Annex II(A)
Management System Checklist
(for any management system certification)

The management system certification body shall complete the following checklist, which will be used for the assessment of the management system certification body's conformity with HKAS and HKCAS accreditation requirements.

This checklist consists of questions based on the requirements of HKAS 002, HKAS SC-06, HKCAS SC-04 and ISO/IEC 17021-1: 2015. For further information, please refer to the corresponding document and clause as listed in the second column.

The management system certification body shall indicate in the 'QM Clause' column, for every question, the clause(s) in its management system manual, operation procedures or other related documentation which can demonstrate the management system certification body's conformity with the requirement.

The column headed 'OK' is for internal use of HKAS Executive.

A softcopy of this completed checklist shall be provided to HKAS Executive by email or other means.

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
REQUIREMENTS FOR CERTIFICATION BODIES				
GENERAL REQUIREMENTS	**5**			
Legal and contractual matters	**5.1**			
Legal responsibility	5.1.1			
Is your certification body a legal entity, or a defined part of a legal entity, such that your certification body can be held legally responsible for all your certification activities?		☐		
Certification agreement	5.1.2			
Does your certification body have a legally enforceable agreement with each client for the provision of certification service in accordance with the relevant requirements of this part of ISO/IEC 17021?		☐		
Where there are multiple offices of your certification body or multiple sites of a client, does your certification body ensure there is a legally enforceable agreement between your certification body granting certification and issuing a certificate, and all the sites covered by the scope of the certification?				
Responsibility for certification decisions	5.1.3			
Is your certification body responsible for, and does your certification body retain authority for the decisions relating to certification, including the granting, refusing, maintaining of certification, expanding or reducing the scope of certification, renewing, suspending or restoring following suspension, or withdrawing of certification?		☐		
Management of impartiality	**5.2**			

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body undertake conformity assessment activities impartially? Is your certification body responsible for the impartiality of your conformity assessment activities? Does your certification body not allow commercial, financial or other pressures to compromise impartiality?	5.2.1	☐		
Does your certification body have top management commitment to impartiality in management system certification activities? Does your certification body have a policy that your certification body understands the importance of impartiality in carrying out your management system certification activities, manages conflict of interest and ensures the objectivity of your management system certification activities?	5.2.2	☐		
Does your certification body have a process to identify, analyse, evaluate, treat, monitor, and document the risks related to conflict of interests arising from provision of certification including any conflicts arising from your relationships on an ongoing basis?	5.2.3	☐		
Where there are any threats to impartiality, does your certification body document and demonstrate how to eliminate or minimise such threats and document any residual risk? Does the demonstration cover all potential threats that are identified, whether they arise from within your certification body or from the activities of other persons, bodies or organisations? When a relationship poses an unacceptable threat to impartiality, will certification not be provided?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does the top management review any residual risk to determine if it is within the level of acceptable risk? Does the risk assessment process include identification of and consultation with appropriate interested parties advising on matters affecting impartiality including openness and public perception? Is the consultation with appropriate interested parties balanced with no single interest predominating?		☐		
Does your certification body not certify another certification body for its quality management system?	5.2.4	☐		
Does your certification body and any part of the same legal entity and any entity under the organisational control of your certification body not offer or provide management system consultancy?	5.2.5	☐		
The carrying out of internal audits by your certification body and any part of the same legal entity to your certified clients is a significant threat to impartiality. Does your certification body and any part of the same legal entity and any entity under the organisational control of your certification body not offer or provide internal audits to your certified clients?	5.2.6	☐		
Does your certification body not certify the management system of a client who has received management systems consultancy from a body that has a relationship with your certification body within two years following the end of the consultancy?	5.2.7	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body not outsource audits to a management system consultancy organisation?	5.2.8	☐		
Are your certification body's activities not marketed or offered as linked with the activities of an organisation that provides management system consultancy? Does your certification body take action to correct inappropriate links or statements by any consultancy organisation stating or implying that certification would be simpler, easier, faster or less expensive if your certification body were used? Does your certification body not state or imply that certification would be simpler, easier, faster or less expensive if a specified consultancy organisation were used?	5.2.9	☐		
Does your certification body not use personnel who have provided management system consultancy, including those acting in a managerial capacity, to take part in an audit or other certification activities if they have been involved in management system consultancy towards the client in question within two years following the end of the consultancy?	5.2.10	☐		
Does your certification body take action to respond to any threats to your certification body's impartiality arising from the actions of other persons, bodies or organisations?	5.2.11	☐		
Do all certification body personnel, either internal or external, or committees, who could influence the certification activities, act impartially? Do your certification body's personnel not allow commercial, financial or other pressures to compromise impartiality?	5.2.12	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body require personnel, internal and external, to reveal any situation known to them that may present them or your certification body with a conflict of interests? Does your certification body record and use this information as input to identifying threats to impartiality raised by the activities of such personnel or by the organisations that employ them? Does your certification body not use such personnel, internal or external, unless they can demonstrate that there is no conflict of interest?	5.2.13	☐		
Liability and financing	**5.3**			
Can your certification body demonstrate that your certification body has evaluated the risks arising from your certification activities and that your certification body has adequate arrangements (e.g. insurance or reserves) to cover liabilities arising from your operations in each of the fields of activities and the geographic areas in which your certification body operates?	5.3.1	☐		
Has your certification body evaluated your certification body's finances and sources of income and demonstrated to the committee specified in Clause 6.2 that initially, and on an ongoing basis, commercial, financial or other pressures do not compromise your certification body's impartiality?	5.3.2	☐		
STRUCTURAL REQUIREMENTS	**6**			
Organisational structure and top management	**6.1**			
Has your certification body documented the organisational structure, showing duties, responsibilities and authorities of management and other certification personnel and any committees? When your certification body is a defined part of a legal entity, does the structure include the line of authority and the relationship to other parts within the same legal entity?	6.1.1	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Are your certification activities structured and managed so as to safeguard impartiality?	6.1.2	☐		
Has your certification body identified the top management (board, group of persons, or person) having overall authority and responsibility for each of the following :	6.1.3			
a) development of policies and establishment of processes and procedures relating to your certification body's operations;		☐		
b) supervision of the implementation of the policies, processes and procedures;		☐		
c) ensuring impartiality;		☐		
d) supervision of your certification body's finances;		☐		
e) development of management system certification services and schemes;		☐		
f) performance of audits and certification, and responsiveness to complaints;		☐		
g) decisions on certification;		☐		
h) delegation of authority to committees or individuals, as required, to undertake defined activities on behalf of your certification body;		☐		
i) contractual arrangements;		☐		
j) provision of adequate resources for certification activities?		☐		
Does your certification body have formal rules for the appointment, terms of reference and operation of any committees that are involved in the certification activities?	6.1.4	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Operational control	**6.2**			
Does your certification body have a process for the effective control of certification activities delivered by branch offices, partnerships, agents, franchisees, etc., irrespective of their legal status, relationship or geographical location?	6.2.1	☐		
Does your certification body consider the risk that the above certification activities pose to the competence, consistency and impartiality of your certification body?				
Does your certification body consider the appropriate level and method of control of activities undertaken including your certification body's processes, technical areas of your certification body's operations, competence of personnel, lines of management control, reporting and remote access to operations including records?	6.2.2	☐		
RESOURCE REQUIREMENTS	**7**			
Competence of personnel	**7.1**			
General considerations	7.1.1			
Does your certification body have processes to ensure that personnel have appropriate knowledge relevant to the types of management systems and geographic areas in which your certification body operates?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Determination of competence criteria Does your certification body have a documented process for determining the competence criteria for personnel involved in the management and performance of audits and certification activities? Are competence criteria determined with regard to the requirements of each type of management system standard or specification, for each technical area, and for each function in the certification process? Is the output of the process the documented criteria of required knowledge and skills necessary to effectively perform audit and certification tasks to be fulfilled to achieve the intended results?	7.1.2	☐		
Evaluation processes Does your certification body have documented processes for the initial competence evaluation, and ongoing monitoring of competence and performance of all personnel involved in the management and performance of audits and other certification activities, applying the determined competence criteria? Does your certification body demonstrate that the evaluation methods are effective? Can the output from these processes identify personnel who have demonstrated the level of competence required for the different functions of the audit and certification process.	7.1.3	☐		
Other consideration Does your certification body have access to the necessary technical expertise for advice on matters directly relating to certification activities for all technical areas, types of management systems and geographic areas in which your certification body operates? Such advice may be provided externally or by certification body personnel.	7.1.4	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Personnel involved in the certification activities	**7.2**			
Does your certification body have sufficient, competent personnel for managing and supporting the type and range of audit programmes and other certification work performed?	7.2.1	☐		
Does your certification body employ, or have access to, a sufficient number of auditors, including audit team leaders, and technical experts to cover all of your certification body's activities and to handle the volume of audit work performed?	7.2.2	☐		
Does your certification body make clear to each person concerned their duties, responsibilities and authorities?	7.2.3	☐		
Does your certification body have processes for selecting, training, formally authorizing auditors and for selecting and familiarizing technical experts used in the certification activity? Does the initial competence evaluation of an auditor include the ability to apply required knowledge and skills during audits, as determined by a competent evaluator observing the auditor conducting an audit?	7.2.4	☐		
Does your certification body have a process to achieve and demonstrate effective auditing, including the use of auditors and audit team leaders possessing generic auditing skills and knowledge, as well as skills and knowledge appropriate for auditing in specific technical areas?	7.2.5	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body ensure that auditors (and, where needed, technical experts) are knowledgeable of your certification body's audit processes, certification requirements and other relevant requirements? Does your certification body give auditors and technical experts access to an up-to-date set of documented procedures giving audit instructions and all relevant information on the certification activities?	7.2.6	☐		
Does your certification body identify training needs and offer or provide access to specific training to ensure your certification body's auditors, technical experts and other personnel involved in certification activities are competent for the functions they perform?	7.2.7	☐		
Does the group or individual that takes the decision on granting, refusing, maintaining, renewing, suspending, restoring, or withdrawing certification, or on expanding or reducing the scope of certification, understand the applicable standard and certification requirements, and have demonstrated competence to evaluate the outcomes of the audit processes including related recommendations of the audit team?	7.2.8	☐		
Does your certification body ensure the satisfactory performance of all personnel involved in the audit and certification activities? Is there a documented process for monitoring competence and performance of all persons involved, based on the frequency of their usage and the level of risk linked to their activities? In particular, does your certification body review and record the competence of your certification body's personnel in the light of their performance in order to identify training needs?	7.2.9	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body monitor each auditor considering each type of management system to which the auditor is deemed competent? Do the documented monitoring procedures for auditors include a combination of on-site observation, review of audit reports and feedback from clients or from the market? Is this monitoring designed in such a way as to minimize disturbance to the normal processes of certification, especially from the client's viewpoint?	7.2.10	☐		
Does your certification body periodically evaluate the performance of each auditor on-site? Is the frequency of on-site evaluations based on need determined from all monitoring information available?	7.2.11	☐		
Use of individual external auditors and external technical experts	**7.3**			
Does your certification body require external auditors and external technical experts to have a written agreement by which they commit themselves to comply with applicable policies and implement processes as defined by your certification body? Does the agreement address aspects relating to confidentiality and impartiality and require the external auditors and external technical experts to notify your certification body of any existing or prior relationship with any organisation they may be assigned to audit?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Personnel records	**7.4**			
Does your certification body maintain up-to-date personnel records, including relevant qualifications, training, experience, affiliations, professional status and competence?		☐		
Does the record include management and administrative personnel in addition to those performing certification activities?				
Outsourcing	**7.5**			
Does your certification body have a process in which your certification body describes the conditions under which outsourcing (which is subcontracting to another organisation to provide part of the certification activities on behalf of your certification body) may take place?	7.5.1	☐		
Does your certification body have a legally enforceable agreement covering the arrangements, including confidentiality and conflict of interests, with each body that provides outsourced services?				
Are decisions for granting, refusing, maintaining of certification, expanding or reducing the scope of certification, renewing, suspending or restoring, or withdrawing of certification not outsourced?	7.5.2	☐		
Does your certification body	7.5.3			
a) take responsibility for all activities outsourced to another body,		☐		
b) ensure that the body that provides outsourced services, and the individuals that it uses, conform to requirements of your certification body and also to the applicable provisions of this part of ISO/IEC 17021, including competence, impartiality and confidentiality, and		☐		
c) ensure that the body that provides outsourced services, and the individuals that it uses, are not involved, either directly or through any other employer, with an organisation to be audited, in such a way that impartiality could be compromised?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body have a process for the approval and monitoring of all bodies that provide outsourced services used for certification activities?	7.5.4	☐		
Does your certification body ensure that records of the competence of all personnel involved in certification activities are maintained?				
INFORMATION REQUIREMENTS	**8**			
Public information	**8.1**			
Does your certification body maintain (through publications, electronic media or other means), and make public, without request, in all the geographical areas in which your certification body operates, information about	8.1.1	☐		
a) audit processes;		☐		
b) processes for granting, refusing, maintaining, renewing, suspending, restoring or withdrawing certification or expanding or reducing the scope of certification;		☐		
c) types of management systems and certification schemes in which your certification body operates;		☐		
d) the use of your certification body's name and certification mark or logo;		☐		
e) processes for handling requests for information, complaints and appeals; and		☐		
f) policy on impartiality?		☐		
Does your certification body provide upon request information about	8.1.2	☐		
a) geographical areas in which your certification body operates;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
b) the status of a given certification; and		☐		
c) the name, related normative document, scope and geographical location (city and country) for a specific certified client?		☐		
Is information provided by your certification body to any client or to the marketplace, including advertising, accurate and not misleading?	8.1.3	☐		
Certification documents	**8.2**			
Does your certification body provide by any means your certification body chooses certification documents to the certified client?	8.2.1	☐		
Does the certification document(s) identify the following :	8.2.2			
a) the name and geographical location of each certified client (or the geographical location of the headquarters and any sites within the scope of a multi-site certification);		☐		
b) the effective date of granting, expanding or reducing the scope of certification, or renewing certification; is such datenot before the date of the relevant certification decision?		☐		
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c) the expiry date or recertification due date consistent with the recertification cycle;		☐		
d) a unique identification code;		☐		
e) the management system standard and/or other normative document, including indication of issue status (e.g. revision date or number) used for audit of the certified client;		☐		
f) the scope of certification with respect to the type of activities, products and services as applicable at each site without being misleading or ambiguous;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
g) the name, address and certification mark of your certification body; other marks (e.g. accreditation symbol, client's logo) may be used provided they are not misleading or ambiguous;		☐		
h) any other information required by the standard and/or other normative document used for certification; and		☐		
i) in the event of issuing any revised certification documents, a means to distinguish the revised documents from any prior obsolete documents?		☐		
Reference to certification and use of marks	**8.3**			
Does your certification body have rules governing any management systems' third party mark that it authorizes certified clients to use?	8.3.1	☐		
Do these rules ensure, among other things, traceability back to your certification body?				
Is there any ambiguity, in the mark or accompanying text, as to what has been certified and which certification body has granted the certification?				
Is this mark not used on a product or product packaging or in any other way that may be interpreted as denoting product conformity?				
Does your certification body not permit your certification body's marks to be applied to laboratory test, calibration or inspection reports or certificates?	8.3.2	☐		
Does your certification body have rules governing the use of any statement on product packaging or in accompanying information that the certified client has a certified management system?	8.3.3	☐		
Does your certification body through legally enforceable arrangements require that the certified client:	8.3.4			

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
a) conforms to the requirements of your certification body when making reference to its certification status in communication media such as the internet, brochures or advertising, or other documents;		☐		
b) does not make or permit any misleading statement regarding its certification;		☐		
c) does not use or permit the use of a certification document or any part thereof in a misleading manner;		☐		
d) upon withdrawal of its certification, discontinues its use of all advertising matter that contains a reference to certification, as directed by your certification body (see Clause 9.6.5);		☐		
e) amends all advertising matter when the scope of certification has been reduced;		☐		
f) does not allow reference to its management system certification to be used in such a way as to imply that your certification body certifies a product (including service) or process;		☐		
g) does not imply that the certification applies to activities that are outside the scope of certification; and		☐		
h) does not use its certification in such a manner that would bring your certification body and/or certification system into disrepute and lose public trust?		☐		
Does your certification body exercise proper control of ownership and take action to deal with incorrect references to certification status or misleading use of certification documents, marks or audit reports?	8.3.5	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Confidentiality	**8.4**			
Is your certification body responsible, through legally enforceable agreements, for the management of all information obtained or created during the performance of certification activities at all levels of your certification body's structure, including committees and external bodies or individuals acting on behalf of your certification body?	8.4.1	☐		
Does your certification body inform the client, in advance, of the information your certification body intends to place in the public domain? Is all other information, except for information that is made publicly accessible by the client, considered confidential?	8.4.2	☐		
Except as required in ISO/IEC 17021, is information about a particular certified client or individual not disclosed to a third party without the written consent of the certified client or individual concerned?	8.4.3	☐		
When your certification body is required by law or authorized by contractual arrangements (such as with the accreditation body) to release confidential information, will the client or individual concerned, unless prohibited by law, be notified of the information provided?	8.4.4	☐		
Is information about the client from sources other than the client (e.g. complainant, regulators) treated as confidential, consistent with your certification body's policy?	8.4.5	☐		
Do personnel, including any committee members, contractors, personnel of external bodies or individuals acting on your certification body's behalf, keep confidential all information obtained or created during the performance of your certification body's activities except as required by law?	8.4.6	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body have processes, and where applicable, equipment and facilities that ensure the secure handling of confidential information?	8.4.7	☐		
Information exchange between a certification body and its clients	**8.5**			
Information on the certification activity and requirements	8.5.1			
Does your certification body provide and update clients on the following:				
a) a detailed description of the initial and continuing certification activity, including the application, initial audits, surveillance audits, and the process for granting, refusing, maintaining of certification, expanding or reducing the scope of certification, renewing, suspending or restoring, or withdrawing of certification;		☐		
b) the normative requirements for certification;		☐		
c) information about the fees for application, initial certification and continuing certification;		☐		
d) your certification body's requirements for clients to:		☐		
1) comply with certification requirements;		☐		
2) make all necessary arrangements for the conduct of the audits, including provision for examining documentation and the access to all processes and areas, records and personnel for the purposes of initial certification, surveillance, recertification and resolution of complaints; and		☐		
3) make provisions, where applicable, to accommodate the presence of observers (e.g. accreditation assessors or trainee auditor);		☐		
e) documents describing the rights and duties of certified clients, including requirements, when making reference to its certification in communication of any kind in line with the requirements in Clause 8.3; and		☐		
f) information on processes for handling complaints and appeals?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Notice of changes by a certification body	8.5.2			
Does your certification body give your certified clients due notice of any changes to your certification body's requirements for certification?		☐		
Does your certification body verify that each certified client complies with the new requirements?				
Notice of changes by a certified client	8.5.3			
Does your certification body have legally enforceable arrangements to ensure that the certified client informs your certification body, without delay, of matters that may affect the capability of the management system to continue to fulfil the requirements of the standard used for certification? These include, for example, changes relating to:		☐		
a) the legal, commercial, organisational status or ownership;		☐		
b) organisation and management (e.g. key managerial, decision-making or technical staff);		☐		
c) contact address and sites;		☐		
d) scope of operations under the certified management system; and		☐		
e) major changes to the management system and processes?		☐		
Does your certification body take action as appropriate?		☐		
PROCESS REQUIREMENTS	**9**			
Pre-certification activities	**9.1**			
Application	9.1.1			
Does your certification body require an authorized representative of the applicant organisation to provide the necessary information to enable it to establish the following:		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
a) the desired scope of the certification;		☐		
b) relevant details of the applicant organisation as required by the specific certification scheme, including its name and the address(es) of its site(s), its processes and operations, human and technical resources, functions, relationships and any relevant legal obligations;		☐		
c) identification of outsourced processes used by the organisation that will affect conformity to requirements;		☐		
d) the standards or other requirements for which the applicant organisation is seeking certification; and		☐		
e) whether consultancy relating to the management system to be certified has been provided and, if so, by whom?		☐		
Application review	9.1.2			
Does your certification body conduct a review of the application and supplementary information for certification to ensure that:	9.1.2.1			
a) the information about the applicant organisation and its management system is sufficient to develop an audit programme (see Clause 9.1.3);		☐		
b) any known difference in understanding between your certification body and the applicant organisation is resolved;		☐		
c) your certification body has the competence and ability to perform the certification activity; and		☐		
d) the scope of certification sought, the site(s) of the applicant organisation's operations, time required to complete audits and any other points influencing the certification activity are taken into account (language, safety conditions, threats to impartiality, etc.).		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Following the review of the application, does your certification body either accept or decline an application for certification?	9.1.2.2	☐		
When your certification body declines an application for certification as a result of the review of application, are the reasons for declining an application documented and made clear to the client?				
Based on this review, does your certification body determine the competences your certification body needs to include in the audit team and for the certification decision?	9.1.2.3	☐		
Audit programme	9.1.3			
Is an audit programme for the full certification cycle developed to clearly identify the audit activity/activities required to demonstrate that the client's management system fulfils the requirements for certification to the selected standard(s) or other normative document(s)?	9.1.3.1	☐		
Does the audit programme for the certification cycle cover the complete management system requirements?				
Does the audit programme for the initial certification include a two-stage initial audit, surveillance audits in the first and second years following the certification decision, and a recertification audit in the third year prior to expiration of certification?	9.1.3.2	☐		
Does the first three-year certification cycle begin with the certification decision?				
Do subsequent cycles begin with the recertification decision (see Clause 9.6.3.2.3)?				
Does the determination of the audit programme and any subsequent adjustments consider the size of the client, the scope and complexity of its management system, products and processes as well as demonstrated level of management system effectiveness and the results of any previous audits?				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Are surveillance audits conducted at least once a calendar year, except in recertification years? Is the date of the first surveillance audit following initial certification not more than 12 months from the certification decision date?	9.1.3.3	☐		
Where your certification body is taking account of certification already granted to the client and to audits performed by another certification body, does your certification body obtain and retain sufficient evidence, such as reports and documentation on corrective actions, to any nonconformity? Does the documentation support the fulfilling of the requirements in this part of ISO/IEC 17021. Does your certification body, based on the information obtained, justify and record any adjustments to the existing audit programme and follow up the implementation of corrective actions concerning previous nonconformities?	9.1.3.4	☐		
Where the client operates shifts, are the activities that take place during shift working considered when developing the audit programme and audit plans?	9.1.3.5	☐		
Determining audit time	9.1.4			
Does your certification body have documented procedures for determining audit time? For each client, does your certification body determine the time needed to plan and accomplish a complete and effective audit of the client's management system?	9.1.4.1	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
In determining the audit time, does your certification body consider, among other things, the following aspects:	9.1.4.2			
a) the requirement of the relevant management system standards;		☐		
b) complexity of the client and its management system;		☐		
c) technological and regulatory context;		☐		
d) any outsourcing of any activities included in the scope of the management system;		☐		
e) results of any prior audits;		☐		
f) size and number of sites, their geographical locations and multi-site considerations;		☐		
g) the risks associated with the products, processes or activities of the organisation;		☐		
h) when audits are combined, joint or integrated?		☐		
Are the duration of the management system audit and its justification recorded?	9.1.4.3	☐		
Is the time spent by any team member that is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and auditors-in-training) not counted in the above established duration of the management system audit?	9.1.4.4	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Multi-site sampling				
Where multi-site sampling is used for the audit of a client's management system covering the same activity in various geographical locations, does your certification body develop a sampling programme to ensure proper audit of the management system?	9.1.5	☐		
Is the rationale for the sampling plan documented for each client?				
Sampling is not allowed for some specific certification schemes, and where specific criteria have been established for a specific certification scheme, e.g. ISO/TS 22003, are these applied?				
Multiple management systems standards	9.1.6	☐		
When certification to multiple management system standards is being provided by your certification body, does the planning for the audit ensure adequate on-site auditing to provide confidence in the certification?				
Planning audits	**9.2**			
Determining audit objectives, scope and criteria	9.2.1			
Are the audit objectives determined by your certification body?	9.2.1.1	☐		
Are the audit scope and criteria, including any changes, established by your certification body after discussion with the client?				
Do the audit objectives describe what is to be accomplished by the audit and include the following:	9.2.1.2	☐		
a) determination of the conformity of the client's management system, or parts of it, with audit criteria;		☐		
b) evaluation of the ability of the management system to ensure the client organisation meets applicable statutory, regulatory and contractual requirements;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
c) determination of the effectiveness of the management system to ensure the client can reasonably expect to achieving its specified objectives; and		☐		
d) as applicable, identification of areas for potential improvement of the management system?		☐		
Does the audit scope describe the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited?	9.2.1.3	☐		
Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit may not cover the full certification scope, is the totality of audits consistent with the scope in the certification document.				
Are the audit criteria used as a reference against which conformity is determined and include:	9.2.1.4			
- the requirements of a defined normative document on management systems; and		☐		
- the defined processes and documentation of the management system developed by the client?		☐		
Audit team selection and assignments	9.2.2			
General	9.2.2.1.1	☐		
Does your certification body have a process for selecting and appointing the audit team, including the audit team leader and technical experts as necessary, taking into account the competence needed to achieve the objectives of the audit and requirements for impartiality?				
If there is only one auditor, does the auditor have the competence to perform the duties of an audit team leader applicable for that audit?				
Does the audit team have the totality of the competences identified by your certification body as set out in Clause 9.1.2.3 for the audit?				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
In deciding the size and composition of the audit team, is consideration given to the following:	9.2.2.1.2			
a) audit objectives, scope, criteria and estimated audit time;		☐		
b) whether the audit is a combined, joint or integrated;		☐		
c) the overall competence of the audit team needed to achieve the objective of the audit (see Table A.1 of ISO/IEC 17021-1:2015);		☐		
d) certification requirements (including any applicable statutory, regulatory or contractual requirements);		☐		
e) language and culture;		☐		
Do technical experts, translators and interpreters who supplement the necessary knowledge and skills of the audit team leader and auditors operate under the direction of an auditor? Where translators or interpreters are used, are they selected such that they do not unduly influence the audit?	9.2.2.1.3	☐		
When an auditor-in-training participates in the audit, is an auditor appointed as an evaluator? Is the evaluator competent to take over the duties and have final responsibility for the activities and findings of the auditor-in-training?	9.2.2.1.4	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does the audit team leader, in consultation with the audit team, assign to each team member responsibility for auditing specific processes, functions, sites, areas or activities?	9.2.2.1.5	☐		
Do such assignments take into account the need for competence, and the effective and efficient use of the audit team, as well as different roles and responsibilities of auditors, auditors-in-training and technical experts?				
Are changes to the work assignments made as the audit progresses to ensure achievement of the audit objectives?				
Observers, technical experts and guides	9.2.2.2			
Observers	9.2.2.2.1	☐		
Is the presence and justification of observers during an audit activity agreed to by your certification body and client prior to the conduct of the audit?				
Does the audit team ensure that observers do not unduly influence or interfere in the audit process or outcome of the audit?				
Technical experts	9.2.2.2.2	☐		
Is the role of each technical expert during an audit activity agreed to by your certification body and client prior to the conduct of the audit?				
Does a technical expert not act as an auditor in the audit team?				
Is the technical expert accompanied by an auditor?				
Guides	9.2.2.2.3	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Is each auditor accompanied by a guide, unless otherwise agreed to by the audit team leader and the client? Are guide(s) assigned to the audit team to facilitate the audit? Does the audit team ensure that guides do not influence or interfere in the audit process or outcome of the audit?				
Audit plan	9.2.3			
General	9.2.3.1	☐		
Does your certification body ensure that an audit plan is established prior to each audit identified in the audit programme to provide the basis for agreement regarding the conduct and scheduling of the audit activities?				
Preparing the audit plan	9.2.3.2			
Is the audit plan appropriate to the objectives and the scope of the audit?		☐		
Does the audit plan at least include or refer to the following:				
a) the audit objectives;		☐		
b) the audit criteria;		☐		
c) the audit scope, including identification of the organisational and functional units or process to be audited;		☐		
d) the dates and sites where the on-site audit activities are to be conducted, including visits to temporary sites, as appropriate;		☐		
e) the expected time and duration of on-site audit activities;		☐		
f) the roles and responsibilities of the audit team members and accompanying persons?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Communication of audit team tasks	9.2.3.3			
Are the tasks given to the audit team defined?		☐		
Does your certification body require the audit team to:				
a) examine and verify the structure, policies, processes, procedures, records and related documents of the client relevant to the management system standard;		☐		
b) determine that these meet all the requirements relevant to the intended scope of certification;		☐		
c) determine that the processes and procedures are established, implemented and maintained effectively, to provide a basis for confidence in the client's management system; and		☐		
d) communicate to the client, for its action, any inconsistencies between the client's policy, objectives and targets?		☐		
Communication of audit plan	9.2.3.4			
Is the audit plan communicated and the dates of the audit agreed upon, in advance, with the client organisation?		☐		
Communication concerning audit team members	9.2.3.5			
Does your certification body provide the name of and, when requested, make available background information on each member of the audit team, with sufficient time for the client organisation to object to the appointment of any particular auditor or technical expert and for your certification body to reconstitute the team in response to any valid objection?		☐		
Initial certification	**9.3**			
Initial certification audit	**9.3.1**			
General	9.3.1.1	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Is the initial certification audit of a management system conducted in two stages: stage 1 and stage 2?				
Stage 1	9.3.1.2			
Does planning ensure that the objectives of stage 1 can be met and the client be informed of any “on site” activities during stage 1?	9.3.1.2.1	☐		
Are the objectives of stage 1 to:	9.3.1.2.2			
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; and		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
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?		☐		
Are documented conclusions with regard to fulfilment of the stage 1 objectives and the readiness for stage 2 communicated to the client, including identification of any areas of concern that could be classified as a nonconformity during stage 2?	9.3.1.2.3	☐		
In determining the interval between stage 1 and stage 2, is consideration given to the needs of the client to resolve areas of concern identified during stage 1? Your certification body may also need to revise its arrangements for stage 2. If any significant changes which would impact the management system occur, does your certification body consider the need to repeat all or part of stage 1? Is the client informed that the results of stage 1 may lead to postponement or cancellation of stage 2?	9.3.1.2.4	☐		
Stage 2 The purpose of stage 2 is to evaluate the implementation, including effectiveness, of the client's management system. Does the stage 2 take place at the site(s) of the client and include the auditing of at least the following:	9.3.1.3			
a) information and evidence about conformity to all requirements of the applicable management system standard or other normative documents;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
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 ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements;		☐		
d) operational control of the client's processes;		☐		
e) internal auditing and management review; and		☐		
f) management responsibility for the client's policies?		☐		
Initial certification audit conclusions	9.3.1.4	☐		
Does the audit team analyse all information and audit evidence gathered during stage 1 and stage 2 to review the audit findings and agree on the audit conclusions?				
Conducting audits	**9.4**			
General	9.4.1			
Does your certification body have a process for conducting on-site audits?		☐		
Does this process include an opening meeting at the start of the audit and a closing meeting at the conclusion of the audit?				
Where any part of the audit is made by electronic means or where the site to be audited is virtual, does your certification body ensure that such activities are conducted by personnel with appropriate competence?		☐		
Is the evidence obtained during such an audit sufficient to enable the auditor to take an informed decision on the conformity of the requirement in question?				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Conducting the opening meeting	9.4.2			
Is a formal opening meeting held with the client's management and, where appropriate, those responsible for the functions or processes to be audited?		☐		
Is the opening meeting which is to provide a short explanation of how the audit activities will be undertaken usually conducted by the audit team leader?				
Is the degree of details consistent with the familiarity of the client with the audit process?				
Does the opening meeting include the following:				
a) introduction of the participants, including an outline of their roles;		☐		
b) confirmation of the scope of certification;		☐		
c) confirmation of the audit plan (including type and scope of audit, objectives and criteria), any changes, and other relevant arrangements with the client, such as the date and time for the closing meeting, interim meeting between the audit team and the client's management;		☐		
d) confirmation of formal communication channels between the audit team and the client;		☐		
e) confirmation that the resources and facilities needed by the audit team are available;		☐		
f) confirmation of matters relating to confidentiality;		☐		
g) confirmation of relevant work safety, emergency and security procedures for the audit team;		☐		
h) confirmation of the availability, roles and identifies of any guides and observers;		☐		
i) the method of reporting, including any grading of audit findings;		☐		
j) information about the conditions under which the audit may be prematurely terminated;		☐		
k) confirmation that the audit team leader and audit team representing your certification body are responsible for the audit and in control of executing the audit plan including audit activities and audit trails;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
l) confirmation of the status of findings of the previous review or audit, if applicable;		☐		
m) methods and procedures to be used to conduct the audit based on sampling;		☐		
n) confirmation of the language to be used during the audit;		☐		
o) confirmation that, during the audit, the client will be kept informed of audit progress and any concerns; and		☐		
p) opportunity for the client to ask questions?		☐		
Communication during the audit	9.4.3			
During the audit, does the audit team periodically assess audit progress and exchange information?	9.4.3.1	☐		
Does the audit team leader reassign work as needed between the audit team members and periodically communicate the progress of the audit and any concerns to the client?				
Where the available audit evidence indicates that the audit objectives are unattainable or suggests the presence of an immediate and significant risk (e.g. safety), does the audit team leader report this to the client, if possible, to your certification body to determine appropriate action?	9.4.3.2	☐		
Does such action include reconfirmation or modification of the audit plan, changes to the audit objectives or audit scope, or termination of the audit?				
Does the audit team leader report the outcome of the action taken to your certification body?				
Does the audit team leader review with the client any need for changes to the audit scope which becomes apparent as on-site auditing activities progress and report this to your certification body?	9.4.3.3	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Obtaining and verifying information	9.4.4			
During the audit, does the auditor of your certification body collect information relevant to the audit objectives, scope and criteria (including information relating to interfaces between functions, activities and processes) by appropriate sampling and verified to become audit evidence?	9.4.4.1	☐		
Does the auditor of your certification body use methods to collect information include, but not limited to:	9.4.4.2	☐		
a) interviews;		☐		
b) observation of processes and activities;		☐		
c) review of documentation and records?		☐		
Identifying and recording audit findings	9.4.5			
Are the audit findings summarizing conformity and detailing nonconformity identified, classified and recorded to enable an informed certification decision to be made or the certification to be maintained?	9.4.5.1	☐		
Opportunities for improvement may be identified and recorded, unless prohibited by the requirements of a management system certification scheme. Are audit findings, which are nonconformities, not recorded as opportunities for improvement?	9.4.5.2	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Is each finding of nonconformity recorded against a specific requirement and does it contain a clear statement of the nonconformity and identify in detail the objective evidence on which the nonconformity is based? Are nonconformities discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood? Does the auditor refrain from suggesting the cause of nonconformities or their solution?	9.4.5.3	☐		
Does the audit team leader attempt to resolve any diverging opinions between the audit team and the client concerning audit evidence or findings and are unresolved points recorded?	9.4.5.4	☐		
Preparing audit conclusions	9.4.6			
Under the responsibility of the audit team leader and prior to the closing meeting, does the audit team:		☐		
a) review the audit findings, and any other appropriate information obtained during the audit, against the audit objectives and audit criteria and classify the nonconformities;		☐		
b) agree upon the audit conclusions, taking into account the uncertainty inherent in the audit process;		☐		
c) identify any necessary follow-up actions; and		☐		
d) confirm the appropriateness of the audit programme or identify any modification required for future audits (e.g. scope of certification, audit time or dates, surveillance frequency, audit team competence)?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Conducting the closing meeting	9.4.7			
Does the audit team of your certification body hold a formal closing meeting with the client's management and, where appropriate, those responsible for the functions or process audited?	9.4.7.1	☐		
Is attendance of the closing meeting recorded?				
Is the closing meeting, which is to present the audit conclusions, including the recommendation regarding certification, normally conducted by the audit team leader?				
Are all nonconformities presented in such a manner that they are understood?				
Is the timeframe for responding agreed with the client?				
	9.4.7.2	☐		
Does the closing meeting include the following elements and is the degree of detail consistent with the familiarity of the client with the audit process?				
a) advising the client that the audit evidence collected was based on a sample of the information; thereby introducing an element of uncertainty;		☐		
b) the method and timeframe of reporting, including any grading of audit findings;		☐		
c) your certification body's process for handling nonconformities including any consequences relating to the status of the client's certification;		☐		
d) the timeframe for the client to present a plan for correction and corrective action for any nonconformities identified during the audit;		☐		
e) your certification body's post audit activities;		☐		
f) information about the complaint handling and appeal processes?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does the audit team of your certification body give the client opportunity for questions?	9.4.7.3	☐		
Are any diverging opinions regarding the audit findings or conclusions between the audit team and the client discussed and resolved where possible?				
Are diverging opinions that are not resolved recorded and referred to your certification body?				
Audit report	9.4.8			
Does your certification body provide a written report for each audit to the client?	9.4.8.1	☐		
Does the audit team identify opportunities for improvement butnot recommend specific solutions?				
Is the ownership of the audit report maintained by your certification body?				
Does the audit team leader ensure that the audit report is prepared and is he/she responsible for the report's content?	9.4.8.2	☐		
Does the audit report provide an accurate, concise and clear record of the audit to enable an informed certification decision to be made and include or refer to following:				
a) identification of your certification body;		☐		
b) the name and address of the client and the client's management representative;		☐		
c) the type of audit (e.g. initial, surveillance or recertification audit or special audits);		☐		
d) the audit criteria;		☐		
e) the audit objectives;		☐		
f) the audit scope, particularly identification of the organisation or functional units or processes audited and the time of the audit;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
g) and deviation from the audit plan and their reasons;		☐		
h) any significant issues impacting on the audit programme;		☐		
i) identification of the audit team leader, audit team members and any accompanying persons;		☐		
j) the dates and places where the audit activities (on site or offsite, permanent or temporary sites) were conducted;		☐		
k) audit findings (see Clause 9.4.5), reference to evidence and conclusions, consistent with the requirements of the type of audit;		☐		
l) significant changes, if any, that affect the management system of the client since the last audit took place;		☐		
m) any unresolved issues, if identified;		☐		
n) where applicable, whether the audit is combined, joint or integrated;		☐		
o) a disclaimer statement indicating that auditing is based on a sampling process of the available information;		☐		
p) recommendation from the audit team;		☐		
q) the audited client is effectively controlling the use of the certification documents and marks, if applicable; and		☐		
r) verification of effectiveness of taken corrective actions regarding previously identified nonconformities, if applicable.		☐		
Does the report contain:	9.4.8.3	☐		
a) a statement on the conformity and the effectiveness of the management system together with a summary of the evidence relating to:				
- the capability of the management system to meet applicable requirements and expected outcomes;				
- the internal audit and management review process;				
b) a conclusion on the appropriateness of the certification scope; and				
c) confirmation that the audit objectives have been fulfilled?				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Cause analysis of nonconformities Does your certification body require the client to analyse the cause and describe the specific correction and corrective actions taken, or planned to be taken, to eliminate detected nonconformities, within a defined time?	9.4.9	☐		
Effectiveness of corrections and corrective actions Does your certification body review the corrections, identified causes and corrective actions submitted by the client to determine if these are acceptable? Does your certification body verify the effectiveness of any correction and corrective actions taken? Is the evidence obtained to support the resolution of nonconformities recorded? Is the client informed of the result of the review and verification? Is the client informed of an additional full audit, an additional limited audit, or documented evidence (to be confirmed during future audits) will be needed to verify effective correction and corrective actions?	9.4.10	☐		
Certification decision	9.5			
General	9.5.1			
Does your certification body ensure that the persons or committees that make the decisions for granting certification, expanding or reducing the scope of certification, suspending or restoring certification, withdrawing certification or renewing certification are different from those who carried out the audits? Does the individual(s) appointed to conduct the certification decision have appropriate competence?	9.5.1.1	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Is/Are the person(s) [excluding members of committees (see Clause 6.1.4)] assigned by your certification body to make a certification decision employed by, or under legally enforceable arrangement with either your certification body or an entity under the organisational control of your certification body?	9.5.1.2	☐		
Is your certification body's organisational control one of the following:				
a) whole or majority ownership of another entity by your certification body;		☐		
b) majority participation by your certification body on the board of directors of another entity; and		☐		
c) a documented authority by your certification body over another entity in a network of legal entities (in which your certification body resides), linked by ownership or board of director control?		☐		
Do the persons employed by, or under contract with, entities under organisational control fulfil the same requirements of this part of ISO/IEC 17021 as persons employed by, or under contract with, your certification body?	9.5.1.3	☐		
Does your certification body record each certification decision including any additional information or clarification sought from the audit team or other sources?	9.5.1.4	☐		
Actions prior to making a decision	9.5.2			
Does your certification body have a process to conduct an effective review prior to making a decision for granting certification, expanding or reducing the scope of certification, renewing, suspending or restoring, or withdrawing of certification, including, that		☐		
a) the information provided by the audit team is sufficient with respect to the certification requirements and the scope for certification;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
b) for any major nonconformities, it has reviewed, accepted and verified the correction and corrective actions; and		☐		
c) for any minor nonconformities it has reviewed and accepted the client's plan for correction and corrective action?		☐		
Information for granting initial certification	9.5.3			
Does the information provided by the audit team to your certification body for the certification decision include, as a minimum,	9.5.3.1	☐		
a) the audit report;		☐		
b) comments on the nonconformities and, where applicable, the correction and corrective actions taken by the client;		☐		
c) confirmation of the information provided to your certification body used in the application review (see Clause 9.1.2);		☐		
d) confirmation that the audit objectives have been achieved; and		☐		
e) a recommendation whether or not to grant certification, together with any conditions or observations?		☐		
If your certification body is not able to verify the implementation of corrections and corrective actions of any major nonconformity within 6 months after the last day of stage 2, does your certification body conduct another stage 2 prior to recommending certification?	9.5.3.2	☐		
When a transfer of certification is envisaged from one certification body to another, does the accepting certification body have a process for obtaining sufficient information in order to take a decision on certification?	9.5.3.3	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Information for granting recertification	9.5.4			
Does your certification body make decisions on renewing certification based on the results of the recertification audit, as well as the results of the review of the system over the period of certification and complaints received from users of certification?		☐		
Maintaining certification	**9.6**			
General	9.6.1			
Does your certification body maintain certification based on demonstration that the client continues to satisfy the requirements of the management system standard?		☐		
Does your certification body maintain a client's certification based on a positive conclusion by the audit team leader without further independent review, provided that				
a) for any major nonconformity or other situation that may lead to suspension or withdrawal of certification, your certification body has a system that requires the audit team leader to report to your certification body the need to initiate a review by competent personnel (see Clause 7.2.8), different from those who carried out the audit, to determine whether certification can be maintained; and		☐		
b) competent personnel of your certification body monitor the surveillance activities, including monitoring the reporting by your auditors, to confirm that the certification activity is operating effectively?		☐		
Surveillance activities	9.6.2			
General	9.6.2.1			
Does your certification body develop the surveillance activities so that representative areas and functions covered by the scope of the management system are monitored on a regular basis, and take into account changes to your certified client and its management system?	9.6.2.1.1	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Do surveillance activities include on-site audits assessing the certified client's management system's fulfilment of specified requirements with respect to the standard to which the certification is granted?	9.6.2.1.2	☐		
Do other surveillance activities include				
a) enquiries from your certification body to the certified client on aspects of certification,		☐		
b) reviewing any client's statement with respect to its operations (e.g. promotional material, website),		☐		
c) requests to the client to provide documents and records (on paper or electronic media), and		☐		
d) other means of monitoring the certified client's performance.		☐		
Surveillance audit	9.6.2.2			
Are surveillance audits, which are on-site audits but are not necessarily full system audits, planned together with the other surveillance activities so that your certification body can maintain confidence that the certified management system continues to fulfil requirements between recertification audits?		☐		
Does each surveillance for the relevant management system standard include:				
a) internal audits and management review;		☐		
b) a review of actions taken on nonconformities identified during the previous audit;		☐		
c) complaints handling;		☐		
d) effectiveness of the management system with regard to achieving the certified client's objectives and the intended results of the respective management system(s);		☐		
e) progress of planned activities aimed at continual improvement;		☐		
f) continuing operational control;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
g) review of any changes; and		☐		
h) use of marks and/or any other reference to certification?		☐		
Recertification	**9.6.3**			
Recertification audit planning	9.6.3.1			
The purpose of the recertification audit is to confirm the continued conformity and effectiveness of the management system as a whole, and its continued relevance and applicability for the scope of certification. Is each recertification audit planned and conducted to evaluate the continued fulfilment of all of the requirements of the relevant management system standard or other normative document?	9.6.3.1.1	☐		
Is each recertification audit planned and conducted in due time to enable for timely renewal before the certificate expiry date?				
Does your recertification audit include the review of previous surveillance audit reports and consider the performance of the management system over the most recent certification cycle?	9.6.3.1.2	☐		
Will recertification 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)?	9.6.3.1.3	☐		
Recertification audit	9.6.3.2			
Does the recertification audit include an on-site audit that addresses the following:	9.6.3.2.1	☐		
a) the effectiveness of the management system in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification; and		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
b) demonstrated commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance;		☐		
c) the effectiveness of the management system with regard to achieving the certified client's objectives and the intended results of the respective management system(s)?		☐		
For any major nonconformity, does your certification body define time limits for corrections and corrective actions. Are these actions implemented and verified prior to the expiration of certification?	9.6.3.2.2	☐		
When recertification activities are successfully completed prior to the expiry date of the existing certification, is the expiry date of the new certification based on the expiry date of the existing certification? Is the issue date on a new certificate on or after the recertification decision?	9.6.3.2.3	☐		
If your certification body has not completed the recertification audit or your certification body is unable to verify the implementation of corrections and corrective actions for any major nonconformity (see Clause 9.5.2.1) prior to the expiry date of the certification, is recertification not recommended and is the validity of the certification not extended? Is the client informed and the consequences explained?	9.6.3.2.4	☐		
Following expiration of certification, can your certification body restore certification within 6 months provided that the outstanding recertification activities are completed? Otherwise, will at least a stage 2 audit be conducted? Is the effective date on the certificate on or after the recertification decision and is the expiry date based on prior certification cycle?	9.6.3.2.5	☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Special audits	9.6.4			
Expanding scope	9.6.4.1			
Does your certification body, in response to an application for expanding the scope of a certification already granted, undertake a review of the application and determine any audit activities necessary to decide whether or not the extension may be granted?		☐		
Short-notice audits	9.6.4.2			
Is it necessary for your certification body to conduct audits of certified clients at short notice or unannounced to investigate complaints, or in response to changes, or as follow up on suspended clients? In such cases:		☐		
a) does your certification body describe and make known in advance to the certified clients (e.g. in documents as described in 8.5.1) the conditions under which such audits will be conducted, and		☐		
b) does your certification body exercise additional care in the assignment of the audit team because of the lack of opportunity for the client to object to audit team members?		☐		
Suspending, withdrawing or reducing the scope of certification	9.6.5			
Does your certification body have a policy and documented procedure(s) for suspension, withdrawal or reduction of the scope of certification, and specify the subsequent actions by your certification body?	9.6.5.1	☐		
Does your certification body suspend certification in cases when, for example,	9.6.5.2	☐		
- the client's certified management system has persistently or seriously failed to meet certification requirements, including requirements for the effectiveness of the management system;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
- the certified client does not allow surveillance or recertification audits to be conducted at the required frequencies; or		☐		
- the certified client has voluntarily requested a suspension?		☐		
Under suspension, is the client's management system certification temporarily invalid?	9.6.5.3	☐		
Does your certification body restore the suspended certification if the issue that has resulted in the suspension has been resolved?	9.6.5.4	☐		
Does failure to resolve the issues that have resulted in the suspension in a time established by your certification body result in withdrawal or reduction of the scope of certification?				
Does your certification body reduce the scope of certification to exclude the parts not meeting the requirements, when the certified client has persistently or seriously failed to meet the certification requirements for those parts of the scope of certification?	9.6.5.5	☐		
Is any such reduction in line with the requirements of the management system standard used for certification?				
Appeals	**9.7**			
Does your certification body have a documented process to receive, evaluate and make decisions on appeals?	9.7.1	☐		
Is your certification body responsible for all decisions at all levels of the appeals-handling process?	9.7.2	☐		
Does your certification body ensure that the persons engaged in the appeals-handling process are different from those who carried out the audits and made the certification decisions?				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Do submission, investigation and decision on appeals not result in any discriminatory actions against the appellant?	9.7.3	☐		
Does the appeals-handling process include at least the following elements and methods:	9.7.4	☐		
a) an outline of the process for receiving, validating and investigating the appeal, and for deciding what actions need to be taken in response to it, taking into account the results of previous similar appeals;		☐		
b) tracking and recording appeals, including actions undertaken to resolve them; and		☐		
c) ensuring that any appropriate correction and corrective action are taken?		☐		
Is your certification body receiving the appeal responsible for gathering and verifying all necessary information to validate the appeal?	9.7.5	☐		
Does your certification body acknowledge receipt of the appeal and provide the appellant with progress reports and the result of the appeal?	9.7.6	☐		
Is the decision to be communicated to the appellant made by, or reviewed and approved by, individual(s) not previously involved in the subject of the appeal?	9.7.7	☐		
Does your certification body give formal notice to the appellant of the end of the appeals-handling process?	9.7.8	☐		
Complaints	**9.8**			

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Is your certification body responsible for all decisions at all levels of the complaints-handling process?	9.8.1	☐		
Do submission, investigation and decision on complaints not result in any discriminatory actions against the complainant?	9.8.2	☐		
Upon receipt of a complaint, does your certification body confirm whether the complaint relates to certification activities that your certification body is responsible for and, if so, does your certification body deal with it? If the complaint relates to a certified client, then does examination of the complaint consider the effectiveness of the certified management system?	9.8.3	☐		
Is any valid complaint about a certified client referred by your certification body to the certified client in question at an appropriate time?	9.8.4	☐		
Does your certification body have a documented process to receive, evaluate and make decisions on complaints? Is this process subject to requirements for confidentiality, as it relates to the complainant and to the subject of the complaint?	9.8.5	☐		
Does the complaints-handling process include at least the following elements and methods:	9.8.6	☐		
a) an outline of the process for receiving, validating, investigating the complaint, and for deciding what actions need to be taken in response to it;		☐		
b) tracking and recording complaints, including actions undertaken in response to them;		☐		
c) ensuring that any appropriate correction and corrective action are taken?		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Is your certification body receiving the complaint responsible for gathering and verifying all necessary information to validate the complaint?	9.8.7	☐		
Whenever possible, does your certification body acknowledge receipt of the complaint, and provide the complainant with progress reports and the result of the complaint?	9.8.8	☐		
Is the decision to be communicated to the complainant made by, or reviewed and approved by, individual(s) not previously involved in the subject of the complaint?	9.8.9	☐		
Whenever possible, does your certification body give formal notice of the end of the complaints-handling process to the complainant?	9.8.10	☐		
Does your certification body determine, together with the client and the complainant, whether and, if so to what extent, the subject of the complaint and its resolution shall be made public?	9.8.11	☐		
Client records	**9.9**			
Does your certification body maintain records on the audit and other certification activities for all clients, including all organisations that submitted applications, and all organisations audited, certified, or with certification suspended or withdrawn?	9.9.1	☐		
Do records on certified clients include the following:	9.9.2			
a) application information and initial, surveillance and recertification audit reports;		☐		
b) certification agreement;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
c) justification of the methodology used for sampling of sites, as appropriate;		☐		
d) justification for auditor time determination (see Clause 9.1.4);		☐		
e) verification of correction and corrective actions;		☐		
f) records of complaints and appeals, and any subsequent correction or corrective actions;		☐		
g) committee deliberations and decisions, if applicable;		☐		
h) documentation of the certification decisions;		☐		
i) certification documents, including the scope of certification with respect to product, process or service, as applicable;		☐		
j) related records necessary to establish the credibility of the certification, such as evidence of the competence of auditors and technical experts; and		☐		
k) audit programmes?		☐		
Does your certification body keep the records on applicants and clients secure to ensure that the information is kept confidential? Are records transported, transmitted or transferred in a way that ensures that confidentiality is maintained?	9.9.3	☐		
Does your certification body have a documented policy and documented procedures on the retention of records? Are records retained for the duration of the current cycle plus one full certification cycle?	9.9.4	☐		
MANAGEMENT SYSTEM REQUIREMENTS FOR CERTIFICATION BODIES	**10**			

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Options	**10.1**			
Does your certification body establish and maintain a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of ISO/IEC 17021?		☐		
In addition to meeting the requirements of Clauses 5 to 9, does your certification body implement a management system in accordance with either				
a) general management system requirements (see Clause 10.2), or		☐		
b) management system requirements in accordance with ISO 9001 (see Clause 10.3)?		☐		
Which option has your certification body adopted?			**State Option A or B**	
Option A: General management system requirements	**10.2**			
General	10.2.1			
Does your certification body establish, document, implement and maintain a management system that is capable of supporting and demonstrating the consistent achievement of the requirements of ISO/IEC 17021-1?		☐		
Does your certification body's top management establish and document policies and objectives for its activities?		☐		
Does the top management provide evidence of its commitment to the development and implementation of the management system in accordance with the requirements of ISO/IEC 17021-1?				
Does the top management ensure that the policies are understood, implemented and maintained at all levels of your certification body's organisation?				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body's top management appoint a member of management who, irrespective of other responsibilities, have responsibility and authority that include		☐		
a) ensuring that processes and procedures needed for the management system are established, implemented and maintained, and		☐		
b) reporting to top management on the performance of the management system and any need for improvement?		☐		
Management system manual	10.2.2			
Are all applicable requirements of ISO/IEC 17021-1 addressed either in a manual or in associated documents?		☐		
Does your certification body ensure that the manual and relevant associated documents are accessible to all relevant personnel?				
Control of documents	10.2.3			
Does your certification body establish procedures to control the documents (internal and external) that relate to the fulfilment of ISO/IEC 17021-1?		☐		
Do the procedures define the controls needed to:				
a) approve documents for adequacy prior to issue;		☐		
b) review and update as necessary and re-approve documents;		☐		
c) ensure that changes and the current revision status of documents are identified;		☐		
d) ensure that relevant versions of applicable documents are available at points of use;		☐		
e) ensure that documents remain legible and readily identifiable;		☐		
f) ensure that documents of external origin are identified and their distribution controlled; and		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
g) prevent the unintended use of obsolete documents, and to apply suitable identification to them if they are retained for any purpose?		☐		
Control of records	10.2.4			
Does your certification body establish procedures to define the controls needed for the identification, storage, protection, retrieval, retention time and disposition of its records related to the fulfilment of ISO/IEC 17021-1?		☐		
Does your certification body establish procedures for retaining records for a period consistent with its contractual and legal obligations?		☐		
Does access to these records consistent with the confidentiality arrangements.				
Management review	10.2.5			
General	10.2.5.1			
Does your certification body's top management establish procedures to review its management system at planned intervals to ensure its continuing suitability, adequacy and effectiveness, including the stated policies and objectives related to the fulfilment of ISO/IEC 17021-1?		☐		
Are these reviews conducted at least once a year.				
Review inputs	10.2.5.2			
Do the inputs to the management review include information related to		☐		
a) results of internal and external audits;		☐		
b) feedback from clients and interested parties;		☐		
c) safeguarding impartiality;		☐		
d) the status of corrective actions;		☐		
e) the status of actions to address risks;		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
f) follow-up actions from previous management reviews;		☐		
g) the fulfilment of objectives,		☐		
h) changes that could affect the management system, and		☐		
i) appeals and complaints?		☐		
Review outputs	10.2.5.3			
Do the outputs from the management review include decisions and actions related to		☐		
a) improvement of the effectiveness of the management system and its processes;		☐		
b) improvement of the certification services related to the fulfilment of ISO/IEC 17021-1;		☐		
c) resource needs; and		☐		
d) revisions of the organisation's policy and objectives?		☐		
Internal audits	10.2.6			
Does your certification body establish procedures for internal audits to verify that your certification body fulfils the requirements of ISO/IEC 17021-1, and that the management system is effectively implemented and maintained?	10.2.6.1	☐		
Is each audit programme planned, taking into consideration the importance of the processes and areas to be audited, as well as the results of previous audits?	10.2.6.2	☐		
Are internal audits performed at least once every 12 months?	10.2.6.3	☐		
Will the frequency of internal audits be reduced if your certification body can demonstrate that the management system continues to be effectively implemented according to ISO/IEC 17021-1 and has proven stability.				

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body ensure that	10.2.6.4			
a) internal audits are conducted by qualified personnel knowledgeable in certification, auditing and the requirements of ISO/IEC 17021-1;		☐		
b) auditors do not audit their own work;		☐		
c) personnel responsible for the area audited are informed of the outcome of the audit;		☐		
d) any actions resulting from internal audits are taken in a timely and appropriate manner; and		☐		
e) any opportunities for improvement are identified?		☐		
Corrective actions	10.2.7			
Does your certification body establish procedures for identification and management of nonconformities in its operations?		☐		
Does your certification body also, where necessary, take actions to eliminate the cause of nonconformities in order to prevent recurrence?				
Are corrective actions appropriate to the impact of the problems encountered.				
Do the procedures define requirements for				
a) identifying nonconformities (e.g. from valid complaints and internal audits);		☐		
b) determining the causes of nonconformity;		☐		
c) correcting nonconformities;		☐		
d) evaluating the need for actions to ensure that nonconformities do not recur;		☐		
e) determining and implementing in a timely manner, the actions needed;		☐		
f) recording the results of actions taken; and		☐		

ISO/IEC 17021-1: 2015 Requirements	Clause	OK	QM/ Procedure Clause	Remarks / Questions to be asked at certification body
g) reviewing the effectiveness of corrective actions?		☐		
Option B: Management system requirements in accordance with ISO 9001	**10.3**			
General	10.3.1			
Does your certification body establish and maintain a management system, in accordance with the requirements of ISO 9001, which is capable of supporting and demonstrating the consistent achievement of the requirements of ISO/IEC 17021-1, amplified by Clause 10.3.2 to 10.3.4?		☐		
Scope	10.3.2			
For application of the requirements of ISO 9001, does the scope of the management system include the design and development requirements for your certification body's certification services?		☐		
Customer focus	10.3.3			
For application of the requirements of ISO 9001, when developing its management system, does your certification body consider the credibility of certification and address the needs of all parties (as set out in Clause 4.1.2) that reply upon your certification body's audit and certification services, not just your clients?		☐		
Management review	10.3.4			
For application of the requirements of ISO 9001, does your certification body include as inputs for management review, information on relevant appeals and complaints from users of certification activities and a review of impartiality?		☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
The obligations of an accredited or applicant organisation				
After obtaining accreditation, will your certification body at all times :-	002 5.1	☐		
(a) conform with the accreditation criteria, including accreditation regulations specified in HKAS 002 and HKCAS SC-04, technical and non-technical requirements and other conditions as specified by HKAS Executive under your terms of accreditation;	002 5.1 a	☐		
(b) represent honestly and truthfully to any person concerned that your certification body is only accredited for activities stated in your scope of accreditation;	002 5.1 b	☐		
(c) pay such fees and charges as determined by HKAS Executive;	002 5.1 c	☐		
(d) endeavour to ensure the accreditation granted by HKAS is not used in a misleading manner;	002 5.1 d	☐		
(e) be a legal entity; and	002 5.1 e	☐		
(f) conform to the Business Registration Ordinance (Cap 310) and provide a copy-of its business registration certificate to HKAS Executive if such legislation is applicable to the organisation? If your certification body is incorporated or registered outside HKSAR, does your certification body provide a copy of official document showing its name and registered address under the laws of its place of incorporation or registration? For each permanent location where accredited activities are performed, does your certification body provide proof that your certification body has the right to access and perform accredited activities at that permanent location?	002 5.1 f	☐		
For any customers for which your certification body performs any accredited activity, does your certification body maintain for such activity a quality standard which is in conformity with the accreditation criteria as set by HKAS?	002 5.2	☐		
Will your certification body maintain the same quality standard at all times, no matter whether or not the HKAS accreditation symbol is used in the certificate covering the result of such activity?	002 5.2	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
When making any statement in relation to your certification body's accreditation status in situation where non-accredited activities are mentioned, will your certification body ensure that such a statement is accompanied by a statement indicating which activities are not accredited?	002 5.3	☐		
Does your certification body implement the following accreditation regulation :- "Upon termination of accreditation for all activities of an organisation as specified in a certificate of accreditation, the organisation shall return such certificate of accreditation to HKAS Executive forthwith."?	002 5.4	☐		
Will your certification body cooperate with HKAS Executive and its assessment teams and provide them with full support during an on-site assessment and in any other situation such as to provide all necessary information for assessment of your certification body's competence and conformity with the accreditation criteria?	002 5.5	☐		
Upon the request of HKAS Executive, will your certification body provide HKAS Executive with a copy of the documentary standard for which your certification body seeks HKAS accreditation for use during the assessment?	002 5.5	☐		
Does your certification body ensure that you will not use your accreditation status in such a manner that will bring HKAS or any of its accreditation schemes into disputes, and will not make any statement regarding your accreditation status that HKAS Executive may reasonably consider it to be misleading?	002 5.6	☐		
Does your certification body maintain complete integrity and impartiality in all circumstances?	002 5.7	☐		
Does your certification body issue and implement a pertinent code of conduct for all its directors, officers, employees and other personnel involved in your operation?	002 5.7	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Will the authorised representative report any impropriety or unlawful act of your certification body or any iniquitous management and/or staff to HKAS Executive?	002 5.7	☐		
Will the authorised representative further report immediately any corrupt practice to the ICAC (or similar authority or the police when outside the jurisdiction of the HKSAR)?	002 5.7	☐		
Will your certification body notify HKAS Executive within one calendar month if a new authorised representative has been appointed?	002 5.8	☐		
Will the authorised representative or in his absence, other responsible person of your certification body inform HKAS Executive in writing immediately of any changes or intended changes in your certification body's circumstances which may affect your conformity with relevant accreditation criteria?	002 5.9	☐		
Does your certification body implement the following HKAS regulation on confidentiality :- "An accredited organisation shall pay due regard to the confidentially of its customer's information and shall make internal rules and guidelines in order to ensure protection of its customer's information. Confidential information about a particular customer shall not be disclosed to a third party without the consent of the customer, except where the law requires such information to be so disclosed. However, an applicant organisation or an accredited organisation shall allow HKAS Executive to examine all its records which are relevant to the scope of accreditation in order to assess its competence and conformity with the relevant accreditation criteria. An applicant organisation and an accredited organisation shall obtain consent from their customers for the disclosure of any relevant information to HKAS."?	002 5.10	☐		
Does your certification body ensure that no unofficial contact with assessors, technical experts and/or AAB members will be made on any matter relating to or in connection with the assessment of any activity for the purpose of granting or maintaining accreditation?	002 5.11	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Are all communications concerning your certification body's assessment made between the authorised representative or his/her representative or its chief executive or his/her representative and HKAS Executive?	002 5.11	☐		
Does your certification body have a clear policy in writing concerning the provision or receipt of advantages by your staff? Does the policy document contain a statement notifying your staff the law under Section 9 of the Prevention of Bribery Ordinance (Cap. 201)? Does your certification body further ensure that the policy is made known to all staff members?	002 5.12	☐		
Does your certification body have a policy and procedure in writing for handling and resolving complaints, disputes and appeals from your customers or other parties?	002 5.13	☐		
Does your certification body keep records of all complaints, disputes and appeals and actions taken for a minimum of 3 years and make available to HKAS Executive for inspection upon request?	002 5.13	☐		
Where a complaint, dispute or appeal received from your customers or other parties raises any doubt on your conformity with your polices or procedures, will your certification body ensure that the relevant areas of your accredited activities are promptly audited?	002 5.14	☐		
If a complaint, dispute or appeal received from your customers or other parties relating to any of your accredited activities is not satisfactorily resolved within 60 days from the date of receipt, will your certification body notify HKAS Executive in writing of this matter?	002 5.15	☐		
Is your certification body aware that any concerned party may lodge complaints with HKAS on any of your accredited activities?	002 5.16	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Upon the request of HKAS Executive, an accredited organisation shall confirm the authenticity or otherwise of a report, certificate or other document purporting to have been issued by it for an accredited activity. Where such a report, certificate or document is found to be a forged document, the organisation shall cooperate with HKAS Executive in the investigation of its cause and taking mutually agreeable steps to prevent recurrence.	002 5.17	☐		
An accredited organisation shall not provide certification service to any other party for any standard used by HKAS as accreditation criteria. HKAS Executive will take immediate action to suspend the accreditation of an accredited organisation in violation of this requirement.	002 5.18	☐		
Use of HKAS accreditation symbols and claims of accreditation status				
Does your certification body implement the following HKAS regulation :- "An accredited organisation may use the relevant HKAS accreditation symbol as described in HKAS Supplementary Criteria No. 1 and claim its accreditation status provided that the following conditions are complied with :-	002 8.1	☐		
(a) all advertising and promotional materials (including letterheads) shall not, in the opinion of HKAS Executive, give a false or misleading impression regarding the accreditation status of the organisation;	002 8.1 a	☐		
(b) HKAS Supplementary Criteria No. 1 and requirements relevant to the accreditation scheme concerned as described in the relevant specific regulations, are complied with at all times; and	002 8.1 b	☐		
(c) any statement made by the organisation in connection with its accreditation status shall not, in the opinion of HKAS Executive, give a false or misleading impression to any third party of its accreditation status."?	002 8.1 c	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Is your certification body aware of that an accredited organisation shall not allow its accreditation be used to imply that any subject of its accredited activities, for example, a product, process, system or person is approved by HKAS or HKAS Executive and shall take suitable actions to stop any incorrect reference to accreditation.	002 8.2	☐		
Upon suspension or termination of the accreditation of any activities carried out by an organisation, whether or not voluntarily made, does your organisation discontinue to make reference to the accreditation in any report, certificate, letterhead, brochure, advertising material, stationery, and Internet websites, etc., immediately?	002 8.3	☐		
Other HKAS regulations				
Has your certification body documented the code of conduct within its management system for stating its policies on impartiality, confidentiality, professionalism, integrity, conflict of interest, and the organisation's commitment to complying with the Prevention of Bribery Ordinance (Cap 201) of Hong Kong or applicable laws and regulations of the country where the accredited organisation is located?	HKAS SC-06 2.1	☐		
Does the code of conduct cover at least the following aspects:				
(a) acceptance of advantage;	HKAS SC-06 2.2a	☐		
(b) offer of advantage;	HKAS SC-06 2.2b	☐		
(c) entertainment;	HKAS SC-06 2.2c	☐		
(d) compliance with laws of Hong Kong or of relevant jurisdictions;	HKAS SC-06 2.2d	☐		
(e) compliance with relevant requirements of applicable professional standards;	HKAS SC-06 2.2e	☐		
(f) conflict of interest;	HKAS SC-06 2.2f	☐		
(g) use of company assets;	HKAS SC-06 2.2g	☐		
(h) confidentiality of company information;	HKAS SC-06 2.2h	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
(i) outside employment;	HKAS SC-06 2.2i	☐		
(j) relationship with customers, suppliers and contractors;	HKAS SC-06 2.2j	☐		
(k) procedures for reporting suspected violation and established mechanism for the prompt and fair adjudication of alleged violations; and	HKAS SC-06 2.2k	☐		
(l) disciplinary actions to be taken against violations.	HKAS SC-06 2.2l	☐		
Does your certification body determine the contents of the code of conduct in accordance with its circumstances to ensure that all persons working for it act lawfully, ethically, professionally, and honestly and protect the impartiality, independence and integrity of the organisation?	HKAS SC-06 2.3	☐		
Does your certification body ensure that all its directors, staff and other personnel working for it understand and practice the code of conduct?	HKAS SC-06 3.1	☐		
Has your certification body provided training to all personnel as part of the orientation training when they join the organisation and refresher training to all members periodically thereafter?	HKAS SC-06 3.2	☐		
Does your certification body periodically remind all personnel working for it the code of conduct?	HKAS SC-06 3.3	☐		
Is the code of conduct accessible to all personnel working for the organisation?	HKAS SC-06 3.4	☐		
Is the authorised representative aware that he/she shall report any impropriety or unlawful act of the organisation or any iniquitous management and/or staff to HKAS Executive in accordance with HKAS 002 clause 5.7?	HKAS SC-06 3.5	☐		
Does your certification body periodically review the code's suitability and adequacy; and implement improvement as appropriate?	HKAS SC-06 3.6	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Specific regulations for HKCAS				
An assessment team may, at its discretion, carry out on-site witnessing on your certification body while it is performing certification audits for which your certification body is accredited or seeking accreditation. Does your certification body ensure to seek consent from and explain to your customers concerning the presence of the assessment team in such certification audits?	HKCAS SC-04 2.1	☐		
Does your certification body further assure your customers that the presence of the assessment team during the certification audits will not affect the outcome of the audits?	HKCAS SC-04 2.1	☐		
Is your certification body aware that HKAS Executive may follow the rules specified by APAC and IAF as it sees fit in establishing the strategies for witnessing the audits carried out by your certification body?	HKCAS SC-04 2.1	☐		
Is your certification body aware that HKAS Executive will conduct a reassessment on the accredited activities of your certification body every three years after the accreditation has been granted?	HKCAS SC-04 2.2	☐		
Is your certification body aware that HKAS Executive may also conduct a surveillance visit to your certification body routinely every six months and HKAS Executive has discretion to vary the period for reassessment and surveillance visit as it sees fit?	HKCAS SC-04 2.3	☐		
Is your certification body aware that upon granting of the accreditation to your certification body for a type of certification activity, HKAS Executive will issue a certificate of HKCAS accreditation for such certification activity to your certification body?	HKCAS SC-04 2.4	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body at all times conform with the following HKCAS accreditation criteria :- (a) HKAS 002 - Regulations for HKAS Accreditation, (b) Relevant HKAS Supplementary Criteria, (c) Relevant HKCAS Supplementary Criteria, (d) Relevant IAF requirements as specified in IAF documents including Mandatory Documents and Resolutions, and (e) Relevant APAC requirements as specified in APAC documents including Technical Documents	HKCAS SC-04 3.1	☐		
Does your certification body ensure that it shall not use its accreditation status in a way that may be interpreted by any person that any product, process, system or person certified by your certification body has been approved by HKAS or HKAS Executive? Will your certification body further endeavour to ensure that the organisations certified will implement the certified system at all time?	HKCAS SC-04 3.2	☐		
Is your certification body aware that the requirements and conditions for the use of accreditation symbols on products certified under an accredited product certification scheme are specified in the relevant HKAS and HKCAS Supplementary Criteria?	HKCAS SC-04 3.3	☐		
If your certification body intends to subcontract any part of your accredited activities, does your certification body ensure that the subcontracted certification body is accredited for performing the activities by HKAS or an accreditation body which has concluded a mutual recognition arrangement/agreement with HKAS?	HKCAS SC-04 3.4	☐		
Does your certification body notify the customer in writing of your intention to subcontract the activities, the extent of such subcontract and the name of the subcontractor?	HKCAS SC-04 3.4	☐		
Does your certification body further ensure that your customer agrees to such arrangement?	HKCAS SC-04 3.4	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body keep all records of such subcontracted activities?	HKCAS SC-04 3.4	☐		
Does your certification body have enforceable arrangements with each organisation holding a HKCAS accredited certificate which commit it to allow, on request, HKAS assessment teams to witness the certification body's audit teams performing audits, including access to its premises for doing so?	HKCAS SC-04 3.5	☐		
Does your certification body provide to HKAS a list of countries that HKAS accredited certificates have been issued by your certification body? (Any change to this list is considered to be circumstances that may affect conformity with relevant accreditation criteria.)	HKCAS SC-04 3.6	☐		
Does your certification body provide information as specified from time to time by HKAS?	HKCAS SC-04 3.7	☐		
Does your certification body maintain complete integrity at any points in the application and assessment process? Fraudulent behaviour is considered as 'any intentional misinterpretation, concealment of information or provision of false information to a relevant interested party, resulting in the deliberate violation of accreditation or certification rules'.	HKCAS SC-04 3.8	☐		
Is your certification body aware if there is evidence of fraudulent behaviour, by your certification body, HKAS Executive will reject your application or terminate the assessment process? Under this circumstance, the resulting application and assessment fees paid are not refundable.	HKCAS SC-04 3.8	☐		
Will your certification body cooperate with HKAS Executive and provide HKAS Executive all requested information for any credible allegations of fraudulent behaviour against your certification body and your certified clients?	HKCAS SC-04 3.8	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Is your certification body aware HKAS Executive may undertake certain actions in response to those allegations, including but not limited to, conducting extraordinary on-site assessments and referring the allegations to any relevant legal enforcement departments for further actions?	HKCAS SC-04 3.8	☐		
Does your certification body have a legally enforceable arrangement with each certified client for conducting an investigation of any allegation of fraudulent behaviours against your certified clients relevant to their scope of accredited certification?	HKCAS SC-04 3.9	☐		
Will your certification body validate the allegation when your certification body received or revealed any allegation of fraudulent behaviour against your certified client, for examples, via HKAS or other relevant interested parties or during the performance of certification activities such as certification audit, complaint investigation or enquiry from interested parties?	HKCAS SC-04 3.10	☐		
If it is confirmed to be relevant to the scope of accredited certification, will your certification body start the investigation of the allegation of fraudulent behaviour as soon as possible?	HKCAS SC-04 3.10	☐		
Will your certification body initiate your suspension and/or withdrawal of certification process against your certified client within a reasonable timeframe if there is confirmed evidence of a fraudulent behaviour against your certified client?	HKCAS SC-04 3.11	☐		
Is your certification body aware if your certification body fails to adequately deal with an allegation of fraudulent behaviour against your certified client within a reasonable timeframe, HKAS Executive may consider suspending and/or terminating the accreditation of your certification body?	HKCAS SC-04 3.12	☐		
Will the authorised representative of your certification body, within 14 days from the effective date of any suspension or termination (voluntarily or by HKAS Executive), inform your customers of activities for which the accreditation has been suspended or terminated in writing of such suspension or termination?	HKCAS SC-04 4.1	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Will your certification body inform your clients the consequence of the suspension or termination of accreditation?	HKCAS SC-04 4.1	☐		
Is your certification body aware that HKAS Executive may publish information relating to any suspension and termination of accreditation granted by HKAS in any HKAS publications and in the website of HKAS?	002 2.10	☐		
Is your certification body aware that every certification body accredited under HKCAS will be awarded with a distinctive HKCAS accreditation symbol?	HKCAS SC-04 5.1	☐		
Does your certification body implement the following HKAS regulation :- "An organisation which is certified by a certification body accredited by HKAS may use the HKCAS accreditation symbol of such certification body (subject to regulations set out in HKAS 002) to demonstrate to the public that it has been certified by a competent and impartial certification body accredited by HKAS."?	HKCAS SC-04 5.2	☐		
Does your certification body issue accredited management system certificates for certification services within the scope of accreditation of your certification body? If your certification body has obtained more than one accreditation, will the certificate be issued with at least one accreditation? Does your certification body issue accredited management system certificates bearing HKCAS accreditation symbol or statement as specified in 5.3 of HKCAS SC-04?	HKCAS SC-04 5.3	☐		
Does your certification body provide the format of the proposed certificate with your certification body's HKCAS accreditation symbol to HKAS Executive for approval before use?	HKCAS SC-04 5.4	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Is your certification body aware that a HKAS accredited certification body may use its HKCAS accreditation symbol on its stationery, documents, publications and its advertisements, subject to the regulations set out in HKAS SC-01 and any other relevant requirements as specified from time to time by HKAS?	HKCAS SC-04 5.5	☐		
Will your certification body only use the HKCAS accreditation symbol on any stationery, documents, publications and advertisements when those stationery, documents, publications and advertisements relate in whole or in part to the accredited certification body's scope of accreditation?	HKCAS SC-04 5.6	☐		
Is your certification body aware that your certification body is allowed to print the accreditation symbol on your pre-printed letterhead paper?	HKCAS SC-04 5.6	☐		
Does your certification body ensure that the form, size, colour and usage of the HKCAS accreditation symbol are in accordance with the HKAS SC-01?	HKCAS SC-04 5.7	☐		
Does your certification body use distinctly different certification marks for different certification systems (such as Products, Quality Management System) and shall avoid confusion between the meanings of its marks?	HKCAS SC-04 5.8	☐		
Does your certification body ensure that where an organisation is certified by your certification body, such certified organisation may use the HKCAS accreditation symbol in conjunction with the certification symbol of your certification body provided that any use of the accreditation symbol is subject to the regulations set out in HKAS SC-01, HKCAS SC-04 and any other relevant HKCAS requirements as specified from time to time by HKAS?	HKCAS SC-04 5.9	☐		
Does your certification body ensure that organisations certified for management system will **NOT** use the certification mark on a product, product packaging or a test certificate, or in any way that may be interpreted by any person as suggesting product certification?	HKCAS SC-04 5.10	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body ensure that the HKCAS accreditation symbol will not be used by any of your certified organisations on any stationery, documents, publications and advertisements unless those stationery, documents, publications and advertisements are related in whole or in part to your certification body's scope of accreditation and to the certification scope of the organisation?	HKCAS SC-04 5.11	☐		
Does your certification body ensure that your certified organisations will only use the HKCAS accreditation symbol together with your certification symbol in such a manner as set down in HKAS SC-01 and any other relevant HKCAS Supplementary Criteria?	HKCAS SC-04 5.12	☐		
Does your certification body ensure **NOT** to use the HKCAS accreditation symbol in any way that may be interpreted by any person as suggesting that HKAS Executive has certified or approved the activities of your certified organisations, or in any way which may have a misleading effect? Will your certification body also take reasonable steps to ensure that your certified organisations will not use the HKCAS accreditation symbol in such a way?	HKCAS SC-04 5.13	☐		
Does your certification body ensure that if the accreditation in relation to any activity under your scope of accreditation is suspended or terminated, your certification body will immediately cease to use and to distribute any certificate, stationery, document, publication and advertisement which bear the accreditation symbol?	HKCAS SC-04 5.14	☐		
Does your certification body ensure that such certificate, stationery, document, publication or advertisement bearing the accreditation symbol will be used only for activities in whole or in part to your certification body's valid scope of accreditation?	HKCAS SC-04 5.14	☐		
If the accreditation for a certification service of your certification body is suspended or terminated, will your certification body take all steps to ensure that your certified organisations cease to use the HKCAS accreditation symbol, and only use them in activities related in whole or in part to certification services, the accreditation of which is not suspended or terminated?	HKCAS SC-04 5.15	☐		

Regulations for HKAS Accreditation	Clause	OK	QM/Procedure Clause	Remarks / Questions to be asked at certification body
Does your certification body ensure that application for any HKCAS service from HKAS is made in appropriate forms?	HKCAS SC-04 6.1	☐		