certification activities		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
9.1.1	Application		
	ISO/IEC 17021-1:2015, 9.1.1, shall be followed. The certification body shall require the applicant organization to provide the information concerning products and processes relevant to determination of the audit duration, as per Annexes A and B.		
9.1.2	Application Review		
9.1.2.2	The certification body shall use Annex A to define the relevant scope for the organization applying for certification. The scope statement shall: <ul style="list-style-type: none"> • identify the category(s) or subcategory(s) in scope of certification for each site or sites; • briefly describe the main types of activities/processes for the products and/or services that are audited by the certifying body. 		
9.1.2.3	The defined scope of certification shall not: <ul style="list-style-type: none"> — be misleading; — exclude activities, processes, products or services from the scope of certification when those activities, processes, products or services can have an influence on the food safety of the end products as defined by the legal responsibility of the organisations' activities; — include any promotional statements, brands or claims. 		
9.1.3	Audit programme		
9.1.3.2	In addition, the certification body shall have a process for choosing the audit timing and season, so that the audit team has the opportunity of auditing		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	the organization operating on a representative number of product lines and/or services covered by the scope of certification.		
9.1.4	Determining audit time		
9.1.4.2	The certification body shall have documented procedures for determining audit time, and for each client, the certification body shall determine the time needed to plan and accomplish a complete and effective audit of the client's FSMS. In determining the audit duration, the certification body shall use the methodology described in Annex B. The audit time determined by the certification body, and the justification for the determination, shall be recorded including justification for any reductions or additions.		
9.1.4.3	<p>In determining and documenting audit time needed, the certification body shall determine:</p> <ul style="list-style-type: none"> a) the time for audit preparation; b) the minimum duration for auditing for each site for on-site or remote auditing, as specified in Clauses B.1, B.2 and B.3 and Table B.1; c) the time for reporting and, if applicable, conducting post-audit activities; d) where additional meetings are necessary (e.g. review meetings, coordination, audit team briefing), an increase in audit time can be 		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>required;</p> <p>e) where applicable and agreed, the time needed to ensure effective remote auditing or use of information and communication technology (ICT).</p>		
9.1.5	Multi-site sampling		
9.1.5.1	<p>ISO/IEC 17021-1:2015, 9.1.5, shall be followed.</p> <p>NOTE The whole of subclause 9.1.5 is intended to apply only to operations where activities present in the scope statement are performed.</p>		
9.1.5.2	<p>A multi-site organization is an organization having an identified central function at which certain FSMS activities are planned, controlled or managed, and a network of sites at which such activities are fully or partially carried out. Examples of possible multi-site organizations are:</p> <ul style="list-style-type: none"> — organizations operating with franchises; — producer groups (for categories A and B); — a manufacturing company with one or more production sites and a network of sales offices; — service organizations with multiple sites offering a similar service; — organizations with multiple branches. 		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	Sampling of multi-site organizations shall cover all activities (see the criteria given in 9.1.5.3).		
9.1.5.3	<p>The certification body shall demonstrate that the sampling of sites does not undermine effective auditing. When multi-site sampling is undertaken, the certification body shall justify and document the rationale based on the following conditions:</p> <ul style="list-style-type: none"> a) sites are operating under one centrally controlled and administered FSMS; b) sites subject to sampling are similar (food chain subcategory, geographical location, processes and technologies, size and complexity, regulatory and statutory requirements, customer requirements, food safety hazards and control measures); c) the central function is part of the organization, clearly identified and not subcontracted to an external organization; d) all sites have a legal or contractual link with the central function; e) the central function has organizational authority to define, establish and maintain the FSMS; f) all sites are subject to the organization's internal audit programme and have been audited; g) audit findings at a site are considered 		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>indicative of the entire FSMS and corrective actions are implemented accordingly;</p> <p>h) the central function is responsible for ensuring that outcomes of performance evaluation and customer complaints from all sites are collected and analysed;</p> <p>i) the organization's FSMS is subject to central management review;</p> <p>j) the central function has authority to initiate continual improvement of the FSMS.</p> <p>NOTE The central function is where operational control and authority from the top management of the organization is exerted over every site. There is no requirement for the central function to be located in a single site.</p>		
9.1.5.4	<p>The use of multi-site sampling is permitted for categories A and B. Sampling may be applied to multi-site organizations, with the minimum sample size being the square root of the total number of sites: \sqrt{x}, rounded up to the next whole number. The square root sample shall be taken per risk category based on production complexity of the sites (e.g. open field plant production, perennial plant production, indoor production, open field livestock production, indoor livestock production).</p> <p>The use of multi-site sampling is permitted for categories F and G, and only for re-heating-type facilities (e.g. event catering, coffee shops, pubs) for category E and only for facilities with limited</p>		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>preparation or cooking (e.g. re-heating, frying) (see Table A.1). For organizations with 20 sites or fewer, all sites shall be audited. For organizations with more than 20 sites, the minimum number of sites to be sampled shall be 20 plus the square root of the total number of other sites: $y = 20 + \sqrt{x - 20}$, rounded up to the next whole number. This applies to the initial certification, to surveillance and to recertification audits.</p> <p>The use of multi-site sampling is not permitted for any other categories identified in Annex A.</p>		
9.1.5.5	<p>Where multi-site sampling is permitted, the certification body shall ensure (e.g. via contractual arrangements) that the organization has conducted an internal audit for each site within one year prior to certification and when applicable the effectiveness of corrective actions shall be available. Following certification, the annual internal audit shall cover all sites of the organization included in the certification scope of the multi-site organization and ongoing effectiveness of corrective actions shall be demonstrated.</p>		
9.1.5.6	<p>Where multi-site sampling is permitted, the certification body shall define and utilize a sampling programme to ensure an effective audit of the FSMS where the following conditions apply.</p> <ul style="list-style-type: none"> a) At least annually, an audit of the central function for the FSMS shall be performed by the certification body prior to the sampled site audits. b) At least annually, audits shall be performed 		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>by the certification body on the required number of sampled sites.</p> <p>c) Audit findings of the sampled sites shall be assessed to ascertain if these indicate an overall FSMS deficiency and therefore can be applicable to some or all other sites.</p> <p>d) Where audit findings of the sampled sites are considered indicative of the entire FSMS, corrective actions shall be implemented accordingly.</p> <p>e) For organizations with 20 sites or fewer, all sites shall be audited.</p> <p>The certification body shall increase the size of sample or terminate the site sampling where the FSMS subject to certification does not indicate the ability to achieve the intended results.</p>		
9.1.5.7	<p>The sample shall be partly selective and partly random and shall result in a representative range of different sites being selected, ensuring all processes covered by the scope of certification will be audited.</p> <p>At least 25 % of the sample shall be selected at random. The remainder shall be selected so that the differences among the sites selected over the period of validity of the certification are as large as possible.</p> <p>The site selection shall consider, among others, the following aspects:</p>		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<ul style="list-style-type: none"> a) results of internal audits, management reviews or previous audits; b) records of complaints, product withdrawals/recalls, and other relevant aspects of corrective action; c) variations in the site characteristics; d) other relevant changes since the last audit. 		
9.1.5.8	If any site has a major nonconformity and satisfactory corrective action have not been implemented in the agreed time frame, certification shall not be granted or maintained for the whole multi-site organization pending satisfactory corrective action.		
9.1.5.9	The certification body shall identify and include in the scope of certification the processes of the FSMS implemented at each sampled site.		
9.3	Initial certification		
9.3.2	<p>The objectives of stage 1 are to provide a focus for the planning of stage 2 of the initial audit by gaining an understanding of the organization's FSMS and the organization's state of preparedness for stage 2 by reviewing the extent to which:</p> <ul style="list-style-type: none"> a) the organization has identified PRPs that are appropriate to the business (e.g. regulatory, statutory, customer and certification scheme requirements); 		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>b) the FSMS includes adequate processes and methods for the identification and assessment of the organization's food safety hazards, and subsequent selection and categorization of control measures (combinations);</p> <p>c) the FSMS includes adequate processes and methods for the identification and implementation of relevant food safety legislation;</p> <p>d) the FSMS is designed to achieve the organization's food safety policy;</p> <p>e) the FSMS implementation programme justifies proceeding to stage 2;</p> <p>f) the validation of control measures, verification of activities and improvement programmes conform to the requirements of the FSMS standard;</p> <p>g) the FSMS documents and arrangements are in place to communicate internally and with relevant suppliers, customers and interested parties;</p> <p>h) there is any additional documentation which needs to be reviewed and/or information which needs to be obtained in advance.</p>		
9.3.3	Where an organization has implemented externally developed elements of a FSMS, stage 1 shall review the documentation included in the FSMS to		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
	<p>determine if the combination of control measures:</p> <ul style="list-style-type: none"> — is suitable for the organization; — was developed in conformity to the requirements of ISO 22000 or other sets of specified FSMS requirements; — is kept up to date. 		
9.3.4	The availability of relevant authorizations shall be checked when collecting the information regarding the compliance to regulatory aspects.	MD22	
9.3.5	<p>For FSMS, stage 1 shall be carried out at the client's premises in order to achieve the objectives stated above. In exceptional circumstances or events, all or part of stage 1 can take place off-site or remotely through the use of ICT and shall be fully justified. The evidence demonstrating that stage 1 objectives are fully achieved shall be provided.</p> <p>NOTE 1 Exceptional circumstances or events can include a very remote location, a natural disaster, a pandemic, a short seasonal production and other special situations.</p> <p>NOTE 2 Any part of the FSMS that is audited during the stage 1 audit, and determined to be fully implemented, effective and in conformity with requirements, does not necessarily need to be re-audited during stage 2. In this case, the audit report includes these findings and clearly states that conformity has been established during the stage 1 of the audit.</p>		

CRITERIA: ISO 22003-1:2022; MD16, MD27		CB'S REFERENCES	COMMENT BY ASSESSOR
9.3.6	The interval between stage 1 and stage 2 shall not be longer than six months. Stage 1 shall be repeated if a longer interval is needed.		
9.6	Maintaining certification		
9.6.2	Where the certification body conducts unannounced audits as part of surveillance activities, the certification body shall describe and make known in advance to the certified clients the conditions under which such audits will be organized and conducted.		

ANNEXURE E - Requirements in support of the ISO London Declaration on Climate Change https://www.iso.org/ClimateAction/LondonDeclaration.html			
	<p>Has the Certification Body ensured that all internal and external issues have been determined by their clients as relevant or not and if so considered in the development and effectiveness of the management system(s) as required by clauses 4.1 and 4.2 of the relevant MS standard?</p> <p>Has the CB ensured that</p> <ul style="list-style-type: none"> • their clients have determined whether climate change is a relevant issue? • Relevant interested parties of their clients can have requirements related to climate change <p><i>With the new additions on Climate Change, Certification Bodies are expected to ensure that Climate Change has been considered and if determined</i></p>		

Additional /General Comments (This space may be used to expand on comments in specific sections)

Review of additional documents. Comment on adequacy

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Additional /General Comments (This space may be used for General Comments in the case of Document Review). Delete inapplicable.

Below are some examples of general comments for different situations encountered. Follow your instincts and use these general comments to highlight areas you feel may require specific attention.

Example 1:

This could be where you notice from the application form or date on documents that the system has only been documented/implemented for a short period of time. Or where it is clear that there is no clear direction given in the documentation, no “hows” described.

Please note that for the initial assessment sufficient records generated by the system must be available to demonstrate implementation of the system to give confidence that the CAB can consistently operate in accordance with the relevant requirements.

Example 2:

Quality documentation is meant to be of benefit to a CAB. The Policies set by management give the overall direction of the CAB. The Objectives are always in line with the policies, usually measurable by some means, more specific to areas and may change. The Procedures are the instruction manual defining how the CAB operates to enable it to achieve the set objectives and thus continue moving in the planned direction as defined by the policies.

Example 3:

Although the documentation submitted appeared to be written in accordance with the Standard, there was very little direction given to the user thereof. Statements of fact were generally made but detail on how the CAB was to achieve these requirements was lacking.

Example 4:

The specific notes made during the evaluation are not necessarily non-compliances, but sometimes areas of lack of clarity that could become obvious during the on-site

assessment.

Example 5:

The documentation submitted was deemed to be assessable and appeared to be in general compliance with the requirements of ISO/IEC 17021-1. Whether the CAB's actual operational procedures are reflected in the Quality documentation can only be determined on-site at the initial assessment.

Example 6:

Use of terms that are open to interpretation, such as "where appropriate" and "if possible", are not suitable as they do not give clear direction to the user to ensure consistency within the CAB.

Be wary of stating that the manual is excellent / in full compliance with the standard as this may cause problems when the site visit reveals weaknesses overlooked during the doc review.

DOCUMENT REVIEW RECOMMENDATION

Example 1:

The deviations listed should be incorporated into the quality manual, after which an initial assessment of the CAB may be arranged.

Example 2:

The manual requires revision and re-submission for evaluation, after which an initial assessment of the CAB may be arranged.

Example 3:

The deviations listed require a submission of additional documents or information to conclude the Document review process after which an Initial assessment may be arranged.

NOTE: Where the recommendation is not to proceed with further assessment, this must be clearly justified.

NOTE 2: If there is evidence of fraudulent behaviour, if the CAB intentionally provides false information or if the CAB conceals information, please contact the Accreditation Manager immediately to reject the application or terminate the assessment process.

Signed: Team Leader /Technical Assessor		Date:
Document Review Report Checked by (SC/TM)		Date:
Signed by Checker		Comments of Checker: