

# Assurance Charter

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Be confident.<sup>™</sup>

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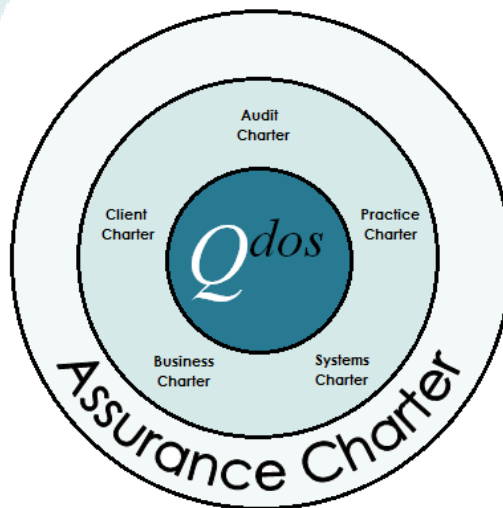
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## Introduction

Independent audit and certification of an organisation's management system is the most recognised means of providing assurance that the organisation has implemented a system for the management of the relevant aspects of its activities, in line with its policy.

This Assurance Charter has been prepared in line with ISO/IEC 17021 "Conformity assessment – Requirements for bodies providing audit and certification of management systems". For the provision of assurance and certification services, it is the principal document that specifies requirements for TEAMS – *The Equal Assurance Management System*, and is supported by a series of Charters. Central to TEAMS is Qdos; the online data operating system. This is represented as follows.



Observance of these requirements is intended to ensure that Equal Assurance operates management system certification in a competent, consistent and impartial manner, thereby facilitating the recognition of Equal Assurance, and the acceptance of its certifications, on a national and international basis. Such processes serve as a foundation for facilitating the recognition of management system certification in the interests of providing business confidence.

Certification of a management system provides independent demonstration that the management system of an organisation:

- a) conforms to specified requirements;
- b) is capable of consistently achieving its stated policy and objectives; and
- c) is effectively implemented.

Conformity assessment such as certification of a management system thereby provides value to the organisation, its customers and interested parties.

Clause 4 of this Assurance Charter describes the principles on which credible certification is based. These principles are the cornerstone of certification, and they are a necessary prelude to Clauses 5 to 10. These principles underpin all the requirements in this Assurance Charter. Methods for supporting and demonstrating the consistent achievement of the requirements in this Assurance Charter, through the establishment and maintenance of a management system, are provided in Clause 10.

This Assurance Charter, as part of TEAMS, is intended for use by those who work for and on behalf of Equal Assurance in the conduct of audit and certification of management systems, giving requirements for performing management system audit and certification activities. It is also available in the public domain.

Certification activities involve the audit of an organisation's management system. The form of attestation of conformity of an organisation's management system to a specific management system standard or other normative requirements is a certification document or a certificate.

This Assurance Charter provides for, among others, a set of requirements for management systems auditing, aimed at providing a reliable determination of conformity to the applicable requirements for certification, conducted by a competent audit team, with adequate resources and following a consistent process, with the results reported in a consistent manner.

## 1. Scope

This Assurance Charter contains and/or references principles and requirements for the audit and certification of management systems, through Equal Assurance, in line with ISO/IEC 17021. Certification of management systems (referred to as “certification”) is a third-party conformity assessment activity. Therefore, Equal Assurance is recognised as a conformity assessment body. This Assurance Charter applies to the following assurance programs:

ISO 9001  
Quality management systems

AS 4801  
Occupational health and safety management systems

ISO 14001  
Environmental management systems

OHSAS 18001  
Occupational health and safety management systems

Civil Contractors Federation  
Civil Construction Management Code

ISO 10002  
Complaints handling



## 2. References

The following documents are referenced in the application of this Assurance Charter.

(i) *External documents:*

- ISO 9000 *Quality management systems — Fundamentals and vocabulary.*
- ISO 10002 *Quality management – Customer satisfaction – Guidelines for complaints handling in organizations.*
- ISO/IEC 17000 *Conformity assessment — Vocabulary and general principles.*
- ISO/IEC 17021 *Conformity assessment — Requirements for bodies providing audit and certification of management systems.*
- ISO/IEC 17030 *Conformity assessment — General requirements for third-party marks of conformity.*

(ii) *Internal documents:*

- Audit Charter.
- Business Charter.
- Client Charter.
- Practice Charter.
- Systems Charter.

### 3. Definitions

For the purposes of this Assurance Charter, the terms and definitions given in ISO 9000, ISO/IEC 17000 and the following apply.

- **Client** – An organisation and/or section of an organisation.
- **Certified client** – An organisation and/or section of an organisation whose management system has been certified.
- **Impartiality** – Actual and perceived presence of objectivity. By objectivity it is meant that conflicts of interest do not exist or are resolved so as not to adversely influence subsequent activities of Equal Assurance. Other terms that are useful in understanding the principles of impartiality are: objectivity, independence, freedom from conflict of interests, freedom from bias, lack of prejudice, neutrality, fairness, open-mindedness, even-handedness, detachment, and balance.
- **Management system consultancy** – Participation in designing, implementing or maintaining a management system. Examples include preparing or producing manuals or procedures, and/or giving specific advice, instructions or solutions towards the development and implementation of a management system. Arranging training and participating as a trainer is not considered consultancy, provided that, where the course relates to management systems or auditing, it is confined to the provision of generic information that is freely available in the public domain. In other words, the trainer should not provide client-specific solutions.
- **Third-party certification audit** - Audit carried out by Equal Assurance for the purpose of certifying the client's management system. Note that in the definitions which follow, the term "audit" has been used for simplicity to refer to third-party certification audit. Third-party certification audits include pre-certification audits, certification audits, surveillance audits, re-certification audits, and can also include follow-up audits and special audits. An integrated audit is when a client has integrated the application of requirements of two or more assurance programs into a single management system and is being audited against the Equal Assurance Integrated Audit Criteria.
- **Auditor** - Person who conducts an audit.
- **Competence** - Ability to apply knowledge and skills to achieve intended results.
- **Guide** - Person appointed by the client to assist the audit team.
- **Observer** - Person who accompanies the audit team but does not audit.
- **Technical area** - Area characterised by commonalities of processes relevant to a specific type of management system.

## **4. Principles**

### **4.1 General**

These principles are the basis for the subsequent specific performance and descriptive requirements in this Assurance Charter. Specific requirements for all situations that can occur are not given. These principles are applied as guidance for the decisions that may need to be made for unanticipated situations.

The overall aim of certification is to give confidence to all parties that a management system fulfils specified requirements. The value of certification is the degree of public confidence and trust that is established by an impartial and competent assessment by a third-party such as Equal Assurance. Parties that have an interest in certification include, but are not limited to:

- a) the clients of Equal Assurance;
- b) the customers of the organisations whose management systems are certified;
- c) employees, suppliers and contractors;
- d) governmental authorities;
- e) non-governmental organisations; and
- f) consumers and other members of the public.

Principles for inspiring confidence include:

- impartiality;
- competence;
- responsibility;
- openness;
- confidentiality; and
- responsiveness to complaints.

## 4.2 Impartiality

Being impartial, and being perceived to be impartial, is necessary for Equal Assurance to deliver certification that provides confidence to its stakeholders.

It is recognised that the source of revenue for Equal Assurance is its client paying for certification, and that this is a potential threat to impartiality.

To obtain and maintain confidence, it is essential that Equal Assurance's decisions be based on objective evidence of the extent of conformity (or nonconformity) obtained, and that its decisions are not influenced by other interests or by other parties.

Threats to impartiality include:

- a) Self-interest threats: threats that arise from Equal Assurance acting in its own interest. A concern related to certification, as a threat to impartiality, is financial self-interest.
- b) Self-review threats: threats that arise from Equal Assurance reviewing the work it is itself responsible for. Auditing the management systems of a client to whom the same audit function provided management systems consultancy would be a self-review threat.
- c) Familiarity (or trust) threats: threats that arise from Equal Assurance being too familiar with or trusting of a client instead of seeking audit evidence.
- d) Intimidation threats: threats that arise from Equal Assurance being, or having a perception of being, coerced openly or secretly, such as a threat to be replaced by another conformity assessment body.

### **4.3 Competence**

Competence of the personnel supported by TEAMS is necessary to deliver certification that provides confidence to stakeholders.



#### **4.4 Responsibility**

It is the client, and not Equal Assurance, that has the responsibility for conformity with the requirements for certification.

Equal Assurance has the responsibility to assess sufficient objective evidence upon which to base a certification decision. Based on audit conclusions, it makes a decision to:

- grant certification if there is sufficient evidence of conformity and/or the risk of nonconformity is reduced to an acceptable level in line with the Client Charter; or
- not to grant certification if there is not sufficient evidence of conformity and/or the risk of nonconformity is not reduced to an acceptable level in line with the Client Charter.

It should be noted that any audit is based on sampling within an organisation's management system and therefore is not a guarantee of conformity with all requirements.

## **4.5 Openness**

Through its Client Charter, Equal Assurance provides public access to, or disclosure of, appropriate and timely information about its audit process and certification process, and about the certification status (i.e. the granting, extending, maintaining, renewing, suspending, reducing the scope of, or withdrawing of certification) of any client, in order to gain confidence in the integrity and credibility of certification. Openness is a principle of access to, or disclosure of, appropriate information.

In addition, so as to gain or maintain confidence in certification, Equal Assurance may also provide appropriate access to, or disclosure of, non-confidential information about the conclusions of specific audits (e.g. audits in response to complaints) to specific interested parties. This requirement is included in the Client Charter.

## **4.6 Confidentiality**

To gain the privileged access to information that is needed for Equal Assurance to assess conformity to requirements for certification adequately, it is essential that Equal Assurance keep confidential any proprietary information about its clients.

An appropriate balance between the principles of openness and confidentiality, including responsiveness to complaints (see 4.7), is necessary in order to demonstrate integrity and credibility to all users and beneficiaries of certification.

#### **4.7 Responsiveness to complaints**

Parties that rely on certification expect to have complaints investigated and, if these are found to be valid, should have confidence that the complaints will be appropriately addressed and that a reasonable effort will be made to resolve the complaints. Effective responsiveness to complaints is an important means of protection for Equal Assurance, its clients and other users and beneficiaries of certification against errors, omissions or unreasonable behaviour. Confidence in certification activities is safeguarded when complaints are processed appropriately.

To achieve this, Equal Assurance has through both its Client Charter and Systems Charter established sound processes for dealing with complaints in a responsive and efficacious manner.

## **5. General requirements**

### **5.1 Legal and contractual matters**

#### **5.1.1 Legal responsibility**

The legal entity responsible for certification activities is Equal Assurance Pty Ltd as trustee for the Equal Assurance Trust. As such Equal Assurance can be held legally responsible for all its certification activities.

#### **5.1.2 Certification agreement**

Equal Assurance maintains a Client Charter, which is the legally enforceable agreement for the provision of certification activities to its client. In addition, where there are multiple sites of a client, Equal Assurance ensures the Client Charter is legally enforceable between it and all the sites covered by the scope of the certification.

#### **5.1.3 Responsibility for certification decisions**

Equal Assurance is responsible for, and retains the authority for, its decisions relating to certification, including the granting, maintaining, renewing, extending, reducing, suspending and withdrawing of certification.

## 5.2 Management of impartiality

Equal Assurance maintains top management commitment to impartiality in management system certification activities. Statements in the Client Charter, publicly accessible at the Equal Assurance website, make it clear that Equal Assurance understands the importance of impartiality in carrying out its management system certification activities, manages conflict of interest and ensures the objectivity of its management system certification activities.

As detailed in the various Charters, Equal Assurance has processes in place to identify, analyse and document the possibilities for conflict of interests arising from provision of certification including any conflicts arising from its relationships. Whilst relationships do not necessarily present Equal Assurance with a conflict of interest, where relationships create a threat to impartiality, Equal Assurance shall document and be able to demonstrate how it eliminates or minimises such threats. The demonstration covers all potential sources of conflict of interests that are identified, whether they arise from within Equal Assurance or from the activities of other persons, bodies or organisations. Typical relationships that Equal Assurance manages threats to impartiality for are those based on ownership, governance, management, personnel, shared resources, and shared earnings. This information is made available to the Assurance Committee (see 6.2).

When a relationship poses an unacceptable or unmanageable threat to impartiality, then certification shall not be provided.

Equal Assurance cannot certify another conformity assessment body for its management system certification activities.

Equal Assurance does not offer or provide management system consultancy.

Equal Assurance does not offer or provide internal audits to its certified clients. Equal Assurance also will not certify a management system on which it provided internal audits within two years following the end of the internal audits.

Equal Assurance shall not certify a management system on which a client has received management system consultancy or internal audits, where the relationship between the consultancy organisation and Equal Assurance poses an unacceptable threat to its impartiality. Through provisions in the Audit Charter and references, allowing a minimum period of two years to elapse following the end of the management system consultancy is typically the way the threat to impartiality is reduced to an acceptable level.

Equal Assurance does not outsource audits to management system consultancy organisation, as this poses an unacceptable threat to its impartiality (see 7.5). This does not apply to individuals contracted as auditors through audit practices, as covered in 7.3.

The activities of Equal Assurance are not marketed or offered as linked with the activities of an organisation that provides management system consultancy to clients. Equal Assurance commits to take action to correct inappropriate claims by any consultancy organisation stating or implying that certification would be simpler, easier, faster or less expensive if Equal Assurance were used. In the same way, Equal Assurance does not state or imply that certification would be simpler, easier, faster or less expensive if a specified consultancy organisation were used.

To ensure that there is no conflict of interests, personnel who have provided management system consultancy, including those acting in a managerial capacity, are not used by Equal Assurance to take part in an audit or other certification activities if they have been involved in management system consultancy towards the client in question within two years following the end of the consultancy. Provisions for this are made in the Audit Charter and references.

Equal Assurance also takes appropriate action to respond to any threats to its impartiality arising from the actions of other persons, bodies or organisations.

All Equal Assurance personnel, whether internal or external (including those on the Assurance Committee; see 6.2), who can influence the certification activities, are required to act impartially and shall not allow commercial, financial or other pressures to compromise impartiality.

Equal Assurance requires all personnel, whether internal and external, to reveal any situation known to them that may present them or Equal Assurance with a conflict of interests. Equal Assurance uses this information as input to identifying threats to impartiality raised by the activities of such personnel or by the organisations that employ them, and does not use such personnel, whether internal or external, unless they can demonstrate that there is no conflict of interests.

### **5.3 Liability and financing**

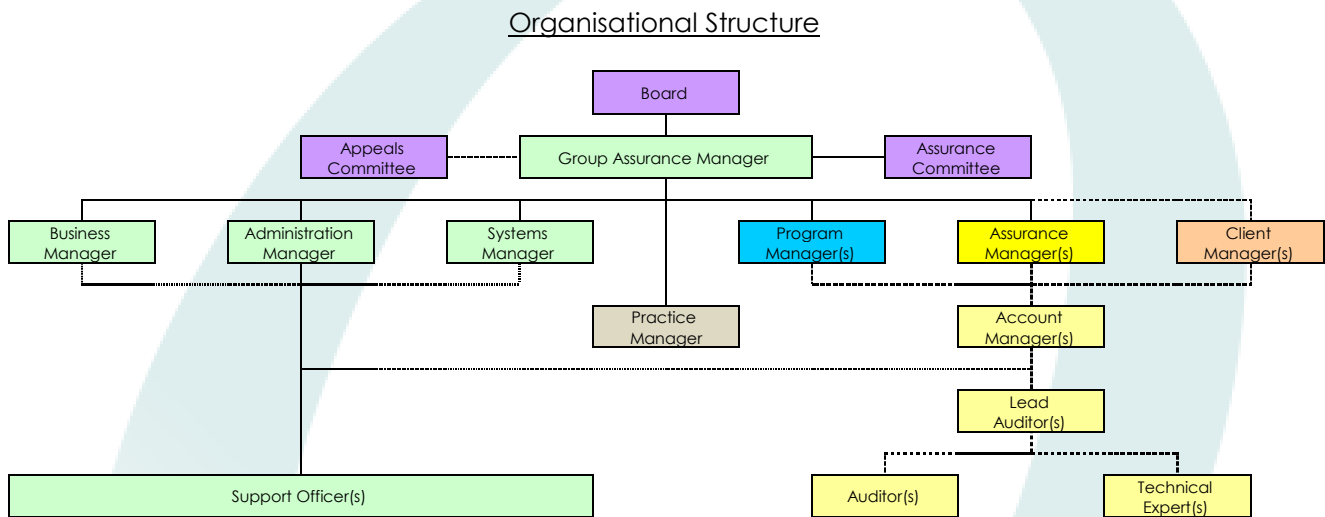
The Business Charter provides for methods to demonstrate that Equal Assurance has evaluated the risks arising from its certification activities and that it has adequate arrangements (eg: insurance and/or financial reserves) to cover liabilities arising from its operations in each of its fields of activities and the geographic areas in which it operates.

As specified in the Business Charter, Equal Assurance evaluates its finances and sources of income on an ongoing basis, and demonstrates to the Assurance Committee specified in 6.2 that commercial, financial or other such pressures do not compromise its impartiality.

## 6. Structural requirements

### 6.1 Organisational structure and top management

The organisation structure for Equal Assurance is shown as follows:



#### Legend:

<span style="display: inline-block; width: 15px; height: 15px; background-color: #d9ead3; border: 1px solid black; margin-right: 5px;"></span> Substantive positions (internal)	— Organizational reporting
<span style="display: inline-block; width: 15px; height: 15px; background-color: #fff2cc; border: 1px solid black; margin-right: 5px;"></span> Nominated positions (internal, per Account)	- - - Functional reporting
<span style="display: inline-block; width: 15px; height: 15px; background-color: #fff2cc; border: 1px solid black; margin-right: 5px;"></span> Nominated positions (internal/external, per Account)	— Resource reporting
<span style="display: inline-block; width: 15px; height: 15px; background-color: #d9ead3; border: 1px solid black; margin-right: 5px;"></span> Nominated positions (internal/external, per Program)	
<span style="display: inline-block; width: 15px; height: 15px; background-color: #fff2cc; border: 1px solid black; margin-right: 5px;"></span> Nominated positions (internal/external, per Client)	
<span style="display: inline-block; width: 15px; height: 15px; background-color: #fff2cc; border: 1px solid black; margin-right: 5px;"></span> Nominated positions (internal/external, per Practice)	
<span style="display: inline-block; width: 15px; height: 15px; background-color: #d9ead3; border: 1px solid black; margin-right: 5px;"></span> Nominated positions (internal/external, by Terms of Reference)	

Details regarding the duties, responsibilities and authorities of these persons and functions are provided in the relevant Charters and their references. More specifically, the Group Assurance Manager has overall authority and/or responsibility for:

- a) development of policies relating to the operation of Equal Assurance;
- b) supervision of the implementation of the policies and procedures;
- c) supervision of the finances of Equal Assurance;
- d) development of assurance and certification programs;
- e) performance of audits and certification, and responsiveness to complaints;
- f) decisions on certification, as made by Assurance Managers;
- g) delegation of authority to committees or individuals, as required, to undertake defined activities on behalf of Equal Assurance;
- h) contractual arrangements; and
- i) provision of adequate resources for assurance and certification activities.

Equal Assurance also maintains documented processes for the appointment, terms of reference and operation of the Committees that are involved in the certification activities.

## **6.2 Committee for safeguarding impartiality**

The structure of Equal Assurance provides for safeguards to ensure the impartiality of its activities. In addition, an Assurance Committee is in place to:

- a) assist Equal Assurance in developing the policies and practices relating to impartiality of its certification activities;
- b) counteract any tendency on the part of Equal Assurance to allow commercial or other considerations to prevent the consistent objective provision of certification activities;
- c) advise on matters affecting confidence in certification provided by Equal Assurance, including openness and public perception; and
- d) conduct a review, as least once annually, of the impartiality of the audit, certification and decision-making processes of Equal Assurance.

Equal Assurance may have other tasks or duties assigned to the Assurance Committee, provided these additional tasks or duties do not compromise its essential role of ensuring impartiality.

The composition, terms of reference, duties, authorities, competence of members and responsibilities of the Assurance Committee is formally documented, and authorised by the Group Assurance Manager, to ensure:

- a) representation of a balance of interests such that no single interest predominates (eg: internal or external personnel are considered to be a single interest);
- b) access to all the information necessary to enable it to fulfil its functions (see also 5.2 and 5.3); and
- c) that if the Group Assurance Manager does not respect the advice of the Assurance Committee, it shall have the right to take independent action (eg: informing authorities, accreditation bodies, stakeholders) whilst respecting the confidentiality requirements of 8.5.

Whilst the Assurance Committee cannot represent every interest, Equal Assurance has identified the following composition of individuals that best represents key interest groups:

- the Group Assurance Manager;
- an Assurance Manager;
- an individual external Auditor (see 7.3);
- a client representative; and
- an industry association representative.

## **7. Resource requirements**

### **7.1 Competence of management and personnel**

#### **7.1.1 General considerations**

As described in the Audit Charter and the Systems Charter, Equal Assurance:

- maintains processes to ensure that personnel have appropriate knowledge relevant to the types of management systems and geographic areas in which it operates;
- determines the competence required for each technical area (as relevant for the specific assurance program), and for each function in the certification activity; and
- determines the means for demonstrating competence prior to carrying out specific functions.

#### **7.1.2 Determination of competence criteria**

As described in the Audit Charter and the Systems Charter, Equal Assurance maintains a documented process for determining the competence criteria for personnel involved in the management and performance of audits and certification. Competence criteria are determined with regard to the requirements of each type of management system standard or specification, for each technical area, and for each function in the certification process. The output of the process is documented criteria of required knowledge and skills necessary to effectively perform audit and certification tasks to be fulfilled to achieve the intended results.

Account Managers shall as a minimum maintain:

- knowledge of specific management system standards/normative;
- knowledge of Equal Assurance processes;
- knowledge of client business sector; and
- Knowledge of client products, processes and organisation.

Assurance Managers shall as a minimum maintain:

- knowledge of audit principles, practices and techniques;
- knowledge of specific management system standards/normative;
- knowledge of Equal Assurance processes; and
- knowledge of client business sector.

Auditors and Lead Auditors shall as a minimum maintain:

- knowledge of business management practices
- knowledge of audit principles, practices and techniques;
- knowledge of specific management system standards/normative;
- knowledge of Equal Assurance processes;
- knowledge of client business sector;
- knowledge of client products, processes and organisation;
- language skills appropriate to all levels within the client;
- note-taking and report-writing skills;
- presentation skills;
- interviewing skills; and
- audit-management skills

Where additional specific competence criteria have been established for a specific assurance program (eg: CCF Code), these are also applied.

For any client management system, the term "technical area" is related to products and processes in the context of the scope of the assurance program. The technical areas can be defined by a specific assurance program (eg: CCF Code); and/or are determined by Equal Assurance. Examples of the application of the term "technical area" for different types of management systems are as follows:

- For a quality management system standard (eg: ISO 9001), the term "technical area" is related to the processes needed to fulfil customer expectations and applicable statutory and regulatory requirements for the client's products and services.
- For an environmental management system standard (eg: ISO 14001), the term "technical area" is related to the categories of activities, products and services related to the environmental aspects affecting air, water, land, natural resources, flora, fauna and humans.
- For an information security management system standard (eg: ISO 27001), the term "technical area" is related, among others, to the categories of information security technologies and practices, information and communication technology and business activities related to the selection of adequate and proportionate security controls that protect information assets.
- For a supply chain security management system standard (eg: ISO 28000), the term "technical area" is related to processes in the context of security risk of supplies, such as transportation, storage, and information.

### **7.1.3 Evaluation process**

As described in the Audit Charter and the Systems Charter, Equal Assurance maintains documented processes for the initial competence evaluation, and on-going monitoring of competence and performance of all personnel involved in the management and performance of audits and certification, applying the determined competence criteria. The evaluation methods in place are demonstrably effective. The output from these processes is to identify personnel who have demonstrated the level of competence required for the different functions of the audit and certification process.

Evaluation methods that are used to evaluate knowledge and skills include:

- review of records;
- feedback;
- interviews;
- observations; and/or
- examinations.

### **7.1.4 Other considerations**

In determining the competence requirements for its personnel performing certification, Equal Assurance addresses the functions undertaken by management and administrative personnel in addition to those directly performing audit and certification activities.

In line with the Business Charter, Equal Assurance also maintains access to the necessary technical expertise for advice on matters directly relating to certification for technical areas, types of management system and geographic areas in which it operates. Such advice may be obtained from external sources, or internally from Equal Assurance personnel.

In respect to both the AS4801 Assurance Program and the OHSAS 18001 Assurance Program, and in line with the Systems Charter, Equal Assurance maintains access to personnel with appropriate occupational health and safety (OSH) technical competency to:

- select and verify the competence of auditors;
- brief auditors and arrange any necessary training;
- review arrangements with clients;
- decide on the granting, maintaining, withdrawing, suspending of certifications;
- decide on the extension or reduction in the scope of certification; and
- set-up and operate appeals, complaints and dispute procedures.

## 7.2 Personnel involved in certification activities

In respect to personnel involved in certification activities, Equal Assurance:

- maintains, as part of its own organisation, personnel having sufficient competence for managing the type and range of assurance programs and other certification work performed;
- employs, or has access to, a sufficient number of Lead Auditors, Auditors and Technical Experts to cover all of its activities and to handle the volume of audit work performed;
- ensures persons concerned are clear on their duties, responsibilities and authorities;
- maintains defined processes in the Systems Charter for selecting, training, formally authorising auditors and for selecting technical experts used in the certification activity, with the initial competence evaluation of an auditor including the ability to apply required knowledge and skills during audits, as determined by a competent evaluator observing the auditor conducting an audit, and with consideration being given to maintenance of desirable personal behaviours consistent with the Equal Assurance Code of Conduct as well as other criteria;
- maintains a documented process to achieve and demonstrate effective auditing, including the use of auditors and possessing generic auditing skills and knowledge, as well as skills and knowledge appropriate for auditing in specific technical areas;
- ensures that auditors (and, where needed, technical experts) are knowledgeable of its audit processes, certification requirements and other relevant requirements, through the maintenance of the Audit Charter and other relevant documentation giving audit instructions and relevant information on the certification activities;
- only uses auditors and technical experts for those certification activities where they have demonstrated competence (see 9.1);
- in line with the Systems Charter, identifies training needs and shall offer or provide access to specific training to ensure its auditors, technical experts and other personnel involved in certification activities are competent for the functions they perform;
- ensures nominated Assurance Managers that take the decision on granting, maintaining, renewing, extending, reducing, suspending or withdrawing certification understand the applicable standard and certification requirements, and have demonstrated competence to evaluate the audit processes and related recommendations of the audit team;
- maintains documented processes in the relevant Charter and/or references for ensuring the satisfactory performance of all personnel involved in the audit and certification activities, including criteria for monitoring and measurement of the performance of all persons involved, based on the frequency of their usage and the level of risk linked to their activities, and, in particular, the review of the competence of personnel in the light of their performance in order to identify training needs;
- ensures the monitoring processes for auditors in the Systems Charter is documented, including a combination of on-site observation, review of audit reports and feedback from clients or from the market, and designed in such a way as to minimise disturbance to the normal processes of certification, especially from the client's viewpoint; and
- periodically observes the performance of each auditor on-site, with the frequency of on-site observations based on the need as determined from all monitoring information available.

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

Equal Assurance requires external auditors and external technical experts to have written agreement by which they commit themselves to comply with its applicable policies and procedures. For individuals engaged through Audit Practices, this agreement is the Practice Charter and any Special Terms that may apply. This and other such documentation addresses aspects relating to confidentiality and to independence from commercial and other interests, and requires the external auditors and external technical experts to notify the certification body of any existing or prior association with any organisation they may be assigned to audit.

Use of individual auditors and technical experts under such agreements does not constitute outsourcing as described under 7.5.

#### **7.4 Personnel records**

In accordance with the Systems Charter, Equal Assurance maintains up-to-date personnel records, including relevant qualifications, training, experience, affiliations, professional status, competence and any relevant consultancy services that may have been provided. This includes management and administrative personnel in addition to those performing certification activities.



## **7.5 Outsourcing**

The process that describes the conditions under which outsourcing (which is subcontracting to another organisation to provide part of the certification activities on behalf of the certification body) may take place is covered, to the extent applicable, in the Business Charter. Where such conditions exist, Equal Assurance shall have a legally enforceable agreement covering the arrangements, including confidentiality and conflict of interests, with each body that provides outsourced services.

Such conditions can include outsourcing to other certification bodies. Use of Auditors and Technical Experts engaged through Audit Practices is addressed in 7.3.

Decisions for granting, maintaining, renewing, extending, reducing, suspending or withdrawing certification on behalf of Equal Assurance shall never be outsourced.

In addition, under such outsourced conditions, Equal Assurance would:

- a) take responsibility for all activities outsourced to another body;
- b) ensure that the body that provides outsourced services, and the individuals that it uses, conform to same requirements as Equal Assurance, including competence, impartiality and confidentiality, and
- c) ensure that the body that provides outsourced services, and the individuals that it uses, is not involved, either directly or through any other employer, with an organisation to be audited, in such a way that impartiality could be compromised.

In line with the Business Charter, Equal Assurance shall maintain documented processes for the qualification and monitoring of all bodies that provide outsourced services used for certification activities, and shall ensure that records of the competence of auditors and technical experts are maintained.

## **8. Information requirements**

### **8.1 Publicly accessible information**

Equal Assurance maintains and makes publicly accessible, or can provide upon request, information describing its audit processes and certification processes for granting, maintaining, extending, renewing, reducing, suspending or withdrawing certification, and about the certification activities, types of management systems and geographical areas in which it operates. This information is typically available through the Client Charter.

Equal Assurance makes every effort to ensure information to any client or to the marketplace, including advertising, is accurate and not misleading.

Equal Assurance makes publicly accessible information about certifications granted, suspended or withdrawn, in part through the Certified Clients Register, as referenced in the Client Charter.

On request from any party, Equal Assurance provides the means to confirm the validity of a given certification, through the Certified Clients Register, as referenced in the Client Charter.

In exceptional cases, Equal Assurance may need to limit access to certain information on the request of the client (eg: for security reasons).

## **8.2 Certification documents**

The certification document used by Equal Assurance to attest the type and scope of certification for a certified client is the "Certificate of Confidence", including any referenced documentation. Equal Assurance provides the Certificate of Confidence to certified clients in line with its Audit Charter, Client Charter and Systems Charter.

The effective date of the Certificate of Confidence shall not be before the date of the certification decision.

In line with the Systems Charter, the Certificate of Confidence identifies:

- a) the name and geographic location of the client whose management system is certified (and/or the geographic location of the Main Site and any other Permanent Sites within the scope of a multi-site certification);
- b) the date(s) of granting, extending or renewing certification;
- c) the expiry date or re-certification due date consistent with the re-certification cycle;
- d) a unique identification code;
- e) the standard and/or other normative document, including issue number and/or revision, relevant to the assurance program, used for audit of the certified client;
- f) the scope of certification with respect to activities, products and/or services, as applicable at the sites of the certified client;
- g) the name, address and certification mark of Equal Assurance (other marks such as the accreditation symbol 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; and
- i) in the event of issuing any revised Certificate of Confidence, a means to distinguish the revised documents from any prior obsolete documents.

### **8.3 Directory of certified clients**

In line with the Client Charter, Equal Assurance maintains and makes publicly accessible, or provides upon request, typically by electronic means, a directory of valid certifications (being the Certified Clients Register) that as a minimum shows the name, relevant normative document for the relevant assurance program, scope and geographical location for each certified client (and/or the geographic location of the headquarters and any sites within the scope of a multi-site certification).

The Certified Clients Register remains the sole property of Equal Assurance.

## 8.4 Reference to certification and use of marks

The Client Charter provides for requirements governing any assurance mark (or Q-Mark<sup>™</sup>) that Equal Assurance authorises certified clients to use. Q-Marks<sup>™</sup> are, among other things, traceable back to Equal Assurance, and there is no ambiguity, in the Q-Mark<sup>™</sup> or accompanying text, as to what has been certified and that Equal Assurance has granted the certification. Requirements of the Client Charter also make it clear that Q-Marks<sup>™</sup> are not be used on a product or product packaging seen by consumers, or used in any other way that may be interpreted as denoting product conformity. ISO/IEC 17030 provides requirements for use of third-party marks.

Provisions in the Client Charter also ensure certified clients do not apply Q-Marks<sup>™</sup> to laboratory test, calibration or inspection reports, as such reports are deemed to be products in this context.

Provisions in the Client Charter require clients to:

- a) conform to Equal Assurance requirements when making reference to its certification status in communication media such as the internet, brochures, advertising, or other documents;
- b) not make or permit any misleading statement regarding its certification;
- c) not use or permit the use of the Certificate of Confidence or any part thereof in a misleading manner;
- d) upon suspension or withdrawal of its certification, discontinue its use of all advertising matter that contains a reference to certification, as directed by Equal Assurance (see 9.6);
- e) review and amend as required all advertising matter when the scope of certification has been reduced (see 9.6);
- f) not allow reference to its management system certification to be used in such a way as to imply that Equal Assurance certifies any activities, products and/or services;
- g) not imply that the certification applies to activities that are outside the scope of certification; and
- h) not use their certification in such a manner that would bring Equal Assurance and/or its practices into disrepute and lose public trust.

Through the Client Charter, Equal Assurance exercises proper control of ownership and takes action to deal with incorrect references to certification status or misleading use of the Certificate of Confidence, Q-Marks<sup>™</sup> or audit reports. Such action could include requests for correction and corrective action, suspension, withdrawal of certification, publication of the transgression and, if necessary, legal action.

## **8.5 Confidentiality**

Equal Assurance maintains, through legally enforceable agreements as covered in the various Charters, policies and arrangements to safeguard the confidentiality of the information obtained or created during the performance of certification activities at all levels of its structure, including committees and external bodies or individuals acting on its behalf.

Equal Assurance informs clients in advance, through the Client Charter, of the information it intends to place in the public domain. All other information, except for information that is made publicly accessible by the client, is considered confidential.

Except as required in ISO/IEC 17021, information about a particular client or individual shall not be disclosed to a third party without the written consent of the client or individual concerned. Where Equal Assurance is required by law to release confidential information to a third party, the client or individual concerned shall, unless regulated by law, be notified in advance of the release.

Consistent with Equal Assurance policy, information about clients from sources other than the client (eg: complainants, regulators) shall be treated as confidential.

Personnel, including any committee members, auditors, technical specialists, personnel of external bodies or individuals acting on behalf of Equal Assurance, will keep confidential all information obtained or created during the performance of its activities.

In line with the Systems Charter and the Practice Charter, Equal Assurance, and those acting on its behalf, maintain equipment and facilities that ensure the secure handling of confidential information (eg: documents, records).

Through the Client Charter, clients are made aware that confidential information may be made available to other bodies (eg: accreditation body).

## **8.6 Information exchange between Equal Assurance and its clients**

### **8.6.1 Information on the certification activity and requirements**

Through the Client Charter, Equal Assurance provides and updates clients on the following:

- a) a detailed description of the initial and continuing certification activity, including the application, initial audits, surveillance audits, and the process for granting, maintaining, reducing, extending, suspending, withdrawing certification and recertification;
- b) the normative requirements for certification, relevant to the assurance program;
- c) information about the fees for application, initial certification and continuing certification;
- d) requirements for prospective clients:
  - 1) to comply with certification requirements;
  - 2) to make all necessary arrangements for the conduct of the audits, including provision for examining documentation and the access to all processes and areas, records and personnel for the purposes of initial certification, surveillance, re-certification and resolution of complaints; and
  - 3) to make provisions, where applicable, to accommodate the presence of observers (e.g. accreditation auditors or trainee auditors);
- e) information describing the rights and duties of certified clients, including requirements, when making reference to its certification in communication of any kind in line with the requirements in 8.4; and
- f) information on procedures for handling complaints and appeals.

### **8.6.2 Notice of changes by Equal Assurance**

Equal Assurance provides its certified clients due notice of any changes to its requirements for certification, as expressed in the Client Charter, and contractual arrangements with certified clients are maintained to ensure implementation of these requirements. In line with our Audit Charter, Equal Assurance verifies that each certified client complies with the new requirements.

### **8.6.3 Notice of changes by a client**

Through the Client Charter, Equal Assurance maintains legally enforceable arrangements to ensure that certified clients inform it, without delay, of matters that may affect the capability of the management system to continue to fulfil the requirements of the standard used for certification, relevant to the assurance program. These include, for example, changes relating to:

- a) the legal, commercial, organisational status or ownership;
- b) organisation and management (eg: key managerial, decision-making or technical staff);
- c) contact address and sites;
- d) scope of operations under the certified management system; and
- e) major changes to the management system and processes.

## **9. Process requirements**

### **9.1 General requirements**

Equal Assurance maintains the Client Charter, the Audit Charter, and the Systems Charter that, along with their references, provide the primary mechanisms by which it delivers process requirements. An outline of these process requirements follows. As different program owners/regulators maintain different requirements, some assurance programs do not necessarily follow all process requirements. Where and to the extent these process requirements vary, variations have been detailed in the relevant Charter, and their references.

#### **9.1.1 Audit programme**

An audit programme for the full certification cycle is developed to clearly identify the audit activity(ies) required to demonstrate that the client's management system fulfils the requirements of the relevant assurance program(s).

For most assurance programs, the audit programme includes a two-stage initial audit, surveillance audits in the first and second years, and a re-certification audit in the third year prior to expiration of certification. The three-year certification cycle begins with the certification or re-certification decision. The determination of the audit programme and any subsequent adjustments considers the size of the client, the scope and complexity of its management system, activities, products and services, as well as demonstrated level of management system effectiveness and the results of any previous audits. Where Equal Assurance takes account of certification or other audits already granted to the client, it collects sufficient, verifiable information to justify and record any adjustments to the audit programme.

#### **9.1.2 Audit plan**

##### **9.1.2.1 General**

Equal Assurance ensures an audit plan is established for each audit identified in the audit programme to provide the basis for agreement regarding the conduct and scheduling of the audit activities. This audit plan is based on the requirements of the Audit Charter and Client Charter.

##### **9.1.2.2 Determining audit objectives, scope and criteria**

The audit objectives are determined by Equal Assurance. The audit scope and criteria, including any changes, are established by Equal Assurance after discussion with the client. The audit objectives describe by reference to the Client Charter what is to be accomplished by the audit and include the following:

- a) determination of the conformity of the client's management system, or parts of it, with the audit criteria;
- b) evaluation of the ability of the management system to ensure the client meets applicable statutory, regulatory and contractual requirements (noting that a management system certification audit is not a legal compliance audit);
- c) evaluation of the effectiveness of the management system to ensure the client is continually meeting its specified objectives;
- d) as applicable, identification of areas for potential improvement of the management system.

The audit scope describes the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited. Where a pre-certification, certification, surveillance or re-certification process consists of more than one audit (eg: covering different locations), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the existing or ensuing certificate(s).

Considerations for the audit programme, audit scope or audit plan include:

- a) the scope and complexity of the client's management system;
- b) products and processes (including services);
- c) size of the client;
- d) sites to be audited;
- e) language of the client and languages spoken and written;
- f) the requirements of sector or regulatory schemes;
- g) client and their customers' requirements and expectations;
- h) the number and timing of shifts;
- i) audit time required for each audit activity;
- j) competence of each member of the audit team;
- k) the need to audit temporary sites;
- l) results of the pre-certification audit or of any other previous audits;
- m) results of other surveillance activities;
- n) demonstrated level of management system effectiveness;
- o) eligibility for sampling;
- p) customer complaints;
- q) complaints received by the certification body about the client;
- r) integrated audits;
- s) changes to the client, its products, processes or its management system;
- t) changes to the certification requirements;
- u) changes to legal requirements;
- v) changes to accreditation requirements;
- w) risk and complexity;
- x) client performance data (eg: defect levels, key performance indicators (KPI) data, etc.);
- y) interested parties' concerns;
- z) information gained during previous audits.

The audit criteria are used as a reference against which conformity is determined, and includes the requirements of the relevant assurance program(s), and/or the defined processes and documentation of the client's management system.

#### 9.1.2.3 Preparing the audit plan

The audit plan is appropriate to the objectives and the scope of the audit. The audit plan at least includes or refers to the following:

- a) the audit objectives;
- b) the audit criteria;
- c) the audit scope, including identification of the organisational and functional units or processes to be audited;
- d) the dates/sites where on-site auditing is to be conducted, including visits to temporary sites;
- e) the expected time and duration of on-site audit activities;
- f) the roles and responsibilities of the audit team members and accompanying persons.

The audit plan is typically one document that includes and/or makes reference to the relevant audit plan information. Other audit plan considerations are listed in 9.1.2.2.

### **9.1.3 Audit team selection and assignments**

Equal Assurance maintains processes for selecting and appointing the audit team, taking into account the competence needed to achieve the audit objectives. If there is only one auditor, the auditor has the competence to perform the duties of a Lead Auditor applicable for that audit.

In deciding the size and composition of the audit team, consideration is given to the following:

- a) audit objectives, scope, criteria and estimated time of the audit;
- b) whether the audit is an integrated audit;
- c) the overall competence of the audit team needed to achieve the objectives of the audit;
- d) certification requirements (including statutory, regulatory or contractual requirements);
- e) language and culture;
- f) whether audit team members have previously audited the client's management system.

The necessary knowledge and skills of the Lead Auditor and auditors may be supplemented by technical experts, translators and interpreters who operate under the direction of an auditor. Where translators or interpreters are used, they are selected such that they do not unduly influence the audit. The criteria for the selection of technical experts are determined on a case-by-case basis by the needs of the audit team and the scope of the audit.

Auditors-in-training may be included in the audit team as participants, provided an auditor is appointed as an evaluator. The evaluator is competent to take over the duties and have final responsibility for the activities and findings of the auditor-in-training.

The Lead Auditor, in consultation with the account manager and audit team, assigns to each team member responsibility for auditing specific processes, functions, sites, areas or activities. Such assignments take into account the need for competence, and the effective and efficient use of the audit team, as well as different roles and responsibilities of auditors, auditors-in-training and technical experts. Changes to the work assignments may be made as the audit progresses to ensure achievement of the audit objectives.

### **9.1.4 Determination of audit time**

Equal Assurance maintains documented processes for determining audit time. For each client Equal Assurance determines the time needed to plan and accomplish a complete and effective audit of the client's management system. The audit time determined, and the justification for the determination, is recorded. In determining the audit time, Equal Assurance considers, among other things, the following aspects regarding the client:

- a) the relevant management system standard(s), as per the required assurance program(s);
- b) size and complexity;
- c) technological and regulatory context;
- d) any outsourcing of any activities included in the scope of the management system;
- e) the results of any prior audits;
- f) number of sites and multi-site considerations;
- g) the risks associated with the client's products, processes or activities;
- h) when audits are integrated.

Where specific criteria have been established for a specific assurance program (eg: CCF Code), these criteria shall be applied.

The time spent by any team member that is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and auditors-in-training) does not count in the above established audit time. In addition, the use of translators and interpreters can necessitate additional audit time.

#### **9.1.5 Multi-site sampling**

Where multi-site sampling is utilised for the audit of a client's management system covering the same activity in various locations, Equal Assurance develops a sampling methodology to ensure proper audit of the management system. The rationale for the sampling methodology is documented for each client.

#### **9.1.6 Communication of audit team tasks**

The tasks given to the audit team are defined, are made known to the client, and require the audit team to:

- a) examine and verify the structure, policies, processes, procedures, records and related documents of the client relevant to the management system,
- b) determine that these meet requirements relevant to the intended scope of certification,
- c) determine that the processes and procedures are established, implemented and maintained effectively,
- d) provide a basis for confidence in the client's management system, and
- e) communicate to the client, for its action, any inconsistencies between the client's policy, objectives and targets (consistent with the expectations in the relevant management system standard or other normative document) and the results.

#### **9.1.7 Communication concerning audit team members**

Equal Assurance provides the name of and, when requested, makes available background information on each member of the audit team, with sufficient time for the client to object to the appointment of any particular auditor or technical expert and for Equal Assurance to reconstitute the team in response to any valid objection.

#### **9.1.8 Communication of audit plan**

The audit plan is communicated and agreed upon, in advance, with the client.

#### **9.1.9 Conducting on-site audits**

##### 9.1.9.1 General

Equal Assurance maintains documented processes for conducting on-site audits. This process includes an opening meeting at the start of the audit and a closing meeting at the conclusion of the audit. In addition to physical location(s) (eg: factory), on-site audits can include remote access to electronic that is information relevant to the audit of the management system.

#### 9.1.9.2 Conducting an opening meeting

A formal opening meeting, where attendance is recorded, shall be held with the client's management and, where appropriate, those responsible for the functions or processes to be audited. The purpose of the opening meeting, which is usually be conducted by the Lead Auditor, is to provide a short explanation of how the audit activities will be undertaken. The degree of detail of the opening meeting is consistent with the familiarity of the client with the audit process, and includes the following elements:

- a) introduction of the participants, including an outline of their roles;
- b) confirmation of the scope of certification;
- c) confirmation of the audit plan (including type and scope of audit, objectives and criteria), any changes, and other relevant arrangements with the client, such as the date and time for the closing meeting, interim meetings between the audit team and the client's management;
- d) confirmation of formal communication channels between the audit team and the client;
- e) confirmation that the resources and facilities needed by the audit team are available;
- f) confirmation of matters relating to confidentiality;
- g) confirmation of relevant work safety, emergency and security procedures for the audit team;
- h) confirmation of the availability, roles and identities of any guides and observers;
- i) the method of reporting, including any grading of audit findings;
- j) information about the conditions under which the audit may be prematurely terminated;
- k) confirmation that the Lead Auditor and audit team representing the certification body is responsible for the audit and shall be in control of executing the audit plan including audit activities and audit trails;
- l) confirmation of the status of findings of the previous review or audit, if applicable;
- m) methods and procedures to be used to conduct the audit based on sampling;
- n) confirmation of the language to be used during the audit;
- o) confirmation that, during the audit, the client will be kept informed of audit progress and any concerns;
- p) opportunity for the client to ask questions.

#### 9.1.9.3 Communication during the audit

During the audit, the audit team periodically assesses audit progress and exchange information. The Lead Auditor reassigns work as needed between the audit team members and periodically communicates the progress of the audit and any concerns to the client.

Where the available audit evidence indicates that the audit objectives are unattainable or suggests the presence of an immediate and significant risk (e.g. safety), the Lead Auditor reports this to the client and, if possible, to the Account Manager to determine appropriate action. Such action may include reconfirmation or modification of the audit plan, changes to the audit objectives or audit scope, or termination of the audit. The Lead Auditor also reports the outcome of the action taken to the Account Manager.

The Lead Auditor reviews with the client any need for changes to the audit scope that becomes apparent as on-site auditing activities progress and report this to the Account Manager.

#### 9.1.9.4 Observers and guides

The presence and justification of observers during an audit activity is agreed to by Equal Assurance and the client prior to the conduct of the audit. The audit team ensures that observers do not influence or interfere in the audit process or outcome of the audit. Observers can be members of the client's organisation, consultants, witnessing accreditation body personnel, regulators or other justified persons.

Unless otherwise agreed to by the Lead Auditor and the client, each auditor is accompanied by a guide. Guide(s) are assigned to the audit team to facilitate the audit. The audit team ensures that guides do not influence or interfere in the audit process or outcome of the audit.

The responsibilities of a guide can include:

- a) establishing contacts and timing for interviews;
- b) arranging visits to specific parts of the client and/or site;
- c) ensuring that rules concerning site safety and security procedures are known and respected by the audit team members;
- d) witnessing the audit on behalf of the client; and/or
- e) providing clarification or information as requested by an auditor.

#### 9.1.9.5 Collecting and verifying information

During the audit, information relevant to the audit objectives, scope and criteria (including information relating to interfaces between functions, activities and processes) is collected by appropriate sampling and verified to become audit evidence.

Methods to collect information include, but are not limited to:

- a) interviews;
- b) observation of processes and activities; and/or
- c) review of documentation and records.

#### 9.1.9.6 Identifying and recording audit findings

Audit findings summarising conformity and detailing nonconformity and its supporting audit evidence is recorded and reported to enable an informed certification decision to be made or the certification to be maintained.

Unless prohibited by the requirements of an assurance program, opportunities for improvement can be identified and recorded. Audit findings, however, which are nonconformities in accordance with 9.1.15 b) and c) are not recorded as opportunities for improvement.

A finding of nonconformity is recorded against a specific requirement of the audit criteria, contains a clear statement of the nonconformity and identifies in detail the objective evidence on which the nonconformity is based. Nonconformities are discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood. The auditor however refrains from suggesting the cause of nonconformities or their solution. In line with the Client Charter, nonconformities, consistent with the requirements of 9.1.15 b), can be classified as either extreme- or high-risk audit findings, whereas other nonconformities (see 9.1.15 c)) can be classified as medium- or low-risk audit findings.

The Lead Auditor attempts to resolve any diverging opinions between the audit team and the client concerning audit evidence or findings, and unresolved points are recorded.

#### 9.1.9.7 Preparing audit conclusions

Prior to the closing meeting, the audit team:

- a) reviews the audit findings, and any other appropriate information collected during the audit, against the audit objectives;
- b) agrees upon the audit conclusions, taking into account the uncertainty inherent in the audit process;
- c) identifies any necessary follow-up actions; and
- d) confirm the appropriateness of the audit programme or identify any modification required (e.g. scope, audit time or dates, surveillance frequency, competence).

#### 9.1.9.8 Conducting the closing meeting

A formal closing meeting, where attendance is recorded, is held with the client's management and, where appropriate, those responsible for the functions or processes audited. The purpose of the closing meeting, which is normally be conducted by the Lead Auditor, is to present the audit conclusions, including the recommendation regarding certification. Any nonconformities are presented in such a manner that they are understood (but not necessarily accepted by the client), and the timeframe for responding is agreed.

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

- a) advising the client that the audit evidence collected is based on a sample of the information; thereby introducing an element of uncertainty;
- b) the method and timeframe of reporting, including any grading of audit findings;
- c) the Equal Assurance process for handling nonconformities including any consequences relating to the status of the client's certification;
- d) the timeframe for the client to present a plan for correction and corrective action for any nonconformities identified during the audit;
- e) post audit activities required by Equal Assurance;
- f) information about the complaint handling and appeal processes.

The client is given opportunity for questions. Any diverging opinions regarding the audit findings or conclusions between the audit team and the client is discussed and resolved where possible. Any diverging opinions that are not resolved are recorded and referred to the Account Manager.

#### 9.1.10 Audit report

Equal Assurance provides a written report for each audit. The audit team may identify opportunities for improvement but do not specify solutions. Equal Assurance maintains ownership of the audit report.

The Lead Auditor ensures that the audit report is prepared and is responsible for its content. The audit report provides an accurate, concise and clear record of the audit to enable an informed certification decision to be made, and includes or refers to the following:

- a) identification of Equal Assurance as the certification body;
- b) the name and address of the client and the name of the client's management representative;
- c) the type of audit (e.g. initial, surveillance or recertification audit);
- d) the audit criteria;
- e) the audit objectives;
- f) the audit scope, particularly identification of the organizational or functional units or processes audited and the time of the audit;
- g) identification of the Lead Auditor, audit team members and any accompanying persons;
- h) the dates and places where the audit activities (on-site or off-site) were conducted;
- i) audit findings, evidence and conclusions, consistent with the requirements of the type of audit;
- j) any unresolved issues, if identified.

#### **9.1.11 Cause analysis of nonconformities**

Equal Assurance requires the client to analyse the cause and describe the specific corrective actions planned and/or taken to eliminate detected nonconformities, within a defined time.

#### **9.1.12 Effectiveness of corrections and corrective actions**

Equal Assurance reviews for acceptability the corrective actions submitted by the client. Equal Assurance verifies the effectiveness of any correction and corrective actions taken. The evidence obtained to support the resolution of nonconformities is recorded, and the client is informed of the result of the review and verification. Verification of effectiveness of correction and corrective action can be carried out based on a review of documentation provided by the client, or where necessary, through verification on-site.

#### **9.1.13 Additional audits**

The client is informed of the response required to verify correction and corrective action. This can include supply of documented evidence (9.1.12), follow-up audits and/or special audits (see 9.5).

#### **9.1.14 Certification decision**

Equal Assurance ensures that the persons making the certification or re-certification decisions (ie: Assurance Managers) are different from those who carried out the audits.

#### **9.1.15 Actions prior to making a decision**

Equal Assurance confirms, prior to making a certification or re-certification decision, that:

- a) the information provided by the audit team is sufficient with respect to the certification requirements and the scope for certification;
- b) it has reviewed, accepted and verified the effectiveness of correction and corrective actions, for all nonconformities that represent:
  - 1) failure to fulfil one or more requirements of the management system standard, or
  - 2) a situation that raises significant doubt about the ability of the client's management system to achieve its intended outputs; and
- c) it has reviewed and accepted the client's planned correction and corrective action for any other nonconformities.

## **9.2 Initial audit and certification**

### **9.2.1 Application**

Equal Assurance requires an authorised representative of the client to provide the necessary information to enable it to establish the following:

- a) the desired scope of the certification;
- b) the general features of the client, including its name and the address(es) of its physical location(s), significant aspects of its process and operations, and any relevant legal obligations;
- c) general information, relevant for the field of certification applied for, concerning the client, such as its activities, human and technical resources, functions and relationship in a larger corporation, if any;
- d) information concerning all outsourced processes used by the client that will affect conformity to requirements;
- e) the assurance program, standards or other requirements for which the client is seeking certification; and
- f) information concerning the use of consultancy relating to the management system.

### **9.2.2 Application review**

Before proceeding with the audit, Equal Assurance conducts a review of the application and supplementary information for certification to ensure that:

- a) the information about the client and its management system is sufficient for the conduct of the audit;
- b) the requirements for certification are clearly defined and documented, and that the client is aware of and/or has received these requirements;
- c) any known difference in understanding between Equal Assurance and the client is resolved;
- d) Equal Assurance has the competence and ability to perform the certification activity;
- e) the scope of certification sought, the location(s) of the client's operations, time required to complete audits and any other points influencing the certification activity are taken into account (language, safety conditions, threats to impartiality, etc.); and
- f) records of the justification for the decision to undertake the audit are maintained.

Following the review of the application, Equal Assurance either accepts or declines an application for certification. When Equal Assurance declines an application for certification as a result of the review of application, the reasons for declining an application are documented and made clear to the client. When declining an application for certification, Equal Assurance is careful not to act in conflict with the principles set out in Clause 4.

Based on this review, Equal Assurance determines the competences it needs to include in its audit team and for the certification decision.

Following acceptance by the client, the audit team is appointed. The audit team is composed of auditors (and technical experts, as necessary) who, between them, have the totality of the competences identified by Equal Assurance for the certification of the client. The selection of the audit team is performed with reference to the designations of competence of auditors and technical experts made under 7.2, and may include the use of both internal and external human resources.

The individual(s) who will be conducting the certification decision shall also be appointed to ensure appropriate competence is available (see 7.2).

### **9.2.3 Initial certification audit**

The initial certification audit of a management system is conducted in two stages: stage 1 (pre-certification) and stage 2 (certification).

#### **9.2.3.1 Pre-certification audit**

The pre-certification audit is performed to:

- a) audit the client's management system documentation;
- b) evaluate the client's location and site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for the certification audit;
- c) review the client's status and understanding regarding requirements of the standard (relevant to the assurance program), in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system;
- d) collect necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory aspects and compliance (eg: quality, safety, environmental, legal issues, associated risks, etc.);
- e) review the allocation of resources for the certification audit and agree with the client on the details of the certification audit;
- f) provide a focus for planning the certification audit by gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects; and
- g) evaluate if the internal audits and management review are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for the certification audit.

For most management systems, whilst it is not always possible or practicable, in order to achieve the objectives stated above, Equal Assurance seeks to carry out least part of the pre-certification audit at the client's premises.

Pre-certification audit findings are documented and communicated to the client, including identification of any areas of concern that could be considered as nonconforming during the certification audit.

In determining the interval between pre-certification and certification audits, consideration is given to the needs of the client to resolve areas of concern identified during the pre-certification audit. Equal Assurance may also need to revise its arrangements for the certification audit.

### 9.2.3.2 Certification audit

The purpose of the certification audit is to evaluate the implementation, including effectiveness, of the client's management system. The certification audit takes place at the site(s) of the client. It includes at least the following:

- a) information and evidence about conformity to requirements of the applicable management system standard or other normative document;
- b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable assurance program, management system standard or other normative document);
- c) the client's management system and performance as regards to identification, monitoring and evaluation of legal compliance, as applicable;
- d) operational control of the client's processes;
- e) internal auditing and management review;
- f) management responsibility for the client's policies; and
- g) links between the criteria for certification, policy, performance objectives and targets (consistent with the expectations in the applicable assurance program, management system standard or other normative document), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions.

### 9.2.4 Initial certification audit conclusions

The audit team analyses all information and audit evidence gathered during the pre-certification and certification audits to review the audit findings and agree on the audit conclusions.

### 9.2.5 Information for granting initial certification

The information provided by the audit team to Equal Assurance for the certification decision shall include, as a minimum:

- a) the audit reports;
- b) comments on any nonconformities and, where applicable, the correction and corrective actions taken by the client;
- c) confirmation of the information provided to Equal Assurance used in the application review (see 9.2.2); and
- d) a recommendation whether or not to grant certification, together with any conditions or observations.

Equal Assurance makes the certification decision on the basis of an evaluation of the audit findings and conclusions and any other relevant information (e.g. public information, comments on the audit report from the client).

## **9.3 Surveillance activities**

### **9.3.1 General**

Equal Assurance develops its surveillance activities so that representative areas and functions covered by the scope of the management system are monitored on a regular basis, and take into account changes to the certified client and its management system.

Surveillance activities include on-site audits assessing the certified client's management system's fulfilment of specified requirements with respect to the standard (relevant to the assurance program) to which the certification is granted. Other surveillance activities may include:

- a) enquiries from Equal Assurance to the certified client on aspects of certification;
- b) reviewing client's statements regarding its operations (eg: promotional material, website);
- c) requests to the client to provide relevant documents and records (in hard or soft copy); and
- d) other means of monitoring the certified client's performance.

### **9.3.2 Surveillance audit**

Surveillance audits are on-site audits, but are not necessarily full system audits, and are planned together with the other surveillance activities so that Equal Assurance can maintain confidence that the certified management system continues to fulfil requirements between re-certification audits (see 9.4). The audit programme for surveillance audits includes, as a minimum:

- a) internal audits and management review;
- b) a review of actions taken on nonconformities identified during the previous audit;
- c) treatment of complaints;
- d) effectiveness of the management system in achieving the certified client's objectives;
- e) progress of planned activities aimed at continual improvement;
- f) continuing operational control;
- g) review of any changes; and
- h) use of Q-Marks<sup>™</sup> and/or any other reference to certification.

Surveillance audits are conducted at least once a year. The date of the first surveillance audit following initial certification cannot be more than 12 months from the last day of the certification audit.

### **9.3.3 Maintaining certification**

Equal Assurance maintains certification based on demonstration that the client continues to satisfy the requirements of the management system standard relevant to the applicable assurance program, and a positive conclusion by the lead auditor is made. No further independent review is needed, on the basis that:

- a) for any nonconformity or other situation that may lead to suspension or withdrawal of certification, Equal Assurance requires the lead auditor to report the need to initiate a review by appropriately competent personnel (see 7.2), different from those who carried out the audit, to determine whether certification can be maintained; and
- b) Equal Assurance ensures competent personnel (see 7.2) monitor its surveillance activities, including monitoring the reporting by its auditors, to confirm that the certification activity is operating effectively.

## **9.4 Re-certification**

### **9.4.1 Re-certification audit planning**

In line with the Audit Charter, a re-certification audit is planned and conducted to evaluate the continued fulfilment of all of the requirements of the relevant management system standard or other normative document in respect to the applicable assurance program. The purpose of the re-certification audit is to confirm the continued conformity and effectiveness of the management system as a whole, and its continued relevance and applicability for the scope of certification.

The re-certification audit considers the performance of the management system over the period of certification, and includes the review of previous audit reports as applicable.

Re-certification audit activities may need to have a pre-certification audit (see 9.2.3.1) in situations where there have been significant changes to the management system, the client, or the context in which the management system is operating (e.g. changes to legislation).

In the case of multiple sites or certification to multiple management system standards and/or assurance programs being provided by Equal Assurance, the planning for the audit ensures adequate on-site audit coverage to provide confidence in the certification.

### **9.4.2 Re-certification audit**

The re-certification audit includes 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; and
- c) whether the operation of the certified management system contributes to the achievement of the organisation's policy and objectives.

When, during a re-certification audit, instances of nonconformity or lack of evidence of conformity are identified, Equal Assurance has defined time limits for correction and corrective actions to be implemented prior to the expiration of certification.

### **9.4.3 Information for granting re-certification**

Equal Assurance make decisions on renewing certification based on the results of the re-certification audit, as well as the results of the review of the management system over the period of certification and complaints received from users or beneficiaries of certification.

## **9.5 Special audits**

### **9.5.1 Extensions to scope**

In response to an application for extension to the scope of a certification already granted, Equal Assurance undertakes a review of the application and determines any audit activities necessary to decide whether or not the extension may be granted. This may be conducted in conjunction with a surveillance audit.

### **9.5.2 Short-notice audits**

It may be necessary for Equal Assurance to conduct audits of certified clients at short notice. Such cases may include:

- a) in order to investigate complaints (see 9.8);
- b) in response to changes (see 8.6.3);
- c) as follow up on suspended client certifications (see 9.6); or
- d) to review progress on correction and corrective action on high-risk audit findings or significant failures of the client's management system (9.1).

In such cases, Equal Assurance:

- a) describes and makes known in advance to the certified client (eg: in the Client Charter) the conditions under which these short notice visits are to be conducted; and
- b) exercises additional care in the assignment of the audit team because of the lack of opportunity for the client to object to audit team members.

## **9.6 Suspending, withdrawing or reducing the scope of certification**

As specified in the Audit Charter and Client Charter, Equal Assurance maintains documented processes for suspension, withdrawal or reduction of the scope of certification, and the subsequent actions it takes.

Equal Assurance may suspend certification in cases when, for example, the:

- client's certified management system has persistently or seriously failed to meet certification requirements, including requirements for the effectiveness of the management system;
- certified client does not allow surveillance or re-certification audits to be conducted at the required frequencies; or
- certified client has voluntarily requested a suspension.

Under suspension, the client's management system certification is temporarily invalid. Equal Assurance has enforceable arrangements with its clients to ensure that in case of suspension the client refrains from further promotion of its certification. Equal Assurance makes the suspended status of the certification publicly accessible (see 8.1) and takes any other related measures it deems appropriate.

Failure to resolve the issues that have resulted in the suspension in a time established by Equal Assurance (in most cases the suspension would not be allowed to exceed beyond 6 months) results in withdrawal or reduction of the scope of certification.

Equal Assurance reduces the client's scope of certification to exclude the parts not meeting the requirements, when the client has persistently or seriously failed to meet the certification requirements for those parts of the scope of certification. Any such reduction is in line with the requirements of the standard used for certification, relevant to the applicable assurance program.

Equal Assurance maintains enforceable arrangements with the certified client concerning conditions of withdrawal (see 8.4) ensuring upon notice of withdrawal of certification that the client discontinues its use of all advertising matter that contains any reference to a certified status.

Upon request by any party, Equal Assurance correctly states the status of certification of a client's management system as being suspended, withdrawn or reduced.

## **9.7 Appeals**

Equal Assurance has a documented process to receive, evaluate and make decisions on appeals.

A description of the appeals-handling process is publicly accessible in the Client Charter.

Equal Assurance is responsible for all decisions at all levels of the appeals-handling process, and ensures that the persons engaged in the appeals-handling process are different from those who carried out the audits and made the certification decisions.

Submission, investigation and decision on appeals will not result in any discriminatory actions against the appellant.

The appeals-handling process includes at least the following elements and methods:

- a) an outline of the process for receiving, validating and investigating the appeal, and for deciding what actions are to be taken in response to it, taking into account the results of previous similar appeals;
- b) tracking and recording appeals, including actions undertaken to resolve them; and
- c) ensuring that any appropriate correction and corrective action is taken.

Equal Assurance will acknowledge receipt of the appeal and provides the appellant with progress reports and the outcome.

The decision to be communicated to the appellant is made by, or reviewed and approved by, individual(s) not previously involved in the subject of the appeal.

Equal Assurance will give formal notice to the appellant of the end of the appeals-handling process.

## 9.8 Complaints

A description of the complaints-handling process for Equal Assurance is publicly accessible at the Equal Assurance website at [www.equalassurance.com](http://www.equalassurance.com).

Upon receipt of a complaint, Equal Assurance will confirm whether the complaint relates to certification activities that it is responsible for and, if so, deals with it. If the complaint relates to a certified client, then examination of the complaint will also consider the effectiveness of the certified management system.

In line with the Client Charter and Systems Charter, any complaint about a certified client is also referred by Equal Assurance to the certified client in question at an appropriate time.

Equal Assurance maintains a documented process to receive, evaluate and make decisions on complaints. This process is subject to requirements for confidentiality, as it relates to the complainant and to the subject of the complaint.

In line with the principles of ISO 10002, the complaints-handling process includes the following elements and methods:

- a) an outline of the process for receiving, validating, investigating the complaint, and for deciding what actions are to be taken in response to it;
- b) tracking and recording complaints, including actions undertaken in response to them; and
- c) ensuring that any appropriate correction and corrective action are taken.

Equal Assurance will be responsible for gathering and verifying all necessary information to validate the complaint.

Whenever possible, and in line with the Systems Charter, Equal Assurance will acknowledge receipt of the complaint, and will provide the complainant with progress reports and the outcome.

The decision to be communicated to the complainant is made by, or reviewed and approved by, individual(s) not previously involved in the subject of the complaint.

Whenever possible, and in line with the Systems Charter, Equal Assurance will give formal notice of the end of the complaints-handling process to the complainant.

Equal Assurance will determine, together with the client and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution shall be made public.

## **9.9 Records of applicants and clients**

Equal Assurance maintains records on the audit and other certification activities for all clients, including all organisations that submitted applications, and all organisations audited, certified, or with certification suspended or withdrawn.

Records on certified clients include the following:

- a) application information and pre-certification, certification, surveillance and re-certification audit reports;
- b) agreements in relation to assurance and certification services;
- c) justification of the methodology used for sampling, including the sampling employed to assess the management system and/or to select sites in the context of multi-site assessment;
- d) justification for auditor time determination (see 9.1);
- e) verification of correction and corrective actions;
- f) records of complaints and appeals, and any subsequent correction or corrective actions;
- g) committee deliberations and decisions, if applicable;
- h) documentation of the certification decisions;
- i) certification documents, including the scope of certification with respect to product, process or service, as applicable; and
- j) related records necessary to establish the credibility of the certification, such as evidence of the competence of auditors and technical experts.

Equal Assurance keeps the records on applicants and clients secure to ensure that the information is kept confidential. Records are transported, transmitted or transferred in a way that ensures that confidentiality is maintained.

Equal Assurance maintains documented processes in Systems Charter on the retention of records. Records are as a minimum retained for the duration of the current cycle plus one full certification cycle, or for as long as the law stipulates.

## **10. Management system requirements**

### **10.1 Options**

Equal Assurance maintains TEAMS as the management system capable of supporting and demonstrating the consistent achievement of the requirements of ISO/IEC 17021. In addition to meeting the requirements of Sections 1 to 9 of this Assurance Charter, Equal Assurance also maintains more general management system requirements in line with 10.3 of ISO/IEC 17021.

## **10.2 Standards for management system requirements**

In principle, Equal Assurance aims to maintain management system requirements that are consistent with the management system requirements of the assurance programs it delivers. As such, general management system requirements are provided in 10.3.



### **10.3 General management system requirements**

Equal Assurance maintains the Systems Charter that, along with its references, provides the primary mechanisms by which it delivers management system requirements. An outline of these management system requirements follows, and is provided in line with Clause 10.3 of ISO/IEC 17021.

#### **10.3.1 General**

Equal Assurance has established, documented, implemented and maintains a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of ISO/IEC 17021.

The Group Assurance Manager:

- has established and documented policies and objectives for its activities;
- provides evidence of its commitment to the development and implementation of the management system in accordance with the requirements of ISO/IEC 17021 through the approval of the Assurance Charter;
- ensures that the policies are understood, implemented and maintained at all levels of Equal Assurance; and
- is the member of management who, irrespective of other responsibilities, has responsibility and authority that includes:
  - ensuring that processes and procedures needed for the management system are established, implemented and maintained; and
  - reporting on the performance of TEAMS and any need for improvement.

#### **10.3.2 Management system manual**

All applicable requirements of ISO/IEC 17021 have been addressed either in this Assurance Charter (being the management system manual for TEAMS) or in associated documents. Through the Systems Charter, Equal Assurance ensures that the Assurance Charter and relevant associated documents are accessible to all relevant personnel.

#### **10.3.3 Control of documents**

In line with the Systems Charter, Equal Assurance maintains documented processes to control the documents (internal and external) that relate to the fulfilment of ISO/IEC 17021. These documented processes define the controls needed to:

- a) approve documents for adequacy prior to issue;
- b) review and update as necessary and re-approve documents;
- c) ensure that changes and the current revision status of documents are identified;
- d) ensure that relevant versions of applicable documents are available at points of use;
- e) ensure that documents remain legible and readily identifiable;
- f) ensure that documents of external origin are identified and their distribution controlled; and
- g) prevent the unintended use of obsolete documents, and to apply suitable identification to them if they are retained for any purpose.

Documentation at Equal Assurance can be in any form or type of medium.

### **10.3.4 Control of records**

Equal Assurance maintains documented processes in the Systems Charter:

- to define the controls needed for the identification, storage, protection, retrieval, retention time and disposition of its records related to the fulfilment of ISO/IEC 17021;
- for retaining records for a period consistent with its contractual and legal obligations; and
- for accessing these records, consistent with the confidentiality arrangements.

For control of records on certified clients, see also 9.9.

### **10.3.5 Management review**

#### 10.3.5.1 General

Equal Assurance maintains documented processes in the Business Charter, established by the Group Assurance Manager, to review TEAMS at planned intervals to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of the requirements of ISO/IEC 17021. These reviews are conducted at least once a year.

#### 10.3.5.2 Review inputs

The input to the management review includes information related to:

- a) results of internal and external audits;
- b) feedback from clients and interested parties related to the fulfilment of ISO/IEC 17021;
- c) feedback from the Assurance Committee established to safeguarding impartiality;
- d) the status of preventive and corrective actions;
- e) follow-up actions from previous management reviews;
- f) the fulfilment of objectives;
- g) changes that could affect TEAMS; and
- h) appeals and complaints.

#### 10.3.5.3 Review outputs

The outputs from the management review include decisions and actions related to:

- a) improvement of the effectiveness of TEAMS and its processes;
- b) improvement of the certification services related to the fulfilment of ISO/IEC 17021; and
- c) resource requirements.

### **10.3.6 Internal audits**

As specified in the Systems Charter, Equal Assurance maintains documented processes for internal audits to verify that it fulfils the requirements of ISO/IEC 17021 and that TEAMS is effectively implemented and maintained. Such internal audits are conducted in line with the guidelines provided in ISO 19011.

An internal audit programme is planned, taking into consideration the importance of the processes and areas to be audited, as well as the results of previous audits.

Internal audits are performed at least once a year. The frequency of internal audits may be reduced if Equal Assurance is demonstrably satisfied that TEAMS continues to be effectively implemented according to ISO/IEC 17021 and has proven stability.

Equal Assurance ensures that:

- a) internal audits are conducted by qualified personnel knowledgeable in certification, auditing and the requirements of ISO/IEC 17021;
- b) auditors do not audit their own work;
- c) personnel responsible for the area audited are informed of the outcome of the audit;
- d) actions resulting from internal audits are taken in a timely and appropriate manner; and
- e) any opportunities for improvement are identified.

### **10.3.7 Corrective actions**

As specified in the Systems Charter, Equal Assurance maintains documented processes for identification and management of nonconformities in its operations and, where necessary, takes actions to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions are appropriate to the impact of the problems encountered. The documented processes define requirements for:

- a) identifying nonconformities (eg: from complaints and internal audits);
- b) determining the causes of nonconformity;
- c) correcting nonconformities;
- d) evaluating the need for actions to ensure that nonconformities do not recur;
- e) determining and implementing in a timely manner, the actions needed;
- f) recording the results of actions taken; and
- g) reviewing the effectiveness of corrective actions.

### **10.3.8 Preventive actions**

As specified in the Systems Charter, Equal Assurance maintains documented processes for taking preventive actions to eliminate the causes of potential nonconformities. Preventive actions taken are appropriate to the probable impact of the potential problems. The documented processes define requirements for:

- a) identifying potential nonconformities and their causes;
- b) evaluating the need for action to prevent the occurrence of nonconformities;
- c) determining and implementing the action needed;
- d) recording the results of actions taken; and
- e) reviewing the effectiveness of the preventive actions taken.

## Document change control

The following provides a summary of the on-going changes made to the Assurance Charter.

Issue Number	Section Number	Details of changes	Approved by	Date
1	N/A	See Issues 1, 2 or 3.	Group Assurance Manager	15May07 to 27Aug07
2				
3				
4	All	General typographical changes and/or improvements.	Group Assurance Manager	10Feb08
	-	Changed address on cover page.		
5	All	General typographical changes and/or improvements.	Group Assurance Manager	27Feb09
	1	Removed AS 4360, Privacy, AS 3806, AS 8000 assurance programs.		
	6.1	Added Practice Manager to organisational chart.		
	7.4	Added reference to Systems Charter.		
	8.2	Changed Certificate of "Compliance" to "Confidence".		
	8.4			
10.3.3	Added reference to Systems Charter.			
6	All	General typographical changes and/or improvements.	Group Assurance Manager	10May10
	0	Added TEAMS graphic and included reference to Qdos.		
	7.3	Added reference to Special Terms.		
	8.1 8.3	Changed reference to "Certified Clients Register".		
7	All	General typographical changes and/or improvements Deleted reference to Equal Assurance address	Group Assurance Manager	08Oct10
	1	Added reference to OHSAS 18001		
	7.1			
8	All	General typographical changes and/or improvements	Group Assurance Manager	29Jul11
	Intro.	Changed requirements to align with ISO 17021:2011.		
	3	Changed requirements to align with ISO 17021:2011.		
		Deleted AS and NZS from assurance program titles.		
		Added ISO 10002 Assurance Program.		
	4.3	Changed requirements to align with ISO 17021:2011.		
	7.1	Changed requirements to align with ISO 17021:2011.		
	7.2	Changed requirements to align with ISO 17021:2011.		
	9.1	Changed requirements to align with ISO 17021:2011.		
9.2.2	Changed requirements to align with ISO 17021:2011.			
6.1	Changed "Administration Officer "to "Support Officer".			