

	Conducting audits Procedure		Proc QP 09 Rev: 05 Eff date: 25 Sept 2025
Developed by	Certification Manager	Approved by	Managing Director

1. Purpose

The purpose of this procedure is to define how Certification audits shall be conducted in fulfilment of the provisions under clause 9 of ISO/IEC17021-1:2015.

2. Scope

This procedure covers the processes from the time a quotation is accepted for the management systems certification to the time the permit is granted/renewed and maintenance of certification.

3. Responsibility

Certification manager together with the MD.

4. Abbreviations

IC – Impartiality Committee

MS – Management System

IR – Improvement requests

IAF – International Accreditation Forum

AB – Accreditation body (like SANAS)

CM – Certification manager

5. Process

Function	Process	Measurement
General information	- The certification manager is responsible for ensuring that a competent audit team is assigned to the audits based on the IAF codes. - The certification Manager shall determine from approved IAF codes matrix the audit team suitable for the particular audit to be undertaken. - Audit notifications shall be sent to the clients and auditors by end of each year. Both the auditor and the client are required to accept the audit dates if favourable. - At least one of the audit members must have the required IAF code or the team must be supplemented by a technical expert. - The selected audit team shall appear in the audit plan and responsibilities defined. - The stage 1 audit and follow-up audits may be carried out by the Lead auditor only. - All other audits shall be carried out by number of auditors as outlined in audit time determination whose collective competence shall ensure that the objectives of the audit are achieved effectively.	Frm- QP 09.1 Three-year programme Frm- QP 06.1 Roles and responsibilities Frm- QP 06.9 Approved IA codes matrix Frm- QP 08.5 Certification agreement

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	- When an audit is initiated, the responsibility for conducting and communicating with the audit team remains with the assigned Lead auditor until the audit is completed. - The initial certification audit of the management systems shall be conducted in two stages: Stage 1 and 2. - The evaluation shall be conducted in English. - Surveillance shall be conducted within 12 months of the certification decision and subsequent surveillance shall be conducted within 12 months of the previous one. - Recertification audits shall be planned and conducted within 3months of the certificate expiry date. - Special audits shall be conducted as and when required (resolving a complaint, closure of NCs, when they are significant changes.... etc). - Audit reports shall be reviewed by a competent person before they are issued to the clients. - Improvement requests to be submitted within 30 working days from the date of audit where applicable. - Initial and recertification audits shall be submitted for certification decision and the decision shall be made according to the certification decision process. - The certificate shall be issued based on the successful certification decision. - Certificate must be document according to the approved certificate template and authorized by a SANAS approved person.	
Audit planning	- CM/Administrator will confirm the audit dates with the client and the auditors prior generating an audit Plan based on the three-year programme where applicable. - Audit plan shall be sent to the client at least seven (5) days before the audit date detailing auditor details, areas to be audited and approximate arrival times and closing meeting times. - CM/Administrator sends the client the audit plan. <u>**Note for OH&S MS Audits – Lead auditor shall ensure:</u> Management representative shall invite “legally responsible for occupational health and safety “(e.g. Safety officer etc.), personnel responsible for monitoring employees’ health (e.g. Doctor, Nurse, EHS rep, etc.) for Closing meeting mandatory. Reason in case of absence shall be documented (in Attendance Register or Audit Plan) by Lead auditor.	Frm -QP 08.3a Frm- QP 09.2 Frm QP 09.1 Frm QP 09.4

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	Name of personnel interviewed shall be mentioned in audit question list or audit plan, which shall include at least one member from managers, temporary & permanent employees, contractor's employee, personnel responsible for health & safety (doctor, nurse) (reason in case of remote auditing shall be documented), employee 's representative, management with legal responsibility for OH&S (e.g. Safety officer, etc.)	
Conducting audits	• Conduct Opening and closing meeting with the client representatives and management. • Audit areas as documented in the audit plan. • Document objective evidence on the audit notes template/audit report template • Review checklist/audit report template to confirm all areas are completed. • Where deviations are identified they must be documented on the Improvement request (not applicable to stage 1 audit) root causes be conducted and corrective actions be determined and submitted within 30 days. • A finding of nonconformity shall be recorded against a specific requirement, and shall contain a clear statement of the nonconformity identifying in detail the objective evidence on which the nonconformity is based. Nonconformities shall be discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood. The auditor however shall refrain from suggesting the cause of nonconformities or their solutions. • The audit activities for stage 2 must be confirmed to be conducted within 4 months of the stage 1 audit date and for recertification audit must be confirmed to be conducted within 3 months of expiry date. • Surveillances shall be planned within 12 months of certification decision in-line with the audit programme. • Upon receipt of the audit pack from the lead auditor, the admin and certification manager will conduct administrative review of the pack as documented on the Audit pack review template. • All the reports will be reviewed by the technical reviewer and if the outcome is positive the audit report shall be issued to the client and if negative then the auditor might be advised to reaudit or get more information. • Certification decision is mandatory before the certification is granted and is dependent on recommendation made by the auditors and technical reviewers.	Frm- QP 09.3_ Attendance register Audit notes/ audit report Opening and Closing meeting. Corrective action request (including previous) 09.7 Audit Report - Frm- QP 09.6/ Frm-QP 09.7 Technical Review & Certification Decision Record Frm- QP 10.1 <i>Audit pack review Frm QP 09.11</i>

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	• Certification decisions are conducted according to Proc-QP 10 and documented on Frm-QP 10.1.	
Planning of audits and Technical Expert performance	• The technical expert is allocated to a Lead Auditor/auditor for inclusion on the audit team. The duties and responsibilities of the technical expert (TE) is explained to him/her. • The name of the technical expert is included on the audit plan sent to the client to be audited. The plan will clearly show which auditor the technical expert will accompany throughout the audit. • The audit is conducted and the auditor who is responsible for the technical expert shall report back to the Managing Member/Certification manager, on the performance of the technical expert. • The report is reviewed and if acceptable it gets approved. If not satisfactory, a decision is made whether to continue to use the expert.	Accepted audit plan by both the client and the TE. Signed declaration of interest and confidentiality (forms part of the audit plan) FRM- QP 02.4 Confidentiality and Impartiality agreement
Stage 1 audit only	• Review client documentation and verify if it conforms to the standard requirements and have documented management system and audit evidence to be documented under audit summary <i>(It is not compulsory for the auditor to use Audit notes templates)</i>. • Audit team must document and communicate conclusions with regards to fulfilment of the stage 1 audit objectives and readiness for the stage 2 including identification of areas of concern that could have an impact on stage 2 audit. • Stage 1 audit will be repeated under the following conditions but not limited to the following: ○ If the client is unable to provide evidence of the documented management system, ○ if the client has gone through significant changes ○ if the client is unable to rectify areas of concern within 6 months. • Arrangements of stage 2 audit must be taking place within 6 months of stage 1. • When the audit conclusions are positive the arrangements will be made for the stage 2 audit and the audit must be conducted within 6 months of stage 1(confirm details for Stage 2 audit). • Audit pack shall be technically reviewed and upon recommendation by the reviewer the client shall be issued with the report.	Measurement as defined under conducting audits except Corrective action requests.

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Stage 2	- Confirm implementation of the areas of improvement raised during the stage 1 audit. - Objective evidence to be documented in the audit notes templates. - Deviations identified to be recorded on corrective action request and corrective actions to be implemented and evidence be provided. - Arrangements for the next audit to be confirmed with the auditee.	Measurement as defined under conducting and planning audits.
Surveillance audits	- Surveillance audits are intended to verify the continued effective maintenance of the client organization's management system, satisfy the needs of the client's organization and maintain the integrity of the certification process as a whole. Surveillance audit is intended to: - Assess that the client organization's certified management system has been maintained. - Verify that changes to management system subsequent to the previous visit are in compliance with respective standard and that objective evidence is available to substantiate implementation. - Re-confirm that the management system is appropriate to client organization's product, process or service provided, with the capability of managing and improving performance. - Promote the effectiveness of the management system. - Assess major changes in client organization's operations, technology that could affect the certification. - Surveillance audits are conducted within 12 months of certification. - Refer to the audit planning section for the planning of surveillance audits.	Measurement as defined under conducting and planning audits.
Recertification audit	- Recertification audits shall be conducted at least three months before the expiry date of the certificate to allow certification decision process and closure of findings or any other problems that might be encountered. - Prior to scheduling and conducting a Recertification audit, an evaluation of past performance shall be conducted and documented in the Three-year audit programme. - Precertification activities process to be implemented before planning the audit. - Audit planning and conducting the audit will be conducted as listed above	Frm- QP 09.1 Frm- QP 08.1 Frm- QP 08.3 Frm- QP 09.7 Frm- QP 09.8 Frm- QP 09.9
Special audits (Changes to CIPC details)	Certified management system must continue to comply with the current version of specific standard. Also, the scope of registration must continue to be appropriate to the client organization's objectives and appropriate for the client organization's products and services. On the other hand, complaints, appeals, request for change in scope, additional accreditation, audit visits, surveillance visits or serious incidents	Frm- QP 08.1 Certification application

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	that happened with the organisation may disclose reasons for undertaking an additional visit. - NST Total Compliance (Pty) Ltd remains the right to suspend certification with immediate effect should non-conformances be observed on site that might cause serious injuries and/or fatalities or in cases where serious injuries and/or fatalities have occurred. The same apply for repeat reportable environmental incidents. - In response to an application for expanding the scope of the certification already granted, NST TC shall undertake a review of the application and determine any audit activities necessary to decide whether or not the extension may be granted. - This may be conducted in conjunction with a surveillance audit. - Name change - Address changes - Directorship changes	
Short Notice Audits	- Where necessary, NST may conduct audits to investigate complaints, or in response to changes, or as a follow up on suspended clients. - Such audits shall be conducted at short notice and the client shall be informed.	
Transfer of valid certification from another Accredited certification body	- Pre-certification procedure shall be activated, client will be issued with a quote and upon acceptance of the quote planning will commence. - Client applying for transfer will be treated as new client provided the information from the other CB was not received. - If the information was received the technical reviewer will be assigned to review the pack and make a recommendation. - Certification decision to be taken on transfer of existing certificate from another CB will only be granted if: - there is evidence that there are no outstanding major nonconformities from the CB at which the client is holding certification. - corrective action for minor nonconformities has been approved. - Stage 2 /Recertification audit shall be conducted as stipulated in this procedure where applicable. - Upon satisfying the requirements of this procedure the certification decision shall be made according to Proc QP 10.	Proc- QP 10 Certification decision. IAF MD 2

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Function	Process	Measurement
Closing meeting and feedback	Closing meeting with client organization is held and feedback on audit and non-conformances raised; decision to recommend/not to recommend, follow up action required is given.	Frm- QP 09.3 Attendance register
Reporting	- The Lead Auditor shall generate the audit report with 10 working days of the audit and submit to the certification manager for review. - Upon successful technical review of the report (shall be completed with 3 working days of submission), it will be sent to the client via email by the administrator/certification manager. - The report must be issued to the client within 21 working days of the audit	Frm- QP 09.6/ Frm- QP 09.7 audit report Frm- QP 09.5 Audit notes Frm- QP 10.1 TR
Verification of Corrective actions	- Corrective actions and evidence for the non-conformities identified during the audits shall be submitted to the certification manager for review within 30 working days detailing root cause analysis, remedial action, and corrective actions. - The CM will subsequently forward the corrective actions and evidence to the responsible auditor for review and Verify suitability and effectiveness of corrections and corrective actions. - The client shall be notified of the results of the review of the corrective actions and subsequent actions thereafter (additional information, special audit, verification during the next audit).	Corrective action plans and evidence from the client Certification notice
Completion of audit	- Client submits details of action taken/planned within time limit specified on CAR reports. - The audit pack is deemed complete when Improvement requests for raised Non-conformances has been forwarded, reviewed, accepted by the Lead Auditor and status of Improvement requests has been communicated with the client. - Administrator to review the audit pack prior filing it into the client folder to verify completeness and correctness.	Inputs and outputs of this procedure

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Revision History

Proposed by	Section	Description of amendment	Date	Revision status	Approved By
CM		Review of all management system documentation to align with standard requirements	01 June 2023	01	MD
CM		Reporting and Conducting audits	01 Oct 2023	02	MD
CM	Special Audits	Name change	01 Sept 2024	03	MD
CM	Audit Planning and Special audit section	Note for OH&SMS Audits and occupational health and safety incident	20 Dec 2024	04	MD
CM		Full Review of the procedure	25 Sept 2025	05	MD