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REVIEW	DATE	CHANGES
A	06-05-2013	Drafting the draft document and its first use
B	04-07-2013	Integrations
C	01-10-2014	Integrations field welding procedures qualification, PEFC CoC and IFCC
D	18-11-2014	Transposition of the requirements of the standards: IFCC ST 1002: 2013, IFCC ST 1001: 2014.
E	13-01-2015	Inserted New AJA Policy – Observation from ACCREDIA
F	22-02-2016	Accreditation UNI CEI 11352
G	16-02-2017	Change of Technical Director
H	21-04-2017	Reliefs ACCREDIA 19/04/2017 (Desktop review)
I	01-03-2019	ISO 17021 - Remove references to 17065 and reformat with new AJA logo and font
J	01-07-2020	Reliefs ACCREDIA 11-02-2020 (Desktop review) - § 4.5.1 / 7.5 / 8.1 / 10

APPROVED

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Foreword

This Manual and associated procedures and instructions are confidential and intended for controlled circulation within **AJA Registrars Europe S.r.l.**

No copies or extracts will be made or passed to other companies or persons. Should additional copies be required or extracts requested by external authorities, this request will be passed to the Certification Manager for review and, if appropriate, issue of the additional documents.

Introduction

AJA Registrars Europe S.r.l. is an independent third party Certification Body operating both nationally and internationally and holds all rights to the responsibility of certification/registration activities. AJA Registrars Europe S.r.l. is fully funded and revenue is derived from Certification and Personnel Training services. AJA Registrars Europe S.r.l. was established with the aim of creating a Global Network of offices which can provide Multi National Clients with a global approach, while remaining responsive and sensitive to the local markets and small companies' needs.

1 Scope

This document constitutes what is referred to as a Quality Manual in ISO/IEC 17000.

2 Normative References

ISO 9000:2005 – Quality Management Systems – Fundamentals and Vocabulary

IFCC ST 1000:2013: IFCC Certification Scheme – Introduction

IFCC ST 1001:2014 Rev. 3 - Sustainable Forest Management – Requirements

Annex 4, IFCC ST 1001 (Amendment 1), Sustainable Community Forest Management Certification - Requirements

IFCC ST 1002:2013 - Requirements for Bodies Providing Audit and Certification of Sustainable Forest Management

IFCC PD 1005:2017, IFCC Procedures for Group Forest Management

IFCC ST 1003:2013: IFCC Logo usage rules – requirements

IFCC PD 1002:2013: IFCC Procedures for Investigation and Resolution of Complaints and Appeals

PEFC ST 2001:2008 PEFC Logo Usage Rules – Requirements

ISO/IEC 17021:2015 - Conformity assessment - Requirements for bodies providing audit and certification of management systems

ISO 19011:2018, Guidelines for auditing management systems

ISO/IEC 17011:2017, Conformity assessment - General requirements for accreditation bodies accrediting conformity assessment bodies

ACCREDIA RG-01 - Rev.04 - 18.07.2017 – Regolamento per l'accreditamento degli Organismi di Certificazione, Ispezione, Verifica e Convalida – Parte Generale

RG-01-01 - Rev.01 - 18.07.2017 – Regolamento per l'accreditamento degli Organismi di Certificazione di Sistemi di Gestione

RG-09 - Rev.08 - 05.11.2018 - Regolamento per l'utilizzo del Marchio ACCREDIA

3 Terms and Definitions

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

3.1 – Certified Client

An organisation whose management system has been certified by AJA Registrars Europe S.r.l.

3.2 - Impartiality

Presence of objectivity

Note 1 to entry: Objectivity means that conflicts of interest do not exist, or are resolved so as not to adversely influence subsequent activities of the AJA Registrars Europe S.r.l..

Note 2 to entry: Other terms that are useful in conveying the element of impartiality include "independence", "freedom from conflict of interests", "freedom from bias", "lack of prejudice", "neutrality", "fairness", "open-mindedness", "even-handedness", "detachment", "balance".

3.3 – Management System Consultancy

Participation in establishing, implementing or maintaining a management system

EXAMPLE 1: Preparing or producing manuals or procedures.

EXAMPLE 2: Giving specific advice, instructions or solutions towards the development and implementation of a management system.

Note 1 to entry: 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; i.e. the trainer should not provide client-specific solutions.

Note 2 to entry: The provision of generic information, but not client specific solutions for the improvement of processes or systems, is not considered to be consultancy. Such information may include:

- explaining the meaning and intention of certification criteria;
- identifying improvement opportunities;
- explaining associated theories, methodologies, techniques or tools;
- sharing non-confidential information on related best practices;
- Other management aspects that are not covered by the management system being audited.

3.4 – Third Party Certification Audit

Audit carried out by an auditing organization independent of the client and the user, for the purpose of certifying the client's management system

Note 1 In the definitions which follow, the term "audit" has been used for simplicity to refer to third-party certification audit.

- Note 2 Third-party certification audits include initial, surveillance, re-certification audits, and can also include special audits.
- Note 3 Third-party certification audits are typically conducted by audit teams of those bodies providing certification of conformity to the requirements of management system standards.
- Note 4 A joint audit is when two or more auditing organizations cooperate to audit a single client.
- Note 5 A combined audit is when a client is being audited against the requirements of two or more management systems standards together.
- Note 6 An integrated audit is when a client has integrated the application of requirements of two or more management systems standards into a single management system and is being audited against more than one standard.

3.5 - Client

Organization whose management system is being audited for certification purposes

3.6 - Auditor

Person who conducts an audit

3.7 - Competence

Ability to apply knowledge and skills to achieve intended results

3.8 - Guide

Person appointed by the client to assist the audit team

3.9 - Observer

Person who accompanies the audit team but does not audit

3.10 – Technical Area

Area characterized by commonalities of processes relevant to a specific type of management system. & its intended results

3.11 – Nonconformity

Non-fulfilment of a requirement

3.12 – Major nonconformity

Nonconformity that affects the capability of the management system to achieve the intended results

Note 1: Nonconformities could be classified as major in the following circumstances:

- ▶ If there is a **significant doubt** that effective process control is in place, or that products or services will meet specified requirements;
- ▶ A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

3.13 – Minor nonconformity

Nonconformity that does not affect the capability of the management system to achieve the intended results.

3.14 – Technical expert

Person who provides specific knowledge or expertise to the audit team

Note 1: Specific knowledge or expertise is that which relates to the organization, the process or activity to be audited.

3.15 – Certification scheme

Conformity assessment system related to management systems to which the same specified requirements, specific rules and procedures apply

3.16 – Audit time

Time needed to plan and accomplish a complete and effective audit of the client organization's management system

3.17 – Duration of management system certification audits

Part of audit time spent conducting audit activities from the opening meeting to the closing meeting, inclusive

Note 1: Audit activities normally include:

- conducting the opening meeting;
- performing document review while conducting the audit;
- communicating during the audit;
- assigning roles and responsibilities of guides and observers;
- collecting and verifying information;
- generating audit findings;
- preparing audit conclusions;
- conducting the closing meeting.

4 Principles

4.1 General

4.1.1

The principles stated in ISO/IEC 17021 and IFCC ST 1002 are the basis for the subsequent specific performance and descriptive requirements within the International Standard. The International Standard and this Policy Manual do not give specific requirements for all situations that can occur. Therefore the principles of the International Standard are applied as guidance for the decisions that may need to be made for unanticipated situations. Principles are not requirements. Common Sense is applied.

4.1.2

The overall aim of AJA Registrars Europe S.r.l.' certification is to give confidence to all parties that an

approved management system fulfils the specified requirements. AJA Registrars Europe S.r.l. recognises the need for 3rd party certification bodies who can provide a high quality of service with low costs to both service this need and to support industries in their development; both Nationally and Internationally. AJA Registrars Europe S.r.l. understands that the value of certification is the degree of public confidence and trust that is established by an impartial and competent assessment. Parties who have an interest in certification may include, but are not limited to the following:

- a) The clients of AJA Registrars Europe S.r.l.
- b) The customers of the organisations whose management systems have been certified by AJA Registrars Europe S.r.l.
- c) Governmental authorities
- d) Non-governmental organisations
- e) Consumers and other members of the public

4.1.3

AJA Registrars Europe S.r.l.' principles for inspiring confidence include

- Impartiality
- Competence
- Responsibility
- Openness
- Confidentiality
- Responsiveness to complaints

To help achieve quality and professionalism in the audit process, the management of AJA Registrars Europe S.r.l. has identified twelve points on which the approach to certification and the AJA Registrars Europe S.r.l. systems are structured. These are to:

1. Ensure impartiality and independence is applied throughout the audit and certification process
2. Provide total confidentiality to clients and prospective clients at all times
3. Provide a consistent approach to all audits
4. Ensure audit teams employ a practical common-sense approach, based on experience and technical expertise
5. Operate a professional service which is approachable and accessible at all levels to clients and potential clients
6. Maintain an efficient and cost effective service, resulting in low cost certification with high maintenance of standards
7. Provide a global capability to multi-site and multi-country clients
8. Provide a full package of services within AJA Registrars Europe S.r.l. to be able to offer a one-stop-shop for certification services

9. Provide confidence to accreditation authorities that AJA Registrars Europe S.r.l. can, at all times, comply with their accreditation requirements
10. Ensure that AJA Registrars Europe S.r.l. do not practice any form of discrimination, such as hidden discrimination, by the speeding up or delaying of applications
11. Process all applications unconditionally and without bias
12. Ensure supplementary assessment information is limited to an outline of the assessment process and does not include guidance on the application and implementation of the relevant standard

The senior management of AJA Registrars Europe S.r.l. are totally committed to the policies and procedures presented within this Policy Manual and AJA Registrars Europe S.r.l.' Documented System, which are mandatory and binding on all management and staff (both permanent and subcontract), who will be required to exhibit the same commitment by implementing and applying these policies in all their day-to-day activities, both diligently and with enthusiasm.

4.2 Impartiality

4.2.1

Being impartial, and being perceived to be impartial, is necessary for AJA Registrars Europe S.r.l. to deliver certification that provides confidence (see Procedure 16). This also enables AJA Registrars Europe S.r.l. to maintain the professionalism and credibility of the audit and certification process. Impartiality is not only an accreditation requirement for a third party certification and inspection body; it is an absolute necessity to maintain the professionalism and credibility of the Audit, Inspection and certification process. It is therefore the objective of AJA Registrars Europe S.r.l. to ensure that impartiality is maintained as an integral part of the Audit and Inspection process. AJA Registrars Europe S.r.l. is a self-financed independent organisation, which ensures that it retains its impartiality.

AJA Registrars Europe S.r.l. will not accept applications for certification or inspection of organizations who report directly to a person or group who also have operational responsibility for AJA Registrars Europe S.r.l..

In addition no AJA Registrars Europe S.r.l. Office, joint venture or wholly owned, shall enter into any partnerships that provide full consultancy or consultancy in part. AJA Registrars Europe S.r.l. may provide auditor training when contracted by another body to do so, but such contractual agreement may not be advertised in any manner without prior review and approval of the Accredited Office.

The following controls shall be implemented, maintained and complied with by all audit and certification staff to ensure this impartiality policy is maintained throughout the audit process.

1. Audit/Inspection staff are prohibited from participating in the Audit/Inspection of any organisation to which they have given assistance, by consultancy or training (other than professionally registered auditor training), or where they have any financial or commercial interest for a minimum period of 2 years prior to the date of application of the organisation for registration.
2. When allocated to a particular contract, Audit/Inspection staff shall not disclose or discuss any detail, before or after the Audit/Inspection, to any member of staff other than their direct Management or other members of the team, as required by the Secrecy & Non-Disclosure agreement signed on commencement of employment.

3. All subcontracted Audit/Inspection staff or sector specialists used to support permanent staff of AJA Registrars Europe S.r.l. shall sign a Subcontractor Agreement and a Secrecy & Non Disclosure Agreement and shall be included on the Office Potential Conflict Listing.
4. AJA Registrars Europe S.r.l. direct employees are prohibited from engaging in consultancy activities, which involve the active design, generation or implementation of a Management System.
5. All directly employed Management and Staff are required to declare all financial interests or business activities on commencement and during the period of employment (details of which shall be shown on the Office Potential Conflict Listing).
6. AJA Registrars Europe S.r.l. staff or subcontractors shall not suggest or imply to imply that certification would be simpler, easier or less expensive if consultancy or training services were used. In addition subcontract staff cannot offer consultancy or training services to AJA Registrars Europe S.r.l.' clients that they have been assigned to audit, during or after the assigned task has been completed.
7. Overall the certification of companies who supply a service to AJA Registrars Europe S.r.l. is not deemed to be an unacceptable threat to conflict of interest. However, certification of a company in partnership with whom AJA Registrars Europe S.r.l. provides a direct service is deemed to be an unacceptable threat to impartiality. Should such a partnership develop, a new accredited certification body will be sourced to continue the certification.

4.2.2

AJA Registrars Europe S.r.l. recognise that the source of revenue for a certification body is the client paying for certification, and that this is a potential threat to impartiality. Therefore AJA Registrars Europe S.r.l. is a self-financed independent organisation, with a number of controls to ensure that impartiality is retained

4.2.3

To obtain and maintain confidence, it is essential that AJA Registrars Europe S.r.l.' certification decisions are based on objective evidence of conformity or nonconformity, and that any decisions made are not influenced by other interests or by other parties. Certification decisions are made and signed for by a competent Certification Decision Maker who was not responsible for the audit and was not a member of the audit team

4.2.4

AJA Registrars Europe S.r.l. recognises that threats to impartiality include the following.

- Self-interest threats arising from a person or body acting in their own interest.
- Self-review threats arising from a person reviewing the work that they have conducted themselves.
- Familiarity (or trust) threats arising from a person becoming too familiar with or too trusting of another, instead of seeking audit evidence (see Report Format).
- Intimidation threats arising from a person having a perception of being coerced openly or

secretively, such as a threat to be replaced or reported to a supervisor.

4.3 Competence

Competence of the personnel supported by the management system of AJA Registrars Europe S.r.l. is necessary to deliver certification that provides confidence. AJA Registrars Europe S.r.l.' XPRD-PRO_VAL include details to explain how audit staff competence are established and maintained. Competence of all other staff involved in the certification process is described also within the XPRD-PRO_VAL.

4.4 Responsibility

4.4.1

It is the responsibility of AJA Registrars Europe S.r.l.' clients (and not AJA Registrars Europe S.r.l.) to conform to the requirements of certification, as is explained in the COP_IFCC_SFM - CODE OF PRATICE.

4.4.2

AJA Registrars Europe S.r.l. has the responsibility to assess sufficient objective evidence upon which to base a certification decision. Based on audit conclusions within the specific Report Format, AJA Registrars Europe S.r.l. makes a decision to grant certification, if there is sufficient evidence of conformity; or not to grant certification, if there is not sufficient evidence of conformity.

Note Any audit is based on sampling within a management system and therefore is not a guarantee of 100% conformity with standard requirements, as is explained in the COP_IFCC_SFM - CODE OF PRATICE.

4.5 Openness

4.5.1

AJA Registrars Europe S.r.l. is able, to provide public access to, or disclosure of, appropriate and timely information about the audit process and certification process (see <http://ajaeurope.eu> - www.ajaindonesia.com), and about the certification status (for example the granting, extending, maintaining, renewing, suspending, reducing the scope of, or withdrawing of certification) in order to gain confidence in the integrity and credibility of certification (info@ajaeurope.eu).

All information relating to certificates issued by AJA is communicated to IFCC in a timely manner.

Openness is a principle of access to, or disclosure of, appropriate information.

4.5.2

To gain or maintain confidence in certification, AJA Registrars Europe S.r.l. is able, upon request, to provide appropriate access to, or disclosure of, non-confidential information about the conclusions of specific audits (e.g. audits performed in response to complaints) to specific interested parties in a typed free-format providing only non-confidential information.

4.6 Confidentiality

To gain the privileged access to information that is needed for AJA Registrars Europe S.r.l. to assess conformity to requirements for certification adequately, it is essential that any proprietary information about a client is kept confidential.

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It is therefore a primary objective of AJA Registrars Europe S.r.l. to ensure that confidentiality is maintained at all times. To meet this objective the following controls shall be applied:

On the first day of commencement of employment, new staff shall be issued with an extracted copy of the relevant sections of this Policy Manual (to include Impartiality, Confidentiality, the AJA Registrars Europe S.r.l. Stated Undertaking and the AJA Registrars Europe S.r.l. Staff Undertaking; in order to emphasise the confidential nature of AJA Registrars Europe S.r.l.' services and to instruct them in the implementation of the confidentiality policy.

AJA REGISTRARS EUROPE S.R.L. STATED UNDERTAKING

AJA Registrars Europe S.r.l. shall observe all reasonable precautions, in order to keep confidential to the client and to the staff and Management of AJA Registrars Europe S.r.l.:

1. Information about the business operations or manufacturing processes of the client which has been given to AJA Registrars Europe S.r.l. by the client and that is not published or common knowledge;
2. Data and specific results obtained from visits made in carrying out work for the client; including reports from AJA Registrars Europe S.r.l. to the client that incorporates or refers to the information and/or the data and specific results defined in 1 above.

Reports and data shall not be discussed with third parties without the specific authorisation of the client. Where the law requires information to be disclosed to a third party, the client shall be informed of the information provided, as permitted by the law.

Conditions under which reports from AJA Registrars Europe S.r.l. may be quoted or reproduced are as follows.

Reports are the property of AJA Registrars Europe S.r.l., but may be reproduced or published freely by the client, provided that AJA Registrars Europe S.r.l. name is sited or implied. Such reproduction is verbatim and without abridgment of the report. Extracts from, and précis of, reports in which AJA Registrars Europe S.r.l. name is cited may only be reproduced or published with the prior consent of AJA Registrars Europe S.r.l..

AJA REGISTRARS EUROPE S.R.L. STAFF UNDERTAKING

All AJA Registrars Europe S.r.l. staff, whether permanent or subcontracted, are required to give the following undertaking as part of their conditions of employment.

1. I will observe complete secrecy and the strictest confidence in regard to all the work I shall be involved in, in respect of the affairs of AJA Registrars Europe S.r.l. and the affairs of its clients, which may come to my knowledge. I will not impart to any person or body any information relating thereto (except to persons within AJA Registrars Europe S.r.l. to whom it is necessary to pass such information in the course of my work), unless authorised in writing to do so.
2. I will not, without written consent of AJA Registrars Europe S.r.l., remove the papers of the AJA Registrars Europe S.r.l., its clients or any third party from the premises where I am working.
3. I accept that the above provisions and the confidence imposed on me will continue to be binding not withstanding the termination of my contract or agreement that I have with AJA Registrars Europe S.r.l., however that termination will occur.

4. I accept that any contravention of this undertaking will result in the termination of any Contract or Agreement that I may have with AJA Registrars Europe S.r.l..
5. On termination of my dealings with AJA Registrars Europe S.r.l., I undertake to return any of AJA Registrars Europe S.r.l.' Documents, that have come into my possession.

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 AJA Registrars Europe S.r.l. and its clients against errors, omissions or unreasonable behaviour. Confidence in certification activities is safeguarded when complaints are processed appropriately. For this reason AJA Registrars Europe S.r.l. have a dedicated Complaints and Appeals Information Section within the standard Report Format, identifying the appropriate balance between the principles of openness and confidentiality; including responsiveness to complaints, in order to demonstrate integrity and credibility to all.

4.8 Risk Based Approach

AJA Registrars Europe S.r.l. take into account the risks associated with providing competent, consistent and impartial certification. Risks may include, but are not limited to, those associated with:

- The objectives of the audit;
- The sampling used in the audit process;
- Real and perceived impartiality;
- Legal, regulatory and liability issues;
- The client organization being audited and its operating environment;
- Impact of the audit on the client and its activities;
- Health and safety of the audit teams;
- Perception of interested parties;
- Misleading statements by the certified client;
- Use of marks.

AJA Registrars Europe S.r.l. consider all of the above by conduction and periodically updating a full Risk Assessment in accordance with Procedure 18 – Risk Assessment

5 General Requirements

5.1 Legal and Contractual Matters

5.1.1 Legal Responsibility

It is the policy of AJA Registrars Europe S.r.l. to legally register the company in countries where we operate and therefore, for Accreditation, the company name as legally registered may vary from country to country. As this Policy Manual and associated Management System documentation is applicable to all offices, the organization is referred to as **AJA Registrars Europe S.r.l.**

If AJA Registrars Europe S.r.l. were to become part of Government, AJA Registrars Europe S.r.l. will ensure that should an applicant or a registered client be part of the same Government that AJA Registrars Europe S.r.l. and the client both report to, then AJA Registrars Europe S.r.l. may reject any application and, where applicable, relinquish certification of the client.

A Governmental certification body is deemed to be a legal entity on the basis of its Governmental status.

5.1.2 Certification Agreement

The AJA Registrars Europe S.r.l. Accredited Office has a legally enforceable agreement for the provision of certification activities to all certified clients including those with multiple offices/sites for the Accreditation which they hold. This is the Proposal and Application. This document must reference each client site to be covered by the scope of certification. The agreement can be achieved through multiple agreements that reference or otherwise link to one another.

5.1.3 Responsibility for Certification Decisions

The AJA Registrars Europe S.r.l. Accredited Office is responsible for the Accreditation which they hold, and will retain authority for, decisions relating to accredited certification, including the granting, refusing, maintaining of certification, expanding or reducing the scope of certification, renewing, suspending or restoring following suspension, or withdrawal of certification, as specified in the AJA Registrars Europe S.r.l. COP_IFCC_SFM - CODE OF PRATICE.

5.2 Management of Impartiality

5.2.1

AJA Registrars Europe S.r.l. shall be responsible for maintain the impartiality of its conformity assessment activities and shall not allow commercial, financial or other pressures to compromise impartiality.

5.2.2

AJA Registrars Europe S.r.l. have top management commitment to ensuring impartiality in management system certification activities. AJA Registrars Europe S.r.l. have a publicly accessible statement on the AJA Registrars Europe S.r.l. Website (see <http://ajaeurope.eu> / <http://www.ajaindonesia.com/>)- to show we understand the importance of impartiality in carrying out management system certification activities, managing conflict of interest and ensuring the objectivity of management system certification activities (also see Policy Manual section 4.2.1, points 1-7)

5.2.3

AJA Registrars Europe S.r.l. have identified, analysed and documented the possibilities for conflict of interests arising from provision of certification, including any conflicts arising from relationships. Having relationships does not necessarily present AJA Registrars Europe S.r.l. with a conflict of interest. However, if any relationship creates a threat to impartiality, AJA Registrars Europe S.r.l. have documented and are able to demonstrate how we eliminate or minimise such threats (see Office Potential Conflict Listing for Auditor and Staff). Accredited Offices shall create a separate Office Potential Conflict Listing to show all Offices who operate under their accreditation. This information is made available to the Impartiality Committee and covers all potential sources of conflict of interests that

have been identified, whether they arise from within AJA Registrars Europe S.r.l. or from the activities of other persons, bodies or organisations.

AJA Registrars Europe S.r.l. Business Risk Plan procedure 18 which includes processes to identify, analyse, evaluate, treat, monitor, and document the risks related to conflict of interests arising from provision of certification including any conflicts arising from its relationships on an ongoing basis. Where there are any threats to impartiality, AJA Registrars Europe S.r.l. shall document and demonstrate how it eliminates or minimizes such threats and document any residual risk. The demonstration shall cover all potential threats that are identified, whether they arise from within AJA Registrars Europe S.r.l. or from the activities of other persons, bodies or organizations.

When a relationship poses an unacceptable threat to impartiality (such as a wholly owned subsidiary of AJA Registrars Europe S.r.l. requesting certification from its parent), then certification will not be provided.

AJA's top management review any residual risk to determine if it is within the level of acceptable risk. The risk assessment process shall include identification of and consultation with appropriate interested parties to advise on matters affecting impartiality including openness and public perception. The consultation with appropriate interested parties shall be balanced with no single interest predominating

5.2.4

AJA Registrars Europe S.r.l. will not certify another certification body for its management system certification activities.

5.2.5

AJA Registrars Europe S.r.l., or any part of the same legal entity, categorically will not offer or provide management system consultancy. This is reviewed during Internal Audits conducted by top level management (see Procedure 14).

5.2.6

AJA Registrars Europe S.r.l. or any part of the same legal entity will not offer or provide internal audits to AJA Registrars Europe S.r.l. certified clients, including audits of suppliers on behalf of a certified client. AJA Registrars Europe S.r.l. will not certify a management system on which we provided internal audits within two years following the end of the internal audits, as this is classed as a conflict of interest.

5.2.7

AJA Registrars Europe S.r.l. will 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 the certification body poses an unacceptable threat to the impartiality of the certification body, unless at least a minimum period of two years has elapsed following the end of the management system consultancy. As it is therefore imperative that AJA Registrars Europe S.r.l. are made aware of any consultancy bodies used, this is a question found on the AJA Registrars Europe S.r.l. Questionnaires and is reviewed during both the enquiry and contract review stages on the PWS.

5.2.8

AJA Registrars Europe S.r.l. will not outsource audits to a management system consultancy organisation, as it is recognised that this poses an unacceptable threat to the impartiality of the certification body (see

7.5 – Outsourcing/Subcontracting). However, this does not apply to individuals who have been contracted by AJA Registrars Europe S.r.l. as auditors (See 7.3 – Use of Individual External Auditors and External Technical Experts). All auditors are notified of the audits they are required to perform by issuance of an Auditor Information Sheet, therefore ensuring that the contract is with an auditor rather than a consultancy body/organisation.

5.2.9

AJA Registrars Europe S.r.l.' activities will not be marketed or offered as linked with the activities of an organisation that provides management system consultancy. AJA Registrars Europe S.r.l. will perform periodic checks of any websites of known consultants, and shall take action to correct inappropriate claims by any consultancy organisation that states or implies that certification would be simpler, easier, faster or less expensive if AJA Registrars Europe S.r.l. were used. AJA Registrars Europe S.r.l. will not state or imply that certification would be simpler, easier, faster or less expensive if a specified consultancy organisation were used.

5.2.10

To ensure that there is no conflict of interests, personnel who have provided management system consultancy, including those acting in a managerial capacity, will not be used by AJA Registrars Europe S.r.l. 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. Auditors are asked to sign a declaration on the Auditor Information Sheet and also on the front page of the Report Format.

5.2.11

AJA Registrars Europe S.r.l. will take action (including re-allocation of work) to respond to any threats to its impartiality arising from the actions of other persons, bodies or organisations.

5.2.12

All AJA Registrars Europe S.r.l. personnel, either internal or external, or committees (Impartiality Committee), who could influence the certification activities, will act impartially and will not allow commercial, financial or other pressures to compromise impartiality. AJA Registrars Europe S.r.l. Business Risk Plan (procedure 18) defines and will be used to ensure that there will be no influence with the certification activities, the plan will be used as a management document to assist the group, and this will allow commercial, financial or other pressures not to compromise any outcomes agreed

5.2.13

AJA Registrars Europe S.r.l. requires personnel, internal and external, to reveal any situation known to them that may present themselves or AJA Registrars Europe S.r.l. with a conflict of interests. This information is collected by each office on the Office Potential Conflict Listing. AJA Registrars Europe S.r.l. will use this information as input to identifying potential threats to impartiality raised by the activities of such personnel or by the organisations that employ them, and will not use such personnel, internal or external, unless they can demonstrate that there is no conflict of interests.

5.3 Liability and Financing

5.3.1

Upon request, AJA Registrars Europe S.r.l. are able to demonstrate that the risks arising from certification activities have been evaluated and that adequate arrangements are in place (including insurance where economically viable/available and AJA Registrars Europe S.r.l.' own financial reserves) to cover liabilities arising from operations in each of the fields of activities and the geographic areas in which AJA Registrars Europe S.r.l. operates. In addition to this AJA Registrars Europe S.r.l. has included specific wording in its COP_IFCC_SFM - CODE OF PRATICE to make it clear to its clients that AJA Registrars Europe S.r.l. holds itself removed from any responsibility or liability to the client for any implications or actions, resulting from legislative/regulatory non-compliance on behalf of the client; including any actions taken subsequent to the audit resulting in legal or financial failures of the client.

5.3.2

AJA Registrars Europe S.r.l. will evaluate finances and sources of income and demonstrate to the Impartiality Committee that initially, and on an ongoing basis, commercial, financial or other pressures do not compromise impartiality (see XPRD_PRO_ IMPARTIALITY).

6 Structural Requirements

6.1 Organisational Structure and Top Management

6.1.1

It is the responsibility of each office of AJA Registrars Europe S.r.l. to document its own organisational structure. This will include duties, responsibilities and authorities of management and other certification personnel and any committees (such as the Impartiality Committee, should the office be an accredited office). The organisational structure will also include lines of authority and the relationship to any other parts within AJA Registrars Europe S.r.l.. (see ORGANIZATIONAL CHART)

6.1.2

AJA Registrars Europe S.r.l. Certification activities have been structured and managed so as to safeguard impartiality. All Accredited AJA Registrars Europe S.r.l. offices have an Impartiality Committee to ensure the safeguarding of the impartiality of certification activities. The purpose of the Impartiality Committee is as follows:-

- To assist in developing the policies relating to impartiality of certification activities
- To counteract any tendency on the part of AJA Registrars Europe S.r.l. to allow commercial or other considerations to prevent the consistent objective provision of certification activities
- To advise on matters affecting confidence in certification, including openness and public perception
- To conduct a review, as least once annually, of the impartiality of the audit, certification and decision making processes of AJA Registrars Europe S.r.l.

Other tasks or duties may also be assigned to the Impartiality Committee provided that 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 this Impartiality Committee have been formally documented in the XPRD_PRO_ IMPARTIALITY and have been authorised by the top management of AJA Registrars Europe S.r.l. to ensure the following:-

- Representation of a balance of interests, so that no single interest predominates (internal or external personnel of AJA Registrars Europe S.r.l. are considered to be a single interest, and shall not predominate)
- Access to all the information necessary to enable the Impartiality Committee to fulfil its functions
- If the top level management of AJA Registrars Europe S.r.l. does not respect the advice of the Impartiality Committee, then the Impartiality Committee has the right to take independent action (for example informing authorities, accreditation bodies and stakeholders). In taking independent action, the Impartiality Committee will respect the confidentiality requirements relating to the client and AJA Registrars Europe S.r.l..

6.1.3

AJA Registrars Europe S.r.l. have identified the following top level management personnel as having overall authority and responsibility for each of the following:

- Development of policies and establishment of processes and procedures relating to the operation of AJA Registrars Europe S.r.l. – CEO & Technical Director
- Supervision of the implementation of the policies and procedures – CEO & Technical Director
- Supervision of the finances of AJA Registrars Europe S.r.l. – CEO
- Development of management system certification services and schemes – CEO & Technical Director
- Ensuring impartiality - CEO & Technical Director
- Performance of audits and certification, and responsiveness to complaints – Technical Director
- Decisions on certification – Application reviewer, Decision Maker, Technical Director, CEO
- Delegation of authority to committees (Impartiality Committee) or individuals, as required, to undertake defined activities on its behalf – Accreditation Manager
- Contractual arrangements – CEO
- Provision of adequate resources for certification activities – CEO

6.1.4

AJA Registrars Europe S.r.l. have formal rules for the appointment; terms of reference and operation of the Impartiality Committee involved in the certification activities (see XPRD_PRO_ IMPARTIALITY).

6.2 Operational Control

6.2.1

AJA Registrars Europe S.r.l. have a process through operational agreements and other constraints for the independent review for the effective control of certification activities delivered by branch offices, irrespective of their legal status, relationship or geographical location. AJA have considered the business risk (procedure 18) that these activities pose to the competence, consistency and impartiality of the certification body.

6.2.2

AJA Registrars Europe S.r.l. have considered the appropriate level and method of control of activities undertaken including its processes, technical areas of AJA's operations, competence of personnel, lines of management control, reporting and remote access to operations including records this will be monitored by use of the business risk plan (procedure 18) in conjunction with the impartiality committee

6.2.3

Although the Impartiality Committee cannot represent every interest, AJA Registrars Europe S.r.l. will, wherever possible, identify and invite key interests. Such interests may include: clients of AJA Registrars Europe S.r.l., customers of organisations whose management systems are certified by AJA Registrars Europe S.r.l., representatives of industry trade associations, representatives of governmental regulatory bodies or other governmental services, or representatives of non-governmental organisations, including consumer organisations (XPRD_PRO_IMPARTIALITY)

7 Resource Requirements

7.1 Competence of Management and Personnel

7.1.1 General Considerations

AJA Registrars Europe S.r.l. ensure that personnel have appropriate knowledge and skills relevant to the types of management systems and geographic areas in which it operates. The competence and skills requirements for each Technical Area, in accordance with requirements specified in relevant IAF Mandatory Documents and/or ISO Standards are shown within the XPRD-PRO_VAL.

7.1.2 Determination of Competence Criteria

In determining skills and requirements for personnel performing certification in each Technical Area, AJA Registrars Europe S.r.l. have addressed the functions undertaken by management and administrative personnel in addition to those directly performing audit and certification activities. The development of skills and Competence Criteria is described in XPRD-PRO_VAL.

7.1.3 Evaluation Process

AJA Registrars Europe S.r.l. have a documented procedure for the initial skills competence and the evaluation of auditors and technical experts (XPRD-PRO_VAL). The output from these processes shall be to identify personnel who have demonstrated the level of competence required for the different functions of the audit and certification process. Competence shall be demonstrated prior to the individual taking the responsibility for the performance of their activities within AJA Registrars Europe S.r.l..

AJA Registrars Europe S.r.l. have a documented procedure for the ongoing monitoring of competence of auditors and technical experts (see XPRD-PRO_VAL).

7.1.4 Other Considerations

7.1.4.1

In determining the skills competence requirements for its personnel performing certification, AJA Registrars Europe S.r.l. has identified criteria for functions undertaken by management and administrative personnel in addition to those directly performing audit and certification activities (see XPRD-PRO_VAL).

7.1.4.2

AJA Registrars Europe S.r.l. have 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 AJA Registrars Europe S.r.l. operates. Such advice may be provided externally or by certification body personnel. The selection of such persons is described in Procedure XPRD-PRO_VAL.

7.2 Personnel Involved in the Certification Activities

AJA Registrars Europe S.r.l. Accredited offices have personnel with sufficient competence for managing the type and range of audit programmes and other certification work performed across the range of all schemes and accreditations, these personnel hold the role of Certification Manager and their competency requirements are shown within the relevant COP_IFCC_SFM - CODE OF PRATICE and XPRD-PRO_VAL.

AJA Registrars Europe S.r.l. employ and have access to, a sufficient number of auditors, including audit team leaders, and technical experts to cover all of its activities and to handle the volume of audit work performed.

AJA Registrars Europe S.r.l. make clear to each person concerned their duties, responsibilities and authorities. These are clearly documented in Job Descriptions, which are signed by employees.

AJA Registrars Europe S.r.l. have defined Procedures for selecting, training, formally authorising auditors and for selecting technical experts used in the certification activity (see Procedure XPRD-PRO_VAL and IFCC ST 1002:2013). The initial competence evaluation of an auditor includes a demonstration of applicable personal attributes and the ability to apply required knowledge and skills during audits, as determined by a competent evaluator observing the auditor conducting an audit.

AJA Registrars Europe S.r.l. have a process to achieve and demonstrate effective auditing, including the use of auditors and audit team leaders possessing generic auditing skills and knowledge, as well as skills and knowledge appropriate for auditing in specific technical areas. This process has been defined within Procedure XPRD-PRO_VAL.

AJA Registrars Europe S.r.l. ensure that auditors (and, where needed, technical experts) are knowledgeable of the AJA Registrars Europe S.r.l. audit processes, certification requirements and other relevant requirements. AJA Registrars Europe S.r.l. gives auditors and technical experts access to an up-to-date set of documented procedures giving audit instructions and all relevant information on the certification activities.

AJA Registrars Europe S.r.l. have a process to identify training needs and 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. The Procedure XPRD-PRO_VAL provide more details about this process.

As in 7.2.7 AJA Registrars Europe S.r.l. will identify training needs and will offer and provide access to specific training. This includes areas such as handling of possibly difficult situations namely refusing, restoring, suspensions also the withdrawal of certification of which will be monitored via the Business risk plan (procedure 18) to ensure auditors, technical experts and other personnel involved in certification activities are competent for the functions they perform.

Within AJA Registrars Europe S.r.l., the person who makes the decision on granting, maintaining, renewing, extending, reducing, refusing, suspending or withdrawing certification must understand the applicable standard and certification requirements. This person must have demonstrated and have a

recorded competence (as specified in the requirements for Application Reviewer, Certification Decision Maker, Technical Director within the relevant XPRD-PRO_VAL and Job Descriptions) to evaluate the audit processes and related recommendations of the audit team.

AJA Registrars Europe S.r.l.; taking into account each management system; shall monitor each auditor who is deemed competent. This to ensure the satisfactory performance of all personnel involved in the audit and certification activities. AJA Registrars Europe S.r.l. reviews the competence of its personnel in the light of their performance in order to identify further training needs.

The Procedure XPRD-PRO_VAL for training auditors includes a combination of on-site observation, review of audit reports and feedback from clients. This monitoring must be designed in such a way as to minimise disturbance to the normal processes of certification, especially from the client's viewpoint.

AJA Registrars Europe S.r.l. periodically observes the performance of each auditor on-site. The frequency of on-site evaluations have a minimum frequency but are also based on need, determined from all monitoring information available (see XPRD-PRO_VAL).

7.3 Use of Individual External Auditors and External Technical Experts

AJA Registrars Europe S.r.l. requires external auditors and external technical experts to have signed a Subcontractor Agreement and a Secrecy & Non-Disclosure Agreement, by which they commit themselves to comply with the applicable policies and procedures of AJA Registrars Europe S.r.l.. The Agreements address aspects relating to confidentiality, impartiality and to independence from commercial and other interests, and require the external auditors and external technical experts to notify AJA Registrars Europe S.r.l. of any existing or prior association with any organisation which they may be assigned to audit. However, using individual auditors and technical experts does not constitute Outsourcing/Subcontracting (See 7.5).

7.4 Personnel Records

AJA Registrars Europe S.r.l. offices maintain up-to-date personnel records, including relevant qualifications, training, experience, affiliations, professional status, competence this includes management, sales and administrative personnel, in addition to those performing certification activities and sending information to Accredited Office. Potential Conflict Listings are required to be maintained by the office and kept up-to-date and submitted to the accredited office for review.

7.5 Outsourcing/Subcontracting

AJA Registrars Europe S.r.l. currently outsource part of the certification activities, related the PEFC-IFCC scheme, to the Indonesia Office (PT. AJA SERTIFIKASI INDONESIA). The rules applicable are indicated on the specific agreement signed by AJA REGISTRARS EUROPE SRL AND PT. AJA SERTIFIKASI INDONESIA. The distribution of responsibilities is set out in § 11 of the Policy Manual.

Moreover, there is a procedure describing the conditions under which outsourcing/subcontracting to another organisation, to provide part of the certification activities on behalf of AJA Registrars Europe S.r.l., may take place if needed (see Procedure 8).

AJA Registrars Europe S.r.l. will have a legally enforceable agreement covering the arrangements, including confidentiality and conflict of interests, with each AJA member that provides services as per the Procedure 8.

Decisions for granting, maintaining, renewing, extending, reducing, refusing, restoring, expanding or reducing the scope of certification suspending or withdrawing certification are only made by employed and approved competent staff of AJA Registrars Europe S.r.l. and must never be outsourced (see Procedure 8).

AJA Registrars Europe S.r.l.:

- Shall take responsibility for all activities outsourced to another body
- Shall ensure that the body that provides outsourced services, and the individuals that it uses, conform to requirements of AJA Registrars Europe S.r.l. and also to the applicable provisions of ISO 17021, including competence, impartiality and confidentiality
- Shall ensure that the body providing 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 (see XPRD_PRO_ IMPARTIALITY).

8 Information Requirements

8.1 Publicly Accessible Information

AJA Registrars Europe S.r.l. maintains information describing audit processes, certification processes for granting, maintaining, extending, renewing, reducing, refusing suspending, withdrawing certification, expanding or reducing the scope of certification; types of management systems and certification schemes in which it operates; as well as the use of AJA Registrars Europe S.r.l. name and certification mark or logo; processes for handling requests for information, complaints and appeals; policy on impartiality. All of the above is available by being displayed within the Codes of Practice issued at time of Proposal and as displayed on the AJA Registrars Europe S.r.l. website.

All of the above shall be reported to the IFCC.

Information provided by AJA Registrars Europe S.r.l. to any client, or to the marketplace, including advertising shall be accurate and not misleading and, where appropriate, in line with the Website Policy.

Public Consultation

After Stage 1 and before Stage 2, AJA launch a public consultation, through Aja Website and inform IFCC and invite Public communities and stakeholders to submit comments regarding the Client's Forest Management Operations. The AJA Registrars Shall consider and evaluate received information during the Stage 2 Audit

Public Report

Immediately following the issuance of each certificate and after each Surveillance, a public report shall be issued, including a summary of findings on the client organization's conformity with the forest management standard. This report will be sent to IFCC. Additionally, the public report shall be available for stakeholders, upon request and on the Website.

8.2 Certification Documents

AJA Registrars Europe S.r.l. recognise that certification documents may be provided to the certified client by any means. However, AJA Registrars Europe S.r.l. choose to provide certification documents in the form of Certificates/Schedules or only certificate (1 page or 2 pages).

The effective date (Registration Date) of granting, expanding or reducing the scope of certification, or renewing certification which shall not be before the date of the relevant certification decision;

The certification documents identify the following:

- The Name of the Client
- The Geographic location (address) of each client whose management system is certified (or the geographic location of the headquarters and any sites within the scope of a multi-site certification)
- The Scope
- The Standard, including issue number and/or revision, used for audit of the certified Client
- The Certificate Number (formatted as above)
- The name, address and certification mark of AJA Registrars Europe S.r.l.
- A statement regarding the fact that the certificate remains the property of AJA Registrars Europe S.r.l.
- The Date of Original Registration (Certificate Issue Date)
- The Date of Re-Registration (If applicable)
- The Expiry Date of the Certificate.
- Reference to any sector scheme standards/identity
- Any other information required by the standard used for certification

This in the event of issuing any revised certification documents, is a means to distinguish the revised documents from any prior obsolete documents.

For more information related the specific scheme see COP_IFCC_SFM - CODE OF PRATICE

8.3 Reference to Certification and Use of Marks

AJA Registrars Europe S.r.l. have rules governing any management system certification mark that it authorises certified clients to use (see XPRD-BRAND_IFCC - USE OF CERTIFICATES AND LOGO/BRANDS PROCEDURE) which states that there must be no ambiguity in the mark or accompanying text as to what has been certified and which certification body has granted the certification. This mark shall not be used on a product nor product packaging nor in any other way that may be interpreted as denoting product conformity

AJA Registrars Europe S.r.l. shall not permit its marks to be applied by certified clients to laboratory test, calibration, inspection reports or certificates

AJA Registrars Europe S.r.l. have rules governing the use of any statements on product packaging or in accompanying information that the certified client has a certified management system.

Product packaging is considered as that which can be removed without the product disintegrating or being damaged. Accompanying information is considered as separately available or easily detachable. Type labels or identification plates are considered as part of the product.

The statement shall in no way imply that the product, process or service is certified by this means. The statement shall include reference to:

- Identification (e.g. brand or name) of the certified client;
- The type of management system and the applicable standard;
- The certification body issuing the certificate.

AJA Registrars Europe S.r.l. shall through legally enforceable arrangements require that the certified client exercise proper control of ownership and take action to deal with incorrect references to certification status or misleading use of certification documents, marks or audit reports.

AJA Registrars Europe S.r.l. shall exercise proper control of ownership and shall take action to deal with incorrect references to certification status or misleading use of certification documents, marks or audit reports. And as appropriate shall take action, this action can include requests for correction and corrective action, suspension, withdrawal of certification, publication of the transgression and, if necessary, legal action.

8.4 Confidentiality

AJA Registrars Europe S.r.l. have a Secrecy & Non Disclosure Agreement to safeguard the confidentiality of the information obtained or created during the performance of certification. This must be signed by all staff, operating at all levels of AJA Registrars Europe S.r.l.' structure, including the Impartiality Committee members and any external bodies or individuals acting on behalf of AJA Registrars Europe S.r.l..

AJA Registrars Europe S.r.l. inform the client, in advance through the COP_IFCC_SFM - CODE OF PRATICE, 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, shall be considered confidential.

Except as required in ISO/IEC 17021-1, 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, as is explained in the COP_IFCC_SFM - CODE OF PRATICE. Where AJA Registrars Europe S.r.l. 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 information provided, as is also explained in the Codes of Practice.

Information about the client from sources other than the client (e.g. complainant, regulators) shall be treated as confidential, consistent with AJA Registrars Europe S.r.l.' confidentiality policy, however if required by law or authorized by contractual arrangements the client or individual concerned shall, unless prohibited by law, be notified of the information provided.

Personnel, including any committee (Impartiality Committee) members, contractors, personnel of external bodies or individuals acting on AJA Registrars Europe S.r.l.' behalf, are informed that they shall keep confidential all information obtained or created during the performance of AJA Registrars Europe S.r.l.' activities which is defined as per our AJA's Secrecy and Non-Disclosure Agreement, audit reports and AIS sheet for each audit.

AJA Registrars Europe S.r.l., including any committee members, contractors, personnel of external bodies or individuals acting on behalf of AJA Registrars Europe S.r.l. shall ensure the secure handling of confidential information, such as secure offices and secure information technology systems. , all

information obtained or created during the performance of the certification body's activities except as required by law. (COP_IFCC_SFM - CODE OF PRATICE)

AJA Registrars Europe S.r.l. have processes and where applicable equipment and facilities that ensure the secure handling of confidential information (COP_IFCC_SFM - CODE OF PRATICE)

8.5 Information Exchange between AJA Registrars Europe S.r.l. and its Clients

8.5.1 Information on the Certification Activity and Requirements

AJA Registrars Europe S.r.l. shall provide and update clients on the following:

- 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 (see COP_IFCC_SFM - CODE OF PRATICE which are sent to each client with the Proposal & Application and are re-issued to each client by the AJA Registrars Europe S.r.l. offices every time there is an amendment made)
- The normative requirements for certification (see COP_IFCC_SFM - CODE OF PRATICE)
- Information about the fees for application, initial certification and continuing certification (see Proposal & Application)
- AJA Registrars Europe S.r.l.' requirements for clients (see COP_IFCC_SFM - CODE OF PRATICE)
- Documents describing the rights and duties of certified clients, including requirements, when making reference to its certification in communication of any kind (see COP_IFCC_SFM - CODE OF PRATICE and XPRD-BRAND-IFCC - USE OF CERTIFICATES AND LOGOS/BRANDS PROCEDURE)
- Information on procedures for handling complaints and appeals (see COP_IFCC_SFM - CODE OF PRATICE)

8.5.2 Notice of changes by a certification body

AJA Registrars Europe S.r.l. give certified clients due notice of any changes to its requirements for certification by re-sending the COP_IFCC_SFM - CODE OF PRATICE, client information sheet whenever updates are made. AJA Registrars Europe S.r.l. verify that each certified client complies with the new requirements during audits. AJA Registrar's authorised representative shall be in contact with the Accreditation body for any clarification required, new applications etc. via email or use of the Accreditation body allocated software.

8.5.3 Notice of Changes by Clients

AJA Registrars Europe S.r.l. state in the Codes of Practice that the certified clients shall inform AJA Registrars Europe S.r.l., 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. These include changes relating to the following:

- The legal, commercial, organisational status or ownership
- Organisation and management (e.g. key managerial, decision-making or technical staff)
- Contact address and sites

- Scope of operations under the certified management system
- Major changes to the management system and processes

9 Process Requirements

For IFCC scheme, see specific COP-IFCC-SFM CODE OF PRATICE IFCC SFM

9.1 Pre- certification activities

9.1.1 Application

AJA Registrars Europe S.r.l. require an authorised representative of the applicant organisation to provide the necessary information on the Questionnaires, to enable it to establish the following:

- The desired scope of the certification
- The general features of the applicant organisation, including its name and the addresses of its physical locations, significant aspects of its process and operations, and any relevant legal obligations
- General information, relevant for the field of certification applied for, concerning the applicant organisation, such as its activities, human and technical resources, functions and relationship in a larger corporation, if any
- Information concerning all outsourced processes used by the organisation that will affect conformity to requirements
- The standards or other requirements for which the applicant organisation is seeking certification
- Information concerning the use of consultancy relating to the management system

AJA Registrars Europe S.r.l. may refuse to offer Certification to the applicant company in the following circumstances:

- AJA Registrars Europe S.r.l. do not hold the accreditation for the activity in the Scheme required by the applicant
- The applicant company is a laboratory requiring ISO 17025 approval
- The applicant company does not provide all necessary information as requested by AJA Registrars Europe S.r.l. on either the Questionnaire and/or additional follow up requests which then prevents AJA Registrars Europe S.r.l. from being able to accurately assess and plan for the necessary 3 year certification cycle
- The applicant is not a legally registered entity in the country involved

9.1.2 Application Review

Before proceeding with the audit, AJA Registrars Europe S.r.l. conduct a Contract Review, recorded on the PWS, to ensure that:

- The information about the applicant organisation and its management system is sufficient for the conduct of the audit
- The requirements for certification are clearly defined and documented, and have been

provided to the applicant organisation

- Any known difference in understanding between AJA Registrars Europe S.r.l. and the applicant organisation is resolved
- AJA Registrars Europe S.r.l. has the competence and ability to perform the certification activity
- The scope of certification sought, the locations of the applicant organisation's operations, time required to complete audits and any other points influencing the certification activity are taken into account, such as language, safety conditions, threats to impartiality, etc
- Records of the justification for the decision to undertake (or not) the audit are maintained
- Should the decision be made not to undertake the audit a the rejected client shall be informed in writing of this decision and the reason for this

Based on the Contract Review, AJA Registrars Europe S.r.l. shall either accept or refuses an application for certification. If AJA Registrars Europe S.r.l. refuses an application for certification, as a result of the review of application, the reasons for refusing an application based on any one or combination of the factors detailed in 9.1.2.1 shall be documented and made clear to the applicant. For more details about the process please refer to COP-IFCC-SFM CODE OF PRATICE IFCC SFM.

9.1.3 Audit Programme

An audit programme for the full certification cycle is developed and recorded on the report format by the auditor and approved by the decision maker.

The audit programme for the certification cycle shall cover the complete management system requirements.

AJA Registrars Europe S.r.l. understands that the audit programme shall include a two-stage initial audit, surveillance audits in the first and second years, and a recertification audit in the third year prior to expiration of certification. The three-year certification cycle begins with the certification or recertification decision. The determination of the audit programme and any subsequent (Cycles) adjustments shall consider the size of the client, the scope and complexity of its management system, products and processes as well as demonstrated level of management system effectiveness and the results of any previous audits.

Surveillance audits shall be conducted at least once a year. The first planned Surveillance Audit shall take place no more than 12 months after the last day of the Stage 2 Audit. It can be necessary to adjust the frequency of surveillance audits to accommodate factors.

Where AJA Registrars Europe S.r.l. is taking account of certification or other audits already granted to the client, sufficient, verifiable information is collected to justify and record any adjustments to the audit programme

AJA Registrars Europe S.r.l. will take into account the client shift patterns, activities that take place during shift working and these shall be considered when developing the audit programme and audit plans and define the effective man-days.

9.1.4 Determining Audit Time

AJA Registrars Europe S.r.l. conform to the requirements of all relevant IAF Mandatory documents, IFCC ST 1002 and other ISO Standards in determining audit times for each stage of the overall audit cycle. The methods for determining such audit times are defined in the relevant scheme (COP-IFCC-SFM CODE OF PRATICE IFCC SFM) and all calculations and any variances used are fully recorded and justified on the relevant Proposal Work Sheet (PWS). The review and acceptance or rejection (and subsequent amendment) of such audit time calculations is similarly recorded on the relevant Proposal Work Sheet (PWS).

In determining the audit time, AJA Registrars Europe S.r.l. shall consider, among other things, the following aspects:

- The requirements of the relevant management system standard
- Size and complexity
- Technological and regulatory context
- Any outsourcing of activities included in the scope of the management system
- The results of any prior audits
- Number of sites and multi-site considerations
- The risks and/or complexity associated with the products, processes or activities of the organisation
- When audits are combined, joint or integrated

Time spent travelling to and from audited sites is not included in the calculation of the duration of the management system audit days.

The duration of the management system audit by any team member that is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and auditors-in-training) shall not count in the above established duration of the management system.

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, AJA Registrars Europe S.r.l. have developed a sampling guide, referenced in the XPRD-PRO_DETERMINING SAMPLE SIZE Procedure for determining sample size for Stage 2 and Surveillance Audits, to ensure an effective audit of the management system.

The sampling plan shall be documented on the Visits Matrix for Multi-Site Sampling for each client and submitted with the PWS. Where there are multiple sites not covering the same activity sampling is not appropriate.

9.1.6 Multiple management systems standards

When certification to multiple management system standards is being provided by AJA Registrars Europe S.r.l., the planning for the audit shall ensure adequate on-site auditing to provide confidence in the certification and the Lead auditor must be qualified for all management systems.

9.2 Planning Audits

9.2.1. Determining audit objectives, scope and criteria

AJA Registrars Europe S.r.l. ensure that an audit Itinerary is established for each audit.

The determination of audit objectives, scope and criteria is undertaken following discussions with the client.

The audit objectives scope and criteria is communicated to the Audit Team on the Auditor Information Sheet. This information is then used by the audit team leader to formulate the Audit Plan (Itinerary), which includes the audit scope.

9.2.2 Audit team selection and assignments

For selecting and appointing the audit team, including the audit Lead Auditor, AJA Registrars Europe S.r.l. taking into account the competence needed to achieve the objectives of the audit. Every audit – whether involving single auditors or audit teams of multiple auditors and whether conducted over single days of multiple days – shall be planned to ensure an appropriately approved Lead Auditor shall be in attendance at all times, as shown in the procedure XPRD-PRO-VAL ASSESSMENT OF SKILLS AND TRAINING PERSONNEL INTERNAL-EXTERNAL

Observers

The presence and justification of observers during an audit activity shall be agreed to by AJA Registrars Europe S.r.l. and client prior to the conduct of the audit. The audit team shall ensure that observers do not influence or interfere in the audit process or outcome of the audit.

Note: Observers can be members of the client's organization, consultants, witnessing accreditation body personnel, regulators or other justified persons

Guides

Each auditor shall be accompanied by a guide, unless otherwise agreed to by the audit team leader and the client. Guide(s) are assigned to the audit team to facilitate the audit. The audit team shall ensure that guides do not influence or interfere in the audit process or outcome of the audit. The responsibilities of a guide can include:

- Establishing contacts and timing for interviews;
- Arranging visits to specific parts of the site or organization;
- Ensuring that rules concerning site safety and security procedures are known and respected by the audit team members;
- Witnessing the audit on behalf of the client & providing clarification or information as requested by an auditor.

9.2.3 Audit plan

AJA Registrars Europe S.r.l. ensure that an audit Itinerary is established for each audit.

Initially the audit scope is determined during the review of the client Questionnaire.

This scope is repeated to the client in the Proposal and Application letter. The client signs to accept this and a further review of suitability is conducted.

9.2.3.3 Communication Concerning Audit Team Members

AJA Registrars Europe S.r.l. shall provide the name of and, when requested, make available background information on each member of the audit team on the Itinerary, with sufficient time for the client organisation to object to the appointment of any particular auditor or technical expert and for AJA Registrars Europe S.r.l. to reconstitute the team in response to any valid objection.

9.2.3.4 Communication of Audit Plan

The Itinerary shall be communicated and the dates of the audit shall be agreed upon, in advance, with the client organisation.

9.3.1 Initial certification audit

9.3.1.1 General

The initial certification audit of a management system shall be conducted in two stages: Stage 1 and Stage 2.

9.3.1.2 Stage 1

The Stage 1 audit shall be performed as per the relevant Briefing Note. Stage 1 audit findings are documented and communicated to the client in the form of a Stage 1 Report Format, including identification of any areas of concern that could be classified as nonconformity during the Stage 2 audit.

The objectives of stage 1 are defined within AJA's report format which are:

- review the client's management system documented information;
- evaluate the client's site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for stage 2;
- review the client's status and understanding regarding requirements of the standard, in particular with respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system;
- obtain necessary information regarding the scope of the management system, including: the client's site(s); processes and equipment used; levels of controls established (particularly in case of multisite clients); applicable statutory and regulatory requirements;
- review the allocation of resources for stage 2 and agree the details of stage 2 with the client;
- provide a focus for planning stage 2 by gaining a sufficient understanding of the client's management system and site operations in the context of the management system standard or other normative document;
- evaluate if the internal audits and management reviews are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for stage

In determining the interval between Stage 1 and Stage 2 audits, consideration shall be given to the needs of the client to resolve areas of concern identified during the Stage 1 audit. AJA Registrars Europe S.r.l. may also need to revise the arrangements for Stage 2. Therefore, wherever possible the Stage 1 Audit will be carried out at least 4 weeks prior to the scheduled Stage 2 Audit, in order to allow the client company to be advised of any areas where improvement is required in sufficient time for the client to be able to address these documentation issues prior to the Stage 2 site visit.

9.3.1.3 Stage 2

The Stage 2 audit shall be performed as per the relevant Briefing Note. The purpose of Stage 2 is to evaluate the implementation, including effectiveness, of the client's management system. The Stage 2 must take place at the site(s) of the client which include the auditing of at least the following:

- information and evidence about conformity to all requirements of the applicable management system standard or other normative documents;
- performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);
- the client's management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements;
- operational control of the client's processes;
- internal auditing and management review;
- management responsibility for the client's policies

9.3.1.4 Initial Certification Audit Conclusions

The Lead Auditor and (as appropriate to the particular audit) audit team shall analyse all information and audit evidence gathered during the Stage 1 and Stage 2 audits to review the audit findings and agree on the audit conclusions – the final decision on such conclusions rests with the Lead Auditor.

9.4 Conducting Audits

9.4.1 General

The COP-IFCC-SFM CODE OF PRATICE IFCC SFM includes the process for conducting on-site audits

9.4.2 Conducting the Opening Meeting

A formal opening meeting 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 shall usually be conducted by the audit lead auditor, is to provide a short explanation of how the audit activities will be undertaken and shall include the following elements. The degree of detail shall be consistent with the familiarity of the client with the audit process. The opening meeting will address all of the points in AJA Registrars Europe S.r.l. Opening Meeting Checklist

9.4.3 Communication During the Audit

During the audit, the audit team shall periodically assess audit progress and exchange information. The audit lead auditor shall reassign work as needed between the audit team members and periodically communicate 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 audit lead auditor shall report this to the client; and, if possible, to AJA Registrars Europe S.r.l., to determine the 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 audit lead auditor shall report the outcome of the action taken to AJA Registrars Europe S.r.l..

The audit lead auditor shall also review with the client any need for changes to the audit scope which becomes apparent as on-site auditing activities progress and report this to AJA Registrars Europe S.r.l. (Auditor Guide 14)

9.4.4 Obtaining and verifying information

9.4.4.1

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

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

- Interviews;
- Observation of processes and activities;
- Review of documentation and records

9.4.5 Identifying and recording audit findings

Audit findings summarizing conformity and detailing nonconformity and its supporting audit evidence shall be recorded on the related AJA Registrars Europe S.r.l. Audit report to enable an informed certification decision to be made or the certification to be maintained.

Opportunities for improvement (Observations) may be identified and recorded, unless prohibited by the requirements of a management system certification scheme. Audit findings, however, which are non-conformities shall not be recorded as Observations but as CARs.

A finding of nonconformity shall be recorded against a specific requirement of the audit criteria, contain a clear statement of the nonconformity and identify in detail the objective evidence on which the nonconformity is based. Nonconformities shall be discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood. The auditor however shall refrain from suggesting the cause of nonconformities or their solution. The audit team leader shall attempt to resolve any diverging opinions between the audit team and the client concerning audit evidence or findings, and unresolved points shall be recorded.

9.4.6 Preparing Audit Conclusions

Prior to the closing meeting, audit Lead Auditor and (as appropriate to the particular audit) the audit team shall:

- Review the audit findings, and any other appropriate information collected during the audit, against the audit objectives;
- Agree upon the audit conclusions, taking into account the uncertainty inherent in the audit process;
- Identify any necessary follow-up actions;
- Confirm the appropriateness of the audit programme or identify any modification required (e.g. scope, audit time or dates, surveillance frequency, competence).

9.4.7 Conducting the Closing Meeting

A formal closing meeting shall be held with the client's management and, where appropriate, those responsible for the functions or processes audited. The purpose of the closing meeting, which shall normally be conducted by the audit lead auditor, is to present the audit conclusions, including the recommendation regarding certification. Any non-conformities shall be presented in such a manner that they are understood, and the timeframe for responding shall be agreed.

During the closing meeting the client will be asked to sign the Audit Opening and Closing Meeting Attendance Record.

The closing meeting will address all of the points in AJA Registrars Europe S.r.l.' Closing Meeting Checklist.

Any diverging opinions that are not resolved shall be recorded and referred to the AJA Registrars Europe S.r.l.

9.4.8 Audit Report

AJA Registrars Europe S.r.l. provide a written Report Format for each audit. The audit team may identify opportunities for improvement but shall not recommend specific solutions. Ownership of the audit report is maintained by AJA Registrars Europe S.r.l.. The audit lead auditor shall ensure that the audit report is prepared and shall be responsible for the content of the report. The detailed Standard Specific Report Format, prepared by the Lead Auditor off-site following completion of the on-site audit activities, will only be considered final when all required fields within the Standard Specific Report Format have been completed.

The audit lead auditor shall provide the client with copies of any non-conformance finding statements (Corrective Action Requests) and any Observations made at the time of the Closing Meeting to allow the client to commence investigation of the circumstances and to commence Correcting and Corrective Action implementation in the most timely manner possible.

For more information see COP-IFCC-SFM CODE OF PRATICE IFCC SFM

9.4.9 Cause Analysis of Non Conformities

AJA Registrars Europe S.r.l. require the client to analyse the cause and describe the specific correction and corrective actions taken, or planned to be taken, to eliminate detected non conformities, within a defined time.

9.4.10 Effectiveness of Corrections and Corrective Actions

AJA Registrars Europe S.r.l.' auditors review any corrections and corrective actions submitted by the client to determine if these are acceptable. The Audit Team Leader shall verify the effectiveness of any correction and corrective actions taken. The evidence obtained to support the resolution of nonconformities shall be recorded on the non-conformance report (CAR). The client shall be informed of the result of the review and verification. The client shall be informed if an additional full audit, an additional limited audit, or documented evidence (to be confirmed during future audits) will be needed to verify effective correction and corrective actions. If such additional auditing is required this shall be recorded within the body of the overall Audit Report and a specific itinerary for such an additional audit visit shall be documented.

9.5 Certification Decision

9.5.1 General

AJA Registrars Europe S.r.l. ensure that the persons who make the certification or re-certification decisions are different from those who carried out the audits.

The individual who will conduct the final certification decision is the AJA Registrars Europe S.r.l. Decision Maker, for the particular standard and technical area.

Accreditation Manager, Scheme Manager and or Accreditation Review Officer also fulfil the same requirements of this part of ISO/IEC 17021 as persons employed by, or under contract with, the AJA Registrars Europe S.r.l..

AJA Registrars Europe S.r.l. record each certification decision on the Package Submission Checklists, including any additional information or clarification sought from the audit team or other sources.

9.5.2 Actions prior to making a decision

AJA Registrars Europe S.r.l. confirm, prior to making a decision, that

- The information provided by the audit team is sufficient, with respect to the certification requirements and the scope for certification
- The effectiveness of correction and corrective actions have been reviewed, accepted and verified, for all nonconformities that represent
 - Failure to fulfil one or more requirements of the management system standard
 - A situation that raises significant doubt about the ability of the client's management system to achieve its intended outputs
- The client's planned correction and corrective action for any other non-conformity which may have occurred has been reviewed and accepted

9.5.3 Information for Granting Initial Certification

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

- The audit reports
- Comments on the nonconformities and, where applicable, the correction and corrective actions taken by the client
 - Confirmation of the information provided to AJA Registrars Europe S.r.l. and used in the application review
 - A recommendation whether or not to grant certification, together with any conditions or observations

If AJA is not able to verify the implementation of corrections and corrective actions of any major nonconformity within 6 months after the last day of stage 2, AJA will conduct another stage 2 prior to recommending certification

When a transfer of certification is envisaged from other certification body, the office should follow IAF MD2.

9.5.4 Information for Granting Recertification

AJA Registrars Europe S.r.l. shall make the recertification decision, recorded on the Package Submission Checklists, on the basis of an evaluation of the audit findings and conclusions, as well as the results of the review of the system over the period of certification and complaints received from users of certification by either the client themselves or by AJA Registrars Europe S.r.l., and any other relevant information (such as public information, comments from the client).

9.6 Maintaining Certification

AJA Registrars Europe S.r.l. maintain client certification based on demonstration that the client continues to satisfy the requirements of the management system standard. AJA Registrars Europe S.r.l. may maintain a client's certification based on a positive conclusion by the audit team leader.

Continued certification packages will be checked and reviewed, including any non-conformances or other situations that may lead to suspension or withdrawal of certification, and are processed by the Accredited AJA Registrar's Office, recorded on the Package Submission Checklists for all Surveillance audits

Competent AJA Registrars Europe S.r.l. personnel monitor the surveillance activities, including monitoring the auditor reporting, to confirm that the certification activity is operating effectively.

9.6.2 Surveillance Activities

AJA Registrars Europe S.r.l. conduct surveillance activities so that representative areas and functions covered by the scope of the management system are monitored on a regular basis, and take into account changes to its certified client and their management system.

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

Other surveillance activities may include:

- Enquiries from AJA Registrars Europe S.r.l. to the certified client on aspects of certification
- Reviewing any client's statements with respect to its operations (such as promotional materials, website)
- Requests to the client to provide documents and records (on paper or electronic media)
- Other means of monitoring the certified client's performance

Surveillance audits shall be conducted at least once a calendar year. The first planned Surveillance Audit shall take place no more than 12 months after the certification/recertification decision date.

A continued certification package will be assembled by the Lead Auditor and sent to the Local AJA Office for package compilation, review and approval.

The completed continued certification package is then submitted to the accredited office

Competent AJA Europe personnel monitor the surveillance activities, including monitoring the auditor reporting, to confirm that the certification activity is operating effectively.

Continued certification packages will be checked and reviewed, including any non conformances or other situation that may lead to suspension or withdrawal of certification.

9.6.3 Recertification Audit

At the end of a 3-year registration cycle all clients are required to be subject to a full Re-Audit.

A recertification audit shall be planned and conducted to evaluate the continued fulfilment of all of the requirements of the relevant management system standard. The purpose of the recertification 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 recertification audit shall consider the performance of the management system over the period of certification, as is recorded on the Report Format, and include the review of previous surveillance audit reports.

The recertification activity shall include the review of previous surveillance audit reports and consider the performance of the management system over the most recent certification cycle, via re-audit review form.

The process for a Re-Audit is the same as the process described above, starting at Proposals and Contract Reviews, the only difference being that Stage 1 Audits are not mandatory. Although there may be a need to have a Stage 1 audit in situations where there has been a consistently poor level of conformity to the standard during the past certification cycle. Or where the client has informed AJA of any significant changes to their MS, their details, or the context in which their management system is operating (such as changes to legislation).

The recertification audit shall be performed as per the relevant CODE OF PRATICE.

When, during a recertification audit, instances of non-conformity or lack of evidence of conformity are identified, AJA Registrars Europe S.r.l. shall define time limits for corrective actions to be implemented prior to the expiration of the company's certificate. Therefore, any proposed corrective actions shall be requested during the closing meeting.

When, recertification activities are successfully completed prior to the expiry date of the existing certification the expiry date of the new certification can be based on the expiry date of the existing certification. The issue date on a new certificate shall be on or after the recertification decision.

If the AJA Registrars Europe S.r.l. completed the recertification audit or is AJA Registrars Europe S.r.l. are unable to verify the implementation of corrections and corrective actions for any major nonconformity prior to the expiry date of the certification, then recertification shall not be recommended and the validity of the certification shall not be extended. The client shall be informed and the consequences shall be explained.

Following expiration of certification, AJA Registrars Europe S.r.l. can restore certification within 6months provided that the outstanding recertification activities are completed, otherwise at least a stage 2 shall be conducted. The effective date on the certificate shall be on or after the recertification decision and the expiry date shall be based on prior certification cycle.

9.6.4 Special Audits

9.6.4.1 Extensions to Scope

AJA Registrars Europe S.r.l. shall, in response to an application for extension to the scope of a certification already granted, undertake a review of the application and determine any audit activities necessary to decide whether or not the extension may be granted. This may be conducted in

conjunction with a surveillance audit in which case the areas relevant to the extension shall be clearly highlighted within both the itinerary for the visit as well as within the audit report.

9.6.4.2 Short-Notice Audits

It may be necessary for AJA Registrars Europe S.r.l. to conduct audits of certified clients at short notice to investigate complaints, or in response to changes, or as follow up on suspended clients (see Codes of Practice).

AJA Registrars Europe S.r.l. shall exercise additional care in the assignment of the audit team because of the lack of opportunity for the client to object to audit team members. Whilst an itinerary for such a short notice audit may not be possible to be communicated to the client in advance of the visit an itinerary shall be prepared to demonstrate the coverage planned for the audit itself and the conduct of the short notice audit shall be fully reported using suitably amended AJA Registrars Europe S.r.l. audit reporting formats.

9.6.5 Suspending, Withdrawing or Reducing the Scope of Certification

AJA Registrars Europe S.r.l. have documented procedures for Suspension, Withdrawal, and Scope Reductions (COP-IFCC-SFM CODE OF PRATICE IFCC SFM).

AJA Registrars Europe S.r.l. shall 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
- The certified client does not allow surveillance or recertification audits to be conducted at the required frequencies
- The certified client has voluntarily requested a suspension

Under suspension, the client's management system certification is temporarily invalid (see Codes of Practice). The local AJA Registrar's office shall make the suspended status of the certification publicly accessible upon request and shall take any other measures it deems appropriate.

Failure to resolve the issues that have resulted in the suspension in a time established by AJA Registrars Europe S.r.l. shall result in withdrawal or reduction of the scope of certification. In most cases the suspension would not exceed 6 months.

AJA Registrars Europe S.r.l. shall reduce the client's scope of certification to exclude the parts not meeting the requirements, when the client has persistently or seriously failed to meet the certification requirements for those parts of the scope of certification. Any such reduction shall be in line with the requirements of the standard used for certification.

The revocation of certification involves' immediate ban of the use of the certificate by the company.

9.6.6 ABORTING AN AUDIT

The Lead Auditor does not make the decision to abort an audit. The Company Management must make the decision to abort an audit, based upon on the recommendation of the Lead Auditor. The auditor should consider the need to abort an audit if it is found that (after the commencement of the audit) there is clear and widespread evidence of the existence of major non-conformance(s) to either the standard or the company procedures. For example, where non-conformances are occurring in almost every area and activity and it is evident that there is a fundamental and widespread breakdown of the

system. From that point on, no matter how good the company wants to be, the audit must end in the "Not Recommended" situation at the Closing Meeting. Therefore it is the responsibility of the Lead Auditor to draw the attention of the Management Representative to this fact as soon as it becomes clear that this exists.

The decision to abort an audit is a sensitive one carrying with it the "stigma" of failure from the company's point of view. Aborting an audit is never easy, but if it is necessary it is the responsibility of the Lead Auditor to bring it to the attention of the management of the company in the best possible way. Handled properly it can be of benefit to everyone, handled badly it can destroy the credibility of the auditors, AJA and the audit discipline itself.

The Lead Auditor should attempt to stress the positive side of the circumstances. The company can, if they wish (and they must be informed of their options), choose to continue the audit but under the guise of a non-certification "pre-audit". This will give them the opportunity to understand all of the areas of concern so that they can implement change and preventive actions before the to-be-arranged Audit.

Although the Lead Auditor is the person who must talk directly with the company, the Lead Auditor should always communicate with senior AJA management when discussions are held with a client on the possibility of aborting an audit. This ensures that the Lead Auditor understands that their decision has the support of the senior AJA management and allows the senior AJA manager to be made aware of the situation.

Circumstances surrounding an aborted audit must be clearly recorded within the AJA client file. As there are 2 options open to the client, either to abort the audit completely or to continue the audit as a pre-audit, the reporting of this in the AJA client file must clearly show the outcome:

- If the audit was aborted a Standard Specific Report Format and also a summary should be prepared (no fixed format) by the Lead Auditor identifying all of the circumstances leading up to the decision. So when the audit process is continued later the Lead Auditor is able to follow through with a focus on the original concerns
- If the audit was continued as a Pre-Audit this should be recorded in the file and a copy of any Pre-Audit report should be attached so that all areas of concern are planned for review in the to-be-arranged Audit

Accredited office of AJA also need to be advised, as a further Proposal & Application must then be prepared as a result of either outcome.

9.7 Appeals

AJA Registrars Europe S.r.l. have a documented procedure to receive, evaluate and make decisions on appeals (see Procedure 1).

A description of the appeals-handling process is publicly accessible in the Codes of Practice and the Report Format.

AJA Registrars Europe S.r.l. are responsible for all decisions at all levels of the appeals-handling process. AJA Registrars Europe S.r.l. shall ensure that the persons engaged in the appeals-handling process are different from those who carried out the audits and made the certification decisions (see Procedure 1)

Submission, investigation and decision on appeals shall not result in any discriminatory actions against the appellant as is explained in the Report Format and Codes of Practice.

The appeals-handling process is outlined in Procedure 1.

Upon receipt of an appeal, a letter of acknowledgement is sent, advising that the appeal has been received and is being investigated.

The decision to be communicated to the appellant shall be made by, or reviewed and approved by, individuals not previously involved in the subject of the appeal.

AJA Registrars Europe S.r.l. shall give formal notice to the appellant of the end of the appeals-handling process.

9.8 Complaints

A description of the complaints-handling process is publicly accessible in the Codes of Practice and the Report Format. AJA Registrars Europe S.r.l. shall be responsible for all decisions at all levels of the complaints handling process

Upon receipt of a complaint, AJA Registrars Europe S.r.l. shall confirm whether the complaint relates to certification activities that it is responsible for and, if so, shall deal with it. If the complaint relates to a certified client, then examination of the complaint shall consider the effectiveness of the certified management system. AJA Registrars Europe S.r.l. in there Submission, investigation and decision on complaints shall not result in any discriminatory actions against the complainant.

Any complaint about a certified client shall also be referred by AJA Registrars Europe S.r.l. to the certified client in question at an appropriate time.

Procedure 1 explains the process for receiving, evaluating and making decisions on any valid complaints. This process is subject to requirements for confidentiality, as it relates to the complainant

The complaints-handling process is outlined in Procedure 1.

AJA Registrars Europe S.r.l., upon receiving the complaint, shall be responsible for gathering and verifying all necessary information to validate the complaint.

Whenever possible, AJA Registrars Europe S.r.l. shall acknowledge receipt of the complaint, and shall provide the complainant with progress reports and the outcome.

The decision to be communicated to the complainant shall be made by, or reviewed and approved by, individuals not previously involved in the subject of the complaint.

Whenever possible, AJA Registrars Europe S.r.l. shall give formal notice of the end of the complaints handling process to the complainant.

AJA Registrars Europe S.r.l. shall determine, together with the client and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution shall be made public.

9.9 Client Records

AJA Registrars Europe S.r.l. maintain records on the audit and other certification activities for all clients within uniquely identifiable client files, including all organisations who have submitted applications, and all organisations audited, certified, or with certification suspended or withdrawn on the AJA Registrars Europe S.r.l. Database.

Records required on certified clients are defined within XPRD-PRO-DOC&REC DOCUMENT & RECORDS PROCEDURE

AJA REGISTRARS EUROPE SRL

POLICY MANUAL



AJA Registrars Europe S.r.l. keep all records on applicants and clients secure, to ensure that the information is kept confidential. Records must be transported, transmitted or transferred in a way that ensures that confidentiality is maintained. Office network systems and databases are to be password protected, as are all computers used by AJA Registrars Europe S.r.l.' personnel to conduct work functions and store AJA Registrars Europe S.r.l.' documentation and information.

XPRD-PRO_DOC&REC defines the AJA Registrars Europe S.r.l. policy for retention of records. Client records shall be retained for the duration of the current cycle plus one full certification cycle.

All AJA Registrars Europe S.r.l. records shall be retained according to the table below.

Document	Retention Time
Enquiries	Current certification cycle plus the previous certification cycle
Proposals – job lost	1 year
Client File Documents	Current certification cycle plus the previous certification cycle
Client File Documents Cancelled/ Withdrawn	Minimum of 3 years from date of Cancellation/ Withdrawal
Certificate Issue Register	Indefinite
Staff Member Files	Employment Period plus 1 year/Legal requirement
Auditor/Technical Expert Files	6 years from last use
AJA Documented System	1 revision
Library Records (Standards, Guidelines, Reference Works and Legislation)	Minimum of 1 revision
Management Review Minutes	3 years
Impartiality Committee Minutes	3 years
Internal Audit Records	3 years
Other Documentation	Refer to Accredited Office for guidance

10 Management System Requirements for certification bodies

10.1 Options A - General management system requirements

AJA Registrars Europe S.r.l. have established, documented, implemented and maintained a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of the International Standard.

The top management of AJA Registrars Europe S.r.l. provide evidence of commitment to the development and implementation of the management system. The top management of AJA Registrars Europe S.r.l. ensure that the policies are understood, implemented and maintained at all levels of AJA Registrars Europe S.r.l.' organisation.

The top management of AJA Registrars Europe S.r.l. have appointed the Accredited Manager with the responsibilities and authorities (as shown in his job descriptions) that include:

- Ensuring that processes and procedures needed for the management system are established, implemented and maintained
- Reporting to top management of AJA Registrars Europe S.r.l. on the performance of the management system and any need for improvement
- Managing New Schemes

10.2.1 General

All applicable requirements of the International Standards have been addressed either in this Policy Manual or in other associated AJA Registrars Europe S.r.l. documents. AJA Registrars Europe S.r.l. ensure that the Policy Manual and the associated documents required are accessible to all relevant personnel.

AJA Registrars Europe S.r.l. has a Quality Policy Statement established by the Joint Chief Executives:

POLICY

AJA Registrars Europe S.r.l. as a company, and all employees of the company, are committed to:

- The provision of completely professional 3rd party auditing, inspection and registration of client company Management Systems in line with ISO 19011, ISO 17020 and ISO 17021 requirements
- Maintaining complete confidentiality of all client information gained during audit processes unless required to release such information by law and unless a client sanctions release of such information when this is requested by other external parties
- Maintaining complete impartiality in the certification processes including certification decision-making
- Ensuring compliance with all regulatory and legal requirements for business operations.

This policy is periodically reviewed by the senior management of AJA Registrars Europe S.r.l. and, as necessary amended to suit changing circumstances. This policy is publicly available on request through the web-site

The above Policy is a corporate AJA Registrars Europe S.r.l. Policy; corporate objectives related to this policy are established and reviewed at Directors/Management Review Meetings, the overall corporate objective is to maintain AJA Registrars Europe S.r.l.' reputation within the certification industry by continually improving and reducing the number of complaints received both from and about certified clients

Offices which also hold a local Accreditation may be required (by local Accreditation Bodies) to establish local quality policies and objectives in addition to the corporate policies and objectives, these will be issued and controlled by the local offices.

10.2.1 General

XPRD-PRO-DOC&REC DOCUMENT & RECORDS PROCEDURE defines the controls needed for the identification, storage, protection, retrieval, retention time and disposition of records.

10.2.2 Control of Documents

AJA Registrars Europe S.r.l. have a Document Control procedure (see XPRD-PRO-DOC&REC DOCUMENT & RECORDS PROCEDURE) to control the documents (both internal and external).

10.2.3 Control of Records

XPRD-PRO-DOC&REC DOCUMENT & RECORDS PROCEDURE defines the controls needed for the identification, storage, protection, retrieval, retention time and disposition of records.

10.2.4 Management Review

AJA Registrars Europe S.r.l.' top management have established procedures to review the management system at planned intervals to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives. These reviews are conducted at least once a year (see Procedure 9 and Procedure 10).

The minimum inputs required for the Management Review are documented in Procedure 9 and Procedure 10.

The minimum outputs required from the Management Review documented in Procedure 9 and Procedure 10.

10.2.5 Internal Audits

AJA Registrars Europe S.r.l. have established procedures for internal audits (see Procedure 14 and Procedure 15) to verify that the requirements of the International Standard and the management system are effectively implemented and maintained.

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

Internal audits of must be performed at least once every 12 months by each AJA Registrars Europe S.r.l. office and once every 2 years by Italy Management.

AJA Registrars Europe S.r.l. ensure the following through application of Procedure 14 and Procedure 15:

- Internal audits are conducted by qualified personnel knowledgeable in certification, auditing and the requirements of the International Standard
- Auditors do not audit their own work
- Personnel responsible for the area audited are informed of the outcome of the audit
- Any actions resulting from internal audits are taken in a timely and appropriate manner
- Any opportunities for improvement are identified

AJA Registrars ensure that:

- internal audits are conducted by competent personnel knowledgeable in certification, auditing and the requirements of this part of ISO/IEC 17021-1
- auditors do not audit their own work;
- personnel responsible for the area audited are informed of the outcome of the audit;
- any actions resulting from internal audits are taken in a timely and appropriate manner;
- any opportunities for improvement are identified.

10.2.6 Corrective Actions

AJA Registrars Europe S.r.l. have a procedure for identification and management of non conformities (see Procedure 12). AJA Registrars Europe S.r.l., wherever necessary, take actions to eliminate the causes of any non conformity identified, in order to prevent recurrence. Corrective actions must be appropriate to the impact of the problems encountered.

11 - IFCC Certification Scheme - IFCC ST 1001:2014 Rev. 3 – Distribution of responsibility

Activity	AJA Registrars Europe	AJA Indonesia
Customer Management		X
Questionnaire / Proposal (Id Code)		X
Proposal and contract review		X
Identification of Job Number (SIA - Company System)	X	
Auditor & Decision Maker - Qualification & Monitoring		X
Auditor & Decision Maker – Validation	X	
Audit Plan		X
Audit Report – Check List		X
PKG		X
Certification Decision (Decision Maker)		X
PKGs Validation (Review to check compliance to procedure)	X	
Certificate Issue & Signature	X	
Certificate printing & delivery to the client		X