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1. Scope & Responsibility

Clause	TNV's Procedure	
1.0	Purpos	e
	l	ation process of Management System conforming to ISO 9001, ISO 14001, ISO 22000, OHS ISO 27001 and ISO 13485 as operated by TNV.
1.2	SCOPE	1 .
	This pro	ocedure applies to TNV Certification Services Process including its auditors.
1.3	RESPO	ONSIBILITY: CEO/QM/TM
1.4	Descrip	otion of Procedure
	The Cer	rtification process shall consist of the following key stages
	i Application Review & Contract Review	
	ii	Initial Certification Audit: Stage-1 & Stage 2 Audit)
	iii Certification Decision	
	iv Continual assessment (surveillance audit)	
	v Renewal Audit	
	vi	Suspending, Withdrawing, Extending or reducing scope of certification
	vii Management of Quality Policy	

2. Policy, Integrity & Objective

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Clause	TNV's Procedure		
2.1	Quality Policy		
2.1	 Quality Policy Top Management of the TNV Certification P Ltd shall demonstrate that: TNV is committed to provide Transparent, Neutral, Independent, and Competent Management System Certification Services which reveal Veritas among the Business, Government & Society and Add value to its Client's Product & Services to the ultimate customer satisfaction. The Management System of TNV is Established, Maintain and continually improve in accordance with the requirements of the Accreditation Board and to meet all Statutory & Regulatory Requirements in its entire process of Services to meet Accreditation Requirement. The Impartiality Board is established to guarantee the implementation of this policy related to Certification activities. Board will ensure that all possible "conflict of interest" situations arising out of its activities are identified and resolved timely and effectively. TNV shall create & maintain an environment where each employee contributes to all aspects of our business process and shall strive for continual improvement to meet with Customer Satisfaction. Quality Management System has been installed which enables TNV to operate in accordance with ISO/IEC 17021. The above policy may be reviewed for any changes, as and when required, by the Top Management. The above policy will be prominently displayed in TNV office, website and brochures. 		
	Pragyesh Kumar Singh Managing Director 01/01/2017		

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Clause	TNV's Procedure	
	Clarification for Implementation of TNV's Quality policy: 1. The CEO collects information from all stakeholders (e.g. TNV, Shareholders, Board of Directe Employees, Subcontractors, Agencies, Clients, Regulatory Authorities, Accreditat Organizations & other relevant professional bodies like CII etc) with regard to expectations a resources for the following years. 2. Inside the Quality Manual, all management tasks are described, as well as the structuorganization, and quality-safeguarding activities, which are all necessary for the certificat body in auditing and certifying quality systems, including the inspection body in providing The Party Inspection services. All requirements for quality systems are satisfied in accordance with ISO/IEC 17021. 3. This Quality Management System is directly in charge of the Quality Manager who controls a operates it in line with the TNV's accreditations and related guidelines. 4. Sub-contractors as well as the TNV's staff shall be obliged to follow the quality managem measures laid down and they are required to contribute towards its improvement. Access to Quality Manual and all other related documents is allocated to every employee involved. 5. All full or part-time and subcontracted staff who have any contact whatsoever with custom related information, are obliged by their respective contracts of employment to maint confidentiality and to that extent they must sign a confidentiality declaration. Specific custom related information which comes to their knowledge in connection with their activities must be passed on to a third party, even after their contract of employment has been terminated. 6. The same applies to members of the Impartiality Board or any other person having access customer-related information. 7. Signed in original and presented on the office notice board, distributed and communica throughout the company.	
2.2	Please feel free to ask any clarification in this reference by writing to md@isoindia.org INTEGRITY AT TNV	
	Integrity and Professional decorum are the core values of TNV. The trust that we inspire in our customers and stakeholders is the key to our success as an organization and as individuals. As leaders in certification industry, TNV hold ourselves to the highest standard of professional behavior and decorum. TNV's Code of Integrity & Professional Decorum defines the key principles of professional integrity for the TNV and is an expression of the principles that are shared throughout TNV, its businesses and its associates.	
	TNV collectively with our team are committed to a ETHOS where issues of integrity and professional ethics can be raised & conferred openly. Directions and support available to help employees and other stakeholders acting on behalf of, or representing, TNV to understand the ETHOS and to help them make the right decision when faced with an ethical dilemma. TNV provides training to its employees on TNV's Code of Integrity & Professional Decorum, to ensure that the highest standards of integrity are functional to all our management System Standards Certificate activities worldwide, in accordance with international best practice.	
	Our Annual Training Program on TNV's Code of Integrity & Professional Decorum acts as a periodic refresher of the principles of the Code and is conducted by each supervisor and manager with responsibility for staff. A record of participation is kept to ensure that all staff complete the training each year	

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Clause	TNV's Procedure	
	TNV's Code of Integrity & Professional Decorum is Available on the Internet in English, Hindi and franchisee office acting as business associate shall make it available in the office in local language. All the new induction to TNV must undergo this training as part of their induction.	
	The Chief Executive Officer is responsible for implementing procedures governing the ethical behaviour of our employees and Associates, and for conducting investigations on alleged staff misconduct. CEO also sets the standards of integrity that we expect of our business partners. Reports on suspected violations of the Code can be submitted, or advice obtained, by filing a written report online or sending it by mail to CEO at mdo.arg .	
	The Professional Conduct Committee ensures implementation of the Code of Integrity within our organization and advises management on all issues of business ethics. It also approves agreements for the procurement or development of business opportunities with intermediaries.	
	The Professional Conduct Committee consists of four members: One members from the Board of Directors Chief Executive Officer One member from Impartial Committee	
2.3	One person from Marketing – Vice President Impartiality Policy	
	TNV shall have process to identified, analysed, Evaluate, Treat, Monitor and documented the possibilities for conflict of interests and risk related to conflict of interest arising from provision of certification including any conflicts arising from its relationships on an ongoing basis. However, if any activities or relationship creates a threat to impartiality, TNV shall document and eliminates or minimizes such threats / risk and document any residual risk also. TNV shall document, analysed and minimise or eliminate such threats which includes:	
	 Weather this risk arises within the TNV? Weather this risk arises from activities of other person, bodies or organization? 	
	Top Management of TNV review all residual risk to determine if it is within the level of acceptable risk.	
	TNV's Risk assessment process includes identification of and consultation with appropriate interested parties* advise on matter affecting confidence in certification, including impartiality, openness and public Perception. The consultation with appropriate interested parties shall be balanced with no single predominating.	
	During the risk assessment TNV identify and consult interested parties to take advise on matter affecti confidence in certification, impartiality openness and public perception: these interested parties m include TNV's representatives, Certified Clients, Consumer of Certified Organization, Representative Industry Trade Association, Representative of Governmental regulatory Bodies or governmental Service Representative of NGOs, Consumer Organization, Environmental Specialist, Food Sector Specialist Health Safety Specialist, Information Security Specialist, Health Sector Specialist.	
	A relationship that threatens the impartiality of TNV can be based on ownership, governance, management, personnel, shared resources, finances, contracts, training, marketing and payment of a sales commission or other inducement for the referral of new clients, etc. TNV continually evaluate its relationship with any other organization, which may affect its impartiality.	
	TNV shall made this information available to the expert committee.	
2.4	Objective	
	To provide a reliable, positive and simple auditing, inspection and certification process for organizations to assist in meeting their business objectives and continual improvement.	
<u> </u>	to access in meeting their customes cojecutes and community inferiorement.	

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3. Application Review & Contract Review

Clause	TNV's Procedure		
3.0	Application Receipt		
	(Refer TNV-F-001 & TNV-F-002)		
3.1	Initiating Application		
	Enquiries may be received in several forms, by telephone, letter, e-mail, message or inquiry by visiting the organization or its marketing offices. Sometimes, TNV, on its own may also approach prospective clients by way of mail, letter, telephone or message or by any other possible mean of marketing.		
3.2	Required Information		
3.2.1	Client manager (Admin Assistant or local representative in specific country) may review the basic application and its nature and may request the applicant organization to provide the information in questionnaire TNV-F-001 as per nature of inquiry to enable TNV to complete the contract review of the prospective client mainly following information are needed:		
3.2.2	 a. Client name & Legal information b. Details of the site to be audited c. The desired scope of the certification; d. The general features of the applicant organization, including its name and the address (es) of its physical location(s), significant aspects of its process and operations, and any relevant legal obligations; e. General information, relevant for the field of certification applied for, concerning the applicant organization, such as its activities, human and technical resources, functions and relationship in a larger corporation, if any; f. Information concerning all outsourced processes used by the organization that will affect conformity to requirements; g. The standards or other requirements for which the applicant organization is seeking certification; h. Information concerning the use of consultancy relating to the management system to ensure the impartiality. i. Availability of the information and any limitation in providing the information to ensure the attainment of the audit objective in absence of any information. j. Understanding of the client in reference to Risk assessment and consideration of the legal and statutory requirements. 		
	k. Any factor which may affect the calculation of man-days applicable to the prospective client for the certification purpose.		
3.2.3	Basic Review & acknowledgment		
	Review shall be conducted in 2 part, one basic review and second technical review. After basic review completed, client may accept the application and may issue receipt of the application in any mann preferably signing on the application form. If applicant organisation request for formal acceptance letter acceptance letter may be issued on TNV-F-01-L acknowledgement letter.		
	Basic review shall be based on following;		
	 Does accreditation request is available with the TNV (Refer accreditation letter) Does MSS request is available with TNV (Refer accreditation letter) Does Scope demand is available with the TNV (Refer accreditation letter) Does territory of the application is in active list (Refer accreditation letter) 		

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Clause	TNV's Procedure	
3.2.4	Note for basic reviewer:	
	 Please make sure that information not applicable field is stroked off. Make sure that only relevant part of the form are filled, get application properly filled before sending to QM for review. Temporary Site means a Location (physical or virtual) where a client organization perform specific work or provides a service for a finite period of time and which is not intended to become a permanent site. If you are not sure of it, please ask QM. Make proper understanding of Virtual Site: An example of such a virtual site is a design of development organization with all employees performing work located remotely, working in Cloud environment. A site cannot be considered a virtual site where the processes must be executed in a physical environment, e.g., warehousing, manufacturing, physical testing laboratories, installation or repairs to physical products. Application form can be filled in soft copy, hard copy or on line at MIS, to obtain a log in detailst please contact at info@isoindia.org. Acceptance of the application can be executed by AA, AM, QM, country head or any other authorized personal, acceptance of the application does not mean acceptance of application, but this is an acceptance of application for internal review purpose only. 	
	Reference TNV-F-01 Inquiry Form TNV F 001-A Transfer Inquiry Form	
3.3	Application Review	
3.3.1	On the receipt of inquiry form, the details received shall be reviewed by AM against technical area, ANZ-SIC code, NACE Codes or any other classification and the accredited codes of TNV. check TNV's capability for processing the certification. The review shall be conducted in accordance with procedure no P 06. "Procedure for Review of Application and contract review", if the same is found to be within TNV's scope of accreditation either by JAS-ANZ, AM forwards the application to QM/TM for Contract Review and Quotation issuance process.	
3.3.2	TNV shall ensure that information about the applicant organization and its management system is sufficient to develop an audit programme. Ref: TNV-F-001	
3.3.3	Any known difference in understanding between the TNV and the applicant organization is resolved.	
3.3.4	TNV shall verify the availability of competence to perform certification activities.	
3.3.5	TNV shall take into account and verify the scope of certification sought, the site(s) of the applicant organization's operations, time required to complete audits and any other points influencing the certification activity for example (language, safety conditions, threats to impartiality, etc.). Ref: TNV-F-01 & F-02	
3.4	Contract Review	
3.4.1	QM shall prepare a quotation after the contract review based on requirements of Mandays, multi-site activities and other considerations. Estimation of man days shall be as per procedure no. P 06 "Contract Review". And after obtaining approval from CEO, shall submit the same to the client. The matter shall be followed with the client for securing business. If the client decides not to award the work to TNV, the matter shall be treated closed and the offer and other details filed in "LOST BUSINESS" file.	
3.4.2	If the client accepts the quotation of TNV, he will forward the registration fee and On receipt of all these AM shall be required to verify the relevant details of the client's application, fee quotation reconfirm Contract. He may consult CEO or any other officer of TNV to carry out an accurate review. Including allocation of the scope sector of the client's activities coming under the applied scope of registration with the original Questionnaire to check that there is no discrepancy. Any discrepancy shall be taken up with the client and differences resolved prior to acceptance of work.	
3.4.3	Based on the contract review (as per Procedure P05), TNV shall determine the competences needed to be included in its audit team and for the certification decision	

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Clause	TNV's Procedure				
3.4.4	QM /AM in consultation with CEO shall proceed for finalizing the audit team. The audit team shall be appointed and composed of auditors (and technical experts, as necessary) who, between them, have the totality of the competences identified by TNV in application review for the certification of the applicant organization. The selection of the team shall be performed with reference to the designations of competence of auditors and technical experts and may include the use of both internal and external human resources. The selection of the team comprising of Auditors/ Auditor Team including Technical Expert are selected as per TNV Procedure P 03 & P 06.				
3.4.5	The individual(s) who will be conducting the certification decision shall be appointed ensuring appropriate competence with appointment letter-TNV-F-006				
3.4.6	Audit time shall be calculated as per the requirement of the ISO 17021, ISO 22003, ISO 27006 & as per procedure of the Accreditation board including IAF mandatory documents.				
3.4.7	Computation of on-Site audit time for FSMS:				
	i The minimum time includes stage 1 and stage 2, but shall not include the time for preparation of the audit nor for writing the audit report.				
	ii In order to avoid duplication where another relevant management system is in place and certified by the same CAB, additional time is not required (as per Table B.1 of ISO 22003:2013). In the case of a combined audit involving the FSMS, a reduction of the audit time can be implemented if justified and documented.				
	iii The minimum audit time is established for the audit of an FSMS which includes only one HACCP study.				
	iv A HACCP study corresponds to a hazard analysis for a family of products/services with similar hazards and similar production technology and, where relevant, similar storage technology.				
	v The minimum time for on-site auditing of the product and/or service realisation of the organization shall be 50 % of the total minimum audit time (applies to all type of audits).				
	vi The number of auditors per audit day shall be determined taking into consideration the effectiveness of the audit, the resources of the organization being audited as well as the resources of the CAB.				
	vii Where additional meetings are necessary, e.g. review meetings, coordination, audit team briefing, an increase in audit time may be required.				
	viii The number of employees involved in any aspect of food safety shall be expressed as the number of fulltime equivalent employees (FTE). When an organization deploys workers in shifts (including seasonal workers) plus office workers.				
	ix Multi-site sampling is to be permitted only in Categories A, B, E, F and G.				
	x Where sampling of sites is allowed, the sample of sites shall be selected before applying the audit duration calculation. Therefore, audit duration calculations shall be applied to each site in accordance with the requirements of ISO 22003 as specified in TNV-F-002-F.				
	xi If the scope of one specific client organization covers more than one category, the audit-time calculation shall be taken from the highest recommended basic audit time. Additional time is required for each HACCP study (i.e. a minimum of 0,5 audit day for each HACCP study).				
	xii Other factors may necessitate increasing the minimum audit time (e.g. number of product types, number of product lines, product development, number of critical control points, number of operational prerequisites programmes, building area, infrastructure, in-house laboratory testing, need for a translator).				

4. Initial Certification Audit:

Clause	TNV's Procedure
4.0	Initial Certification Audit:

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Clause	TNV's Procedure
	The initial certification audit of an FSMS shall be conducted in two stages: stage 1 and stage 2 in all management system certification scheme ISO 9001, ISO 14001, OHSAS 18001, ISO 22000, ISO 27001 & ISO 13485.
4.1	Stage 1 Audit
4.1.1	TNV proceeds with Initial Certification Audit (Stage-1) audit activity on completion of contract review and acceptance for TNV certification agreements. Stage 1 audit which is conducted before the Certification audit at client's option to provide a macro level assessment of the status of implementation and identification of any major deficiencies in the compliance of the documented quality system with the requirements of the certification standards, for corrective actions to be taken in advance of the certification audit. It provides valuable inputs to give confidence to the clients and saves time for taking necessary corrective action, later. Stage 1 audit is done in all cases and it is also ensured that the auditor signs the conflict of interest before every visit.
4.1.2	Stage I audit is intended to
	a) Ensure that the clients management system documentation meets the requirements of the applicable standard/specification.
	b) To collect information for planning of stage II audit and determine the client's readiness for stage II audit including interval between stage I and Stage II audits.
	Stage I audit shall have an audit plan as per format TNV-F-005. Normally the Stage I audit shall be performed at client's site. In exceptional cases stage I could be carried out without a visit (off site). Such decision shall be justified in audit report, which may be based on the client's size, location, risk consideration, previous knowledge, etc. In such situation the client's management shall be informed that the planning of stage II audit might not be accurate.
	Objective of Stage-1 Audit is:
	a) review the client's management system documented information;
	b) evaluate the client's site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for stage 2;
	c) 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;
	d) obtain necessary information regarding the scope of the management system, including:
	—the client's site(s);
	—processes and equipment used;
	—levels of controls established (particularly in case of multisite clients);
	—applicable statutory and regulatory requirements;
	e) review the allocation of resources for stage 2 and agree the details of stage 2 with the client;
	f) provide a focus for planning stage 2 by gaining a sufficient understanding of the client's management system and site operations in the context of the management system standard or other normative document;
	g) evaluate if the internal audits and management reviews are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for stage 2.
	NOTE-01: If at least part of stage 1 is carried out at the client's premises, this can help to achieve the objectives stated above.
	Note-02: The TNV shall not exclude part of processes, products or services (unless allowed by regulatory authorities) from the scope of certification when those processes, products or services have an influence on the safety and quality of products.

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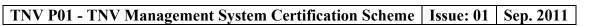
Clause	TNV's Procedure			
4.1.3	The stage 1 audit shall be conducted on site as per the man-days defined in the Contract Review. Audit shall start with opening meeting and shall be concluded with closing meeting in which client shall be informed about the readiness for Stage 2 audit.			
	Exceptional circumstances for FSMS: In exceptional circumstances, part of stage 1 can take place off-site but shall be fully justified. The evidence need to be submitted demonstrating that stage 1 objectives are fully achieved. Off-Site audit can only be permitted in Exceptional circumstances with the permission of the CEO, indicative circumstance are as following: i Very remote location			
	ii Short seasonal productioniii Difficult environmental condition of the auditing, like in glacier			
	The audit shall be performed by verifying and with the following:			
4.2.0	Audit Objective			
	Please refer Procedure 13			
4.3	At the end of audit the team leader shall prepare an audit report declaring:			
	a. Client's status regarding readiness for stage 2 audit.			
	b. Identified areas preventing the client being deemed ready.			
	c. Areas of concern, which could be classified as non-conformity during stage II audit.d. During stage I audit no non-conformities shall be identified.			
	e. In case it is concluded that the client is not ready for stage II audit then stage I audit shall be			
	performed again.			
	f. Team leader then shall prepare an audit plan for stage II audit based on defined processes of the			
	client.			
	g. Stage 1 audit findings documented and communicated to the client by the Team Leader			
4.4	For most management systems, it is recommended that most part of the stage 1 audit be carried out at the client's premises in order to achieve the objectives stated above. Any part of the FSMS that is audited during the stage 1 audit, and determined to be fully implemented, effective and in conformity with requirements, may not need to be re-audited during the stage 2 audit. However, the TNV shall ensure that the already audited parts of the FSMS continue to conform to the certification requirements. In this case, the audit report shall include these findings and shall clearly state that conformity has been established during the stage 1 audit.			
4.5	Stage 1 audit findings shall be documented and communicated to the client, including identification of any areas of concern that could be classified as nonconformity during the stage 2 audit. Agreement (TNV-F-004) shall contain a clause to mandatory information to the client that the results of the stage 1 may lead to postponement or cancellation of the stage 2 audit.			
4.6	In determining the interval between stage 1 and stage 2 audits, consideration shall be given to the needs of the client to resolve areas of concern identified during the stage 1 audit. Stage-1 and stage 2 can be planned together, but in case stage 2 is not conducted due to finding raise in Stage-1, Client shall be liable to pay full fees for the cancellation of the audit plan. TNV may also need to revise its arrangements for stage 2. The interval between stage 1 and stage 2 shall not be longer than 6 months. Stage 1 shall be repeated if a longer interval is needed. But in case of time-gap between stage-1 & Stage-2 audit for ISO 9001:2015 & ISO 14001:2015 exceed 2 months, client need to provide INCIDENCE REPORT (Incidence after stage-1 Audit, which may affect the risk assessment or risk prospective of the client) and its treatment(if applicable).			
4.7	The report shall be evaluated by AM and plan for the subsequent audits of the organization is discussed with the client. A detailed report shall be prepared by the Team Leader and a copy shall be given to the client.			
4.8	It is expected that the generally the management system has been in place for at least about three months			
	before the Pre-Audit is considered. However, the time can be decided by CEO.			
4.9	Any part of management system audited at stage I audit and determined to be fully implemented, effective, and in conformity with requirements of FSMS can be left during the Stage 2 audit.			
4.10	In case OHS Stage 1 & Stage 2 audit is carried out by different auditor, the auditor need to take a copy of the report from TNV, QM is responsible for confirming from the auditor.			
5.0	Stage 2 Audit			

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Clause	TNV's Procedure			
	Stage II audit is intended to:			
	a) Ensure that the clients management system conforms to the requirements of the applicable			
	standard/specification including its effectiveness.			
	b) To provide guidelines for associated follow up audits/ surveillance audit and recertification audit.			
	The purpose of the stage 2 audit is to evaluate the implementation, including effectiveness, of the client's management system. The stage 2 audit plan is verified to ensure that the majority of the audit time is given			
	to verify the effective implementation of the management system in the locations where the organization's			
	activities take's place including on-site audits of temporary sites for OHSAS (In Management System			
	Audit 80% of the audit time shall be given onsite).			
	TNV ensures Stage 2 audit meets the following requirement			
	5.1 Stage 2 Audit shall take place at the site (s) of client			
5.2	Stage 2 audit shall be conducted within maximum 90 days of completion of stage 1 audit			
5.3	Team leader shall prepare an audit plan communicate to the client after completion of stage 1 audit			
5.4	Stage 2 audit shall include at least the following:			
	a) Information and evidence about conformity to all requirements of the applicable management			
	system standard or other normative document			
	b) Performance monitoring, measuring, reporting and reviewing against key, performance objectives and targets (consistent with the expectations in the applicable management system standard or			
	other normative document).			
	c) The client's management system and performance as regards to legal and other requirements			
	d) Operational control procedures of the client's processes.			
	e) Internal auditing and management review			
	f) Management commitment and responsibility for the client's policies			
	g) Links between the normative requirements, policy, performance objectives and targets (consistent			
	with the expectations in the applicable management system standard or other normative			
	document), any applicable legal and other requirements, responsibilities, competence of personnel, operations procedures, performance data and internal audit findings and conclusions.			
	h) Various mandatory records to ensure that the management system is operational			
	i) Evidence of the monitoring of customer satisfaction			
	j) The organization adheres to its own OHSAS policies, objectives and procedures.			
	k) The OHS management system conforms to all the requirements of the OHS standard and is			
	achieving the organization's policy objectives for providing a safe and healthy working			
	environment.			
	1) Verify effective implementation of OHS including temporary sites.			
5.5	Audit shall begin with an opening meeting followed by a site visit. If the audit is for more than one calendar day duration, a meeting shall be conducted to apprise the client on findings of the day including			
	any non- conformities, progress of audit, any problem faced and modification to the audit plan, if required			
5.6	Before meeting the client/ closing meeting, the team leader shall have a meeting with the team members			
	who will exchange findings and review the audit progress and system implementation status till that time.			
5.7	Each team member shall ensure that the Auditor's notes are legible, containing name of main auditee, date			
	and area/ process audited, what and where was seen, reference of documents/ records reviewed, any			
	nonconformity identified with objective evidence, category of non- conformity, observations etc.			
5.8	As far as possible at least one member in the team shall possess the relevant code, who shall be assigned to			
	audit core processes of the management system. In case team members doesn't have competency, in such			
	case a specialist with appropriate code shall be arranged.			
5.9	It is the responsibility of the team leader to ensure that the audit is completed for areas/processes by the			
	team and all requirements are covered and that the team members have provided necessary inputs to him for completing the report.			
5.10	If audit is to be conducted in a language not known by any team member including team leader, a suitable			
3.10	interpreter should be arranged, ensuring impartiality.			
5.11	If any non- conformity is identified, the auditor shall explain the same to auditee to his satisfaction. In case			
J.11	of a Major non- conformity, the team leader shall be informed who will inform the management about the			
	same and give them option either to terminate further audit or to continue.			

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S.12 While recording nonconformity, sufficient objective evidence, standard/ specification clause number, client documents. Reference number (if any) in addition to area where it was found shall be recorded in clear terms so that the auditee or any other person reading it can easily understand	5.12			y, sufficient objective evider	nce standard/specific	
5.14 While deciding on recommendation, the issues like number and category of non-conformities, any concentration of non-conformities against any clause (s), view of team members shall be considered. 5.15 At the end of the assessment, a written report, duly signed by the team leader and client representative shall be prepared and handed over to the client which shall include non conformities identified if any, recommendation for certification or otherwise. 5.16 It is advisable to request client to have a close look at the "Certification detail" in the report for any possible error in name, address, scope, spelling mistake etc. 5.17 When recommendation is made for certification the audit reports, confirmation of the information provided to the TNV used in the application review, a recommendation whether or not to grant certification, together with any conditions or observations, the need for taking corrective action and need of verification of the corrective action taken (i.e. when there is nil or few minor non- conformities), by site visit or otherwise must be take into account & explained. The client should complete the corrective action within maximum 90 days from the date closing meeting. 5.18 A copy of the report should be given to the client and one copy with attendance record and auditors notes to be sent to Head office of TNV. 5.19 For multi- site certification "Procedure for selection site P06 shall be followed. 5.20 Lead Auditor need to submit a copy of report to the client and accepted report to TNV Head Office Lucknow, Uttar Pradesh. 5.21 Lead Auditor shall clearly identify the recommendations conditions with Non Conformity or without Non Conformity, the observations shall be well communicated in the report. 5.22 Non conformity Type of NC Pre-Audit Certification until completion within 60 days or new full audit verification based on objective evidence (on documents or on site) - Non certification suspended: Information to the customers. - New verification based on objective evidence (on do		client documents. Reference number (if any) in addition to area where it was found shall be recorded in clear terms so that the auditee or any other person reading it can easily understand				
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Conformity, the observations shall be well communicated in the report. S.22 Non conformities shall be classified as. Major or Minor according to their potential effects on the management system. The consequences of these shall be termed as follows: S.23 Nonconformity		Lucknow, Uttar Pradesh.				
Type of NC Pre-Audit Certification Audit Surveillance or recertification audit		Conformity, the observations shall be well communicated in the report.				
Type of NC Major - No certification - Completion - time scale open - Full certification audit - No certification within 60 days or new full audit verification based on objective evidence (on documents or on site) - Next surveillance audit within 6/9 months - New verification Audit - Completion within 15 days - Verification based on objective evidence (on documents or on site) - Certification suspended: Information to the customers New verification based on objective or to the customers.	5.22	Non conformities shall be classified as. Major or Minor according to their potential effects on the management system. The consequences of these shall be termed as follows: Nonconformity				
Major - No certification - Completion - time scale open - Full certification audit - Full certification audit - No certification until completion within 60 days or new full audit verification based on objective evidence (on documents or on site) - Next surveillance audit within 6/9 months - New verification based on objective to the customers. - New verification based on objective or on site) - New verification audit - Completion within 15 days - Verification based on objective evidence audit to the customers. - New verification audit - New verification based on objective to the customers.	5.23					
- Completion - time scale open - Full certification audit completion within 60 days or new full audit verification based on objective evidence (on documents or on site) - Next surveillance audit within 6/9 months - Verification based on objective evidence (on documents or on site) - Certification suspended: Information to the customers New verification based on objective		Type of No	C	Pre- Audit	Certification Audit	
Minor No certification - Certification completion effective or effectively planned within 30 days - Verification based on objective evidence (on documents or on site) - Next surveillance audit within 6/9 months Completion effective or effectively planned within 30 days - Verification based on objective evidence (on documents or in site) - Certification suspended: information to customers		·	- Completion - time scale open - Full certification audit	completion within 60 or new full audit verific based on objective evid (on documents or on sit - Next surveillance within 6/9 months - Certification complete effective or effect planned within 30 days - Verification based objective evidence	days ation dence e) audit - Certification to the custome - New verification evidence - Next survements letion Completion planned within - Verification evidence (on or complete to the custome and the custome of the c	n based on objective documents or on site) n suspended: Information ers. cation based on objective dillance audit within 6/9 effective or effectively in 30 days n based on objective documents or in site)
				documents or on site)	to customers	

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Clause	TNV's Procedure		
6.0	Granting Initial Certification		
6.1	The information provided by the audit team to TNV for the certification decision shall be as per TNV procedure no. P 07 "Procedure for issue, change and cancellation of certification. and shall include, as a minimum.		
	 a. The audit reports, b. Comments on the nonconformities and, where applicable, the correction and corrective actions taken by the client, c. Confirmation of the information provided to TNV used in the application review, and d. A recommendation whether or not to grant certification, together with any conditions or observations. TNV shall make the certification decision on the basis of an evaluation of the audit findings and conclusions and any other relevant 		
	information (e.g. public information, comments on the audit report from the client).		
6.2	TNV Certification Committee shall analyze all information and audit evidence gathered during the stage 1 and stage 2 audits to review the audit findings and agree on the audit conclusions. For decision making, non-compliances / non conformities may be classified in 2 categories:		
 a. Major non-conformity – which must be rectified before certification can be rethe Lead Auditor. b. Minor non-conformity – which do not affect the recommendation for approaddressed prior to the issue of your certificate. 			
6.3	In case of the transition to new standard like (ISO 9001:2015 or ISO 14001:2015); TNV shall restrict the expiry date of the certificate by the last date of the standard, unless and otherwise required by the client with the commitment to timely make the transition before the due date as specified.		
6.4	TNV Shall not accept application for previous version of 2008 of ISO 9001 & previous version 2004 of ISO 14001 with effect from 01 st January 2017. But shall accept only 2015 version of ISO 9001 and 2015 version of ISO 14001.		

6. Maintaining Certification

Clause	TNV's Procedure		
7	Maintaining Certification		
7.0	Surveillance Audit		
7.1	Surveillance Planning		
	Surveillance audit shall be identified 3 months prior to the due date by QM/AM, the client must be communicated about the due date and proposed date of Surveillance audit. CEO shall monitor the effectiveness of Surveillance audits on monthly basis. If the client does not confirm the Surveillance Audit date latest within 7 days of due date, letter of suspension is issued to the client. After the issuance of the Suspension letter, letter of cancellation is issued to the client on the next date of due date. Any justification provided by the client for the postponement of the audit is recorded has to be approved by QM/CEO and recorded in the client file.		

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Clause	Surveillance audits are on-site audits, but are not necessarily full system audits. Surveillance audits planned together with the other surveillance activities so that the certification body can maint confidence that the certified management system continues to fulfill requirements between recertificat audits. The Assigned team leader is responsible for conducting and managing the assessment along we other team member, if any. The Team Leader shall be of Auditor status as a minimum. The team leads also ensures that any Technical Expert / Specialist are not allowed to function independently and always accompanied by Auditor/ Lead Auditor.		
7.2			
7.3	The surveillance audits conducted at least once a year and the date of the first surveillance audit following initial certification shall not be more than 12 months from the last day of the stage 2 audit.		
7.4	 The of surveillance audit is to ensure following: a. Ensure that the client's management system which was basis of grant of certificate has been maintained on continuous basis. b. Verify and ensure that any changes to management system which might have taken place since last audit meet the requirement of the standard/ specification and implemented effectively c. Ensure on-site audits assessing the certified client's management system's fulfillment of specified requirements with respect to the standard to which the certification is granted. d. Ensure that the management system continues to be appropriate to the product/ process/ service offered by client, with the capability of managing and improving performance. e. Assess Continual Improvement is client's management system f. Additionally client's statements with respect to its operations (e.g. promotional material, 		
	website). Also reviewed during each surveillance audit. g. Enquiries from the certification body to the certified client on aspects of certification. h. Requests to the client to provide documents and records (on paper or electronic media) i. Other means of monitoring the certified client's performance, j. Internal audits and management review, k. A review of actions taken on nonconformities identified during the previous audit l. Actions taken on customer complaints m. Effectiveness. Of the management system with regard to achieving the objectives n. Progress of planned activities aimed at continual improvement o. Continuing operational control		
	p. Review of use of CB & AB marks q. Verify the OHS for the respective objectives and targets r. Hazard Identification & Assessment Controls s. Compliance towards Legal & Other requirement including customer requirements t. Verify the OHS management systems at the temporary site u. Verify the OHS management at the Multisite based on the Audit Program		
7.5	The team leader shall review the client file, especially the last audit report to make note of any issues to be followed up, including the non-conformities and corrective action plan. Audit plan shall be sent to clients in advance so that they can seek any changes with respect to timing etc, if found inconvenient due to administrative reasons.		
7.6	Audit should be conducted (at least annually and it shall be ensured that the date of first surveillance audit shall not be more than 12 months from the last day of stage 2 audit.) as per Surveillance audit plan given in the last audit report but if there is any change due to any justified reasons, the same should be recorded in auditor notes and surveillance audit plan shall be updated in the report.		
7.7	During opening and closing meeting, the attendance record sheet is circulated for recording name and designation of the client representative present. Either each person can record their name & designation or one person can do so for all present.		
7.8	The corrective action taken on non-conformities identified during last audit should be verified for its effectiveness. If the corrective action taken is not satisfactory/ non taken, the severity of the minor NC shall be re-issued escalated to Major and client shall be advised accordingly.		

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Clause	TNV's Procedure		
7.9	Non-conformity reporting, report preparation, report distribution, requirement of CAP (in case NC is raised) shall be similar to certification audit procedure.		
7.10	If due to change in site address/ scope required re-issue of certificate, the "Certification Details" in the report shall be completed and client date base shall be updated.		
	a. Any significant changes like change in manpower, process necessitating change in subsequent audit duration shall be recorded and post contract review is done by AM.b. Other changes like change in contact number/ person etc shall also be recorded in the report for updating client data base,		
	 7.1 The multi-site client shall be audited the same way except that instead of auditing all sites, sampling of sites shall be followed as per the contract review. 7.2 In case major NC is found at any site the entire certificate of all sites shall be at Risk. 7.2 The site of the state of th		
	 7.3 The surveillance report is submitted by the Lead Auditor in TNV Head Office, and shall be approved by the CEO/TM. 7.4 During the transition period of OHSAS 18001-2007 to ISO 45001-2018 and ISO 22000:2005 to ISO 22000-2018, any nonconformance of new standard shall not affect the validity of the old standard if client meets the requirement of the old version of the standard till the validity of the standard respectively. 		
8.0	Renewal/Re-Certification Audit		
8.1	The process of recertification would include a reassessment of the organization's documented quality management system including a review of the Management System, where necessary, to be conducted before the expiry of three years term of validity. The recertification audits planned and conducted to evaluate the continued fulfillment of all of the requirements of the relevant management system standard or other normative document. The Renewal audit plan is verified to ensure that the majority of the audit time is given to verify the effective implementation of the management system in the locations where the organization's activities takes place including on-site audits of temporary sites for OHSAS (OHSAS (In Management System Audit 80% of the audit time shall be given onsite).		
8.2	The reassessment provides for a review of the past performance of the quality management system over the period of previous certification, including examination of the documents/records relating to the internal audits, management review and effectiveness of corrective and preventive actions, etc.		
8.3	It is the responsibility of the person assigned (of Lead Auditor status) to conduct the Reassessment an submit the report. The team leader also ensures that any Technical Expert / Specialist are not allowed t function independently and are always accompanied by auditor/lead auditor.		
8.4	Re- certification audit shall be planned and conducted three months prior to the validity of the certification to ensure continuity of certification in the likely event of any non conformance found during the audit. the case of 9/6 monthly surveillance frequency the Re-certification audit can be clubbed with the Surveillance Audit		
8.5	The process of Re-certification is planned by the AM. Advance notice is sent to the client. If the client agrees for the recertification the sending Questionnaire, quotation and application review is done as per procedure no.P06. If there are changes like addition of new processes/services, regulatory requirement or new product/services addition or change of location or change of Top management Stage 1 audit is required to be conducted.		
8.6	Before proceeding to client site, the team leader shall review all the previous reports since certification audit/ last Reassessment by Performance Review and make a note of relevant points. The re assessment programme shall at least ensure the following:		

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Clause	TNV's Procedure		
	a. The effective interaction between all elements of system & audit activities have 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 is operating (e.g. changes to legislation) as identified in		
	 the Application Questionnaire. Overall effectiveness of the system in its entirety in the light of changes in operations Demonstrated commitment to maintain the effectiveness of the system Summary of Previous Audit Reports 		
	e. Whether all areas/ processes/ clauses have been audited at least once in the last three year cycle		
	f. Any concentration of non-conformities against particular clauses/areas and effectiveness of corrective actions taken on nonconformities identified by TNV shall be closed within 15 days of recertification audit		
	g. Objectives and Continual Improvement		
	h. Whether the operation of the certified management system contributes to the achievement of the organization's policy and objectives.		
	 In the case of multiple sites or certification to multiple management system standards being provided by the TNV, the planning for the audit ensure adequate on-site audit coverage to provide confidence in the certification. 		
	j. Verify the OHS for the respective objectives and targets		
	k. Hazard Identification & Assessment Controls		
	Compliance towards Legal & Other requirement including customer requirements		
	m. Verify the OHS management systems at the temporary site		
	n. Verify the OHS management at the Multisite based on the Audit Program		
8.7	Re Certification Audit shall be conducted, if the client applies for re-certification prior to expiry of certificate and there is no major change in client organization (legal, scope etc.). How-ever if the client applies for recertification after expiry date then stage I will also be conducted.		
8.8	If NC is identified the Re-Certification audit the team leader shall ensure and communicate the client that the Corrective Actions and the evidences are provided before the expiry of the certificate.		
9.0	Short Notice Audit		
	As a result of a complaint, by any party, any adverse publicity or contravention of the conditions of certification or other information received and suspended client. The special visits will be undertaken at due notice has been given and details agreed between TNV Certification Pvt. Ltd. and visits will be undertaken after due notice has been given and details agreed between the certified company. Due care take of the following.		
	 Information is given to the client in advance regarding the re-source of the visit with details. Due care is taken to select the auditor to Safeguard Lack of Reason to client for objection to the auditor. 		
10	Suspension, Withdrawal, Extension and reduction / Change in scope of Certification		
10.1	Suspension		

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Clause	TNV's Procedure		
	The grounds for suspending the certificate are as follows: a. If the certified organization is not getting the Surveillance audit conducted as per the certification agreement. b. If the client is found to misuse the logo of the Certification Body or is using any kind of misleading statement which might affect the reputation of the certification body and the		
	 accreditation board. c. If there is any complaint from the customer's customer TNV needs to verify the complaint and in case if the certified organization is found guilty the certificate will be suspended and will remain suspended until the complaint is not resolved. d. In case of Nonpayment of the fee as per the Contractual agreement. e. If during the Surveillance audit system found not to comply with Standard requirement. Upon the Suspension the certificate will be surrendered from the client, the TNV web site will be updated that the organization's certificate is suspended (not valid). After withdrawal of the certificate if the organization is found using the certificate or certification information in any manner, legal action will be 		
	taken against the Organization as per the contractual agreement. Note: The evidences can be verified onsite or offsite depending upon the nature of the reason for the suspension.		
10.2	Withdrawal Any certificate issued by TNV may be withdrawn in the event of any of following defaults by a certificate holder:		
	 a. If a surveillance audit is not arranged within 3 months of the due date in response to notice issued by TNV CERTIFICATION PVT. LTD. b. Major lack of effective implementation of corrective of actions within agreed time limits in respect of non-conformities identified during surveillance audits. c. Failure to pay appropriate fees. 		
	 d. Continued misuse of Accreditation mark/logo e.g. misleading publications, advertisement or contravention of the stipulated conditions for the use of marks/logo. Upon suspension or cancellation of certificate of registration, the name of the organization shall be deleted from the TNV CERTIFICATION PVT. LTD.'s approved list of certified companies. e. In case the Organization is not able to resolve the issue of Suspension within 90 days from the date of Suspension. 		
	 f. The evidences submitted by the organization for the reason of suspension as defined above are not found satisfactory. g. If client fails to timely transit to new standard (ISO 9001:2015 or ISO 14001:2015) on the last date of the standard, certificate of respective standard shall be automatically withdrawn. To manage this risk, TNV shall issue certificate with the expiry date which is the validity date of the old version of QMS & EMS (i.e. 15th Sept. 2018). 		
10.3	Extension		
	Upon the request of the client at any point of certification cycle, the scope of certification can be extended after the verifications conducted as per the TNV certification process. Extension to Scope of Certification after the verifications to the initial certified scope are possible, for example, to include addition offices or new areas of business. Audits for this 'extension' can often be carried out causing minimular disruption to client's organization. A common practice is to allocate some extra time during a routing surveillance visit. But special audit can be allocated at the request and cost of the client, surveillance		
	An extension / reduction audit can be performed to extend or reduce the scope of an existing certificate. The extension / reduction audit may be carried out within the scope of a surveillance audit, re-certification audit or on an independently selected date. The validity period of the certificate remains unaffected. Exceptions have to be justified in writing. The		
	lead auditor / audit team will review the ISMS documents concerning the extended / reduced scope and audit all requirements which are affected by the extension / reduction. The further progress with regard to the documentation and release of the audit procedure corresponds to a certification audit.		
10.4	Reduction		

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Clause	TNV's Procedure				
	Upon the request of the client or during the surveillance audit as identified/verified by the audit team, the				
	scope of certification can be reduced after the verifications conducted as per the TNV certification process.				
10.5	Limited Warrantee of the Certification				
	It is considerable that all audits are performed on the basis of limited sampling. If discrepancies are not				
	discovered, there is no guarantee that they do not exist.				

7. Management of Transition Assessment:

Transition Assessment Process					
TNV shall develop detailed transition plan on induction of the new standards in format number					
TNV-TP-QE mainly covering following points and this shall be available on the website of the					
TNV.					
ii					
iii	Transition Implementation Plans and strategy of the TNV				
iv	Validity of Certificate issued under old version (if applicable)				
V	Transition Audit and Audit Duration (if applicable)				
vi	Transition plan				
Vii	Transition team organization				
VII	Competence development of the team TNV				
ix	Communication with the parties (if applicable)				
X	Audit timing and planning (if applicable)				
xi	Upgradation timeline (if applicable)				
Xii	Certification decisions (if applicable)				
XIII	Promotion of the user of new version				
xiv	Transition Period				
	Training				
xvi xvi	Evaluation				
XVI	Control via Internal Audit.				
XVII					
<u> </u>					
XIX	Goals & objective Overseas offices				
XX	Training / knowledge transfer				
XX1 XXii	Schedule				
XXII					
	IAF Guideline for transition (if applicable)				
XXIV	, , , , , , , , , , , , , , , , , , ,				
XXV	Annexure: 01 GAP Analysis (Old Version Vs New Version) Pick Paged Thinking (if applies blo)				
XXVi	Risk Based Thinking (if applicable) PDC 4 Approach (if applicable)				
xxvi	PDCA Approach (if applicable)				

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Transition Assessment Process			
xxvi	Brief of the Changes for client information (if applicable)		
xxix	FAQ for Transition to client (if applicable)		
XXX	What are the possible benefits?		

8. Annexure SL:

The Annex L (formerly called Annex SL but renamed with the 2019th edition) is a section of the ISO/IEC Directives part 1 that prescribes how ISO Management System Standard (MSS) standards should be written. The aim of Annex L is to enhance the consistency and alignment of MSS by providing a unifying and agreed upon high level structure, identical core text and common terms and core definitions. The aim being that all ISO Type A MSS (and B where appropriate) are aligned and the compatibility of these standards is enhanced.

MSS (Certifiable Standards) following Annex L

- 1. ISO 9001:2015, Quality management systems Requirements
- 2. ISO 14001:2015, Environmental management systems Requirements with guidance for use
- 3. ISO 14298:2013, Graphic technology Management of security printing processes
- 4. ISO 18788:2015, Management system for private security operations Requirements with guidance for use
- 5. ISO/IEC 19770-1:2017, Information technology IT asset management Part 1: IT asset management systems Requirements
- 6. ISO/IEC 20000-1:2018, Information technology Service management Part 1: Service management system requirements
- 7. ISO 20121:2012, Event sustainability management systems Requirements with guidance for use
- 8. ISO 21001:2018, Educational organizations Management systems for educational organizations Requirements with guidance for use
- 9. ISO 21101:2014, Adventure tourism Safety management systems Requirements
- 10. ISO 21401:2018, Tourism and related services Sustainability management system for accommodation establishments Requirements
- 11. ISO 22000:2018, Food safety management systems Requirements for any organization in the food chain
- 12. ISO 22301:2012, Societal security Business continuity management systems Requirements
- 13. ISO/IEC 27001:2013, Information technology Security techniques Information security management systems Requirements
- 14. ISO 30301:2011, Information and documentation Management systems for records Requirements
- 15. ISO 30401:2018, Knowledge management systems Requirements
- 16. ISO 34101-1, Sustainable and traceable cocoa beans Part 1: Requirements for sustainability management systems
- 17. ISO 37001:2016, Anti-bribery management systems Requirements with guidance for use
- 18. ISO 37101:2016, Sustainable development in communities Management system for sustainable development Requirements with guidance for use
- 19. ISO 39001:2012, Road traffic safety (RTS) management systems Requirements with guidance for use
- 20. ISO 41001:2018, Facility management Management systems Requirements with guidance for use
- 21. ISO 44001:2017, Collaborative business relationship management systems Requirements and framework

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- TNV P01 TNV Management System Certification Scheme | Issue: 01 | Sep. 2011
 - 22. ISO 45001:2018, Occupational health and safety management systems Requirements with guidance for use
 - 23. ISO 50001:2018, Energy management systems Requirements with guidance for use
 - 24. ISO 55001:2014, Asset management Management systems Requirements
 - 25. ISO 15378:2017, Primary packaging materials for medicinal products Particular requirements for the application of ISO 9001:2015, with reference to good manufacturing practice (GMP)
 - 26. ISO 19443:2018, Quality management systems Specific requirements for the application of ISO 9001:2015 by organizations in the supply chain of the nuclear energy sector supplying products and services important to nuclear safety (ITNS)
 - 27. ISO/TS 22163:2017, Railway applications Quality management system Business management system requirements for rail organizations: ISO 9001:2015 and particular requirements for application in the rail sector
 - 28. ISO/IEC 80079-34:2018, Explosive atmospheres Part 34: Application of quality systems for ex product manufacture

9. Reference Documents:

Sl. No.	Document name	Reference documents
1.	TNV Application Questionnaire / Inquiry Form	TNV-F-01
2.	Offer (Quotation)	TNV-F-03
3.	Contract for The Certification of Management System	TNV-F-04
4.	Contract Review	TNV_F-02
5.	Procedure for Application Review and Contract Review, Multi-	TNV-P06
	Site Sampling Plan	
6.	Audit Schedule / Plan	TNV-F-05
7.	Audit Programme	TNV-F-10
8.	Certification Audit Report stage – 1	
9.	Audit Report	
10.	Release of Audit Documentation	
11.	Procedure for Issue, Change and Cancellation of Certification	TNV-P07
12.	Auditor rough sheet	
13.	AFAR (Non Conformity Report)	
14.	Transition Plan	TNV-TP-QE

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