Certification Process

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1. Purpose

This procedure defines the process requirements for any management system certification in order to ensure that work is completed in a controlled and consistent manner in accordance with accreditation requirements.

2. Scope

2.1. Certification scope

Management system certification activity covers development, implementation, surveillance, review, maintenance and improvement of the management system.

The certification deals only with the conformity assessment of the management system regarding to the standard and not about certification of product, process or services.

Service, product or process certification activity covers only conformity assessment of the service, product or process in scope regarding to standard(s) and other specific criteria.

2.2. Applicable standards

This certification regulation is applicable to all management system certification activities covered by the scope of ISO/IEC 17021-1 standard and ISO/IEC 27006 standard as well as product, service or process certification activities covered by the scope of ISO/IEC 17065 and ETSI 319 403 standard.

3. Certification procedure

3.1. Application

All organizations wishing to be certified by ICTS can apply through any methods of communication (mail, e-mail, phone call, etc.). ICTS needs to get all necessary information for the certification, which include certification scope, general information such as company name, address, number of sites, etc., general description of the organization and activities, management system description, outsourced processes, consultancy support from advisory company, level of centralization of the organization governance, etc. All information has to be recorded in an Application form.

3.2. Application review

The application is reviewed in order to ensure that all necessary information have been recorded and that no ambiguity exists anymore. Consistency of the management system or product, service or process description and certification scope are also reviewed. ICTS may propose a modification of the request if any inconsistency has been identified. In case of doubt, additional information may be requested.

In case where ICTS is not able to process to the certification activity, the applicant is notified in writing that ICTS is not able to respond to the application.

Certification activity will be conduct only when contractual agreement is signed by both parties.

3.3. Initial certification audit

Initial certification shall be conducted in two stages: Stage 1 and Stage 2.

The objectives of Stage 1 audit are to:

- review the client's 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 or the service, product or process;
- obtain necessary information regarding the scope of the management system or product, service or process, 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 or the product, service or process and site operations in the context of the standard or other normative document;
- evaluate if the internal audits and management reviews (if applicable) are being planned and performed, and that the level of implementation of the management system or the product, service or process substantiates that the client is ready for stage 2.

Stage 1 audit is documented in a report which is issued to the client with the final audit report.

If the stage 1 audit conclusions show that significant variations exist against the standard(s) requirements, ICTS can suspend the certification process until significant variations are closed.

The Stage 2 audit consists to audit the implementation and the effectiveness of the management system or the product, service or process according to the requirements of the standard(s). Stage 2 audit should be conducted within one month after the stage 1 audit. After 1 month, stage 1 audit may be carried out again.

All audits are conducted according to ISO/IEC 19011 standard.

3.4. Audit report

At the end of the audit, the audit team leader delivers to the client the result of the audit (non-conformities and observations). These results are discussed during the closing meeting in order that all parties can comment them. All deviations against the standard(s) as well as corrections and corrective action plans must be accepted by the client.

The final audit report will be reviewed by ICTS before being sent to the client.

3.5. Certification decision

The following decisions can be taken depending on the audit report:

- Granting the certification if no major non-conformity has been raised.
- Granting the certification, but subject to a follow-up audit in case when:
  - Lack of maturity of the management system or product, service or process without bringing to light any major non-conformity and/or;
  - Many minor non-conformities or points to follow have been raised and/or;
  - Lack of confidence in elements provided by the client.
- Withhold the certification if the audit report highlights major non-conformities. In this case, a follow-up audit may be conducted, if requested by the client, within 3 months following the decision for resubmitting the granting of certification. After this deadline, the whole certification process must be realized.

All decisions (initial or renewal) of granting, suspending, withdrawing or cancelling a certification have been taken by the Certification Manager and are approved by ICTS's Director. If case of disagreement, the Impartiality and Ethics Committee may be convened.

3.6. Certification documents

When certification is granting, a certificate stating the scope of certification and the standard used for the audit is issued and an audit program is given with the audit report specifying the planning for surveillance activities and renewal audit.

3.7. Certificate validity

Certificate validity period is maximum 3 years from the last day of the stage 2 audit. The certification validity period is subject to regular surveillance.

For eIDAS program, certification validity period is maximum 2 years from the day when the certification decision has been taken.

3.8. Surveillance activities and audits

Surveillance audits are conducted the first and the second year following the initial certification audit (not later than 12 months after the last day of the stage 2 audit or renewal audit for the surveillance audit 1 and not later than 24 months for the surveillance audit 2) in order to ensure that representative areas and functions covered by the scope of the management system or the product, service or process are monitored on a regular basis. The surveillance audit program includes, at least, and depending on the program:

- Internal audits and management review.
- A review of actions taken on nonconformities identified during the previous audit.
- Treatment of complaints.
- Effectiveness of the management system with regard to achieving the certified client's objectives.
- Progress of planned activities aimed at continual improvement.
- Changes to the documented system and operation and review of the system maintenance elements.
- Continuing operational control.
- Review of any changes.
- Use of marks and/or any other reference to certification

Depending on the result of these surveillance audits, the certification can be maintained without reservations, subject to a follow-up audit, suspended or withdrawn.

Surveillance audits are concluded by an audit report. A new certificate is not issued.

For some specific programs, certification cycle may be different (e.g. eIDAS program has only one surveillance audit).

3.9. Recertification audit

A recertification audit is conducted before the expiry of the certification validity period in order to ensure that the management system or the service, product or process still complies with standard(s) requirements. The recertification audit includes an onsite audit that addresses the following:

- The effectiveness of the management system or the service, product or process in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification.
- Demonstrated commitment to maintain the effectiveness and improvement of the management system or the service, product or process in order to enhance overall performance.

- Whether the operation of the certified management system or the service, product or process contributes to the achievement of the organizations policy and objectives and standard(s) requirements.

Recertification audits may require holding a stage 1 audit in situations where there have been significant changes to the management system, the client, or the context in which the management system or the service, product or process is operating (e.g. changes to legislation).

Depending on the result of the recertification audit, the certification can be renewed without reservations, subject to a follow-up audit, suspended or withdrawn.

A new certificate is issued.

3.10. Short notice audit

It may be necessary to conduct audits of certified organizations at short notice to investigate complaints, in response to changes, or as follow up on suspended organizations. In all cases the organization will be notified in advance of the conditions under which the short notice visit is to be conducted. Additional care shall be exercised in the assignment of the audit team.

3.11. Pre-Audit and White Audit

Some clients might request a Pre-Audit or a White Audit. These types of audit will follow the general rules of audit as described in this document but are not to be considered as part of the certification process.

For the purpose of this procedure, even though the definition of pre-audit and white audit might be slightly different, all requirements applied to one of them should be considered as applicable to both.

Pre-audits activities, preliminary audits and/or white audits carried out by Certi-Trust will always meet the following requirements:

- a pre-audit purposely carries out a factual assessment of an entity readiness with regard to the certification criteria, but neither by detecting possible discrepancies toward the requirements of the assessed standard but without recommending practical solutions to solve them, nor by following their remediation;

- a white audit purposely carries out a factual assessment of of an entity readiness with regard to the criteria of a specific scheme without the intention of seeking any certification, neither by detecting possible discrepancies without recommending solutions to solve them, nor by following their remediation;

- pre-audit activities are not allowed to customers whom are already certified (except for the extension part of a scope for which the customer is already certified or for the transition to a new version of any standard to which the client is already certified);

- pre-audit rules and auditors' mission must keep in line with the exposed conditions. Auditors must also abide to Certi-Trust's code of ethics;

- pre-audits will be limited to a single intervention per site and per certification area before a certification audit by Certi-Trust is performed;

- for management system certification schemes, the duration of a pre-audit will be significantly shorter than the expected duration of an initial certification audit with the same customer. An equivalent duration to the one provided for an annual surveillance audit is considered as acceptable. A pre-audit does never constitute an exhaustive assessment of an evaluated management system;

- any pre-audit will give rise to a written report

- a pre-audit is neither similar to any step 1 (initial) audit as defined in the standard NF EN ISO / IEC 17021-1, nor to any internal audit.

3.12. Extension to scope

ICTS will, in response to an application for extension to scope of a certificate already granted, undertake a review of the application (contract review) and determine any audit activities necessary to determine whether or not the extension may be granted, including the requirement to conduct a visit. This may be conducted in conjunction with a surveillance visit.

The certification decision maker will be responsible for granting an extension to scope based upon the information supplied. The process is the same as for initial certification following a stage 2 audit.

3.13. Audit preparation

For all audits, special attention is placed on the audit team selection and assignments depending on skills needed and constraints (specific agreement, management of conflict of interest, respect of impartiality and independency principles, etc.).

The client has to cooperate with ICTS for identifying any potential conflict of interest. Hence, the client has to communicate to ICTS all entities (company or person) which have carried out consultancy services or internal audit services within the past two years.

Audit time is defined following dedicated procedure and defined methodology. Audit plan is agreed with the client.

Where multi-site sampling is used for the audit of a client covering the same activity in various locations, ICTS has developed a sampling program to ensure proper audit of the management system or the product, service or process. The rationale for the sampling plan is documented for each client.

The client is informed as of audit planning about the audit team leader and the audit team in charge of the audit. The client may reject one or more auditors if this recusal is justified (e.g. conflict of interest).

3.14. Processing Nonconformities

All deviations against standard(s) requirements point out during audits are nonconformities. The level of the nonconformity is evaluated depending on the risk caused by the deviation.

The evaluation of the audit findings is based on the following definitions:

- Major nonconformity - The absence or total breakdown of a system to meet a requirement. It may be either:
  - A number of minor nonconformities against one requirement can represent a total breakdown of the system and thus be considered a major nonconformance; or
  - Any nonconformance that would result in the probable shipment of a nonconforming product or inability to conform to a criterion. A condition that may result in the failure or materially reduce the usability of the products or services for their intended purpose or to achieve organization's objectives; or
  - A nonconformance that judgment and experience indicate is likely either to result in the failure of the management system or the ability to conform with requirements related to product, service or process or to materially reduce its ability to assure controlled product, service or process.
- Minor nonconformity (or "Points to watch" for eIDAS program) - A finding that judgment and experience indicate is not likely to result in the failure of the system or reduce its ability to assure controlled product, service or process. It may be either:
  - A failure or weakness in some part of the organization documentation or processes relative to a requirement; or
  - A single observed lapse in following one item of the organization.
- Observations - Any issues which are likely to become a nonconformity if not treated until the next audit are marked as observations (OBS). No response is required.
- Opportunities for improvement - If certain aspects should be improved which generally comply with the requirements of the standard though, then they are marked as opportunities for improvement (OFI). These OFIs help to improve the organization as a whole or named processes. No response is required.

Corrective actions to address identified major nonconformities shall be carried out immediately and ICTS must be notified of the actions taken within 30 days. A ICTS auditor will perform a follow up visit within 90 days to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued.

When a major nonconformity raised at initial audit cannot be closed out within the defined timeframe, the audit process is concluded, and no certification may be granted. A complete re-audit of the management system or product, service or process will be required to again consider granting a certification.

When a major nonconformity, raised at surveillance or re-certification, cannot be closed out within the defined timeframe, this shall be reported and a recommendation for suspension indicated.

Corrective actions to address identified minor nonconformities or points to watch shall be documented on an action plan and sent by the client to the auditor within 30 days for review. If the actions are deemed to be satisfactory, they will be followed up at the next scheduled visit.

In cases where the follow up evaluation determines that a minor nonconformity or points to watch identified at a prior visit has not been addressed by the organization, a new, major nonconformity shall be raised.

3.15. Notice of changes by the client

The client must inform ICTS, without delay, of matters that may affect the capability of the management system or the certified product, service or process to continue to fulfil the requirements of the standard used for certification. These include (but are not limited to):

- The legal, commercial, organizational status or ownership.
- Organization and management (e.g. key managerial, decision–making or technical staff).
- Contact address and sites.
- Scope of operations under the certified management system or certified service, product or process.
- Major changes to the management system or to processes supporting certified product, service or process.
- Breaches of legal obligations.

Depending on the impact, ICTS can decide:

- To maintain the certificate without any change
- To reassess the management system or the product, service or process thanks to an additional audit which will be concluded the extension, the reduction, the suspension or the withdrawal of the certification.

The certificate may be modified, dates of surveillance audits and renewal audit are not changed. The client must modify any object of publicity in case of reduction of its scope of certification.

3.16. Change in accreditation rules or applicable laws and regulations

In case of change in accreditation rules or applicable laws and regulations, and if these changes impact the current contractual agreement and current Certification Regulation, ICTS will inform clients of the transitional arrangements.

Maintenance of certificates will be conditional on the respect of these transitional arrangements which will may be formalized in an amendment of the current contractual agreement.

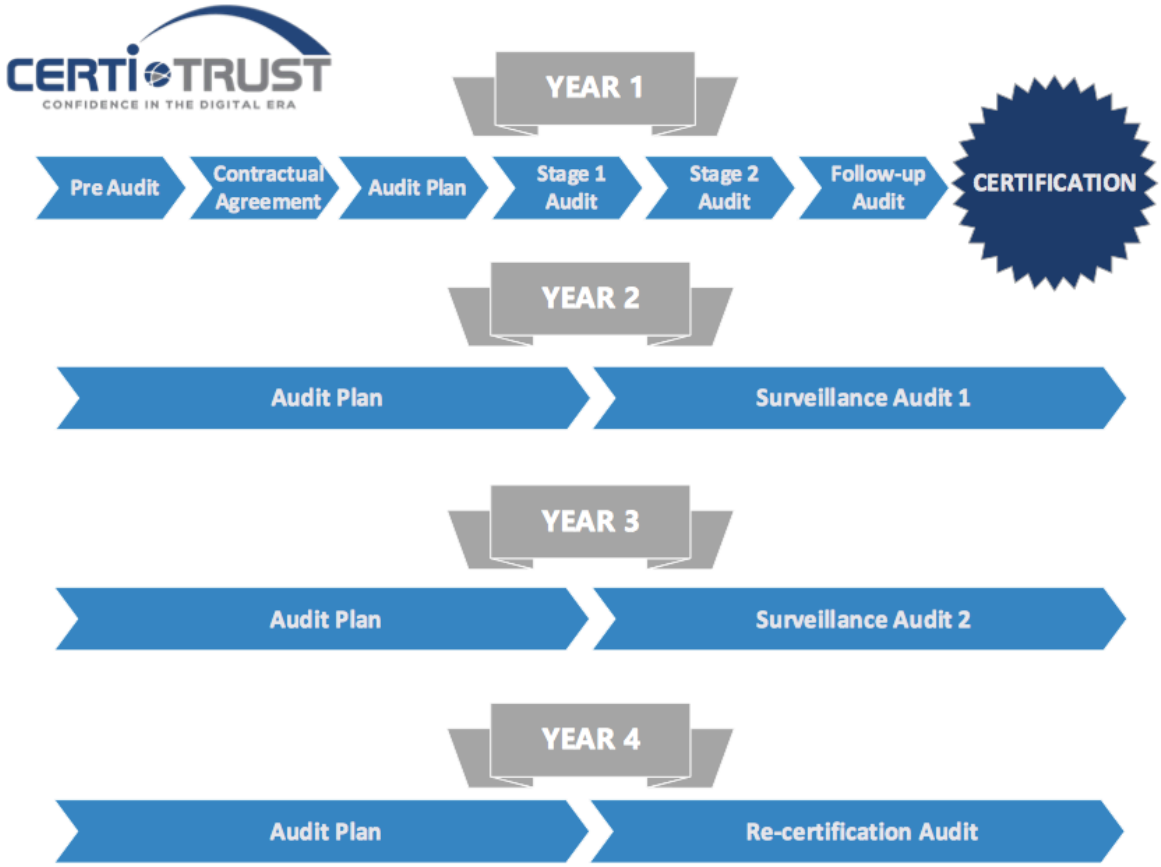
3.17. Suspension or withdrawal of the certification

The certification can be suspended or withdrawn upon request of the client. The certification may also be withdrawn if:

- The client fails to respect certification requirements defined in this regulation and in the contractual agreement.
- The client does not answer to ICTS's requests concerning complaints received by a third-party against the client.
- The client does not allow ICTS to conduct surveillance audits or recertification audit following the agreed audit program and/or refuse additional audit.

Certification suspension cannot exceed 6 months. After 6 months, the certification is considered as withdrawn. During certification suspension period or after a certification withdrawal, the client is not authorized to use certification mark and to promote its certification until a new certification decision.

4. Certification Process



5. Appeals and complaints procedure

This procedure includes ICTS actions in regard to complaints received from applicants, certified organization, and other parties about the certification process and criteria (here on after named "Complainants"), as well as policies and procedures for the performance of certification activity.

5.1. Complaints procedure

Complaints will be reviewed by the Compliance department who is responsible for investigating the complaint made and inform the Complainants about the plan of action for investigation and remediation where applicable.

Complainants will receive an answer from Certi-Trust in the shortest possible delay with details concerning the investigation results and corrective measures taken to eliminate the cause of non-conformance.

Complaints received by ICTS have to be closed within 30 calendar days after reception of the complaint. If the complaint cannot be closed due to force majeure, the Compliance Manager will inform the complainant about the reason and will fix a new deadline (no longer than 30 other calendar day) to fix the resolution of the case.

5.2. Appeals procedure

Appeals will be reviewed by the Certification Manager. In case where the Certification Manager is part of the audit/certification team, the appeal must be assigned to the CEO.

All investigations are recorded by the Compliance Manager who is responsible for appeal process to safeguard impartiality, including taking provisions to ensure the impartiality of organization's operations.

The Certification Manager must reply to the Complainant per written about the investigation results. All corrective measures that have been taken to eliminate the cause of non-conformance must be described in this answer, wherever applicable.

In case both the Certification Manager and CEO have been taking part to the certification process or are not available to treat the appeal, this might be discussed within an Impartiality and Ethics Committee meeting.

Impartiality and Ethics Committee enables the participation of all parties significantly concerned in the development of policies and principles regarding the content and functioning of the certification system, without any particular interest predominating.

This committee is independent from the management in their recommendations except as required by international or national laws. If advices of this committee are not respected by the management in these matters, the committee shall take appropriate measures, which might include informing the accreditation body.

In order to be eligible for taking part on the appeal resolution process (which could include taking a new certification decision), the members of the Impartiality Committee must fulfill the following specific competence requirements:

- knowledge of audit and certification process
- knowledge of the related management system
- 5 years' experience in audit activity related to the certification scheme that makes the object of the appeal

In the exceptional case where there is no member of the impartiality committee available who fulfills the above-mentioned requirements, the impartiality committee will look for an independent expert who meets the requirements to provide the necessary competence to the resolution of the appeal.

Appeals received by ICTS have to be closed within 60 calendar days after reception of the appeal. If the appeal cannot be closed due to force majeure, the Compliance Manager will inform the complainant about the reason and will fix a new deadline (no longer than 60 other calendar day) to the resolution of this case.

5.3. Filling complaint or appeal

While filling a complaint or an appeal, complainants must explain the reason. Appeals must be received within 30 working days after receiving the certification decision.

For filling a complaint or appeal, the Complainant must fill the available form at www.certi-trust.com with the following information:

- Full name
- Company Name
- Telephone number
- Email address
- Subject of the complaint or appeal.

ICTS will not be able to properly treat a complaint or appeal for which this information is missing. Additional information might be requested by ICTS members in charge of the resolution of the complaints and appeals.

Acknowledgement will be sent to the requester after reception of the form.

6. Reference to certification and use of marks

The client shall comply with ICTS Certification Mark policy.