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|  | ***prOCEDure No 20Issue 7*** |

**CONTRACT REVIEW**

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# 1 Purpose

 To define the manner that customer requirements are identified and how the certification body resources are matched and allocated for a certification contract.

# 2 Scope

 This procedure shall be used for all proposed contracts to determine how and if the certification body will satisfy the proposed certification contract.

# 3 References

 UKAS criteria ISO 17021-1

 MD1, MD2, MD5, MD11, ISO 27006

 SN Registrars Management manual

# 4 Definitions

Competent auditor An auditor on the auditors register (SNR Portal and eCMS if used) for the appropriate EA industrial sector/ NACE code with relevant skills

# 5 Procedure

## **5.1 Initial Contract Review**

 When the customer completed application is received, the relevant sections of the application shall be reviewed and determined if the auditees operation as determined by the EA/NACE Code is within the accredited scope of the certification body. If not see 5.3, if yes then SN Registrars logs the relevant details of the application to the contract review form FMP20/06.

 Competent quality, environmental, health and safety, business continuity or information security person then ensures that the client completed application form is analysed by:

* Quality and Business Continuity requirements stated or specific and technological/process requirements.
* Environmental aspects, regulatory requirements, significance of aspects, technological/process requirements.
* OHSAS regulatory requirements, hazards, technological/process requirements.
* ISMS requirements stated or specific and technological/process requirements.

 Note: Contract Review needs to be completed BEFORE quotation and contract are submitted to the customer.

## **5.2 Main Contract Review**

All standards use the same contract review form as the scheme specific requirements are detailed within the contract review form FMP20/06.



 **Note:** Managing Agents may have their local system and approval process, however, the contract review FMP20/06 has to be done based on the application and is a basis for the quotation and contract and needs to be completed and approved before the quotation and contract is submitted.

 The Scheme Manager reviews the application to ensure that the customer’s requirements are understood and there is a competent resource available to deliver the audits.

 *If this is outside of his scopes of approval the file is reviewed by a competent person with the scope approval*.

 This review identifies:

 Scope of work for the EA code/industrial sector and associated risk, technical issues, processes, regulatory requirements, organisation/site activities products and services, environmental aspects. This information is obtained from the application completed by the customer.

Audit team selection for the scope of work for the EA/NACE code/industrial sector and associated risk, auditors skills are matched to allocate an audit team consisting of the following skills:

* Lead auditor;
* Knowledge and understanding of regulatory requirements;
* Quality aspects;
* Technical/process knowledge;
* Requirements, stated or specific.

 The team allocated shall be drawn from eCMS (if used) which identifies the individuals with the above skills. The team can consist of one auditor or several auditors including any Technical Expert. The team must have collectively, all the above skills for each audit.

 **Availability of resource**

 Where a Technical expert is required to support the audit the SN Registrars Scheme manager shall select one using Procedure 11.

 **Audit time (in days) for the planning, initial and main Audits**

 The contract review results are recorded on form P20/06. On completion of the contract review the Application and related documents are kept on the Enquiry file/ eCMS system.

 The selected Audit team shall be provisionally allocated in eCMS.

 Note: Contract Review needs to be completed BEFORE estimate and contract are submitted to the customer.

## **5.3 Non scope applications**

 If it is identified that the application is not within the UKAS scope of the certification body at the initial contract review the Scheme Manager rejects UKAS accredited certification and passes the application, a completed application to the SN Registrars Director who assesses the viability of expanding the UKAS scope for this proposed certification contract or conducting a non accredited certification.

 That viability is based upon;

 i) What is the market potential?

 ii) what % of the market will we have if we do i).

 iii) what is the investment to expand against return, i.e. resource and time.

 iv) potential return over what period.

 v) what are the risks?

a) if we don't expand scope(do nothing)

b) what will competitors do?

c) contingency plans if we don't meet planned requirements

 vi) probability of success

 vii) benefits

 If the SN Registrars Scheme manager decides not to go ahead the applicant is sent an application regret letter.

 If the SN Registrars Director decides to expand the UKAS scope of the Certification Body capability to fulfil the contract then this is action by:

i) Search of CV's, and skills matrix for relevant Auditor skills.

ii) Advertise for Auditors with relevant skills and process as procedures 10 and 11

iii) Inform UKAS of wish to expand scope with what company when the Audit is liable to take place and who the Auditor team will be.

iv) Fulfil UKAS requirements for scope extension which will possibly be:

 a) interview of Auditors for new scope

 b) witnessed Audit

 c) Agree scope extension with no action from them

5.3 a

 If the SN Registrars Director decides not to expand the UKAS scope of SN Registrars but decides to issue non UKAS accredited certificates then the customer is advised that SN Registrars does not have the UKAS scope approval to deliver this certification but will issue a non UKAS accredited certificate. These certificates are to follow the full process followed for accredited certificates and relevant instructions from regulatory bodies to be refered to where non accredited certificates are banned e.g. AS9100.

## **5.4 Transfers from other Certification Body**

If the certification is a transfer from other certification body, the transfer checklist FMP20/07 is completed.

**Pre-Transfer Review**

SN Registrars scheme manager or other competent person carry out a review of the certification transfer of the prospective client. This review shall be conducted by means of a documentation review and where identified as needed by this review, for example there are outstanding major nonconformities, shall include a pre-transfer visit to the transferring client to confirm the validity of the certification.

Note: The pre-transfer visit is not an audit.

The review should cover the following aspects and its findings shall be fully documented:

1. confirmation that the client’s certified activities fall within the accredited scope of the accepting certification body;
2. confirmation that the issuing certification body’s accredited scope falls within its accreditation body’s MLA scope;
3. the reasons for seeking a transfer;
4. that the site or sites wishing to transfer certification hold an accredited certification that is valid in terms of authenticity, duration and scope of activities covered by the management system certification. If practical, the validity of certification and the status of outstanding nonconformities should be verified with the issuing certification body unless it has ceased trading. Where it has not been possible to communicate with the issuing certification body, the accepting certification body shall record the reasons;
5. the initial certification or most recent recertification audit reports, and the latest surveillance report; the status of all outstanding nonconformities that may arise from them and any other available, relevant documentation regarding the certification process. If these audit reports are not made available or if the surveillance audit or recertification audit has not been completed as required by the issuing certification body’s audit programme, then the organisation shall be treated as a new client;
6. complaints received and action taken;
7. the stage in the current certification cycle;
8. any current engagement by the organisation with regulatory bodies in respect of legal compliance.

**Certification**

5.4.1 Normally, only valid accredited certification should be transferred. In cases where certification has been granted by a certification body which has ceased trading or whose accreditation has expired, been suspended or withdrawn, the accepting certification body may consider such a certification for transfer at its discretion. In such cases, before it proceeds with the transfer, SN Registrars shall obtain agreement from the accreditation body, whose mark it intends to place on the certificate.

In the case of acquisitions SN Registrars shall, where practical, fulfil the contractual obligations of the acquired certification body.

5.4.2 Certification which is known to have been suspended or under threat of suspension shall not be accepted for transfer. If SN Registrars has not been able to verify the status of the certification with the issuing certification body, the organisation shall be required to confirm that the certificate is not suspended or under threat of suspension.

5.4.3 Outstanding nonconformities should be closed out, if practical, with the issuing certification body, before transfer. Otherwise they shall be closed out by SN Registrars.

5.4.4 If no further outstanding or potential problems are identified by the pre-transfer review a certification may be issued following the normal decision making process.

The programme of ongoing surveillance should be based on the previous certification regime unless SN Registrars has conducted an initial or recertification audit as a result of the review.

5.4.5 Where doubt continues to exist, after the pre-transfer review, as to the adequacy of a current or previously held certification, SN Registrars shall, depending upon the extent of doubt, either: treat the applicant as a new client or conduct an audit concentrating on identified problem areas.

The decision as to the action required will depend upon the nature and extent of any problems found and shall be explained to the organization and the justification for the decision shall be documented and the records maintained by SN Registrars.

NOTE: SN Registrars quote the organization’s initial certification date on the certification documents with the indication that the organization was certified by a different certification body before a certain date.

## **5.5 Issue of SN Registrars Cerificates jointly with other certification bodies certificates**

If another certification body wishes to be able to offer its clients joint certification that includes SN Registrars/UKAS certificates then those joint certificates may be issued providing the following conditions have been met:

1. There is a signed agreement between SN Registrars and the subcontracting certification body.
2. The subcontracting certification body is managed by the local SN Registrars Agent.
3. The subcontracting certification agree to that the certification process will include the requirements of the SN Registrars procedures.
4. The subcontracting certification body audit staff are assessed and approved as meet the competence requirements of SN Registrars.
5. The subcontracting certification body staff shall complete, in English, a CV and skills matrix. This is forwarded to SN Registrars UK through the SN Registrars Agent who must review the CV and skills matrix and give his approval to SN Registrars UK.
6. The subcontracting certification body then operate as SN Registrars procedure Proc26 and forwards the audit reports through SN Registrars Agent for SN Registrars UK to review, approve and issue SN Registrars certificates through SN Registrars Agent.
7. The local Agent monitors and reports performance of the subcontracting certification body against SN Registrars procedures.
8. The local Agent manages all financial issues.

# 6 Change of Information on an Issued Certificate

 If a certificated client requests the certification body for a change of information on the certificate the SN Registrars Scheme manager checks with the client the validity of the request, Proc 24 is followed when approved and amended certificate is issued after the return of the old certificate.

 If the request is for a change of scope then it shall usually be verified at the next surveillance audit and an amended certificate issued through review.

 If the request is urgent then an extra audit can be conducted.

# 7 Quality Records

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| --- | --- | --- | --- |
| **Quality Record Number**  | **Quality Record Title:** | **Type of File** | **Retention Time** |
| Form P20/01a | Record of Environmental aspects & Risk allocation to client | contract  | 6 years |
| Form P20/01b | Record of Environmental risk assessment for EA codes | contract  | 6 years |
| Form P20/02  | Record of Quality risk assessment for EA codes | Operations | 6 years |
| Form P20/06 | Record of contract review  | Operations | 6 years |
| Form P20/07 | Transfer of certificate checklist | Operations | 6 Years  |
| Form P20/08 | Application rejection letter | Operations | 6 years |
| Form P20/11 | OHSAS 18001 Hazard and Risk Analysis | Operations | 6 years |