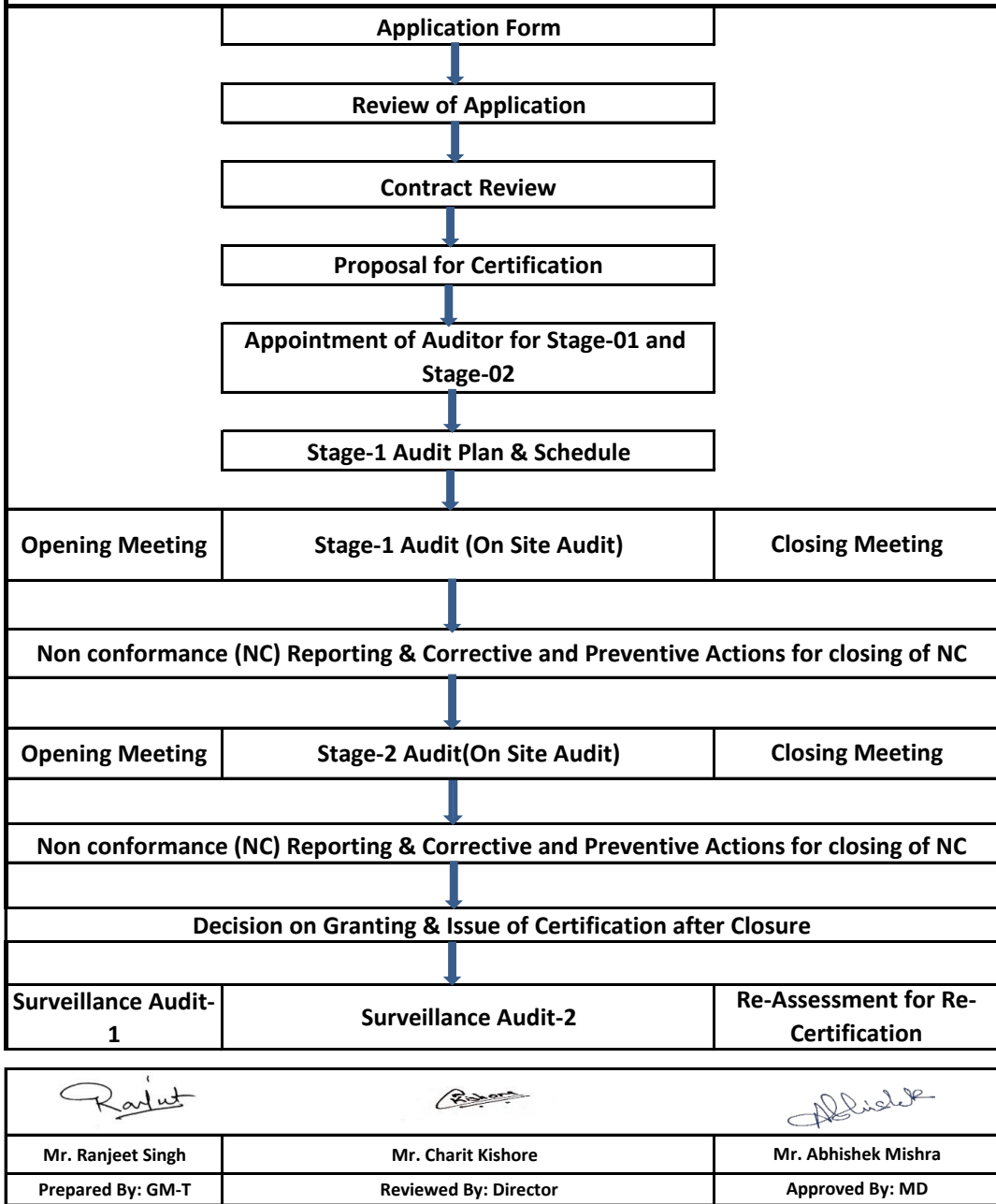




ACK CERTIFICATIONS PRIVATE LIMITED	Doc. No.	ACK-D-06
	Rev. No.	0
CERTIFICATION PROCESS FLOW CHART	Rev. Date	01.07.2021





Purpose: This Quality Procedure has been established to provide guidance for issue and maintenance of the Certificate of conformity to the client’s management system against the Respective MS audit standard.

Scope: This procedure is applicable over all activities related to issue and maintenance of certificate of conformities.

Responsibility: Managing Director/ Quality Manager and Certification decision makers/ Technical Committee.

Authority: This procedure has been authorized by the Managing Director and can be amended only by him.

Sec.	Sub Sec.	Description
1	1.1	Receipt and review of Audit report
	1.1.1	The Team Leader is responsible for submission of audit report to the Quality manager within 10 days of completion of the stage-2 audit. This contains at least client signed audit report, corrective action plan for non-conformances. All audit reports (Stage 1, Stage 2, routine surveillances, follow-up, special audit, recertification etc.) are reviewed by the Report reviewing authority at appropriate stages.
	1.1.2	ACK ensures that certificate of conformity is issued only on the basis of evidence-based recommendation received from a competent audit team. The audit reports are reviewed at multiple stages, as described below- <ul style="list-style-type: none"> a. A competent technical committee constituting one or more members is selected by the application reviewer from among the approved list of auditors (ACK-F-26,27,28 Auditors with IAF/EA Code). If the competent auditor (who had not participated in the audit of this client) is not available, appropriate auditor who is competent to conduct industry of similar or higher complexity is selected along with a competent technical expert. <p>It is ensured that the auditor who has carried out the audit, or the concerned Application reviewer/ audit programmer who planned the audit, do not participate in the certification decision making process.</p> <ul style="list-style-type: none"> b. The Quality manager submits the clients audit file containing all relevant information starting from initial application, client contract, stage-1 audit report, stage-2 audit report, NC findings and corrective action closure reports and audit teams’ recommendations, to the certification decision making person/ committee. c. The submitted set of documents is reviewed for completion by Report reviewer/ certification decision maker. Audit report review checklist (ACK-F-34 Certificate issue checklist) is used to record the review and certification related decision. d. The audit report along with audit report review checklist (ACK-F-34 - Certificate issue checklist) is submitted to Technical committee for technical review which includes review of the information provided by the audit team is sufficient with respect to certification requirements, scope of accreditation and effectiveness of corrections and corrective actions are evidenced for all non-conformances raised during the audit. e. The decision-making committee takes appropriate decision related to certification on the basis of audit report and recommendation submitted by the audit team leader. <p>If the committee feels that the audit report does not provide sufficient information required to make certification decision, additional audit, with specific objectives, by another audit team may be ordered. The Technical Committee & certification decision maker confirms, prior to making a decision on the following basis-</p> <ul style="list-style-type: none"> • the information provided by the audit team is sufficient with respect to the certification requirements and the scope for certification • it has reviewed, accepted and verified the effectiveness of correction and corrective actions, for all major nonconformities that represent failure to fulfill one or more requirements of the audit standard.

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		<ul style="list-style-type: none"> it has reviewed, accepted and verified the effectiveness of correction and corrective actions, for all major nonconformities that represent a situation that raises significant doubt about the ability of the client's management system to achieve its intended outputs. it has reviewed and accepted the client's planned correction and corrective action for all minor nonconformities. Closure of some of the minor non-conformities may be verified by perusal of documentary evidence submitted to the ACK office/ audit team leader. Closure of some of the minor non-conformities may be verified during subsequent surveillance audit.
	1.2	Action prior to making a decision- The Technical Committee confirms, prior to making a decision, that –
	1.2.1	The information provided by the audit team is sufficient with respect to the certification requirements and the scope for certification.
	1.2.2	It has reviewed, accepted and verified the effectiveness of correction and corrective actions, for all major nonconformities that represent – <ul style="list-style-type: none"> ✓ failure to fulfill one or more requirements of the audit standard ✓ a situation that raises significant doubt about the ability of the client's management system to achieve its intended outputs
	1.2.3	It has reviewed and accepted the client's planned correction and corrective action for all minor nonconformities. <ul style="list-style-type: none"> ✓ Closure of some of the minor non-conformities may be verified by perusal of documentary evidence submitted to the ACK office/ audit team leader. ✓ Closure of some of the minor non-conformities may be verified during subsequent surveillance audit.
	1.2.4	SCK Technical Committee takes the decision on granting, refusing, maintaining, renewing, suspending, restoring, or withdrawing certification, or on expanding or reducing the scope of certification, shall understand the applicable standard and certification requirements, and the Person Involved are Competent as per Competency Criterion demonstrated competence to evaluate the outcomes of the audit processes including related recommendations of the audit team.
	1.2.5	Process for refusing certification and information about the use of the CB's name and mark or logo: In Case if Client has Refused the Certification with any reasons such as Non-Conduction of Surveillance Audit, Payment Issue, etc... then Client cannot use the Logo of Certification Mark, If Client Still Used the Logo or Certification Mark then ACK will take the legal Action as per the Client Agreement signed in between the Client and ACK.
2	2.1	On each certificate to be issued, client organization's name, base office, address, name of the audit standard (including issue year of standard), and scope of the audited MS, is typed/ printed.
	2.1.1	Regarding the Certificate Issue Date: Final Copy of the Certificate will be Issued on the same date of the Certification Decision Date {Certificate Issue Date and Certification Decision Date must be same}
	2.2	The Quality Manager review the printed certificate to detect any errors. The certificate with all attachments like logo rules, soft copy of ACK logo, cover letter etc. is submitted to the Managing Director for his signature.
	2.3	After approval signature of the MD, relevant information of the client and its certification status is put in the ACK website. <i>For certificate issued under scope of accreditation, the information about the certificate is updated on Client register by the Managing Director without any delay from the issuance of the certificate.</i>
	2.4	The signed certificate is updated on the client list and forwarded for dispatch. The QM verifies the appropriate updation on ACK client register and records it on the certificate issue checklist of ACK. Ref. ACK-F-34-Certificate Issue Checklist.
	2.5	The designating person verifies the certificate on ACK Client register and prepares the covering letter for the certificate issue to the client. The signed certificate is sent to the client at his address or any other address he has specifically requested. The certificate shall not be issued to any other person without a written approval from the client. The certificate docket shall contain at least the following-



		<ul style="list-style-type: none"> ✓ Covering letter from ACK. ✓ Rules accompanying the logo ✓ Certificate <p>Record of dispatch of certificate is maintained in the ACK office. Safe delivery of the certificate at client's address is also verified by the ACK office by phone or E-mail.</p> <p>After Issuance of Final Copy of Certificate, then It will be Uploaded on ACK Website as well as IAFCERTSEARCH, for Public.</p>
3		Change in Certificate
	3.1	<p>The client may request for change in certificate. This may be due to-</p> <ul style="list-style-type: none"> ✓ Change in ownership ✓ Change in name of the company ✓ Change in location ✓ Increase or decrease in scope (products, services offered etc.) ✓ Increase or decrease in locations <p><i>(In case of revision in the certificate suffix "-01" is added to the certificate no. In case of repeated revision in one certificate the suffix is revised in ascending order like -02, -03.....)</i></p>
	3.2	Client may request for change in certificate or reduction / expansion in scope to Quality Manager shall review the request and decide for a special audit if the next audit is not due in near future or if the next audit cannot be proposed. Quality Manager also determines if the changed scope is within accreditation scope of ACK .
	3.3	In case of change in name of company or location without any change in management, the client shall submit Legal Documents for the change. Where the management has changed, the details of Legal Documents for approval shall be submitted along with the request.
	3.4	The duration for the special visit shall be decided by Quality Manager and communicated to the client. The lead auditor submits a descriptive report detailing the changes, justification for reduction / expansion of scope and review of the impact of change in the scope (use of logos etc.). Where expansion of scope is requested, the compliance to MS for the respective activities and impact on other processes is verified. In case the special visit is carried out as a part of routine surveillance, the descriptive report is added to the surveillance report.
4		Certification document
	4.1	ACK provides certification documents to the certified clients normally by courier. When requested scanned copy is also mailed to the client.
	4.2	<p>The certification document identifies the following:</p> <ul style="list-style-type: none"> a) the name and geographical location of each certified client (or the geographical location of the headquarters and any sites within the scope of a multi-site certification); b) the effective date of granting, expanding or reducing the scope of certification, or renewing certification which shall not be before the date of the relevant certification decision; <p>NOTE: The certification body can keep the original certification date on the certificate when a certificate lapses for a period of time provided that:</p> <ul style="list-style-type: none"> — the current certification cycle start and expiry date are clearly indicated; — the last certification cycle expiry date be indicated along with the date of recertification audit. <ul style="list-style-type: none"> c) the expiry date or recertification due date consistent with the recertification cycle; d) a unique identification code; e) the management system standard and/or other normative document, including indication of issue status (e.g. revision date or number) used for audit of the certified client; f) the scope of certification with respect to the type of activities, products and services as applicable at each site without being misleading or ambiguous; g) the name, address and certification mark of the certification body; other marks (e.g. accreditation symbol, client's logo) may be used provided they are not misleading or ambiguous; h) any other information required by the standard and/or other normative document used for certification; i) in the event of issuing any revised certification documents, a means to distinguish the revised documents from any prior obsolete documents.
	4.3	ACK exercises proper control of ownership over use of certificate, marks/ logo and audit reports. We

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		make this clear in our contract/ agreement with clients that ACK will take action to deal with incorrect references to certification status or misleading use of certification documents, marks (including accreditation symbol if applicable) or audit reports. This action could include requests for correction and corrective action, suspension, withdrawal of certification, publication of the transgression and, if necessary, legal action.
5		Maintaining certification: ACK has established a system which requires that for any non-conformity or other situation that may lead to suspension or withdrawal of certification, the Technical Committee appropriately decides the line of action, to determine whether certification can be maintained. ACK maintains certification based on demonstration that the client continues to satisfy the requirements of the audit standard. It maintains a client's certification based on a positive conclusion by the audit team leader.
6		<p>Recertification</p> <p>Re-Certification audit: After 3-year audit cycle, before the expiry of the certificate, and within one year of the last day of the last surveillance audit, recertification audit is conducted. During the recertification audit conformity to all clauses of the audit standard is verified.</p> <p>The recertification activity shall include the review of previous surveillance audit reports and consider the performance of the management system over the most recent certification cycle. Recertification audit activities may need to have a stage 1 in situations where there have been significant changes to the management system, the organization, or the context in which the management system is operating (e.g. changes to legislation).</p> <p>The recertification audit shall include an on-site audit that addresses the following: a) the effectiveness of the management system in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification; b) demonstrated commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance; c) the effectiveness of the management system with regard to achieving the certified client's objectives and the intended results of the respective management system (s).</p> <p>For any major nonconformity, ACK time limits for correction and corrective actions is 60 Days. These actions shall be implemented and verified prior to the expiration of certification.</p> <p>When recertification activities are successfully completed prior to the expiry date of the existing certification, the expiry date of the new certification can be based on the expiry date of the existing certification. The issue date on a new certificate shall be on or after the recertification decision.</p> <p>If the certification body has not completed the recertification audit or the certification body is unable to verify the implementation of corrections and corrective actions for any major nonconformity (see 9.5.2.1) prior to the expiry date of the certification, then recertification shall not be recommended and the validity of the certification shall not be extended. The client shall be informed and the consequences shall be explained.</p> <p>Following expiration of certification, the certification body can restore certification within 6 months provided that the outstanding recertification activities are completed, otherwise at least a stage 2 shall be conducted. The effective date on the certificate shall be on or after the recertification decision and the expiry date shall be based on prior certification cycle.</p>
7		<p>Surveillance Audit: Surveillance audits are on-site audits, but are not necessarily full system audits. Surveillance audits planned together with the other surveillance activities so that the certification body can maintain confidence that the certified management system continues to fulfill requirements between recertification audits. Surveillance Audit shall not be more than 12 months from the certification decision date</p> <p>The Assigned team leader is responsible for conducting and managing the assessment along with other team member, if any. The Team Leader shall be of Auditor status as a minimum. As far as possible, same team should be sent for surveillance audit for the certification cycle. The team leader also ensures that any Technical Expert / Specialist are not allowed to function independently and are always accompanied by Auditor/ Lead Auditor.</p> <p>The objective of surveillance audit is to:</p>

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- ✓ Ensure that the client’s management system which was basis of grant of certificate has been maintained on continuous basis.
- ✓ Verify and ensure that any changes to management system which might have taken place since last audit meet the requirement of the standard/ specification and implemented effectively
- ✓ Ensure on-site audits assessing the certified client's management system's fulfillment of specified requirements with respect to the standard to which the certification is granted.
- ✓ Ensure that the management system continues to be appropriate to the product/ process/ service offered by client, with the capability of managing and improving performance.
- ✓ Assess continual improvement in client’s management systems

The team leader shall review the client file, specially the last audit report to make note of any issues to be followed up, including the non-conformities and corrective action plan. Audit plan shall be sent to clients in advance so that they can seek any changes with respect to timing etc., if found inconvenient due to administrative reasons. Audit should be conducted (at least annually and it shall be ensured that the date of first surveillance audit shall not be more than 12 months from the last day of stage 2 audit.) as per Surveillance audit plan given in the last audit report but if there is any change due to any justified reasons, the same should be recorded in auditor notes and surveillance audit plan shall be updated in the report. During opening and closing meeting, the attendance record sheet is circulated for recording name and designation of the client representative present. Either each person can record their name & designation or one person can do so for all present. During each surveillance audit, client’s management systems shall be audited in adequate depth to ensure continued effectiveness of implemented system. All areas shall be audited at least once over a period of the certification cycle of three years however mandatory areas shall be audited every time. Following parameters are verified during each surveillance audit.

- ✓ Additionally, client’s statements with respect to its operations (e.g. promotional material, website). Also reviewed during each surveillance audit.
- ✓ enquiries from the certification body to the certified client on aspects of certification,
- ✓ requests to the client to provide documents and records (on paper or electronic media),
- ✓ other means of monitoring the certified client's performance.
- ✓ Internal audits and management review.
- ✓ A review of actions taken on nonconformities identified during the previous audit
- ✓ Actions taken on customer complaints.
- ✓ Effectiveness. Of the management system with regard to achieving the objectives
- ✓ Progress of planned activities aimed at continual improvement.
- ✓ Continuing operational control.
- ✓ Review of any changes and use of CB & AB marks.

The corrective action taken on non-conformities identified during last audit should be verified for its effectiveness. If the corrective action taken is not satisfactory/ non-taken, the severity of the minor NC shall be re-issued escalated to Major and client shall be advised accordingly. In such a case, further action would be taken. Non-conformity reporting, report preparation, report distribution, requirement of CAP (in case NC is raised) shall be similar to certification audit procedure. In case a major NC is identified, the team leader shall review to look for the possibility whether the corrective action taken can be verified off site (i.e. on-site verification is not required). In such case the suitable recommendation shall be made in the report.

8 **Suspension, withdrawing or Cancellation of Client Certification**

- 8.1** ACK have the authority to suspend certification in cases where on reviewing the audit reports and subsequent verification, he arrives to a conclusion that the-
- a. Client’s certified management system has persistently or seriously failed to meet certification requirements, including requirements for the effectiveness of the management system in the surveillance audits.
 - b. the client’s management system has persistently lost the effectiveness of the management system
 - c. The certified client does not allow surveillance or recertification audits to be conducted at the required frequencies as mentioned in the contract no.



		d. The certified client has voluntarily requested a suspension in writing to ACK.
	8.2	Under suspension, the client's management system certification is declared temporarily invalid. ACK makes enforceable agreement with its clients to ensure that in case of suspension the client refrains from further promotion of its certification.
	8.3	Quality Manager ensures that the suspended status of the certification is publicly accessible on the website and also communicated to the client in writing.
	8.4	If Client issues has Resolved then 15 Days' Time Period is there for Revoking otherwise after 15 Days it will be withdrawn. ACK ensures that the suspended status of the certification is publicly accessible on the ACK's website. Suspension Time Limit: 15 Days from the Date when Surveillance Audit has been due, after 15 Days Client will be suspended and listed on the ACK Website under Suspended Clients. For Revoking the Certificate, ACK will Provide additional 15 Days from the Date of Suspension to the Client. After then Certificate will be Withdrawal i.e., Withdrawal time is 15 Days from the Date of Suspension.
	8.5	ACK has established a policy to reduce the client's scope of certification to exclude the parts not meeting the requirements of the audit standard, when the client has persistently or seriously failed to meet the certification requirements for those parts of the scope of certification.
	8.6	ACK has established a policy to reduce the client's scope of certification to exclude the parts not meeting the requirements of the audit standard, when the client has persistently or seriously failed to meet the certification requirements for those parts of the scope of certification. The scope of the certification and communicates in writing to the client and the list is updated on the website.
	8.7	ACK has established legally enforceable arrangements with the certified client concerning conditions of withdrawal. As per this agreement, upon getting the notice of withdrawal, the client has to discontinue its use of all advertising matters that contain any reference to its certified status.
	8.8	This Process correctly state the status of certification of a client's management system as being suspended, withdrawal or reduced in ACK website and may publish status of certification in newspaper as necessary.
Reference: <ul style="list-style-type: none">a. Record of courier /certificate deliveryb. Audit filesc. Website (List of organizations whose certificates have been suspended)d. Certificate Issue Checkliste. List of the Certified Organization		