

9.1 Audit Procedure

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Purpose

An audit program for the full certification cycle is developed and communicated to the client. Audit activity(ies) required to demonstrate that the client's management system fulfils the requirements for certification to the selected standard(s) or other normative document(s) are identified in the 9.2 Initial Audit Procedure 9.3 Surveillance Audit Procedure and 9.4 Reassessment Audit procedure.

The AVU audit program requires a Stage 1 and Stage 2 registration audit, in the first and second year surveillance audits, and, prior to expiration of certification, a Reassessment audit in the third year. The three-year certification cycle begins with the certification or Reassessment decision. The determination of the audit program and any subsequent adjustments considers the client organization size, scope and complexity of the management system, products and processes identified in the scope and a demonstrated level of the effectiveness of the management system as well as results of any previous audits. In the event the initial or Reassessment audits consists of more than one audit (e.g. covering different locations), the scope of an individual location may not cover the full certification scope, but the totality of audits will be consistent with the scope in the certification document i.e. management review, sales, purchasing are conducted at one site and manufacturing at another site and design at a third site.

Where AVU takes into account certifications or other audits already granted or performed with the client, sufficient and verifiable information is collected to justify any adjustments to the audit program. Any information is recorded on the Stage 1 Audit Report or the Audit report for Stage 2, Surveillance or Reassessment Audit Report. Examples of processes that may be accepted from other certifications or audits, as long as they meet the requirements of the standard being audited, are; management reviews, internal audits, corrective actions, control of documents, control of records, customer satisfaction, objectives, training and any other similar processes.

1. Responsibility and Authority (R&A)

Team Leader – has the R&A to plan and manage the audit with the client and implement each audit process which includes:

- a) audit planning and scheduling
- b) coordinating audits with Team Members as applicable
- c) conducting all meetings, or designating a Team Member to conduct a meeting
- d) audit selected processes
- e) submission of corrective actions
- f) reviewing and approving corrective actions
- g) verifying corrective actions for root cause and effectiveness
- h) making recommendations for certification, withdrawal or suspension of certificates,
- i) submitting an audit report and adhering to the specific audit requirements as defined in this procedure
- j) to make changes to the assignments of Team Members during the audit to achieve the audit objectives.

Team Member – has the R&A to:

- a) coordinate timing based on travel according to the audit schedule made by the Team Leader
- b) conduct meetings as designating or in the absence of the Team Leader
- c) submit corrective actions to the Team Leader
- d) verify corrective action for effectiveness in the absence of the Team Leader or as designated by the Team Leader.
- e) submission of audit notes to the Team Leader for processing of the audit report
- f) adhering to the specific audit requirements as defined in this procedure.

Auditor-in-Training (AIT) – has the R&A to:

- a) conduct assigned audit activities under the direction of the Team Leader
- b) AIT is to always be accompanied by a Team Leader or Team Member
- c) AIT will be evaluated by the Team Leader or Team Member
- d) the Team Leader or Team Member will have responsibility for any activities or findings of the AIT and will have the final determination of all audit results.

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Expert – has the R&A to provide advice and guidance to the audit team and must meet the minimum education and work experience requirements of a team member. The expert shall always be accompanied by a Team Member and may not conduct any audit activities on their own.

Translators or Interpreters - will always be accompanied by a Team Member and may not conduct any audit activities.

Observers - the presence and justification of observers during any audit activity will be agreed upon by AVU and the client prior to the audit. The Team Leader will be responsible to make certain any 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 - unless otherwise agreed to by the Team Leader and the client, Team Members will be accompanied by a guide. Guide(s) are assigned to the audit team to facilitate the audit. It is the responsibility of the Team Members to ensure guides do not influence or interfere in the audit process or outcome of the audit.

NOTE The responsibilities of a guide can include:

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

Note: Team Leader and Lead Auditor are interchangeable as well as Team Member and Auditor.

2 The Team Leader Assignment Process

2.1 The Audit Team

2.1.1 An AVU Manager has the R&A to assign a Team Leader. The Team Leader has input on the assembly of the audit team. The audit team is selected based on the competence needed to achieve the objectives of the audit.

2.1.2 In selecting the Team Leader, as well as the size of the audit team the following factors are considered:

- a) audit objectives, scope, criteria and estimated time of the audit;
- b) the type of industry / product or service;
- c) whether it is a combined, integrated or joint audit;
- d) competence of the team to achieve the objectives of the audit;
- e) requirements for any statutory, regulatory, contractual, and accreditation/certification requirements, as applicable;
- f) the ability of the audit team to interact effectively;
- g) size of Client;
- h) the number of sites;
- i) the number of remote/support functions;
- j) number of required audit days based on the Audit Duration Table (Appendix A) of the Audit Time Procedure;
- k) previous audits by team members, if any;
- l) language and culture of the audit (do we need a local audit team if audit is in a different country or special region of a country).

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

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- 2.2 The Team Leader assignment is based on the Auditor Competency Matrix, knowledge of the scope of the relevant management system, audit and industry experience, proximity to the client and audit standard(s). This assures the knowledge and skills are present for the audit team. A Team Leader is assigned by an **AVU Manager** when the qualifications and competencies match the organization's IAF Codes and the appropriate audit standard as well as satisfying (3) above. The Audit Manger sends the auditor assignment letter to the proposed Team Leader and Team Member. Upon acknowledgment of the auditor assignment by the Team Leader and Team Member the audit can then be scheduled with the organization. The Team Leader has input on the selection of the audit team. The audit team is selected based on the competence needed to achieve the objectives of the audit.
- 2.3 The AM will identify the need for an industry expert. The industry expert will work under the supervision of the Team Leader.
- 2.4 During the contract review process, **an AVU Manager** reviews the client's application for accuracy including: the number of employees, industry code (s), audit standard, scope of registration including any exclusions, size of the organization, and other information as applicable. In the event the client does not accurately provide all of the necessary information will reject the application with comments and sendan AM will contact the client to ensure all information is correct.
- 2.5 Competencies are reviewed utilizing the Competence of Management and Personnel that can Affect Certification procedure. Auditor records and files will be reviewed to ensure Members of the Team selected meet the requirements. A minimum of one member of the team will have the knowledge, understanding or experience and be qualified in the client's industry being audited (IAF or industry sector)
 - 2.5.1 Auditors-In-Training are limited to participate as observers only, or may conduct limited auditing (for training purposes only) under the immediate observation and guidance of a Qualified Team Member.
 - 2.5.2 All audit team members are bound to confidentiality by signing the Auditor/Employee Confidentiality Agreement 8.5. This agreement is required to be signed once each year by each employee, audit team member, observer, and/or expert. These agreements are retained in the employee, audit team member, observer, and/or expert file.

3. (Stage 1)

- 3.1 The Stage 1 is the first part of the registration process in which any non-conformances that are found are binding and must be corrected.
- 3.2 The Stage 1 audit begins the Registration Audit process. It may or may not be performed in partial or whole on the Client's premises based on the Client's scope and identified processes. The stage 1 audit provides confirmation to the Client regarding its readiness to continue the registration process. The Stage 1 can be conducted in one or more days. The Stage 1 may be up to 50% of the quoted on-site audit time (Stage 1 + Stage 2).
- 3.5 The number of on-site audit days must be completed for the Registration Audit according to the Audit Duration Table (Appendix A) of the Audit Time Procedure.
- 3.6 Back-to-back scheduling of the initial stage 1 and stage 2 audits is the 'exception and not the rule' (reference *ANAB Heads-Up #145*). In order to schedule this type of arrangement with the Client, the Client must acknowledge a risk if the organization is unable to proceed to the Stage 2 audit activity as planned and a new date is required. Furthermore, the Team Leader and/or Client requesting such an arrangement must provide justification for this arrangement for review by the AM. This acknowledgement as well as approved justification will be retained in the clients file. When AVU and the client agree to conduct a stage 1 and stage 2 in place of a transfer audit the stage 1 and stage 2 audits can be completed back-to-back as long as the client is in good standing with the previous CB. The Team Leader will schedule Stage 1 audit date(s) with the Client and will provide a written agenda to the Client approximately three weeks prior to the Stage 1 according to the 9.2 Initial Audit Procedure.
- 3.7 The scope of the registration must be carefully defined and accurately worded as it will appear on the certificate. This will be discussed with the Client during or just after the Stage 1 Opening meeting.

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- 3.8 The scope statement must include the functions and/or services supported or provided by the Clients Management System(s).
- 3.9 Any proprietary claims made by the Client should be addressed and evaluated with regard to the scope of registration. The facility tour could be helpful in understanding the importance of the claim.
- 3.10 If the Client identifies an area as “proprietary”, “classified”, or if any security clearance is required and it affects the Audit Team’s ability to view objective evidence of implementation, the Team Leader will contact the AM for guidance on how to proceed with the registration process.
- 3.11 The Audit Team MUST indicate the records reviewed to verify any exclusions are justified, as applicable, such as contracts, drawings, production planning, etc. This can be documented in the audit report, and it must be done as part of every on-site audit. NOTE: Team Members must NOT merely indicate that the organization provided justification for the exclusion.
- 3.12 Following the Opening Meeting, the Team Leader will then proceed to review any documentation review issues and follow up questions. The Team Leader will update the status for each issue identified in the documentation review and include this in the Stage 1 Audit Report. Issues that cannot be closed shall be noted and documented on an Stage 1 Audit Report.
- 3.13 Follow up questions will be discussed with the Client to determine if the issue is a nonconformance. If the issue is considered a nonconformance it will be documented in the AFR section of the report.
- 3.14 The Team Leader will review documentation that supports the management system to determine if it adequately addresses the standard and applicable statutory/regulatory requirements. During on-site stage 1 audits the Team Leader will evaluate the Client’s location and site-specific conditions and interview personnel to determine the preparedness for the stage 2 audit; specifically, the Team Leader will:
 - a) review the Client’s status and understanding regarding requirements of the standard, in particular with the respect to the identification of key performance or significant aspects, processes, objectives and operation of the management system.
 - b) collect necessary information regarding the scope of the management system, processes and location(s) of the Client, and related statutory and regulatory aspects and compliance.
 - c) review the allocation of resources for the Stage 2 Audit and agree with the Client on the details and planning of the Stage 2 Audit.
- 3.15 The Team Leader will evaluate that the Management Review and Internal Audits are being planned and performed to determine the level of implementation of the management system and the readiness of the Client for the Stage 2 Audit.
- 3.16 The Team Leader will verify the level of education, training, and/or experience of the Management Representative, the individuals performing the internal audits, and other key members of the Client’s Management System team; The Team Leader shall look for implementation, as a minimum, for the following requirements:
 - a) Qualification of personnel (Training);
 - b) Management Responsibility - as a minimum, verify Management Review completed, if not this should be written as a major nonconformance;
 - c) Internal Management System Audits - as a minimum, verify full cycle of audits completed (if not a major nonconformance should be written), verify audit schedule is based on status and importance, verify criteria for qualifying Auditors, etc.
- 3.17 Audits of other requirements should be started, if time permits.
Note: Requirements completed during the Stage 1 do not need to be re-audited during the on-site Stage 2 Audit, however, the audit team can take additional audit samples during the Stage 2 Audit. Partially audited requirements will be completed during the Stage 2 Audit.

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- 3.18 A site tour with the Client and areas relevant to the management systems standard(s) being audited will be performed. This will allow the Team Leader or audit team to:
- Determine the size of the facility and gain an understanding of the work flow.
 - Determine if the Client has any obvious major issues such as poor handling/storage, uncontrolled documents, and etc.
 - Determine if the identification of process inputs are comprehensive and appropriate to the scope of registration.
 - Discuss multiple shift coverage and discuss shift start and stop times
 - Determine appropriate dress and PPE for the audit team (safety shoes, safety glasses, casual dress).
- 3.19 Any findings identified during the Stage 1 will be documented in the audit report.
- 3.20 The Team Leader shall prepare the Stage 1 Audit Report. The Team Leader will follow the process in this procedure, the Initial Audit procedure and the Surveillance and Reassessment Audit procedure.
- 3.21 A Closing Meeting will be held to summarize the audit results, any proprietary claims, justification for any exclusions and estimated time to perform the on-site Stage 2 Audit. The Stage 1 Audit Report will be reviewed with the Client during the Closing Meeting. The Team Leader will inform the Client if they have determined them ready or for the on-site Stage 2 Audit. The estimated time for the Stage 2 Audit was based upon information provided in the application. Should significant additional factors be found that would require more time, (additional employees have been added, additional shifts have been added, processes have been added, etc.) these would be mentioned and the time to perform the on-site Stage 2 Audit may be revised.
- 3.22 At the conclusion of the Stage 1 audit the Team Leader will recommend one of the following three options:
- PROCEED WITH STAGE 2; NO AFRS: System as audited appears ready for registration audit and the Client does not need to resolve any issues.
 - PROCEED WITH STAGE 2 PENDING EVIDENCE OF CORRECTION: There are one or more non-conformances, which, in the judgment of the Team Leader, will need to be corrected by the Client prior to the registration audit. Evidence of correction is sufficient to approve AFRS issued during Stage 1.
 - DO NOT PROCEED WITH STAGE 2: There are several non-conformances that represent a total breakdown of the Client's Management System. Another Stage 1 visit is required.

NOTE: The Team Leader must use their judgment when selecting option A of the above. If the organization is unable to resolve AFRS prior to the stage 2 w/in 90 days of the Stage 1 closing meeting the determination is the organization was not ready to proceed with a stage 2 and another Stage 1 will be performed.

3.23 As much as possible the on-site Stage 2 Audit dates will be finalized with the Client during the Closing Meeting. A tentative time period may have been established at the time of application and based upon the Audit schedule and issues identified during the Stage 1, this time period will be re-confirmed or an alternate time period proposed. The timing of all audits must take into consideration the timing of production and service realization. Factors can include scheduled downtimes, seasons, etc. and must take into account all products and services offered under the scope of registration. The stage 2 shall be started no later than 90 days from the closing meeting date of the Stage 1 audit. Otherwise another Stage 1 audit will need to be performed.

3.24 The Team Leader will leave a copy of an Audit Report and any AFRs with the Client after every on-site audit if at all possible. The Team Leader may prepare a draft report should there be any issues.

4. Stage 2

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4.1 The on-site Stage 2 Audit is scheduled and conducted within 90 days of the Stage 1 visit. AM approval and Client agreement is required for conducting Stage 1 and Stage 2 audits “back to back”. Approximately three weeks before the tentative audit date the Team Leader will contact the Client and confirm the date is still acceptable.

- a) Confirmation of the date will allow the Team Leader to confirm the dates with the client and audit team, if any.
- b) In the event the dates are not acceptable, new dates will be determined as soon as possible. A new stage 2 schedule will be sent to the Client and audit team confirming the new dates. When it is approximately 3 weeks before the agreed upon on-site audit date, the step above will be repeated.

4.2 The Client will have completed one complete internal audit cycle and one complete cycle of management reviews before scheduling the Stage 2 Audit. This may have been an AFR during the Stage 1 audit and closure can be confirmation this has been completed. This will be verified at the Stage 2 audit.

4.3 A Confirmation Letter with tentative audit schedule will be developed by the Team Leader and be provided to the team and Client as an attachment to the confirming letter schedule according to the example in the 9.2 Initial Audit Procedure 9.3 Surveillance Audit Procedure and 9.4 Reassessment Audit procedure.

. The Audit Schedule will be reviewed and modified accordingly.

4.4 The Team Leader will assure that each different commodity (activity, product or service) identified in the scope is audited.

4.5 The Team Leader will verify that exclusions are justified and documented. The Team Leader will define the records that were reviewed to verify any exclusions made by the Client in their Systems Manual are justified. This will be done as part of every on-site audit.

4.6 The Team Leader will use the following guidelines when developing the audit schedule:

4.6.1 Off-shifts can be audited during a split 8-hour audit-day. For example, it is acceptable to audit an off-shift for 2 hours on one day then audit 6 hours the next day to equal eight hours.

4.6.2 It is also permissible to work longer hours (greater than 8 hours in one day, but no more than a 12 hour day) where a manufacturing site has more than one shift for production. Manufacturing or added value activity must be dedicated on the off-shift(s).

4.6.3 Twelve hours of auditing equals 1.5 man-days, this does not include lunch. This may require a minimum of 12.5 hours on-site.

4.6.7 Audit Reports that show less time than the standard requirements will be rejected by the AM, and the Client's certificate will be held up until the correct audit-day requirements have been completed.

4.6.8 The Team Leader can facilitate the travel and living arrangements of the team members, and provide the team any audit documentation/information needed for the audit. Team members are responsible for financially securing their own travel and lodging. The Team Leader is not required to make the actual reservation but to inform audit team where to stay and approximate arrival time.

4.6.9 Prior to the on-site Stage 2 Audit, the Audit Team may discuss the on-site audit in person or by electronic means.

4.6.10 The Team Leader will assign responsibilities based on the strengths of each team member. The audit team will address all requirements of the standard.

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4.7 The Team Leader will conduct an Opening Meeting.

4.8 Opening and Closing Meetings are to be conducted according to the 9.2 Initial Audit Procedure, 9.3 Surveillance Audit Procedure and 9.4 Reassessment Audit procedure.

4.9 The Team Leader will record attendance for the Opening and Closing Meetings by entering names in the attendance sheet.

4.11 If Consultants are present they are limited to the role of observer.

4.12 The Team Leader will confirm the scope of audit and standard - verify that the scope statement describes what the Client does.

4.13 Scope statements will never be marketing statements, avoid the use of many adjectives in scope statements.

4.14 It is important the audit team review and determine the manufacturing capability for each commodity (activity, product or service) listed in the scope statement.

4.15 At the conclusion of the Opening Meeting, the Team Leader will review, as applicable to the standard being audited, the following:

- a) Customer Satisfaction Indicators,
- b) Client Performance Indicators,
- c) Summary of Management Review,
- d) Summary of Internal Audit Records,
- e) Communications, Aspects, Programs,
- f) Summary of Corrective and Preventive Actions,
- g) Noncompliance Resolutions,
- h) Continual Improvement etc.

4.16 In the event negative indicators are identified and there is no evidence of action plans the Audit Plan may be revised to insure that these trends are thoroughly investigated.

4.17 The Audit Team will proceed to follow the Audit Plan and will sample the management system to evaluate and verify through objective evidence (interviews, procedures, records, etc.) a management system has been developed, documented and effectively implemented and conforms to the Standard(s) being audited.

4.18 It is critical that each Team Member use the "show me philosophy". If the information cannot be verified, there may be a nonconformity. It is very important that the Team Members select their own samples.

4.19 All management system audits will be conducted using process-based auditing techniques. Follow the PDCA method for conducting a process audit.

4.20 The Team Members will document audit findings and audit trails in the audit report. Prior to leaving an organizational/process area of the Client's management system, the Team Members will verify that all applicable requirements of the Standard were included in the client's processes. On a daily basis, the Team Leader will review the status of the audit (completion of items on the schedule) with the other audit team members to communicate the audit is progressing as scheduled. During the discussions the schedule may be modified ensuring all requirements of the Audit Plan are being covered. Non-conformities and opportunities for improvement are identified and communicated to the client at the time of discovery. The Team Members will not give direction to the Client on how to solve a nonconformity or opportunity for improvement. The Team Members will not give direction on how the Client can implement or manage its management system. In the event the Team Leader documents a potential major nonconformity (e.g., the complete lack/breakdown of a core elemental requirement of the management standard) the audit team will communicate this to the Team Leader as soon as

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possible. The Team Leader will review the finding and determine if it is a Major nonconformity. In the event it is a Major nonconformity, the Team Leader will promptly inform the Management Representative.

NOTE: In the event the Team Members identify a nonconformity and the Client presents the Team Member evidence they have already identified the issue internally (e.g. Internal Audit Reports), the Team Leader must still identify the nonconformity unless the organization can show evidence that:

- a) Root cause has adequately been determined
- b) Sufficient correction has been implemented
- c) An acceptable corrective action plan has been developed along with a timeframe for implementation
- d) The nonconformity has not recurred after it was internally identified

4.21 If a Major nonconformity results because of several minors for one requirement, the Team Leader may:

- a) Group all the findings onto one CAR form and identify it as one major nonconformity.

4.22 The Client shall;

- a) Verify the finding with the Team Leader
- b) Take appropriate corrective and preventive action
- c) File all reports required by law
- d) Report its conformance to these practices to AVU management

4.23 The audit team will verify that any unresolved issue(s) from the Stage 1 have been adequately addressed.

4.24 If it is determined early in the Stage 2 Audit that the Client will be "Not Recommended for Registration," the Team Leader shall hold a special meeting with the Client's Executive Management.

The Client will have the option to either:

- a)discontinue the audit;
- b)continue the audit;

4.25 Prior to the Closing Meeting, the Audit Team will classify each finding (e.g., missing or incomplete documentation or missing or incomplete implementation) as a major or minor non-conformance, or opportunity for improvement.

4.26 Definitions and grades of nonconformity are described in the Initial, Surveillance and Reassessment Audit procedures.

4.27 Based upon the findings and a review of the evidence gathered from both Stage 1 and Stage 2 audits the Team Leader will recommend for or against registration. This recommendation is intended for the AVU management to decide whether to grant registration to the Client or not.

4.28 Before the conclusion of the audit, the Team Leader will conduct a Closing Meeting with the Client where the Client's scope and Standard will be restated. The findings as recorded on the AFR section of the report will be summarized and a summary of the audit given. The Team Leader will inform the Client of the registration recommendation, the date that the AFR's must to be addressed, if a verification audit is recommended prior to registration and the appeals process will be discussed.

4.29 The Team Leader will prepare the Audit Report and leave a draft or copy along with AFRs with the Client.

4.30 The Team Leader and audit team will submit the Audit Report to the AM for final review and approval of the registration recommendation.

4.31 An AM is responsible to review the Audit Report and make the registration determination. The AM will use the Audit Review Sheet to make the determination and offer suggestions.

4.32 The Client will provide evidence it took the required corrective and preventive action and submitted for approval within the required time period. The Client is responsible to review, evaluate and correct all non-conformances in a manner to ensure there has not been a breakdown in the management system requirement of the Client's management system. The Client must address the immediate problem, do a root cause analysis and assure problem does not exist in other areas, and document

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how it plans to prevent the problem from reoccurring. (Note: The Team Leader must record how the Client addressed each of these steps for Closure of any AFR.)

The Team Leader will review the AFR Plan upon receipt and document the results. If the plan is not accepted, the Client will be notified by email. The Team Leader is responsible to monitor that the Client submits the AFR action plan within 60 days from the date of the closing meeting.

4.33 The Team Leader may conduct a verification audit or follow-up visit, or close the AFR during the next Surveillance Audit, to verify the Client's corrective action implementation. The Team Leader will notify the Client of the verification method.

5. Verification Audit

5.1 In the event Verification (on-site or off site) Audit or follow up audit is required, the Team Leader will confirm with the Client in writing the date(s) of the verification audit. The verification audit shall occur within 90 days of the closing meeting of the previous audit where the AFR was identified. Team Leaders will not approve AFRs in the system until completion of the Verification audit.

5.2 If the verification is conducted on-site, the Team Leader will conduct a brief Opening Meeting with the Client's Management. The Team Leader will record attendees at this meeting.

5.3 The Team Leader will explain that the nonconformance(s) identified during the audit will be verified for effective corrective action. Since the audit team sampled the Client's management system, the Client is responsible to ensure that it not only corrected the immediate problem (non-conformance), but that the Client has IDENTIFIED THE TRUE ROOT CAUSE of the non-conformance, that it does not exist in other areas of the management system, and the Client has taken measures to prevent re-occurrence of the problem. AM reviewers will reject corrective actions where true root cause analysis has not been determined and where effective corrective action evidence has been submitted.

5.4 Confirmation of corrective action status should be noted.

5.5 For those cases where corrective action has not been completed, a new AFR should be issued. The original AFR number shall be referenced on the new AFR. Depending upon the degree of completion and significance of the item, the Team Leader will recommend either:

- a) Another Verification Audit, or (e.g. Additional objective evidence is required to close the AFR)
- b) An on-site Verification Audit follow up
- c) The completion of corrective action to be verified during the first Surveillance Audit.

5.6 If the Recommendation is to register the Client, the Team Leader will review with the Client to assure all information is accurate.

5.7 The Team Leader will conduct a Closing Meeting with the Client's management to summarize the results of the Verification Audit.

5.8 The Team Leader will conduct the meeting according to the topics outlined in the Initial, Surveillance and Reassessment Audit procedures. The Team Leader will maintain a record of the meeting's attendees.

5.9 A Verification Audit Report consisting of a brief summary listing the status of corrective action will be written by the Team Leader. This report will be sent to the appropriate AM for final review and determination.

6. Surveillance Audit

6.1 In order to monitor conformance for continued Registration, AVU will conduct surveillance audits every 6, 9, or 12 months based on the closing meeting of the Stage 2 and Reassessment Audit. During surveillance audits it is allowed to sample activities and a number of product lines, categories and sectors covered by the scope. The

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sampling will result in a representative review of the scheme implementation. **The first surveillance audit after initial registration shall not exceed 12 months from the last day of the closing meeting of the registration audit. Every surveillance audit thereafter may be conducted preferably annually but at least once per calendar year.**

6.2 If an Organization or Team Leader requests an adjustment to this timing, these requests will be forwarded to **an AVU Manager** for a final decision. AVU may conduct additional audits, announced or unannounced, as needed to monitor for continued conformance with AVU requirements. Short-notice audits may be necessary due to complaints about certified Clients or to follow-up on suspension.

6.3 The Team Leader assigned will contact the Client approximately three weeks prior to the planned audit to confirm the date for the audit and email/fax the Client a confirming letter that includes a tentative audit schedule according to the Initial, Surveillance and Reassessment Audit procedures.

6.4 Surveillance activities are developed so identified areas and functions covered by the scope of the management system are monitored on-site and on a regular basis and take into account changes of the Client's certified management system.

6.5 The Team Leader will determine the requirements to audit during each Surveillance Audit based on previous Audit Reports. Every requirement may be audited at least once during a 36-month audit cycle. The Team Leader will use the Audit Report to record audit activities for all surveillance audits.

6.6 All shifts may be audited every surveillance audit if at all possible. For Clients that require only 1 day annual surveillance audits, it is acceptable to audit ALL shifts during the registration cycle. Also, there are process(es) run on the off-shift and not on the primary shift.

6.7 All requirements of the appropriate audit Standard may be reviewed a minimum of one time during a 36 month period. For quality system audits, the Corrective and Preventive Action requirement (including complaint process), Internal Audit results, Management Review results, external inquiries and/or communications, and progress made towards continuous improvement objectives and targets, will be assessed at each visit.

6.8 The Team Leader will conduct an Opening Meeting with the Client's personnel as defined by the Opening Meeting section of the Initial, Surveillance and Reassessment Audit procedures. The Attendance Sheet will be used to record attendees.

6.9 The Team Leader will explain the purposes of the Surveillance Audit, which is to assure continuing conformity with relevant requirements and to verify that the Client's management system is maintained.

6.10 At the conclusion of the Opening Meeting the audit team will review (to identify positive or negative indicators), as applicable the following:

6.11 Customer Satisfaction/Feedback Indicators, Client Performance Indicators, Summary of Management Review, Summary of Internal Audit Records, Communications, Aspects, Programs, Summary of Corrective and Preventive Actions, etc .

6.12 In the event any *negative* indicators are identified, the audit plan may be revised, if there are no action plans, to insure that these trends are thoroughly investigated.

6.13 The objectives of the Surveillance Audit are:

- a) review with the Client the information for the facility is still correct.
- b) to verify that the audit days are accurate regarding the audit day rate and the number of audit days. Audit day changes typically result from different employee counts, added or deleted processes, a change in the Standard, or change to the audit scope of the Client.

Note: Approval by AVU management is required for all audit day changes.

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Note: Audit Reports that show less time or less audit days than the registration requirements will be rejected. It is important for the audit team leader to verify the number of employees prior to the audit.

Note: If a change to the audit days is necessary, the revised quote audit day requirement will become effective at the next on-site audit visit.

- c) verification the Client is properly using the Marks and appropriate accreditation Marks in advertising, marketing, etc.
- d) during each Surveillance Audit, the Team Leader will verify any AFRs implemented from the previous audit. A new AFR will be issued for any nonconformance that has not had any activity or action plan approved. The original AFR will be referenced on the new AFR. For any minor nonconformance that is not accepted by the Team Leader during the next Surveillance Audit, the minor may be re-classified as a major. If the Team Leader determines the Client has made a strong effort to close the issue the Team Leader may maintain the minor classification.
- e) the Team Leader will verify that a corrective action plan, if applicable, was submitted within the agreed time frame, if not an AFR may be written.
- f) to audit specific departments and/or functions against specific requirements of the audit standard and verify continued operation control. The Team Leader interviews employees, documenting objective evidence, writing AFR's, etc, will be conducted using the same approach as the registration audit.
- g) the Team Leader will identify the records reviewed to verify any exclusions made by the Client in their Systems Manual are justified. This can be documented in the audit report and it will be completed as part of every on-site audit.

6.14 For any nonconformance, the Client will be required to satisfactorily respond with a corrective action plan to the nonconformance in writing (paper or electronic). Failure to satisfactorily respond may result in suspension or withdrawal of the Client's registration. The AFR Plan for any minor nonconformity is required within 60 days of the closing meeting.

6.15 In the event the Team Leader conducts a supplemental management system manual review (Client has revised its management system manual because its management system has changed or audit standard has been revised) the results will be recorded using the Audit Report. At the next audit (Surveillance or Recertification) the changes to the system will be verified using the appropriate Audit Report.

6.16 The Team Leader will conduct a closing meeting with the Client's representative(s). The Team Leader will review the Audit Report and any corrective actions with the Client during the Closing Meeting. The Team Leader will review the corrective action process with the Client. The results of the audit will be one of the following:

- a) continue certification;
- b) continue certification upon closure of minor nonconformance(s) that will be verified during the next regularly scheduled surveillance visit.
- c) continue registration with major nonconformance(s) that will be verified during the next regularly scheduled surveillance visit.
- d) has several major nonconformance(s) and the registration may be canceled unless immediate action is taken.

6.17 During the Closing Meeting, the Team Leader will inform the Client a special Verification Audit will be required to close any major nonconformance(s) within 90 days of the closing meeting. The Team Leader must close all major nonconformance(s) prior to the next scheduled Surveillance Audit either by the special Verification Audit or by a review of the Client's records/procedure(s). Failure of the Client to satisfactorily close the major nonconformance(s) may result in the Client being placed on suspension. Suspension is not withdrawal, but notice to the Client that their certificate is in jeopardy. The Team Leader must note this in the recommendation that the Client is recommended for suspension and notify an AVU Manager of the suspension. Before any suspension can be lifted the Team Leader will conduct an on-site audit of appropriate length to verify effective implementation of all corrective actions.

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6.18 The Team Leader shall consult with AVU management to determine the time needed to complete the Verification Audit. If the Verification Audit does not result in any new major nonconformance and the previous major(s) are effectively closed, the Client's suspension will be lifted. The Client may appeal the Probation within 5 working days by following the appeals process the Team Leader will discuss with the Client.

6.19 The Team Leader will discuss with the organization tentative dates for the next Surveillance Audit and note the dates on the audit report.

6.20 The Team Leader will record the requirements audited during the surveillance audit on the Audit Report. The Audit Report is used for the planning of subsequent Audits.

6.21 In the event the Team Leader cannot leave the Audit report with the client a draft copy and AFRs of the Audit Report will be supplied to the Client.

6.22 The Team Leader will provide the original Audit Report to the AM as part of the Audit Report Package and keep a copy (paper or electronic) until the next on-site audit visit.

6.23 The AM is responsible to review the Audit Report and any other documents that make up the completed report to make the determination of continued registration which may include suspending or withdrawing the Client's certificate.

6.24 During surveillance audits it is allowed to sample activities and a number of product lines, categories and sectors covered by the scope. The sampling shall result in a representative review of the scheme implementation.

6.25 For maintaining certification AVU maintains the client's certification based on the client's ability to demonstrate adherence to the requirements of the management system standard. AVU will maintain the client's certification based on a successful audit and positive report by the Team Leader without further review by the AM as in the registration and Reassessment audits, provided;

- a) for any nonconformity or other situation that may lead to suspension or withdrawal of certification, AVU will follow the 9.6 Suspension, Withdrawal or Reduction in Scope procedure and in the audit report has a system that requires the audit team leader to report to the certification body the need to initiate a review by appropriately competent personnel which is different from those who carried out the audit, to determine whether certification can be maintained, and
- b) AVU AM will monitor its surveillance activities, including monitoring the reporting by its auditors, to confirm that the certification activity is operating effectively.

7. Reassessment Audit

7.1 A Reassessment audit shall be planned and conducted to evaluate the continued fulfillment of all of the requirements of the relevant management system standard or other normative document. The purpose of the Reassessment 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 Reassessment should also provide for a review of past implementation and continuing maintenance of the system over the period of certification. In situations where there have been significant changes to the management system, the client, or the context in which the management system is operating (e.g. changes to legislation) Reassessment audit activities may need to have a stage 1 audit.

7.2 The Reassessment Audit will be conducted prior to the expiration on the Client's certificate. Any requests to extend the expiration date on the Client's certificate must be approved by the relevant accreditation body(ies) and

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may only be considered in the cases of extenuating circumstances. The request will be reviewed by AVU management and forwarded to the accreditation body.

7.3 The Reassessment program evaluates the effective inter-action between the processes of the system and the overall effectiveness of the system, in its entirety, in the light of any changes in operations and demonstrated commitment of upper management to maintain an effective and efficient system over the course of a certification cycle.

7.4 The Reassessment Audit will include an audit to all of the requirements, as applicable based on the previous audit cycle, of the audit Standard and the Client's defined processes and any complaints from the previous audit cycle.

7.5 All shifts may be audited during the Reassessment audit if processes that occur on off shifts are different than processes that occur on the primary shift.

7.6 The Team Leader will identify the records that were reviewed on the Audit Report to verify any justification of exclusions to the MS identified by the Client in the Systems Manual. This can be documented in the audit report, and it will be completed as part of every on-site audit.

7.7 As part of the Reassessment audit, Team Members are required to review management system documentation from the previous audit cycle (i.e.: internal audits, management reviews and corrective actions, previous registration, surveillances and verification audits, and the current Reassessment audit) to determine:

- a) the effective interaction between all identified processes,
- b) the overall effectiveness of the system in its entirety in light of changes in operations, and
- c) a demonstrated commitment by upper management to maintain the effectiveness of the system.

7.8 Reassessment audit time may be reduced in the event the Client's management system shows;

- a) effectiveness, improvement over previous audit cycles,
- b) progress towards meeting internal and external objectives,
- c) the ability to meet customer requirements, and
- d) stability of the Client's production and processes.

AVU management will make this determination after careful consideration of all of the above mentioned conditions.

7.9 The Reassessment Audit can replace the normally scheduled surveillance but must be of the required Reassessment time duration. Reassessment audit time is generally 2/3 that of the initial registration audit, but may be extended or reduced depending on risk, previous audit results, or changes in operations.

7.10 Any nonconformance issued during the Reassessment Audit must be closed by the Client prior to the expiration date on the certificate.

7.11 The Team Leader will record the requirements audited during the Reassessment Audit on a new Audit Report. The Audit Report is used for the planning of subsequent Audits to start the new audit cycle and begin the surveillance audit cycle.

7.12 In the event the Team Leader cannot leave the Audit report with the client a draft copy and AFRs of the Audit Report will be supplied to the Client.

7.13 The Team Leader will provide the original Audit Report to the AM as part of the Audit Report Package and keep a copy (paper or electronic) until the next on-site audit visit.

7.14 The AM is responsible to review the Audit Report and any other documents that make up the completed report to make the determination of continued registration which may include suspending or withdrawing the

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Client's certificate based the records reviewed of the previous audit cycle, of the audit Standard and the Client's defined processes and any complaints from the previous audit cycle.

- 7.15 The Team Leader will review the AFR Action Plan upon receipt and document the results. In the event the plan is not accepted the Client will be notified by the Team Leader within 3 days of the determination. The Team Leader is responsible for monitoring that the Client submits the AFR action plan within 60 days from the date of the closing meeting or prior to the expiry date on the certificate.
- 7.16 Major nonconformances must be closed prior to the expiry date on the Client's certificate. Each minor nonconformance must have an acceptable AFR plan for each AFR prior to the expiration date on the Client's certificate. Failure of the Client to meet the required dates may result in withdrawal of the Client's certificate.
- 7.17 The Team Leader shall verify effective implementation for each nonconformance at the next surveillance audit.
- 7.18 The AM is responsible to review the results for any open AFR. This review shall be documented in the client file.

8. Approval of AFR

8.1 The Client is responsible to send the Team Leader an AFR action plan within 60 days, by email or other means, of the closing meeting or prior to the expiry date on the certificate if it is a Reassessment audit. Upon approval of the audit report by the AM the Client will receive a PDF of the audit report within 3 days and notification of any open AFRs.

8.2 The Team Leader will review the AFR and respond to the Client's root cause and effectiveness within 3 days of receipt unless the expiry date is sooner. AFRs that impact a Client's certificate (new or renewal) will be reviewed by the AM for final approval.

8.3 Upon submission of an AFR plan, the Client must supply objective evidence to support implementation of the plan. The Team Leader will the acceptance or deny the AFR plan based on information supplied by the Client. This determination will be communicated to the Client by email, telephone or other means within 3 days of receipt of the AFR plan. The Client must supply any supporting documentation with the plan that may show root cause and effectiveness as well as the impact of the AFR on other similar areas or processes. The Team Leader will reference the objective evidence reviewed and determine if the submitted plan is sufficient to accept. The acceptance by the Team Leader will be based on root cause analysis, effectiveness and impact as well as any preventive actions.

9 Special audits

9.1 Extensions to scope

AVU will respond to a request for extension to the scope (i.e. addition of design, purchasing, etc.) of a certification already granted. AVU will review the request and communicate to the client the necessary information needed to decide whether or not the extension to the scope may be granted. This may be conducted as an audit exclusively for the extension to the scope or in conjunction with the next scheduled audit (stage 2, surveillance or reassessment) and recorded on the audit report.

9.2 Short Notice Audit

In the event it is necessary to conduct audits at short notice to investigate complaints, in response to changes, or as follow up on suspended clients. In such cases AVU will contact the client in advance of any unscheduled audit. The conditions under which the audit is scheduled and Team Members assigned will be discussed with the client.