



# MANAGEMENT SYSTEM MANUAL FOR THE MANAGEMENT SYSTEM CERTIFICATION BODY

## POLICY - ORGANIZATION - SYSTEM DESCRIPTION

*In accordance with the standards*  
ISO/IEC 17021-1:2015



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4	page 10; page 12; page 47 inserted REG 005 Regulation Committee for the Safeguarding of Impartiality		
3	Integration EA CODE 28; Accredia Technical Regulations RT 05 "Directives for accreditation of Bodies operating the assessment and certification of QMS of construction companies (IAF 28)		
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## 1. OBJECTIVE AND SCOPE

The scope of this manual is:

- To describe the management system adopted in compliance with ISO / IEC 17021-1: 2015.
- To show the management system outside the organization
- To communicate inside and outside the organization the objectives and the policy
- Highlight the commitment of the Management.

This document illustrates the management system of the Certification Body **SDMCERT** which performs certification activities of management systems.

The SNAS Accreditation includes:

- ISO 9001:2015
- ISO 14001:2015
- ISO 45001:2018

### EA CODES:

28	Building
29	Wholesale and retail trade
32	Financial intermediation; real estate; renting
33	Information technology
35	Other services
36	Public administration
37	Education

The applicability of the Certification Body Management System is extended to the activities indicated below, developed in the company's operating units:

**SDMCERT Office: Jelenia, 1, Bratislava, 811 05, Slovakia**

### Exclusions of requirements of the reference standards

#### **ISO/IEC 17021-1:2015**

##### **Req. 6.2 Operational Control**

The certification activity is not entrusted to branches, partnerships, agents, affiliated organizations.

##### **Req. 7.5 Outsourced Activities**

The certification activity is not outsourced.

## 2. REFERENCES TO THE STANDARDS

- ISO/IEC 17021-1:15 Conformity assessment -- Requirements for bodies providing audit and certification of management systems -- Part 1: Requirements
- ISO/IEC 17021-2:16 Competence requirements for auditing and certification of environmental management systems
- ISO/IEC 17021-3:17 Competence requirements for auditing and certification of quality management systems
- ISO/IEC 17021-10:2018 Competence requirements for auditing and certification of occupational health and safety management systems
- IAF MD 1 - Certification of Multi Site Based on Sampling
- IAF MD 2 - Transfer of accredited certification of management systems
- IAF MD 5 - Duration of QMS/EMS/ OH&SMS audits
- IAF MD 11- Audits of integrated management systems
- IAF MD 22- Certification of Occupational Health and Safety Management Systems (OH&SMS)
- IAF ID 1- For QMS and EMS Scopes of Accreditation
- Regulations of Accreditation Bodies
- MOD:001/4 General Terms and Conditions for SDMCERT
- REG:002- Regulations for the use of the Sdmcert logo and certificate.
- SDMCERT Management System Manual
- ISO 9001:2015 Quality management systems -- Requirements
- ISO 14001:2015 Environmental management systems -- Requirements
- ISO 45001:2018 Occupational Health and Safety management systems--Requirements
- ISO 19011:2018 Guidelines for auditing management systems

Technical regulations (mandatory / harmonized and voluntary) are reported in the specific "List of Standards and Laws" (MOD:002/3).

## 3. TERMS AND DEFINITIONS

The terms and definitions adopted in this document are those given in chapter 3 of the standard ISO/IEC 17021-1:2015


### Abbreviations

<b>A</b>	Auditor
<b>TCCD</b>	Technical Committee for Certification Decision
<b>TCO</b>	Technical-Commercial Office
<b>TM</b>	Technical Manager
<b>MSM</b>	Management System Manager
<b>SH</b>	Stakeholders

## 4. GENERAL REQUIREMENTS

### 4.1 General

The Management System of SDMCERT has been designed and implemented in compliance with the principles of certification as indicated in the ISO / IEC 17021-1: 2015

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The aim of SDMCERT is to inspire trust to the parties involved in the certification process.

Parties that have an interest in certification include, but are not limited to:

- a) the customers of the certification body;
- b) customers of organizations whose management systems are certified;
- c) government authorities
- d) non-governmental organizations
- e) consumers and other members of society.

The attention with which the CB focuses its commitments, so that your management system meets the requirements specified in the accreditation standard, is inspired by the following principles:

- impartiality;
- competence;
- responsibilities;
- transparency;
- confidentiality;
- Quick and effective response to complaints;
- risk based approach.

#### 4.2 Impartiality

For any organization that applies for certification, this principle is applied both during the commercial negotiation and the service provision. Access to certification is open to all organizations that request it, without discriminatory policies or procedures being applied to prevent or limit access to certification.


SDMCERT does not carry out consulting activities in designing and developing management systems, (directly or indirectly), and ensures that the evaluators used in the verification activities have not had consultancy relationships in the two years preceding the verification date up to the following two years to the verification office. The decisions of the SDMCERT are based on the evaluation of a consistent set of objective evidence. Such evidence is collected through sampling and may therefore not automatically guarantee full compliance with the requirements. SDMCERT recognizes the importance of impartiality in the verification activities, carrying out its activities objectively, avoiding any conflicts of interest making use of stakeholders to the certification activities.

#### 4.3 Competence

The staff of the CB works in accordance with its Management System to issue a certification that inspires trust to all interested parties.

#### 4.4 Responsibility

The requesting Organization should have a Management System that complies with the requirements of the ISO 17021-1 reference standard. The CB is responsible for verifying such conformity starting from a fair sampling also in relation to the defined verification times and

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through sufficient objective evidence on which to base the final certification decision. Based on the audit findings, the certification body makes the decision to issue the certification, if there is sufficient evidence of compliance, or not to release it, if such evidence does not exist.

#### 4.5 Transparency

The CB ensures the public access or the provision of appropriate information about the audit process as well as the status of the Certifications of the Organizations. In order to maintain confidence in the integrity and credibility of certification, the CB ensures appropriate access and provides non-confidential information about the conclusions of special audits (eg on complaints) to interested parties.

#### 4.6 Confidentiality

The CB does not disclose any confidential information essential for assessing the adequacy of compliance with certification requirements.

#### 4.7 Quick and effective response to complaints

The CB, aware that a rapid and effective response to complaints is an important means of protection of the same CB, its customers and other users of certification against errors, omissions or unreasonable behavior, will promptly take action so that all actions taken can be examined and made available to the interested parties together with the results of the related processing, and of all the efforts put in place to resolve them.

#### 4.8 Risk Based Approach

The CB has approached a risk assessment (not only ethical) concerning processes, activities, functions and internal / external personnel, adopting appropriate countermeasures to ensure an acceptable residual risk.

### 5. GENERAL REQUIREMENTS

#### 5.1. Legal and Contractual Aspects

##### 5.1.1 Legal Representative

The Company SDMCERT, founded in 2018, is a private entity governed by its own statutes. The legal representative of the company is Ing. Marcello Villecco.

The main company data are shown below:

<b>Corporate name:</b>	SDMCERT
<b>Legal Status:</b>	S.r.o.
<b>Main Office:</b>	Jelenia, 1, Bratislava, 811 05, Slovakia

### 5.1.2 Certification Contract

SDMCERT Technical-Commercial Office signs a contract with customers to provide Certification. The contract defines:

- Legal Agreements
- Responsibility of SDMCERT and of its customers.

#### Request of Certification

Organizations interested in quality management system certification can send their request by completing the information questionnaire (MOD 001/2) available at <http://www.sdmcert.com> or sent by the CB upon request. The organization compiles and sends the information questionnaire of SDMCERT (MOD 001/2) which collects, among others, the following information:

- The scope of certification;
- details of your structure, including the name(s) and address(es) of site(s), processes and activities, human resources and techniques, functions, reports and any relevant legal prescription;
- Identification of outsourced processes that influence compliance with the requirements;
- The rules or other requirements on the basis of which it wishes to be certified;
- If an advisory service has been provided for the management system to be certified and, if so, by whom.

Note: For in the Building sector ISO 9001 in addition to the certification request (MOD: 001/2) they must also fill in the information questionnaire ISO 9001 for the building sector (MOD:001/5).

#### Certification Offer

Upon receipt of the application for certification, the CB verify that:

- The information reported on the information questionnaire is sufficient;
- Any discrepancy in interpretation between the CB and the applicant, detected during the examination, is resolved;
- Have the ability to perform the service requested by the Organization;
- The elements necessary for the development of the audit program have been identified and positively reviewed and consideration has been given to the scope of the certification requested, the site (s) of the activities, the time required to complete the audits and any another factor that may influence the certification activity (eg language, security conditions, threats to impartiality, etc.).

If the CB is necessary, it may request further information from the Organization in support of the application and / or provide, where required, further information regarding the Certification System. In the event that SDMCERT is not able to accept the request, it informs the organization, motivating the reasons in writing.



After reviewing the whole SDMCERT draws up the offer (duly signed), and sends it to the applicant together with the "General Conditions of the Contract", which constitute an integral part thereof. The offer considers and details the Audit program for the three-year certification cycle, indicating the economic quotation and the duration of the verification audits according to the company size, the complexity and the dislocation of the processes and activities. It also includes other items such as auditors' travel expenses, administrative costs, the cost of extraordinary audits and any optional pre-audit.

The quotation is given by the SDMCERT MOD:001/1 Quotation Criteria use at the time of the offer. The MOD is drafted according to the IAFs MD1; MD5 ;MD11; MD22.

If, during the subsequent audits, the information initially provided proves to be inaccurate or out of date, SDMCERT reserves the right to change its initial offer.

The contractual relationship between the CB and the applicant organization identified and defined in the Offer is finalized when the Certification Body receives a copy of the Offer and of the General Conditions duly signed by the Customer. The "General Conditions of the Contract" and the Certification Regulations, expressly recalled and available for consultation in the current edition at <http://www.sdmcert.com> form an integral and substantial part of the contractual relationship established between the parties.

The signing of the aforementioned documents officially determines the presentation of the certification application, the confirmation of the data reported in it and actually allows the start of the certification process.

#### Quotation Criteria MOD:001/1

In MOD: 001/1 the quotation criteria of the offer are defined, approved by the Management and made available upon request.

#### Recordings

The questions and communications with the customer are kept in original in the archive, edited by the Technical-Commercial Office in the manner described in paragraph 8.4.


The Management of the Certification Request is reported in the procedure PRO: 001 "Management of Offers and Management System Certification contracts".

Communication towards the outside consists essentially of the information that the organization receives from the client for the purpose of fulfilling the requirements and for this activity we have established effective procedures.

Relationships with the customer are primarily initiated with the technical / commercial office, in relation to the verification and understanding of the information relating to the service and, during the execution of the activities, by the appointed Auditor(s).

#### *5.1.3 Responsibility for the Certification decisions*

The CB is responsible and retains authority on certification decisions, including issuing, refusing, maintaining certification, extending or reducing the scope of certification, renewal, suspension or restoration following suspension, or withdrawal of certification. The CB has appointed the Technical Committee for Certification.

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## 5.2 Management of Impartiality

SDMCERT carries out its certification activities with absolute independence, impartiality and integrity. SDMCERT does not carry out consultancy activities in designing and developing management systems.

The threats to impartiality include the following:

- Threats deriving from its own interests: threats that come from a person who acts in his own interest. A concern related to certification activity, as a threat to impartiality, is constituted by its own financial interest;
- Threats deriving from self-evaluation: threats coming from a person who reviews his work. Carrying out the certification activity to the customer, also providing consulting services relating to the design, manufacture, installation, distribution of the certified product, is considered a threat of self-evaluation;
- Threats arising from familiarity (or trust): threats that come from a person who is too familiar or overly relies on another person, instead of seeking evidence in the certification activity;
- Threats arising from intimidation: threats that come from a person who has the perception of being the object of coercion, open or hidden, like the threat of being replaced or reported to a boss.

SDMCERT is responsible for ensuring the impartiality of its certification activities, not allowing commercial, economic, financial or other pressures to in any way compromise their impartiality.

SDMCERT is also committed not to carry out, and not to use its auditors in certification activities in all cases where there are situations that may conflict with the requirements of independence and impartiality of the certification activity. To this end, SDMCERT requires all its auditors and members of the Management Committee to sign a declaration of responsibility for the absence of situations of conflict of interest, even if only potential, with the subjects involved in any process connected or connected to the product to be certified.

Moreover SDMCERT analyzes systematically and continuously, according to the document: **RA 001 "Risk analysis"**, the potential risks of conflicts of interest that could undermine the impartiality of the Body, adopting the appropriate actions to eliminate or minimize these risks. The procedure PRO:009 "Risk Assessment" provides instructions for a complete and correct risk assessment.


Top management reviews every residual risk to determine if it is within the acceptable risk level.

SDMCERT Interested Parties include clients, Public Administrations and Public Bodies, personnel of the certification body.

At least once a year, stakeholders are consulted to discuss issues affecting impartiality, including transparency and public perception. The consultation involves from a minimum of 3 to a maximum of 5 members, representative of the parties interested in the certification activities carried out by SDMCERT.

SDMCERT any other part of the same legal entity and any other part under the organizational control of the CB does not offer or provide consultancy services relating to the management system. This applies equally to that part of a government entity identified as a certification body.

Conducting internal audits by SDMCERT and any other part of the same legal entity to its certified customers is a significant threat to impartiality. SDMCERT and any other part of the same legal entity, as well as any other entity under the organizational control of the certification body, does not

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offer or provide internal audit services to its certified customers. **SDMCERT** does not certify a management system for which it has performed audits for a minimum of two years following the completion of these internal audits.

If a client has received a consultancy service relating to the management system from a consultancy organization that has relations with the CB, this constitutes a threat to impartiality. **SDMCERT** does not certify the management system for a minimum of two years following the conclusion of the consulting service.

**SDMCERT** does not offer audit activities to a management systems consultancy organization, as it constitutes a threat to impartiality. This fact does not apply to individuals with a contract as an external auditor.

**SDMCERT** activities are not advertised or offered in connection with activities of an organization that provides consulting services related to management systems. **SDMCERT** takes actions to correct inappropriate links or statements by any consulting organization that declares, or implies, that certification would be simpler, easier, faster or less expensive, if requested to the certification body itself. **SDMCERT** does not declare or imply that certification would be simpler, easier, faster or less expensive, if a specific consulting organization was employed.

To ensure that there is no conflict of interest, personnel who have carried out consultancy services relating to the management system, including that which operates at the management level, are not used by the CB in auditing or in other certification activities, if they are involved in consultancy services relating to management systems with the client in question. To mitigate the threat, **SDMCERT** does not employ staff for a minimum of two years following the conclusion of the consultancy service.

**SDMCERT** takes action to respond to any threat to its impartiality resulting from the actions of other people, organizations or organizations.

### 5.3 Responsibility and financial resources

**SDMCERT** signed and renewed annually, an insurance policy for professional liability extended to the work injury, as well as a civil indemnity policy for damages to third parties for liabilities arising from the performance of activities within its competence certification.

**SDMCERT** has financial and economic stability and resources necessary to cope with the regular performance of its certification activities. The Management, during the Management Review phase, and at any time when this evaluation is appropriate, examines the human and material resources (personnel, infrastructure, instrumentation, economic / financial resources, etc.) so as to fill any shortcomings and identify the resources necessary for the pursuit of the social purpose.

**SDMCERT** financing is obtained from the fees received for certification and inspection activities.

## 6 STRUCTURAL REQUIREMENTS

### 6.1 Organizational structure and top management

The organizational structure of **SDMCERT** is highlighted in the following specific documents:

- ALL:003/1 **SDMCERT** Organization chart

➤ MOD:004/7 - List of auditors

The formulation and supervision of the Body's policies regarding the certification of management systems are the responsibility of the top management having consulted the Committee for the safeguarding of impartiality. The top Management also supervises the economic and financial management of the Body and the coordination of technical activities. The definition of the rules and certification processes is the responsibility of the Technical Manager together with the Head of the Management System of the CB. The delegation of authority, responsibility and duties to the staff of the Body is the responsibility of the **SDMCERT** Directorate. The Body clearly defines the delegated authorities, the responsibilities assigned and the tasks assigned to its personnel and ensures that such personnel are aware of the importance of the activities carried out by each and of the contribution that each person can and must make to achieve the objectives set

**SDMCERT** has defined the following figures:

- **General Manager**, who is responsible for the Company's operations;
- **Certification Technical Manager** has all the tasks related to the preparation, coordination, monitoring and proper execution of certification and inspection activities, in compliance with the applicable rules and regulations, with particular regard to the guarantee of independence and impartiality of judgment and protection of confidentiality.
- **Management System Manager of the Certification Body** has the operational tasks related to the preparation and implementation of the management system, in its various technical and management components, and to the surveillance of the proper functioning of the system, including the task of periodically reporting to the top management, as defined above, on the state of the system and to propose and monitor the necessary corrective and improvement actions.
- **The Technical Committee for the Decisions on Certification** (Certification Body) is the body with the task of deciding on the issue of certifications according to the UNI EN ISO / IEC 17021-1: 2015. This Committee consists of 1 person chosen from among the qualified members for this function and appointed by the General Management of **SDMCERT**.
- **Substitute of the Committee for Certification** has the task of replacing the functions mentioned above in order to guarantee the necessary continuity of the operation of these essential functions.
- **Technical-Commercial Office Manager** is responsible for managing the activities related to sales (certification request and verification of customers - processing of the sales contract - contracting with the customer - archiving of contracts) and activities related to archiving of technical documentation. In addition, has the task of filing the Technical documentation; provides for debt collection; assists inspectors in planning and organizing certification activities and assisting customers.
- **Auditor** for Certification audit, performs assessments related to the issue of management system certification.
- **Audit Team**: Team of auditors that performs an audit.
- **Lead Auditor of the audit team**, person who has the skills to coordinate the audit team.
- **Technical expert**, a person who provides specific knowledge or skills on the subject of the audit.
- **Employees of the Technical-Commercial Office** have the task of filing the Technical documentation; provide for debt collection; they assist inspectors in planning and organizing certification activities and assisting customers.

In the Procedure **PRO:003 "Organizational chart and job descriptions"** are reported all the professionals (and their responsibility and authority) of the CB and in the procedure **PRO:004 "Competence, Evaluation and Training"** the professional skills.

## 6.2 Operational control

The CB has no branches, partnerships, agents, affiliated organizations that perform certification activities.

## 7 REQUIREMENTS FOR RESOURCES

### 7.1 Staff Competence

#### 7.1.1. General Considerations

SDMCERT has established the **PRO:004 "Competence, Evaluation and Training"** procedure to ensure that staff have appropriate knowledge and skills related to the different types of management systems (eg environmental management systems, quality management systems, OH&S) and to the geographical areas in which it operates.


#### 7.1.2. Determination of the criteria of competence

SDMCERT has established the **PRO:004 "Competence, Evaluation and Training"** procedure to determine the criteria of competence for the personnel involved in the management and performing of audits and other certification activities. The criteria of competence are determined with reference to the requirements of each type of standard, for each technical area and for each function in the certification process. The outputs of the process are the documented criteria regarding the required knowledge and the skills needed to perform the audit and certification tasks effectively, in order to achieve the expected results.

#### 7.1.3. Evaluation processes

SDMCERT has established the **PRO:004 "Competence, Evaluation and Training"** concerning the initial assessment of the competence and monitoring on an ongoing basis the competence and performance of all personnel involved in the management and conduct of audits and other certification activities, applying the established competence criteria. According to Appendix B of the ISO 17021-1:15 standard, SDMCERT has defined the following methods for assessing staff skills:

- Review of Recordings
- Return information
- Interviews
- Observations
- Exams

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#### 7.1.4 Other Considerations

SDMCERT is in possession of all the information regarding the skills and experience of the technicians.

#### 7.2 Staff involved in the certification activities

SDMCERT ensures that the personnel involved in the certification activities possess the necessary skills for the correct fulfillment of the functions entrusted and the effective exercise of the responsibilities and related authorities, in terms of level of education, training, work experience, skills, behavioral ethics and anything else required.

For the purposes indicated above, the Body:

- Defines the tasks, the duties, the responsibilities, the authorities and the related competence skills;
- Identify any potential "gap" and the corresponding training needs;
- Provide the necessary training and continuously evaluate its effectiveness;
- Ensure staff's awareness of the importance of each person's role and duties and their contribution to achieving the objectives;
- Provide the necessary operating instructions, promote and ascertain the necessary knowledge of the conformity assessment procedures and applicable requirements;
- Keep adequate records of the level of education, experience, training and qualifications of people;
- Monitor staff performance.


For personnel called upon to formulate professional judgments and interpretations (condition present in the activities performed by SDMCERT), the Body ensures, in particular, that such personnel possess the following skills:

- Appendix A of ISO 17021-1: 15
- ISO 17021-2:16
- ISO 17021-3:17
- ISO 17021-10:18
- IAF MD 11
- IAF MD 22

Furthermore, the Body has systematically prepared and applied methods to instill in its staff the awareness of the following factors:

- Importance of compliance with the policy and the requirements of the management system of the Certification Body;
- Benefits deriving from the improvement of professional services;
- Roles and responsibilities of each employee in achieving the objectives;
- Consequences of deviations from predefined rules.

The responsibilities related to the approval of the descriptive / prescriptive documents of the management system of the Certification Body, to the drafting and signing of certificates and

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evaluation reports in general are clearly defined and assigned by the Management.

SDMCERT employs, preferably, employees or external staff hired with generally exclusive collaboration.

The criteria for the selection, qualification, training and periodic evaluation of the personnel involved in the certification activities are defined in the Management Procedure **PRO:004 "Competence, Evaluation and Training"**.

This procedure covers the following aspects:

- Definition of the required levels of competence;
- Definition of training methods;
- Evaluation of the effectiveness of the training;
- Monitoring of professional services;
- Communication of the qualification to the competent Administrations.

### ***Job Description***

The authorities, responsibilities and tasks of the various bodies and functions constituting the structure of the Body are defined under the authority of the Management in the **PRO 003 document "Organizational Chart and Job Description"**.

### ***Selection, training and education***

SDMCERT manages the process of selection, training and education of personnel according to the procedure **PRO:004 "Competence, Evaluation and Training"**.

It provides the following steps

- - Assessment of minimum levels of personnel competence (verification of compulsory and optional documents and titles);
- - Technical / attitudinal interview, aimed at examining the possession of the necessary specialized and transversal skills;
- - Identification of training needs, through coaching and participation in training courses;
- - Compilation of the personal qualification sheet summarizing the requirements, skills and possible training needs of the personnel.

The personnel qualification sheets are monitored and updated periodically by the MSM.

For the inspection staff, the maintenance of the qualification over time is subject to the participation in training / updating courses related to the Technical topics of the inspection activities carried out. All personnel are periodically monitored through field observations and review of the released reports.

### **7.3 Use of individual auditors and external technical experts**

The CB concludes a written contract with external auditors and technical experts with which:

- Underwrite a commitment to operate in compliance with the procedures and regulations of the Body, including the commitment to confidentiality and impartiality;
- They also subscribe to a specific declaration stating that they do not have, in any way, relations with the requesting subjects or holders of certification activities in relation to the management system;
- They behave with diligence, correctness and transparency, acting in such a way as to guarantee impartiality of judgment and fair treatment

The records relating to the qualification of the personnel are made available and kept up-to-date and include all the elements making up the qualification.

The Body has Lists of personnel assigned to certification and inspection activities MOD:004/7.

For all certification activities, SDMCERT has competent and trained resources according to a permanent training system that provides the required and needed professional refresher courses.

#### 7.4 Staff Recordings

These registrations consist of the "Qualification sheets for auditors, management and administrative staff" which are initially filled in at the end of the initial insertion phase, and gradually updated with the additional elements constituting the qualification.

These records make it possible to collect and store, both general information (personal data, qualifications and exams, professional training courses, specialization and / or internships, previous work experience, starting date of collaboration), and professional skills acquired during the period of collaboration with the Body, by carrying out the task and taking part in training and training courses. The cards also report the tasks performed and the delegations and permanent authorizations assigned.

#### 7.5 Outsourced activities

The CB does not outsource any certification activity

## 8 INFORMATION REQUIREMENTS

### 8.1 Public Information

The CB through the website [www.sdmcert.com](http://www.sdmcert.com) publishes, without request and in all the geographical areas in which it operates, information about:

- a) Audit processes;
- b) The processes for issuing, refusing, maintaining, renewing, suspending, restoring or withdrawing certification or extending or reducing its scope;
- c) The types of management systems and certification schemes in which it operates;
- d) Use of the name of the certification body and of the certification mark or logo;
- e) The processes for handling requests for information, complaints and



appeals;

- f) The policy relating to impartiality.

The CB through the website [www.sdmcert.com](http://www.sdmcert.com) provides information on:

- a) The geographical areas in which it operates;
- b) The status of a specific certification;
- c) The name, the related normative documents, the field of application and the geographical position (city and country) of a specific certified client.

The information provided by the CB to customers or to the market, including advertising material, is accurate and not misleading.

## 8.2 Certification Documents

The CB draws up a Certificate of Certification of the Management System which reports:

- The name and geographical location of each certified client (or the geographical location of the headquarters and all sites covered by the scope of a multi-site certification);
- The dates of entry into force for the issue, extension or reduction of the scope of the certification, or the renewal of the certification,
- the expiry date or the date scheduled for the renewal of the certification, consistent with the renewal cycle of the certification;
- a unique identification code;
- the standard and / or other normative document used for auditing the certified client, including the issuing status;
- the scope of certification in reference to the type of activities, products and services, as applicable to each site, without being misleading or ambiguous;
- the name, address and certification mark of the certification body; other brands (for example, the symbol of accreditation, the customer's logo) are used in a non-misleading or ambiguous way;
- any other information required by the law and / or other normative document used for certification


## 8.3 Reference to certification and use of logos

The CB has drawn up the **Regulations for use of the logo and certificate REG:003** to provide the requirements to the Organization to which the certification was issued on how to publicize it with the aim of ensuring a correct dissemination of the image of the Certified organization, of the Certification Body and of the Accreditation Body.

## 8.4 Confidentiality

**SDMCERT** guarantees, in a competent manner with coherence and impartiality, the utmost confidentiality, as regards the certification activity, and its evaluation.

**SDMCERT** undertakes to guarantee the confidentiality of information and documents obtained for

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the purpose of carrying out its certification activity, as well as the protection of property rights, copyrights, and any other rights on the documentation provided by the Customer. This commitment is extended, through the signing of a specific document of commitment to confidentiality, to all personnel, who have access to data related to the certification activity.

SDMCERT if it wishes or is obliged by law to make certain information public, it undertakes to inform the Customer or the individual concerned, in writing and in advance, about the information to be disclosed. Except for information that the Customer makes available to the public, or when agreed between SDMCERT and Customer (for example, in order to respond to complaints or appeals), all other information is considered to be exclusive information and must be considered confidential.

The CB performs periodic internal audits to ensure that the confidentiality provisions given to its staff are complied with, and in the event of any discrepancies or complaints in this sense reports the incident to the relevant Body.

SDMCERT has drawn up the programmatic document on data security according to Reg. (EU) 2016/679.

## 8.5 Exchange of information between a certification body and its customers

### 8.5.1 Information about certification activities and requirements

The CB through the website [www.sdmcert.com](http://www.sdmcert.com) has provided information to customers and keeps the following updated:

- a) a detailed description of the initial certification and maintenance activities, including the application (certification), initial audits, surveillance audits and the process for issuing, refusing, maintaining certification, extending or reducing the field application of certification, renewal, suspension or restoration, or withdrawal of certification;
- b) regulatory requirements for certification;
- c) information on the fees for the application for certification, initial certification and maintenance of certification;
- d) the certification body's requirements towards customers;
- e) documents that describe the rights and duties of certified customers, including requirements to be observed in referring to its certification in communications of all kinds;
- f) information on the processes for handling complaints and appeals.

### 8.5.2 Notification of changes by a certification body

SDMCERT provides its certified customers notifications of any change to their certification requirements (in case of changes to certification standards and changes in certification requirements such as organizational status, change of management, contact addresses and site, scope and major changes to the management system and processes, etc.). Certified clients are assigned a transition time period to meet new or changed needs. SDMCERT verifies that each certified customer complies with the new requirements.

### 8.5.3 Notification of changes by a certified client

According to the MOD 001.4 General Terms & Conditions (GTC), the certified customer is obliged to inform SDMCERT, without delay, about aspects that may affect the ability of the management system to continue to meet the requirements of the standard used for the certification. These provisions include, for example, changes relating to:

- a) legal, commercial, organizational or property aspects;
- b) organization and management (for example executives with key roles, personnel with decision-making power or technical staff);
- c) contact addresses and sites;
- d) scope of the activities of the organization included in the certified management system;
- e) significant changes to the management system and processes.

SDMCERT undertakes the right actions

The certified Customer must inform SDMCERT, immediately, of the occurrence of a serious accident or a violation of the regulation that requires the involvement of the regulatory authority.

## 9. PROCESS REQUIREMENTS

### 9.1 Pre-certification Activities

#### 9.1.1 Certification Application

Organizations interested in quality management system certification can send their request by completing the information questionnaire (MOD 001/2) available at <http://www.sdmcert.com> or sent by the CB upon request. The organization compiles and sends the SDMCERT information questionnaire (MOD 001/2) which includes, among others, the following information:


- The scope of certification;
- Details of your structure, including the name(s) and address(es) of site(s), processes and activities, human resources and techniques, functions, reports and any relevant legal prescription;
- Identification of outsourced processes that influence compliance with the requirements;
- The rules or other requirements on the basis of which it wishes to be certified;
- If an advisory service has been provided for the management system to be certified and, if so, by whom.

Note: For in the Building sector ISO 9001 in addition to the certification request (MOD: 001/2) they must also fill in the information questionnaire ISO 9001 for the building sector (MOD:001/5).

#### 9.1.2 Application Review

Upon receipt of the application for certification, the CB verify that:

- The information reported on the information questionnaire is sufficient;

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- Any discrepancy in interpretation between the CB and the applicant, detected during the examination, is resolved;
- Have the ability to perform the service requested by the Organization;
- The elements necessary for the development of the audit program have been identified and positively reviewed and consideration has been given to the scope of the certification requested, the site (s) of the activities, the time required to complete the audits and any another factor that may influence the certification activity (eg language, security conditions, threats to impartiality, etc.).

If the CB is necessary, it may request further information from the Organization in support of the application and / or provide, where required, further information regarding the Certification System. In the event that SDMCERT is not able to accept the request, it informs the organization, motivating the reasons in writing.

After reviewing the whole SDMCERT draws up the offer (duly signed), and sends it to the applicant together with the "General Conditions of the Contract", which constitute an integral part thereof. The offer considers and details the Audit program for the three-year certification cycle, indicating the economic quotation and the duration of the verification audits according to the company size, the complexity and the dislocation of the processes and activities. It also includes other items such as auditors' travel expenses, administrative costs, the cost of extraordinary audits and any optional pre-audit.

The quotation is given by the SDMCERT MOD:001/1 Quotation Criteria use at the time of the offer. The MOD is drafted according to the IAFs MD1; MD5 ;MD11; MD22.

If, during the subsequent audits, the information initially provided proves to be inaccurate or out of date, SDMCERT reserves the right to change its initial offer.

The contractual relationship between the CB and the applicant organization identified and defined in the Offer is finalized when the Certification Body receives a copy of the Offer and of the General Conditions duly signed by the Customer. The "General Conditions of the Contract" and the Certification Regulations, expressly recalled and available for consultation in the current edition at <http://www.sdmcert.com> form an integral and substantial part of the contractual relationship established between the parties.

The signing of the aforementioned documents officially determines the presentation of the certification application, the confirmation of the data reported in it and actually allows the start of the certification process

#### Certification Criteria

In MOD: 001/1 the quotation criteria of the offer are defined, approved by the Management and made available upon request.

#### Management of extraordinary events or circumstances affecting CAB and organizations certified or to be certified

An extraordinary event affecting a certified organization or SDMCERT can temporarily prevent SDMCERT from carrying out scheduled audits on site. When such a situation occurs SDMCERT operates according to ID IAF 3 and IAF MD 4.

SDMCERT communicates with the Organization for the analysis of the real situation:

1. When will the organization be able to function normally?
2. When will the organization be able to ship products or perform the service defined within the current scope of certification?
3. Will the organization need to use alternative manufacturing and/or distribution sites? If so, are these currently covered under the current certification or will they need to be evaluated?
4. Does existing inventory still meet customer specifications or will the certified organization contact its customers regarding possible concessions?
5. If the certified organization is certified to a management system standard that requires a disaster recovery plan or emergency response plan, has the certified organization implemented the plan and was it effective?
6. Will some of the processes and/or services performed or products shipped be subcontracted to other organizations? If so, how will the other organizations' activities be controlled by the certified organization?
7. To what extent has operation of the management system been affected?
8. Has the Certified organization conducted an impact assessment?
9. Identification of alternative sampling sites, as appropriate.

Once SDMCERT has analyzed the real situation of the Certified Organization or to be Certified with proven documentation (provided by the customer), it provides the following:


- Organization in Surveillance and Certification Renewal
- Remote verification according to IAF MD 4 and IAF ID 12
- 6 months postponed verification, without any loss of validity of the issued certificate.
- Organization to be certified
- Remote verification according to IAF MD 4 and IAF ID 12

### 9.1.3 Audit Program

The CB prepares a complete certification cycle audit program to clearly identify the required audit activity(ies) to demonstrate that the customer management system meets the requirements for certification according to the standard. The certification cycle audit program must cover all the requirements of the management system as a whole. The initial certification audit program covers an initial two-stage audit, surveillance audits in the first and second year following the certification decision, and a certification renewal audit in the third year, before certification expires. The first three-year certification cycle begins with the certification decision. The following cycles start with the decision to renew the certification. For the definition of the audit program and any possible variation, the factors to consider are: the size of the client, the scope and complexity of its management system, products and processes, as well as the level of effectiveness demonstrated from the management system and the results of previous audits.

Surveillance audits are conducted at least once a year (calendar year), with the exception of the years of renewal of the certification. The date of the first surveillance audit, following initial certification, must not exceed 12 months from the date of certification decision.

When the CB takes into account certifications already issued to the client and audits performed by another certification body, it must obtain and maintain sufficient evidence, such as reports and documentation about corrective actions, or any non-compliance detected. The certification body justifies and records, on the basis of the information obtained, any variation of the existing audit

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program and follow the implementation of the corrective actions concerning the previous non-conformities

When the client works on shifts, the activities that take place during the work shifts are considered in the development of the audit program and the audit plans.

#### *9.1.4 Definition of the audit time*

For each client, the body establishes the time necessary to plan and complete a complete and effective audit of the customer management system.

In the document MOD: 001.1 "Price List" the calculation mode of the audit time is reported.

In determining the overall audit time, the certification body considers the following aspects:

- a) the requirements of the relevant management system standard;
- b) the complexity of the client and of his management system
- c) the technological context;
- d) any outsourced process related to the activities involved in the scope of the management system;
- e) results of previous audits;
- f) the size and number of sites, their geographical location and the considerations about multiple sites;
- g) risks associated with the products, processes or activities of the organization;

The duration of the audit of the management system and the related justifications are recorded.


The duration of the audit does not count the time spent by each member of the group, which is not assigned as an auditor (ie technical experts, translators, interpreters, observers and training auditors).

#### *9.1.5 Multi-site sampling*

In the event that multi-site sampling is used for the audit of the management system of a client performing the same activities in different locations, the certification body shall develop a sampling program to ensure an adequate audit of the management system. The motivation of the sampling plan is documented for each client. The method for calculating the audit time is shown in document MOD: 001/1 "Price List"

#### *9.1.6 Rules for integrated management systems*

The duration of an integrated management system (the level to which an organization uses one single management system to manage multiple aspects of organizational performance to meet the requirements of more than one management system standard. Integration relates to the management system being able to integrate documentation, appropriate management system elements and responsibilities in relation to two or more sets of audit criteria/standards) is calculated according to the IAF MD 11. The level of integration is requested on the certification

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application.

In the case of certification according to several standards of management systems the audit planning is guaranteed by an adequate audit activity in the field in order to give confidence to the certification.

The method for calculating the audit time is shown in document MOD: 001/1 "Quotation Criteria"

SDMCERT drafted the procedure **PRO:001 Offers and contracts Management**

**Note:** in that case also the IAF MD22 is taken in consideration.

## 9.2 Audit Planning

### 9.2.1 Definition of objectives, scope and criteria

The CB determines the objectives, the scope and the audit criteria, including any changes, following a consultation with the customer.

The audit objectives describe what should be achieved through the audit and include the following:

- a) ascertaining the compliance of the client's management system, or parts of it, with the audit criteria;
- b) the assessment of the management system's ability to guarantee that the customer meets the applicable requirements of a binding and contractual nature;
- c) ascertaining the effectiveness of the management system to ensure that the customer is reasonably able to achieve the specified objectives;
- d) as far as applicable, the identification of areas of potential improvement of the management system.

the scope of the audit describes the degree of extension and the limits of the audit, such as sites, organizational units, activities and processes to be audited. In cases where the initial or renewal process of certification consists of more than one audit (for example, if it involves different sites), the scope of a single audit might not cover the entire scope of the certification, but the totality of the audits is consistent with the scope specified in the certification document.

The audit criteria are used as a reference for the assessment of compliance and include:

- the requirements of a defined normative document concerning the management systems
- the defined processes and documentation of the management system developed by the customer.

### 9.2.2 Selection and assignment of the audit team

The selection of the members of the audit team and of the technical experts included in the lists is the responsibility of the CB. The selection takes place taking into account the skills necessary to achieve the audit objectives and the impartiality requirements. If only one auditor is present, the auditor must have the competence to perform the tasks of an audit team leader applicable to that audit. The audit team has all the competences identified by the CB.

In deciding the size and composition of the audit team, the CB considers the following:

- a) The objectives, scope, criteria and overall estimated time of the audit;

- b) If the audit is a combined, joint or integrated audit;
- c) The overall competence of the audit team needed to achieve the audit objectives (Appendix A1 - ISO 17021-1: 2015)
- d) Certification requirements (including any applicable requirements of a binding or contractual nature);
- e) Language and cultural aspects.

The necessary knowledge and skills of the head of the audit team and the auditors can be integrated with technical experts, translators and interpreters who have to operate under the direction of an auditor. If translators or interpreters are used, they are selected so as not to influence the audit.

Criteria for the selection of technical experts are determined on a case-by-case basis, depending on the needs of the audit team and the scope of the audit

The auditors in training can take part in the audit, provided that an auditor is appointed as an evaluator. The latter must be competent to take on the tasks and have final responsibility for the activities and findings formulated by the training auditors.

The head of the audit team (Lead Auditor), in consultation with the audit team, must assign to each group member the responsibility for auditing specific processes, functions, sites, areas or activities. These assignments must take into account the needs for competence and effective and efficient use of the audit team, as well as the different roles and responsibilities of auditors, training auditors and technical experts. Changes in assignment of tasks can be made during the audit to ensure the achievement of the audit objectives.

#### *Observers, technical experts and guides*

##### *Observers*

The CB agrees with the client the presence and motivation of observers during an audit activity prior to implementation. The audit team should ensure that observers do not influence or interfere with the audit process or the related outcomes.

Observers may be members of the client organization, consultants, staff accompanying the accreditation body, authorities or other persons whose presence is justified.

##### *Technical experts*

The CB agrees with the client the role of technical experts during an audit activity prior to implementation. A technical expert should not act as an auditor within the audit team. Technical experts must be accompanied by an auditor.

Note: The technical expert can give advice to the audit team in the preparation, planning or management of the audit.

##### *Guides*

Unless otherwise agreed between the audit team manager and the client, each auditor must be accompanied by a guide. The Guide(s) is (are) assigned to the audit team to facilitate the audit itself. The audit team should ensure that the guides do not influence or interfere with the audit process or the related outcomes.

The responsibilities of a guide can include:



- a) establish contacts and timing for interviews;
- b) organize visits to specific parts of the site or organization;
- c) ensure that the rules concerning site security and safety procedures are known and respected by the members of the audit team;
- d) attend the audit on behalf of the client;
- e) provide clarification or information at the request of an auditor

### 9.2.3 Audit Plan

The CB draws up an audit plan as a basis for sharing the methods of conducting and scheduling of audit activities.

#### *Preparation of the audit plan*

The audit plan refers to:

- a) audit objectives
- b) audit criteria
- c) field of application of the audit, including the identification of the organizational and functional units and the processes to be audited
- d) dates and sites to be inspected, including temporary sites
- e) the duration of the audit
- f) the roles and responsibilities of the members of the audit team

#### *Communication of the tasks of the audit team*

The mandate conferred by the CB expects the Audit team:

- a) examine and verify the structure, policies, processes, procedures, registrations and related documents of the client organization, relevant to the management system standard;
- b) determine that the tasks meet all the requirements relevant to the scope of the certification;
- c) determine that processes and procedures are defined, implemented and maintained effectively active, to provide a basis of trust in the organization's management system;
- d) communicate to the Organization, to implement the appropriate actions to counter any inconsistency between the policy, objectives and targets (consistent with the expectations of the applicable management system standard or other normative document).

#### *Communication of the audit plan*

The audit plan must be communicated and the dates previously agreed with the customer

#### *Communication concerning the members of the audit team*

The CB shall notify the Organization of the names of the audit team selected for carrying out the certification audit, in order to obtain its formal acceptance. Where it deems it appropriate, the

Organization may request the replacement of the auditors notified to it, communicating the reasons for it to the CB within 3 days from the date of receipt of the notification.

**Note:** in that case also the IAF MD22 is taken in consideration.

### 9.3 Initial Certification

#### 9.3.1 Certification Audit

##### Certification Audit –Stage 1

The initial certification audit of a management system is conducted in two steps: Stage 1 and Stage 2.

The planning must ensure that the objectives of Stage 1 can be met and, during this stage, the client must be informed of every activity "on site" to be performed during the stage 2.


Objectives of Stage 1 are:

- a) Review the documented information of the customer management system;
- b) Evaluate the specific conditions of the client's site and undertake an exchange of information with the customer's staff, in order to establish the degree of preparation for Stage 2;
- c) Review the client's status and understanding of the requirements of the standard, with particular reference to the identification of key performance or significant aspects, processes, objectives and operation of the management system;
- d) Collect the necessary information concerning the scope of the management system, including:
  - The Customer's Site(s);
  - the processes and equipment used;
  - the levels of established controls (in particular in the case of multi-site customers);
  - applicable statutory and regulatory requirements
- e) review the allocation of resources for stage 2 and agree with the client the details of the stage itself;
- f) to focus on the planning of phase 2, acquiring sufficient knowledge of the management system and activities of the client's site, within the management system standard or other normative documents;
- g) assessing whether internal audits and management reviews are being planned and implemented and that the level of implementation of the management system provides evidence that the customer is ready for Stage 2.

The CB requires that at least part of the Stage 1 be held at the offices / site of the Organization in order to achieve the objectives set out above.

The documented conclusions regarding the fulfillment of the objectives of Stage 1 and the possibility of proceeding to Stage 2 are communicated to the client, including the identification of each potential critical area that, in Stage 2, could be classified as non-compliance.

In determining the interval between Stage 1 and 2, the CB considers the customer's needs for the

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resolution of the potential critical areas identified during Stage 1. The certification body may also need to revise its provisions for Stage 2. If there are significant changes that could impact the management system, the certification body must consider the need to repeat Stage 1, in whole or in part. The client must be informed if the results of Stage 1 can lead to postponement or cancellation of Stage 2.

### Stage -2

The purpose of Stage 2 is to evaluate the implementation, including the effectiveness, of the customer management system. Stage 2 must take place at the customer's site(s) and must at least include the activities listed below:

- a) information and evidence about compliance with all the requirements of the standard of applicable management system or other normative documents;
- b) monitoring, measurement, reporting and performance review, against the objectives and basic performance targets (consistently with the expectations of the applicable management system standard or other normative document);
- c) the capacity of the customer's management system and related services, with reference to compliance with the applicable regulatory requirements;
- d) operational control of customer processes;
- e) internal audits and management review;
- f) the responsibility of the management for the client's policies.

### Note: ISO 9001 EA CODE 28 (Building)

For the ISO 9001 certification for the Building sector, the following procedure is integrated with con Accredia Technical Regulations RT 05 [Directives for accreditation of Bodies operating the assessment and certification of QMS of construction companies (IAF 28)]

### Conclusions of the initial certification audit

The audit team analyzes all audit information and evidence gathered during Stage 1 and Stage 2 in order to review the audit findings and agree on the audit conclusions.

## 9.4 Conduction of the audit

### 9.4.1 General

The certification body has a process for conducting audits in on site **PRO 005**. This process includes an initial meeting, at the beginning of the audit, and a final meeting at the end of the audit.

### 9.4.2 Initial Meeting

Once the audit team has arrived at the customer's premises, it organizes a formal initial meeting with the client's management and, where appropriate, with the managers of the functions or processes to be audited. The purpose of the initial meeting, conducted by the head of the audit team, is to provide a brief explanation of how the activities are carried out. The level of detail is consistent with the client's level of familiarity with the audit process and considers the following:


- a) the presentation of the participants, including a description of their roles;
- b) confirmation of the scope of certification;
- c) confirmation of the audit plan (including the type and scope, the audit objectives and criteria), any changes and any other relevant provisions with regard to the client, such as the closing meeting date and time of each intermediate meeting between the audit team and the client's management;
- d) confirmation of the formal communication channels between the audit team and the client;
- e) confirmation of the availability of the resources and facilities necessary for the audit team
- f) confirmation of confidentiality aspects;
- g) confirmation, to the audit team, of the existence of suitable conditions of safety at work, of emergency and safety procedures;
- h) confirmation of the availability, roles and identities of each guide and observer;
- i) the method of reporting, including any classification of audit findings;
- j) information about the conditions under which the audit can be concluded in advance;
- k) confirmation that the audit team manager and the audit team representing the certification body are responsible for auditing and monitoring the implementation of the audit plan, including audit activities and paths;
- l) confirmation, if applicable, of the status of the results of previous reviews or audits;
- m) methods and procedures to be used to conduct the sampling-based audit;
- n) confirmation of the language to be used during the audit;
- o) confirmation that, during the audit, the customer will be kept informed of audit and advancement of the onset of any critical issues;
- p) opportunity, by the customer, to ask questions.

#### 9.4.3 Communication during the audit

During the audit, the audit team periodically evaluates the progress of the audit and exchanges information. The head of the audit group reassign the job, as needed, between the members of the group of audit and periodically communicates to the customer the status of progress of the audit and the onset of any critical issues.

Where the available audit evidence indicates that the audit objectives are not attainable or the emergence of an immediate and significant risk (for example inherent to safety), the lead Auditor reports this to the client and, if possible, to the certification body for the purpose of choosing appropriate actions. These actions may include the reconfirmation or modification of the audit plan, changes to the objectives or scope of the audit, or the related conclusion. The manager of the audit team reports to the certification body the outcome of the action taken.

The Lead Auditor reviews with the client every need for changes to the scope of the audit that is shown with the progress of the audits in the field and report to the certification body.

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#### 9.4.4 Obtaining and verifying information

During the audit, the Audit Team acquires information relevant to the objectives, scope and audit criteria (including information regarding the interfaces between functions, activities and processes), through a sampling based on the judgment and must be verified in order to become audit evidence.

Sampling based on judgment is based on the knowledge, skills and experience of the audit team.

Sampling by judgment is based on:

- Previous audit experience within the scope of the audit;
- Complexity of requirements (including legal requirements) to achieve audit objectives;
- Complexity and interaction of the organization's processes and the elements of the management system;
- Degree of evolution in technology, human factor or management system;
- Key areas of risk identified above and areas for improvement;
- The elements leaving the assembly of the management systems;

Audit methods for obtaining information include, but are not limited to:

- a) interviews;
- b) observations of processes and activities;
- c) review of documentation and records.

The information is recorded by the audit team in a Check-list.

#### 9.4.5 Identification and recording of audit findings

The audit findings, which summarize the compliance and provide details about the non-compliance, are identified, classified and recorded to allow an informed decision about certification or maintenance.

A result classified as non-compliance is recorded against a specific requirement and contains a clear declaration of non-compliance, which identifies in detail the objective evidence on which the non-compliance is based. The non-conformities are discussed with the client to ensure that the evidence is correct and that the non-conformities are understood. The auditor is obliged not to suggest the cause of the non-conformities or their solution.

The findings referred to the non-conformities are recorded by the verification group on the appropriate forms that the person in charge of the organization signs for acceptance. It is therefore up to the organization to fill in the fields reserved for it, proceeding in the search for the root causes of the non-conformities and proposing a plan of corrections and corrective actions for their removal. The proposed actions and the related closing times must be evaluated and accepted by the Team leader. This can be done either at the time of the final meeting or, if this is not possible, however within thirty days from the date of the verification, sending the proposals for corrective actions directly to the same Team leader.

The audit team leader must attempt to resolve any differences of opinion between the audit team and the client regarding the audit evidence or findings; unresolved issues must be recorded.

## Findings Classification

**Observations:** Identification of an opportunity regarding possible improvements to situations / activities / documents observed during the audit.

For these reasons, the organization is not required to submit a specific plan to the Team leader, but their management is then assessed in the subsequent audit (surveillance or renewal).

**Minor NC:** Lack of fulfillment of a requirement that does not affect the ability of the management system to achieve the expected results.

Detection of a "random" variance, as no other non-conformities of the same type were detected during the investigation that followed.

It requires the adoption of Corrections / Corrective Actions to be undertaken within 3 months, from their formal acceptance. The effectiveness must be verified by the Team leader during the subsequent surveillance Audit (or renewal).

**Major NC:** Detection of the "systematic failure to apply a rule of MS", or the failure to satisfy a customer's requirement (implicit or contractual) or binding, or deficiencies that raise significant doubts about the ability of the MS to achieve the expected results, or the failure to resolve deviations and / or N.C. existing.

It is mandatory to adopt Corrections / Corrective Actions to be undertaken within 3 months of their formal acceptance.

### 9.4.6 Audit Conclusions

Under the responsibility of the head of the audit team and before the closing meeting, the audit team shall:

- a) review the audit findings and any other appropriate information gathered during the audit, against audit objectives and criteria and classify non-compliance;
- b) agreeing the conclusions of the audit, taking into account the uncertainty inherent in the audit process itself;
- c) agree on any necessary subsequent action;
- d) confirm the appropriateness of the audit program or identify any changes required for future audits (for example, scope of the certification, overall time or dates of the audit, monitoring frequency, competence of the audit team).

### 9.4.7 Closing Meeting

The audit team organizes a closing meeting, in the presence of the client's management and, where appropriate, with the managers of the functions or processes audited, in which the participants are registered. The purpose of the closing meeting, led by the head of the audit team, is to present the findings of the audit, including the certification recommendation. Any non-conformities are presented in such a way that response times are understood and agreed. (see paragraph 9.4.5)

The closing meeting includes the following elements, where the degree of detail is consistent with the level of familiarity of the client with the audit process:

- a) warn the client that the audit evidence collected is based on a sample of the

- Information, thus introducing an element of uncertainty;
- b) the method and timing for drawing up the report, including any classification of the audit findings;
  - c) the certification body's process to manage non-compliance, including any consequences related to the status of the client's certification;
  - d) the timing for the client to present a plan for corrections and actions corrective for any non-compliance identified during the audit;
  - e) the post audit activities of the certification body;
  - f) information about the processing of complaints and appeals.

The audit team provides the customer with the opportunity to ask questions. Any divergent opinion about the audit findings or the findings between the audit team and the client must be discussed and resolved wherever possible. Any unresolved divergent opinions must be recorded and reported to the certification body.

#### 9.4.8 Audit Report

The audit team provides the client with a written report for each audit. The audit team can identify opportunities for improvement, but should not recommend specific solutions. The audit report remains the property of the certification body. The team leader must ensure that the audit report is drawn up and is responsible for its content. The audit report should provide an accurate, concise and clear audit record to enable an informed decision to be made about certification and should include or refer to the following:

- a) Identification of the certification body;
- b) the name and address of the customer and customer representative;
- c) the type of audit (eg initial audit, surveillance or renewal of the certification or special audits);
- d) the audit criteria;
- e) the audit objectives;
- f) the scope of the audit, in particular the identification of units
- g) organizational or functional or the processes audited and the duration of the audit;
- h) any deviation from the audit plan and the related reasons;
- i) any significant issue that impacts on the audit program;
- j) the identification of the head of the audit team, the members of the audit team and any accompanying persons;
- k) the dates and places where the audit activities were carried out (in the field / on site or off-site, permanent or temporary sites);
- l) the findings of the audit (see section 9.4.5), the reference to evidence and conclusions, consistent with the requirements of the type of audit;

- m) significant changes, if any, that affect the client's management system since the last audit took place;
- n) any unsolved appearance, if identified;
- o) where applicable, if the audit is combined, joint or integrated;
- p) A declaration of disclaimer that indicates that the audit activity is based on a process of sampling the information available;
- q) recommendations from the audit team;
- r) that the customer subjected to audit is effectively monitoring
- s) the use of documents and certification marks, if applicable;
- t) the verification of the effectiveness of the corrective actions taken, with reference to the non previously identified compliance, if applicable.

The report must also contain:

- a) a statement on the compliance and effectiveness of the management system together with a summary of the evidence relating to:
  - the capacity of the management system to meet the applicable requirements and achieve the expected outcomes;
  - the overall internal audit and management review process;
- b) a conclusion about the adequacy of the scope of certification;
- c) confirmation that the audit objectives have been met.

#### 9.4.9 Analysis of the causes of non-conformities


The Client must analyze the causes and describe the corrections and the specific corrective actions adopted or planned to eliminate, within a pre-established time, the non-conformities detected (see point 9.4.5)

#### 9.4.10 Effectiveness of corrections and corrective actions

The CB must review the corrections, the identified causes and the corrective actions proposed by the client to determine if these are acceptable. The certification body verifies the effectiveness of each correction and corrective action adopted. The customer is informed of the result of the review and verification. The client is informed if a complete additional audit is required, a limited additional audit, or documented evidence (to be confirmed during subsequent audits) to verify the effectiveness of the correction and corrective actions (see paragraph 9.4.5)

Note: The verification of the effectiveness of the correction and of the corrective action can be carried out on the basis of a review of the documented information provided by the client or, where necessary, through a verification on site. This activity is generally performed by a member of the audit team.



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**Note:** in that case also the IAF MD22 is taken in consideration.

## 9.5 Certification Decisions

### 9.5.1 General

The regulation, REG:002, establishes the procedures followed by the SDMCERT for the establishment and definition of tasks and operating procedures of the Technical Committee (CT), a body that works with the task of reviewing and deciding, as part of the Certification scheme: ISO 9001: 2015, 14001: 2015, 45001: 2018

Technical Committee for Certification takes a decision to issue certification, extend or reduce the scope of certification, renewal, suspension or restoration, or withdrawal of certification.

SDMCERT ensures that the persons or committees making decisions concerning the issue or refusal of certification, the extension or reduction of the scope of certification, the suspension or restoration of certification, the withdrawal or the renewal of the certification, are different from those that performed the audits. The single person(s) in charge of taking the certification decision must have appropriate competences.

The list of qualified names to participate in the Technical Committee is periodically submitted to the evaluation of the Management.

### 9.5.2 Actions prior to the decision


Technical Committee for Certification review the documentation before making a decision to issue certification, extend or reduce the scope of certification, renewal, suspension or restoration, or revoke certification, taking into account that:

- a) the information provided by the audit team is sufficient in relation to the requirements and the scope of the certification;
- b) the body has reviewed, accepted and verified the effectiveness of corrections and corrective actions for any major non-compliance
- c) the body has reviewed and accepted the plan of corrections and corrective actions of the customer for any minor non-conformity

### 9.5.3 Information for issuing the Initial Certification

The information provided by the audit team to the CB for deciding on certification includes, at a minimum:

- a) audit reports;
- b) comments regarding non-compliance and, where applicable, corrections and corrective actions taken by the customer;
- c) confirmation of the information provided to the certification body used in the review of the application;
- d) confirmation that the audit objectives have been achieved;

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- e) a recommendation whether or not to issue the certification, including the related conditions or observations.

If the CB is unable to verify the implementation of corrections and corrective actions related to any major non-compliance, within 6 months after the last day of the stage-2, the certification body conducts another stage -2 before recommending the certification issue.

### *TRANSFER AUDIT*


SDMCERT can issue its own certificate, without going through the whole certification process described, based on the recognition of an existing and valid certificate, not suspended or withdrawn, issued by another certification body accredited by an entity which signs mutual recognition agreements (MLA ) For the purpose of the transfer, SDMCERT carries out a preliminary review (pre-transfer review) of the certification of the potential client to verify that sufficient evidence exists to allow such transfer, and then examines:

- a) That the activities under certification fall within the activities for which SDMCERT is accredited
- b) The reasons for which the transfer is requested
- c) The validity of the accredited certificate in terms of authenticity, duration and activities covered by the certification
- d) The sectors and schemes covered by the accreditation of the entity that issued the certificate to be transferred
- e) The situation of the latest audit reports and the status of any non-compliance
- f) Any other available document (checklist, reports etc.)
- g) The complaints received and the actions taken
- h) The point at which the potential customer is within the validity cycle of the certificate
- i) The absence of disputes with the control bodies.

In addition to document review, SDMCERT make a real transfer-audit at the customers' premises, in the following cases:

- If there are other critical points still unresolved
- In case the certification, recertification or previous surveillance reports are not available
- In the event that the deadline for carrying out the surveillance audit has expired.

Following the positive outcome of the pre-transfer review activities and the possible transfer audit, the certificate is issued through the normal decision-making phases. The date of issue is that of the resolution of the Technical Committee. The three-year expiry of the transferred certificate remains unaffected.

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Note1: In the event that the transfer of the certificate is requested close and before the expiry of the certificate to be transferred, if the pre-transfer review is successful SDMCERT proceeds without issuing the certificate transferred directly to the renewal activities.

Note 2 : all the activities related to the transfer procedures are subject to compliance with the requirements established by the IAF MD 2 .

### Remote Audit

In case of extraordinary events (according to IAF ID 3) SDMCERT performs Remote certification-surveillance-renewal audits according to IAF MD 4, IAF ID 12, ISO 17021-1, ISO 19011 and what is reported in the following procedure. Audit times comply with IAF MD 5.

The remote audit is performed with:

- request by e-mail to the Customer for all the System documentation (Manual, procedures, forms), operational documentation of the activity carried out and mandatory documentation.
- A meeting is scheduled for the days of the audit; through teleconferencing services, including audio, video and data sharing through SKY or Whats App to analyze and discuss all the documentation provided by the customer.

The security and confidentiality of electronic or electronically transmitted data will be protected according to Reg. (EU) 679/16.

#### 9.5.4 Information for the issue of renewal of certification

The CB takes the decisions regarding the renewal of the certification on the basis of the results of the certification renewal audit, as well as the results of the system review over the certification period and of the complaints received from users of the certification.


## 9.6 Maintenance of certification

### 9.6.1 General

The certification body must maintain the certification based on the demonstration that the customer continues to comply with the requirements of the management system standard. The certification of a client can be maintained on the basis of a positive conclusion by the head of the audit team, without further reviews and independent decisions, provided that:

- a) for any major non-conformity or other situation that could lead to the suspension or revocation of the certification, the certification body has a system that requires the audit team manager to report to the body the need to start a review from part of the competent staff (see section 7.2.8), different from the one that carried out the audit, to establish whether the certification can be maintained;
- b) Competent staff of the certification body monitors its surveillance activities, including monitoring reports received from its auditors, to confirm that certification activities are effective.

### 9.6.2 Surveillance

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The validity of the certificate, within the three-year cycle, is subject to the positive outcome of the periodic maintenance audits performed by SDMCERT.

The audits are carried out at the site(s) of the organization in accordance with the audit program defined in the contract and reviewed by the Auditor during the audit, to ensure that the functions and representative areas within the scope of the system certified management are assessed at least once during the period of validity of the certification.

The surveillance audits, announced by SDMCERT in advance of at least 30 days, are carried out once for each calendar year. The first audit after initial certification must be performed within twelve months from the date of the certificate's decision. Subsequent audits must respect the 12-month interval (with a tolerance of three months) from the previous audit, consistent with the seasonality (for some sectors) and with respect to the calendar year.

Only situations of exceptional gravity or force majeure (for which see the document IAF ID3: 2011) may allow exceptions, to be requested in writing to SDMCERT. The tolerances applied do not change the frequency of subsequent audits, which must comply with the original audit program.

Other surveillance activities may include:

- a) investigations by the certification body on the certified client relating to certification aspects;
- b) review of every declaration of the certified client, with respect to their activities (for example promotional material, website);
- c) requests to the client certified to provide documented information (on paper or electronic means);
- d) other means of monitoring the performance of the certified client.


#### Surveillance Audit

Surveillance audits are on site audits, but they are not necessarily audits of the entire system and must be planned in conjunction with other surveillance activities, so that the certification body can continue to trust that the client's certified management system continue to comply with the requirements during the period between the certification renewal audits.

In surveillance audits, it is verified that the management system is effectively implemented also in the presence of any changes, and able to achieve the results expected by the organization in its management system.

At least the following points are verified in each audit:

- Every kind of change occurred;
- Use of the logo, certificate and references to certification;
- Management of complaints;
- The improvement and progress of activities planned to achieve the objectives set;
- The closure of the internal audit findings;
- Internal audits and management review of the system
- The closure of the Non-Conformities detected in the previous audit by SDMCERT

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The documentation relating to the surveillance audits is drafted by the Team leader as for the Stage 2 audit and similarly, any findings (non-compliance and / or observations) must be managed by the organization. In the event of serious and systematic shortcomings, the Team leader may request the suspension of the certificate or an additional audit.

Similarly, the Technical Committee of SDMCERT can approve the recommendation of the Team leader for the maintenance of certification or request further information or have additional verification activities communicating it to the certified organization.

In the case of "major" non-compliance, which have not been closed within the established deadlines (3 months), the Committee assesses the adoption of the suspension of the certificate.

In the three-year certification period SDMCERT can also activate towards the certified customer:

- Investigation of aspects related to the certification itself
- Review of customer statements about their activities (ex: on promotional material, website etc ...)
- Requests to provide documented information
- Other customer performance monitoring activities

SDMCERT can **reduce the scope of a certificate** to exclude those parts / areas that are not compliant, if the organization has seriously and persistently failed to keep them compliant with the certification requirements. The reduction must be in line with the requirements of the certification scheme in question.

### 9.6.3 Renewal of the certification

#### Planning of the certification renewal audit

The purpose of the certification renewal audit is to confirm the continued compliance and effectiveness of the management system as a whole, as well as its continued relevance and applicability to the scope of certification. A certification renewal audit is planned and conducted to assess the continued satisfaction of all requirements of the relevant management system standard or other normative document. This is planned and conducted over time due to the purpose of preparing the renewal before the expiry date of the certificate.

The certification renewal activity includes the review of the audit reports of the previous surveillances and considers the performance of the management system along the most recent certification cycle.

Certification renewal audit activities may require a stage 1 audit if significant changes have occurred in the management system, organization or context in which the management system operates (for example changes in legislation).

#### Renewal audit

The certification renewal audit includes an audit in the field that establishes the following:

- the effectiveness of the management system, in light of internal and external changes, and its continued relevance and applicability to the scope of certification;

- the commitment shown to maintain the effectiveness and improvement of the management system, in order to strengthen its overall performance;
- the effectiveness of the management system in relation to the achievement of the client's objectives and the expected results of the respective management system(s).

SDMCERT defines time limits for corrections and corrective actions related to any major non-conformance. These actions must be implemented and verified before the certification expires.

When the certification renewal activities are successfully completed before the expiry date of the existing certification, the expiration date of the new certification is based on the expiry date of the previous certification. The date of issue of a new certificate is corresponding to or subsequent to the certification decision.

If SDMCERT has not completed the certification renewal audit or is unable to verify the implementation of corrections and corrective actions related to any major non-compliance, before the certification expiration date, then the renewal of the certification is not approved and the validity of the certification is not extended. The customer must be informed and its consequences must be explained.

Following the expiry of the certification, SDMCERT can restore it within 6 months, provided that the pending certification renewal activities have already been completed, otherwise at least one stage 2 is carried out. The effective date on the certificate must correspond or be later than decision to renew the certification and the expiry date must be based on the previous certification cycle.

#### 9.6.4 Special Audits

##### Extension of the scope

SDMCERT, in response to an application to extend the scope of a certification already issued, undertakes a review of the application and establishes the audit activities necessary to decide whether or not the extension can be granted. These activities can be carried out together with a surveillance audit.

##### Audit with short notice

It may be necessary for SDMCERT to conduct audits on short notice or without notice, on certified customers, to investigate complaints or in response to changes or as a consequent action against customers who have been suspended certification.

In those cases:

- a) the certification body describes and makes known in advance to the certified customers the conditions under which such audits are conducted;
- b) the certification body pays particular attention to the designation of the audit team due to the client's lack of ability to challenge members of the audit team.

#### 9.6.5 Suspension, withdrawal or reduction of the scope of the certification

SDMCERT provides for the suspension, withdrawal or reduction of the scope of the certification and specifies the consequent actions that it intends to adopt in such cases.

SDMCERT must suspend certification in cases where, for example:

- the client's certified management system has persistently or severely failed to comply with the certification requirements, including the requirements relating to the effectiveness of the management system;
- the certified customer does not allow the surveillance audits or the renewal of the certification to be carried out at the requested frequency;
- the certified client voluntarily requested the suspension.

In case of suspension, the certification of the customer management system is temporarily invalidated.

SDMCERT must restore the suspended certification if the issue that led to the suspension has been resolved. Failure to resolve the issues that led to the suspension, in a time established by the certification body, involves the withdrawal or reduction of the scope of the certification itself.

Note: In most cases, the suspension does not exceed six months.

SDMCERT must reduce the scope of client certification to exclude parts that do not meet the requirements if the customer has persistently or severely failed to comply with the certification requirements for those parts of the scope of the certificate. This reduction is in line with the requirements of the standard used for certification.

SDMCERT has drafted the procedure **PRO 005 Conduction of Certification, Surveillance and Recertification Audit**.

**Note:** in that case also the IAF MD22 is taken in consideration.

## 9.7 Appeals

### Preliminary investigation


All appeals that come to SDMCERT, whose reception will be communicated to the customer within 3 days, without any discrimination, are examined and managed by SDMCERT itself, which is solely responsible for the decisions made in this regard.

The appeals, relating to decisions taken within the scope of the Certifications and Inspections carried out by the SDMCERT must be presented in writing with all the available and relevant documentation within a maximum of 30 days from the decision itself or from when it has been communicated to the interested parties.

If there are well-founded complaints or reports from third parties that call into question proceedings for non-compliance with applicable requirements and of this regulation, SDMCERT will also proceed to examine them in ways similar to those provided for appeals by the direct interested.

The Technical Manager (or his delegate), following the presentation of the appeal, ascertains its possible direct involvement in the activities object of the appeal and in the positive case instructs an independent and qualified person for the management of the same.

If not, the Technical Manager directly conducts an analysis of the appeal through all the available documentation and the consultation of the functions involved. In the case he considers the appeal to be founded and admissible, he shall inform the applicant and initiate the appropriate corrective actions.

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Otherwise, inform the applicant in writing of the reasons why the appeal is not acceptable. This phase must be completed by communicating the outcome to the appellant within 30 days.

The costs incurred by SDMCERT for the necessary additional assessments are to be borne by the interested parties involved, except in cases where the appeal is well founded.

SDMCERT has drafted the procedure: **PRO:006 Complaints, Appeals and Disputes**

## 9.8 Complaints

All complaints received by the Management of SDMCERT, without any discrimination, are examined and managed.

The Management of SDMCERT is solely responsible for the decisions taken regarding the complaints received. In the event of verbal or telephone reports, anyone who receives such a complaint must ask the complainant for a written definition of the same.

The Complainant can take advantage of the special "complaints and appeals" window on the website [www.sdmcert.com](http://www.sdmcert.com) in order to expose his dissatisfaction.

The complaint is managed through the appropriate Complaints and Appeals form, so that it is recorded, communicated and that it is then always traceable. The closing time of the same is a regularly monitored indicator.

The initiation of the investigation lies with the Technical Manager (or his delegate) who is obliged to entrust the case to another person in the event that he / she should be directly involved in the complaint.

The management of the complaint involves:

- The receipt of the complaint / appeal will be communicated to the customer within 3 days.
- The decision to accept the complaint within 30 days of receipt;
- At the end of the management of the complaint: communication of the outcome to the complainant, with information on the actions chosen and the time necessary to complete them.

All complaints aimed at questioning the impartiality of the judgment of the Body and its management are subject to scrutiny by the management of SDMCERT.

The corrective actions to be taken following a complaint or a warning must be started promptly, and their effectiveness checked, before closing the complaint.


Periodically, the number of any complaints, together with the indication of the time taken to manage them, are verified by the SDMCERT and analyzed annually during the management review.

SDMCERT has drafted the procedure: **PRO:006 Complaints, Appeals and Disputes**

## 9.9 Customer Related Recordings

SDMCERT maintains records of audit activities and other certification activities for all customers, including all organizations that have applied and all organizations audited, certified or certified



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suspended or withdrawn.

The registrations related to certified customers include the following:

- a) information about the initial application and audit reports, surveillance and renewal of the certification;
- b) the certification contract;
- c) the motivation for choosing the methodology used for site sampling, if appropriate;
- d) the motivation regarding the definition of the total time allocated to the auditors;
- e) verification of corrections and corrective actions;
- f) records of complaints and appeals and of any correction or corrective action result;
- g) documentation relating to certification decisions;
- h) certification documents, including the scope of certification
- i) referred, as applicable, to the product, process or service;
- j) the related records, necessary to build the credibility of the certification, such as the evidence of the competence of the auditors and technical experts;
- k) audit programs.

SDMCERT securely keeps records of applicants and customers in order to ensure that information is kept confidential. The records are transported, transmitted or transferred, in such a way as to guarantee the maintenance of confidentiality.

SDMCERT has a documented policy and documented procedures for record keeping. Registrations of certified customers and previously certified customers are retained for the duration of the current cycle, plus an entire certification cycle.

## 10. REQUIREMENTS RELATING TO THE MANAGEMENT SYSTEM OF CERTIFICATION BODIES

### 10.1 Options


SDMCERT has set up and developed, keeping it active, a management system that is able to achieve the consistent satisfaction of the requirements of this international standard UNI CEI EN ISO / IEC 17021-1:2015, in compliance with **Option A**.

### 10.2 Option A: Requirements for a generic management system

#### 10.2.1 General

The management system of the certification body deals with the following:

- General documentation of the management system (manual, policies, definition of responsibility ...);
- Control of documentation;
- Control of Recordings;
- Management review;
- Internal audits

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- Corrective actions;

The main responsibility of the Management is therefore to ensure that the entire organization pays attention **to the requirements that must be possessed by the Notified Bodies, as prescribed internationally and nationally by the competent Bodies and Authorities**, ensuring that these are satisfied.

Planning is generally developed through the development of documents that show the operating procedures necessary to ensure:

- The achievement of the objectives of the Management and the implementation of the Policy;
- Identification of appropriate controls;
- Registration of all activities performed.
- 


Per For each activity, operational and control procedures are defined that are based on:

- Identification of responsibilities;
- Well-defined control methods;
- Acceptance criteria for results;

SDMCERT manages these processes according to the reference standard.

The main processes are as follows:

- Activities of the General Management
- Roles, Resources, Skills
- Certification Agreement Process (Certification Applications and Contracts)
- Management System Certification Process
- Analysis of the Risk
- Process Complaints, Appeals, Disputes
- Internal Audit Process
- Non-Conformance Process, Corrective Actions
- Documentation and Registration Management Process

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## ***Statement of Management Commitment and Company Policy***

### **Statement of commitment by the Management**

For all activities and operating units, the Management of SDMCERT identifies the following:

#### **Mission**

***carry out the evaluation and certification of Management Systems adopted by the Organizations in compliance with the standards taken as reference, and in compliance with the requirements of ISO / IEC 17021-1.***

This is the common goal toward which turns the commitment of all employees, each with their specific nature of their role.

In order to direct the entire structure to the realization of the mission, within the framework of a highly competitive global market, the Management is committed to ensuring the availability of resources necessary to develop and implement an effective Management System, communicating within the importance to comply:

- Requirements that must be possessed by the Certification Bodies, as prescribed internationally and nationally by the competent Bodies and Authorities.
- applicable statutory and regulatory requirements

Defining objectives, reviewing the system to implement corrective actions.

### **Declaration on the principles and the impartiality of the certification**

#### **IMPARTIALITY**


For the senior management of SDMCERT it is necessary to be impartial and to be perceived as such.

It is essential to obtain and maintain confidence that SDMCERT's proposals regarding decisions are based on the objective evidence of compliance (or non-compliance) obtained and that they are not influenced by other interests or other stakeholders.

Among the threats to impartiality are the following:

- Threats deriving from its own interests: threats that come from a person who acts in his own interest. A concern related to certification activity, as a threat to impartiality, is constituted by its own financial interest;
- Threats deriving from self-evaluation: threats coming from a person who reviews his work. Carrying out the certification activity to the customer, also providing consulting services relating to the design, manufacture, installation, distribution of the certified product, is considered a threat of self-evaluation;
- Threats arising from familiarity (or trust): threats that come from a person who is too familiar or overly relies on another person, instead of seeking evidence in the certification activity;
- Threats arising from intimidation: threats that come from a person who has the perception of being the object of coercion, open or hidden, like the threat of being replaced or reported to a boss.

The Management of SDMCERT ensures that its behavior is impartial through:

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- access to certification by the applicants without any limitation or prejudice (excluding the organizations that are undergoing judicial proceedings for product liability or who are not in the free exercise of their rights, for example because in a state of liquidation, bankruptcy, or following an ascertained and unacceptable condition of threat to the impartiality of SDMCERT);
- preparation of a Tariff indicating the criteria for the formulation of offers referring to the applicable IAF documents, as well as the methods for calculating expenses, etc.

## **TRANSPARENCY**

SDMCERT ensure public access, or disclose in right way, appropriate and timely information about its audit and certification processes, and on the status of certification (for example, the issue, extension, maintenance, renewal, suspension, reduction of the scope or withdrawal of certification) of all organizations, in order to increase confidence about the integrity and credibility of the certification itself.

Transparency is a basic principle to allow access, or to disseminate, appropriate information. To enhance or maintain confidence in certification, SDMCERT allows access in appropriate ways, or discloses, to specific interested parties, non-confidential information related to the conclusion of particular audits (eg audit in response to complaints).

## **RESPONSIBILITY**

It is the client organization, not the SDMCERT, which is responsible for compliance with the certification requirements. SDMCERT is responsible for assessing sufficient objective evidence on which to propose the certification decision. Based on the conclusions of the audit, SDMCERT proposes to its Organizing Body the decision to issue the certification, if there is sufficient evidence of compliance, or not to release it, if there is no such evidence.

## **COMPETENCY**

To issue a certification that conveys trust, the competence of the personnel is required (demonstrated ability to apply knowledge and skills), supported by the management system of SDMCERT.

SDMCERT ensures the use of auditors and technical experts proficient for the conduct of certification activities by applicants

## **CONFIDENTIALITY**


SDMCERT maintains confidential any information owned by the customer in accordance with the provisions of their confidentiality procedures.

## **MANAGEMENT OF THE IMPARTIALITY**

### **PUBLICITY OF ACTIVITIES**

The certification activities of SDMCERT are not advertised or offered in connection with the activities of an organization that provides consulting services on management systems.

SDMCERT adopts measures to correct inappropriate claims from any consulting organization that declares, or implies, that certification would be simpler, easier, quicker or less expensive, if required to SDMCERT itself. SDMCERT does not state or imply that certification would be simpler, easier, quicker or

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less expensive, if a particular advisory organization were employed.

#### **PROHIBITED ACTIVITIES**

SDMCERT does not certify another Certification Body for its management system certification activities.

SDMCERT does not offer or provide consulting services related to management systems. SDMCERT does not offer or provide internal audit services to its certified customers.

SDMCERT does not certify the management system of a customer who has received consulting services for the management system or for internal audits, if the relationship between the consultancy organization and SDMCERT constitutes an unacceptable threat to the impartiality of SDMCERT itself.

SDMCERT does not certify a management system, for which it has provided internal audit services, before two years from the conclusion of the audits themselves.

SDMCERT does not outsource audit activities to a management system consultancy organization, as this fact constitutes an unacceptable threat to impartiality.

#### **CONFLICT OF INTEREST**

To ensure that there is no conflict of interests, staff who has worked as a consultant on customer management system in question, including the one that operates at management level, is not employed by SDMCERT in audit or other certification activities, in the two years following the end of the consultancy service.

In the event that a report constitutes an unacceptable threat to impartiality (for example, the risk of an inspector who is part of a consulting company that also includes the consultant who helped the company to be inspected) the certification will not be released.

SDMCERT takes measures to respond to any threat to its impartiality resulting from the actions of other persons, organizations or organizations.

All SDMCERT personnel, both internal and external, or committees, which may have influence on certification activities, must act impartially and do not allow commercial, financial or other pressures to compromise their impartiality.

### 10.2.2 Management System Manual

The Manual is the internal guideline for transmitting at all levels the policy adopted by the Management, the organizational information and the management and operational criteria adopted. It also has the important function of demonstrating to the customers and the Supervisory Authorities the ability of the Body to comply with the applicable requirements. This "Management System Manual" is the top document of the documentation in question. It defines and documents, first of all, the policy that the Organization intends to implement and the objectives it intends to pursue through the implementation of the management system.

It then shows, in addition to the brief introductory description of the organization and functioning of the Body:


- ✓ Standard ISO / IEC 17021-1.15, Regulations and prescriptions SNAS (from which SDMCERT will be accredited as a Certification Body for management systems) a concise description of the procedures and resources put in place to ensure compliance with the applicable requirements (of a managerial and technical nature), with reference, for details, to the supporting documentation (if any);
- ✓ The necessary references to supporting documentation (Regulations, management or system procedures, technical procedures, instructions, forms, etc.).

### 10.2.3 Control of Documentation

We have structured the documentation of the Management System according to a pyramid scheme in which, as we move towards operations, the documents contain more detailed indications. The documentation is shown in the form ALL: 002/1 (List of Management System Documentation)

The documentation of the management system of the SDMCERT is divided into two basic categories of documents:

- Descriptive / prescriptive documents that describe the organization and regulate the functioning of the Body, in terms of primary and support processes, including:
  - Documents of internal origin (Manual, Regulations, Management Procedures and Technical Procedures (operational), instructions, checklists, blank forms, job description, organization chart, other supporting documents);
  - Documents of external origin (cogent Technical Rules, voluntary technical standards, draft standards, prescriptions of accreditation bodies, technical documentation related to certified and inspected products sourced from customers, manuals for use and maintenance of equipment and tools, software packages, etc.).
- registration documents that photograph, at a given moment, the functioning status of the Body and the "results" of the processes, also of internal and external origin.

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For both the aforementioned types, the Body has set up a management procedure to control the entire life cycle of the document **PRO 002 Documentation And Records Management**.

Descriptive / prescriptive documentation

### Regulations (RG)

It Includes:

- REG 001 Certification Regulation;
- REG 002 Regulation for Technical Committee for Certification;
- REG 003 Regulation for the Use of Logo and Certificate
- REG 004 Regulation for the certification of the system of quality management - specific requirements for EA Sector 28
- REG 005 Rules of the Committee for the Protection of Impartiality and Reservation

### Management Procedures (PRO)

The management procedures (system) deepen, in detail, the compliance with the general requirements, both management and technical. The management procedures envisaged in the IMS of SDMCERT are shown in the form ALL: 002/1 Documentation List. The Risk Analysis Document is also part of the general documentation of the system.

### Technical Procedures (Operational Procedures and Instructions, PRO - IST)

The operating procedures and instructions describe the responsibilities and operating procedures for the execution of certification and inspection processes (primary processes), acting as guidelines for the functions involved.

The operating procedures and instructions provided in the SDMCERT management system are shown on the form ALL: 002/1 Documentation List.


### Forms (MOD)

It consists of documents supporting procedures (both managerial and operational) to be filled in with data and input or output information for processes. Blank Forms are descriptive / prescriptive documents. The completed forms constitute registration documents. The main modules used in the Body are listed in the ALL: 002/1 Documentation List.

### Registration documents

I SDMCERT registration documents are written with the use of the aforementioned forms and include:

- Management records, such as: internal audit reports, management review reports, corrective action reports, complaints management reports, re-examination of requests / offers / contracts, supplier assessment records, personnel records , etc..
- Technical recordings, such as: attestations and certificates of management system certification, inspection reports, etc..

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The procedures for checking the descriptive / prescriptive documents of the management system of SDMCERT (of origin, both internal and external) are defined in detail in the specific Management Procedure **PRO 002 Documentation And Records Management"**.

This documentation can be on paper or electronic support.

#### Documents of Internal Origin

This documentation includes: the Management System Manual for the Management System Certification Body, the management procedures, operating procedures, instructions, blank forms, organization charts, job descriptions and other supporting documents. These documents are identified unambiguously, by indicating the date of issue, the revised letter, the page number, the total number of pages (or equivalent indication of end of document) and the references of the authority responsible for issuing (signatures).

All documentation issued is reviewed and approved by authorized personnel, prior to issuance or implementation. A list is made available and easily accessible to identify and highlight the revision and distribution status of the documentation and to prevent the use of invalid or obsolete documents.

The procedure for the control of the documentation also ensures that:

- The authorized editions of the documents are available at each location relevant for the proper functioning of the Body;
- The documents are periodically reviewed and revised if necessary to ensure continuity of their adequacy and compliance with the applicable requirements (preferably on an annual basis);
- Invalid documents or exceeded are eliminated or made unusable. This task belongs to the Head of the Certification Body Management System.
- Obsolete documents, kept in compliance with legal provisions or historical records, are appropriately marked (by means of "stamp", if they are paper documents, or deposited in special folders if in electronic form).

The changes to the documentation (revisions) are made in ways similar to those followed for the first issue, unless otherwise specified, until the formal reissue of the document.


The personnel in charge of the modifications have access to all information relevant to the review and changes. The use of documents with provisional changes is not permitted.

#### Documents of External Origin

Cogent regulations (Directives, Laws, Decrees) and voluntary technical standards

The Manager of the Management System and the Technical Manager are responsible for managing the procurement, archiving, distribution and updating of laws, mandatory and voluntary standards, and any other requirements applicable to the activities carried out by the Body, with the support from the Technical-Commercial Office that provides for their controlled distribution and



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storage.

Requirements for Accreditation Bodies, Regulatory Authorities and similar

These documents (eg Regulations of the Accreditation Body) are acquired by the Body through consultation of the websites of the subjects emanating and managed with criteria similar to those applicable to the standards mentioned above.

Documents from Customers

The documents received from customers and relevant for the purposes of carrying out the conformity assessment activities are managed directly by the Technical-Commercial and made available to inspection staff under authorization for all the necessary controls.

Documents from Suppliers

They are archived and distributed with criteria similar to those adopted for descriptive / prescriptive documents of internal origin.

The management of the software used in the company information system is entrusted to an external consultant. This consultant is also entrusted with the administration of the pertinent software and related documents for the user, both original and specifically developed.

Other documentation from suppliers, with the nature of registration (offers, order confirmations, etc.) is managed as part of the procurement process.

Confidentiality of information

In order to guarantee the protection of the confidentiality of the information obtained during the certification activities, we have set up internal provisions in compliance with the laws in force.


The above information is not disclosed to third parties without the consent of the interested party, unless required by law; in cases where the law requires that such information be disclosed to third parties, we communicate this situation to the interested party.

#### 10.2.4 Control of Recordings

Through the appropriate management procedure **PRO 002 Documentation And Records Management** SDMCERT takes care of the identification, collection, indexing, archiving and deletion of all registration documents, ensuring readability, easy consultation and adequate archiving in order to avoid damage, loss of data and tampering, and defining likewise the related responsibilities, as well as ensuring their timely availability and the clear correlation with the conformity assessment activities or other management activities to which they relate.

The registration documents are kept in original for the period of time established by the Body. This period is at least equal to that defined by the legislation, where applicable and existing. In any case, for the records related to the conformity assessment activities, the Body always provides for consulting the client and adapting the retention period to any needs of the same.

The registration documents can be either in paper form (gathered in special files) or in electronic

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form (folders). The registration management procedure also covers aspects related to protection and storage of data stored in electronic form. The computer recordings are in fact protected, as regards the loss of data or unauthorized changes, by the execution of back-up copies automatically and by means of an access password. Back-up copies are kept in place from the server's location. Data management and integrity is described in the GDPR 2016/679 document. The recordings are accessible both in electronic and paper format only to authorized personnel.

#### List of registration documents and retention times

As already mentioned, the registration documents of SDMCERT essentially consist of the forms reported in the Documentation List: ALL: 002/1.

With regard to storage times, the following is considered:

- The records related to the conformity assessment processes (certification activities) are kept for at least 10 years;
- The records relating to the other processes of the management system (eg Training Plan, Monitoring Schedules ...) are kept for at least 10 years.

All registrations pertaining to the Body are completed at the time the activity is carried out and contain all the references necessary to link them to the specific transaction, as better specified in the relative Procedure.

#### Corrections and / or changes

Any corrections made to the recording papers (especially the working documents) will never result in the cancellation of the modified data but simply an indication of the new value next to the object of correction and are initialed by the operator who carries them out. If space allows it, note the motivation of the correction.


With regard to the recordings compiled with video-writing programs or spreadsheets, typically Word and Excel, the personnel who prepare them perform a check on the printed copies that are also submitted to the approval of the competent function.

In the event of errors being detected, either by the editor, or by the pre-set check function, the correct copy is used as a "bad copy" to correct the computer document, which after printing and final inspection, can be officially issued.

#### 10.2.5 Management Review

The Management of SDMCERT provides, periodically and according to pre-established programs and criteria, to carry out a complete review of the management system and conformity assessment activities carried out by the Body.

The members of the Management and the personnel with responsibilities, both of a specific type and of a general nature, with regard to the implementation of the system and management of the related processes and resources, are involved in the review process. Also involved in this process

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is the Manager of the Management System who is responsible for organizing the review, ensuring that this is carried out in a systematic manner, according to established criteria and that the results of the review are recorded. He must also verify the correct and timely implementation of the actions established following the review.

The review of the management system is carried out in order to guarantee its continuous suitability, adequacy and effectiveness, including the established policies and objectives related to the satisfaction of the ISO 17021-1:15 standard.

The review is carried out at least once a year but some classic themes of the review are also dealt with during the periodic meetings of the Management.

The review carried out by SDMCERT takes into consideration, among others, the following aspects which constitute the entry elements for the review:


- internal and external audit results;
- feedbacks from customers and interested parties;
- preservation of impartiality;
- status of corrective actions;
- status of actions to deal with risks;
- actions subsequent to previous management reviews;
- achievement of the objectives;
- changes that could affect the management system;
- appeals and complaints.

The Management Review is carried out with a specific meeting on the basis of a formal agenda including the points highlighted above and the points of the standard, ISO 17021-1: 15. The meeting is attended by the Management, the Technical Manager of the Body and other managerial staff involved, and the Manager of the Management System who also acts as Secretary of the meeting.

The review must lead to clear conclusions and corresponding resolutions that constitute the "outgoing items" of the review. These elements include:

- the improvement of the effectiveness of the management system and its processes;
- the improvement of certification services related to compliance with this part of ISO / IEC 17021-1:15;
- the need for resources;
- the revisions of the organization's policy and objectives.

The results of the review are recorded in a special review report MR:001 which reports the decisions taken with reference to the adaptation / improvement / development actions to be undertaken and related responsibilities and implementation times and prepared and filed by the

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manager of the management system and approved by the Top Management.

The Body uses the aforementioned results as important input data for planning the activities of the following year ("budget"). The Management has the task of ensuring that all the actions envisaged are carried out according to the established procedures and times.

#### 10.2.6 Internal Audit

SDMCERT performs, with appropriate timing and programs, plans and procedures, internal audits to ascertain that the functioning of the Body is constantly in compliance with the applicable requirements of the ISO 17021-1:15 standard and that the management system is effectively implemented and kept active. The general criteria for conducting internal audits are referred to below, also referred to in the Procedure **PRO 007 "Internal Audit"**

The cycle of internal audits is completed as part of an annual program. This program is defined during the management review and constitutes the "annual program of internal audits". It is designed to take into consideration all the relevant elements of the service provided by the Body (areas, processes, resources), including, in particular, the specific aspects of technical competence.

It is generally divided into several interventions distributed during the year for each of which the objectives and general criteria applicable and the dates of implementation are defined. Each intervention is the subject of an "Audit Inspection Plan", also approved by the Management.

The audits are carried out under the coordination of the Management System Manager who has the task of planning and organizing the audits and choosing trained and qualified personnel, not directly involved in the activities subject to verification. The Manager can be directly part of the inspection team, as Group Manager. This function can also be entrusted to a competent and qualified external person who is not conditioned by hierarchical or functional constraints and offers, as such, guarantees of independence and impartiality..


The single inspection is carried out in compliance with the general principles of the ISO 19011 standard and is divided into the following main phases:

- Planning;
- Implementation of the audit;
- Documentation of the results;
- Follow-up

In the planning / preparation phase, the objectives of the verification are defined (locations and areas, organizational units, processes and activities subject to verification, time period), the verification criteria are confirmed (set of rules, requirements and requirements with respect to which the collected evidence are compared) and the composition of the assessment group is defined.

The implementation of the audit is divided into two types of interventions:

- "horizontal" type interventions; they are intended to evaluate, in a complete and in-depth manner, one or more elements of the management system that invest the activities of the Body in

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their area and which are governed by the requirements defined in specific management procedures or in the Sections of this Manual (es the qualification of the personnel, the certification procedures, etc.). These audits are carried out with particular reference to the registration documents and interviews with the staff.

- "vertical" interventions; are intended to evaluate the specific technical competence in the execution of a certain conformity assessment activity. With regard to certification activities, one or more representative procedures are selected among those applied by the Body and the correct execution of the activities is verified, through practical demonstration. Every aspect connected with the selected activities is checked, including: the management of the objects under evaluation, the personnel assigned, the application of the procedure, the environmental conditions, the registration of the results, the drafting of the evaluation report, the certificate issuance investigation, etc., both with reference to the applicable registration documents, and above all on the basis of direct observations.

For the above activities, standardized forms are used ("feedback lists") in which are listed the elements and requirements of the management system to be assessed while the non-conformities found will be highlighted.

The documentation phase consists in the compilation of the inspection report in which:

- the name(s) of the evaluator(s) and the date (or period) of the audit are shown;
- the areas of activities / processes subject to verification are described;
- the findings (summaries, observations, non-conformities) are summarized and commented;
- the agreed treatments and corrective actions are described or the request for the implementation of these measures are reported;
- an overall opinion is expressed on the outcome of the audit, including identification of opportunities for improvement.

The follow-up phase includes the verification of the definition of the treatments and corrective actions (if not already defined during the verification), of the correct fulfillment of these obligations, as well as the verification of their effectiveness (which may require the execution of ad hoc additional audits).


A copy of the internal inspection report is given to the person in charge of the function / s involved. The Management System Manager must ensure that the audit report is brought to the attention of the Director.

The results of internal audits are analyzed during the Management Review.

§§§

We have structured the **service measurement system** by setting:

- An internal evaluation of the service, through the verification of the professional services offered and of the service implementation process by personnel;

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The internal evaluation is essentially aimed at evaluating the characteristics of the service before it is delivered to the client.

Abbiamo impostato la valutazione delle caratteristiche del servizio considerando:

- The concept of self-monitoring by the appointed inspectors;
- On site observation;
- The review of inspection reports;
- Not entrusting to others the systematic verification of the requirements of ISO 17021-1: 15.  
A type of assessment thus structured certifies the compliance with the contractual requirements of the service provided immediately after the service.

The verification activities described above are performed according to the indications given in the specific operating procedures.

#### 10.2.7 Corrective Actions

**SDMCERT** manages the non-conformities according to the internal procedure **PRO:008 Management Of Corrective Actions**. For the purpose of the correct management of non-conformities, the Body ensures:

- a) Identification of the Non Conformity;
- b) Definition of the cause of non conformity;
- c) Correction of the non conformity;
- d) The assessment of the need for actions to ensure that non-compliance is not repeated;
- e) The timely determination and implementation of the necessary actions;
- f) Registration of results of actions taken;
- g) Review of the effectiveness of corrective actions.