1. Purpose

This procedure describes the responsibilities and procedure for certification in accordance with ISO 45001-2018. The certification process is divided into audit preparation, the performance of the certification audit, action on Nonconformance and the award of certificate, surveillance and recertification.

2. Scope

The procedure is applicable for all positions and personnel involved in the ISO 45001:2018 certification process.

3. Definition

Audit Stage 1:

On-site or off-site assessment of the readiness for certification of a company's occupational health and safety management system and planning of audit stage 2. This includes the review of occupational health and safety management system documentation. An on-site assessment may not be needed as an exception.

Audit Stage 2:

On-site assessment of establishment, implementation and effectiveness of occupational health and safety management system with respect to the issue of a certificate.

Completion of audit:

Last day of audit stage 2, typically the day of the final closing meeting.

Surveillance Audit:

Periodical (yearly, optionally half-yearly), post-certification on-site audit of occupational health and safety management system implementation and effectiveness in representative areas and functions covered by the scope of the occupational health and safety management system of the organization at defined intervals with respect to the maintenance of a certificate.

Re-Certification Audit:

Review of overall occupational health and safety management system implementation and effectiveness in the organization with respect to new issue of the certificate.

Extension Audit:

Evaluation of occupational health and safety management system implementation and effectiveness in additional or changed areas or sites of the scope, or after removal of parts of the scope with respect to changes of the scope of a certificate.

Short-notice Audit:

Audits of certified clients at short notice to investigate complaints, or in response to changes, or as follow up on suspended clients.

Nonconformity:

Non-fulfilment with respect to the certification requirements.

a) The effectiveness of correction and corrective actions, for all nonconformities that represent
   - a failure to fulfil one or more requirements of the occupational health and safety management system standard, or
   - a situation that raises significant doubt about the ability of the management system to achieve its intended outputs. have to be reviewed, accepted and verified prior to the release of the audit file.

b) For any other nonconformities the auditor reviews and accepts the client`s planned corrections and corrective actions prior to the release of the audit procedure; the verification is performed in the following scheduled audit (e.g. surveillance).
   The verification may be satisfied by presenting personalized evidence or on a follow-up visit.

Follow-up Audit:

On-site assessment of the implementation and effectiveness of corrections and corrective actions for nonconformities issued during the audit.

Evaluation of documentary evidence:

Off-site assessment of the implementation and effectiveness of corrections and corrective actions for nonconformities issued during the audit.

Correction:

Action to eliminate a detected nonconformity.

Corrective Action:

Action to eliminate the cause of a detected nonconformity.

Audit day:

An audit day basically comprises 8 hours (net). Where it seems useful, a 10 hours audit day might be accepted by the appointed person.

Appointed Person:

Competence Personnel who are appointed to perform certain, defined tasks on behalf of Head of Certification Body.

4. Responsibility

4.1. Head of Certification Body / Certification Manager

With respect to the scope of this procedure, the Head of the Certification Body/Certification Manager is ultimately responsible for:

- select and appoint auditors, senior auditors and appointed persons,
- review and approval of certification files and by involving competent auditors if necessary. These auditors shall not have been part of the certification process activities,
- awarding the certificate.

The Head of the Certification is authorized to delegate responsibilities to Deputy for areas covered by a particular management system standard whenever applicable. Certain tasks from the certification process can be performed in the offices.

4.2. QM Manager/Compliance head

The QM manager is the compliance Head of SIS Certifications

4.3. Auditors

Auditors are responsible for the proper conduct of the certification process in line with this procedure and other relevant national and international regulations.

Within the context of the competent certification decision, lead auditors permanently employed at SIS Certifications who are not involved in the audit procedure can be included in the review and release process.

4.3.1. Technical Expert

Technical experts can be employed to complete competence requirements for an audit team. They always act under the direction of an auditor and do not contribute to audit time.

4.4. Sales & Marketing

- The employees of the Sales & marketing department handle cost calculation of orders, the formulation of the offer and conclusion of contract as well as the implementation of the certification procedure in terms of the SIS Certifications system.
- They have responsible to follow up and Monitor the Questionnaire, Quotation (offer) and Contract for Certification to Client.
- Sales Department File Original Record of Contract for Certification, Quotation and Questionnaire.

4.5. Operations

The employees of the operations maintain and update the auditors and experts record.

They have responsible to send the Questionnaire and Contract for Certification to Client.

They prepare the issue of the certificates and send them to the customers. They file the certification records.

They monitor and organize the performance of the Certification, Surveillance and Re-certification audits on behalf of the certification body management

5. Procedure

5.1. General

These Rules define the additional and/or substitutive procedures applied by SIS Certifications for the certification of Occupational Health and Safety Management Systems in relation to what is already defined in the General Rules for the Certification of Management Systems.

The paragraphs of these Rules refer to (and maintain the same numbering of) the corresponding paragraphs of the General Rules for the Certification of Management Systems for which changes and/or additions have been made.

SIS Certifications issues certification in accordance with the requirements of the ISO/IEC 17021:2015 Standard to Organizations whose Occupational Health and Safety Management System has been recognized as fully conforming to all the requirements of the ISO 45001:2015 standard.

5.2. Certification Requirements

According to what is stated in the General Rules for the Certification of Management Systems, to obtain SIS Certification an Occupational Health and Safety Management System must first and henceforth satisfy the requirements of ISO 45001:2018 and the IAF MD22 additional requirements of accreditation bodies.

5.3. Initial Certification

5.3.1. As well as what is established in the General Rules for the Certification of Management Systems, an organization must inform SIS Certifications of:

- any sites excluded from the field of application of the Occupational Health and Safety Management System to verify acceptability of these exclusions;
- Identification of the significant risks to occupational health and safety, hazardous materials used in the processes and any legal obligations relevant to OH&S legislation, filling in “OHS -List of the laws applicable to OHS aspects” (attached to the offer) or providing equivalent documentation;
- number of personnel provided to other organizations, if any.

5.3.2. According to what is stated in the General Rules for the Certification of Management Systems, together with or following the certification request, the Organization is to make the following documents available to SIS Certifications the document Application

questionnaire form(SIS/APP/01) for first certification filled in all its parts, enclosing any necessary documents.

5.3.3. SIS Certifications Review the above documents for conformity with the reference standard and with the requirements of these Rules.

5.3.4. As well as what is stated in the General Rules for the Certification of Management Systems, the certification process will be suspended if the authorizations or equivalent documents, required by the laws in force, in the health and safety fields, are missing.

5.3.5. If findings are detected during the audits linked to **non-compliance** with mandatory legal requirements in the Occupational Health and Safety field, the certification process will be suspended, except in particular cases, until the organization demonstrates compliance with these requirements.

5.4. Maintenance of Certification

A. As well as what is stated in the General Rules for the Certification of Management Systems, the organization is to keep a record of:

- accidents /emergencies on the site(s) and other events that could have had a negative effect on worker health and safety;
- any observations or remarks from national or local authorities responsible for controlling the workplace;

and must make this record available to SIS Certifications together with the relative corrective actions taken during the periodic audits.

B. In particular, the organisation is required to inform SIS Certifications without delay of any serious incident or observations/remarks received from national or local authorities responsible for controlling the workplace.

C. SIS Certifications will evaluate the actions to be performed, including the possibility to plan an extra audit, as defined in the General Rules for the Certification of Management Systems, in order to investigate if the management system has not been compromised and did function effectively.

D. Moreover, the same activities will be performed in cases where either the body guaranteeing the certificates issued by SIS Certifications and/or the pertinent authorities inform SIS Certifications of criticalities linked to occupational health and safety management.

5.5. Performance of Audit

In addition to what is stated in the General Rules for the Certification of Management Systems, the term non-conformity also refers to a situation such as to reduce the capacity of the management system to ensure control of the compliance with mandatory legal requirements in the Occupational Health and Safety field.

5.6. Requirements for multi-site Organisations

As well as the activities defined in the General Rules for the Certification of Management Systems, also the risk analysis and assessment of the sites is to be managed by the organization's head office.

the sampling must consider following factors:

- the level of OH&S risks associated to the nature of activities and processes carried out in each site included in the scope of certification;
- the differences between the operations of each site (technology, equipment, quantities of hazardous materials used and stored, working environment, premises, etc.).

5.7. Extension / Reduction audit

Refer to Procedure-for-IssueSuspending-withdrawing-or-reducing-the-scope-of-certification, P_4

As well as what is stated in the Procedure-P_4, the validity of the certificate of conformity is suspended in case of SIS's evaluation about serious accident, or a breach of regulation necessitating the involvement of the appropriate regulatory authority, if it has been demonstrated that the system seriously failed to meet the OH&S certification requirements.

5.8. Transfer of certificates from other Certification Bodies

Refer to Procedure for Transfer of certificates, P_13

6. Reference documents

a) Application form-SIS/APPL/01
b) Contract review- SIS/CONTRACT REV/45001/01
c) Quotation
d) Agreement- SIS/Agreement/01
e) Audit plan-SIS/AP/OHSMS
f) Audit Report-Stage 1, sis/OHSMS/report/cert/01
g) Technical review checklist-stage1, SIS/TR/ST01/OHSMS
h) Audit report Stage 2, sis/OHSMS/report/cert/02
i) Technical review checklist-stage 2, SIS/TR/ST02/OHSMS

7. Revision History

Issue No	Revision No.	Date	Description	Remarks