



## PROCEDURES ON MANAGEMENT SYSTEM OF CERTIFICATION

AHF-P-11  
Rev: 1.0  
Date: October 18 2024

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### 1. Objective

This Procedure describes the roles, responsibilities, and processes in a certification body according to **UAE/ GSO 2055-2** involved in the Halal certification of management systems (MS).

The Halal certification process consists of the phases:

- contract review and offer preparation,
- audit preparation,
- Execution of audit stage 1,
- Execution of audit stage 2,
- issue of the certificate, and
- Surveillance 1 and 2 of the certified management systems
- Renewal

The procedure is repeated with each recertification, except for the audit stage 1, which is replaced in the recertification by the confirmation of the calculation of the audit effort /audit program. Recertification audit activities may need to have an audit stage 1 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 in legislation).

### 2. Scope



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This procedure applies to AHF certifier team and to its internal and external auditors.

### 3. Definitions

**Technical area:** Area characterized by commonalities of processes relevant to a specific type of management system. A technical area is equal to the scope according to the categories.

**Audit program:** An audit program shall be planned for the full certification cycle, taking into consideration the importance of the processes and areas to be audited, as well as the results of previous audits.

The audit program shall include an initial audit, surveillance audits in the first and second years, and a recertification audit in the third year prior to expiration of certification. The three-year certification cycle begins with the certification or recertification decision. The determination of the audit program and any subsequent adjustments shall consider the size of the client's organization, 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.

**Audit Stage 1:** The Stage 1 audit is basically performed on site, under certain categories. Some categories are not obliged to do the audit on site and could be affected online. If the Stage 1 audit is not carried out in particularly justified cases - e.g. the management system of the organization is already known through audits according to other standards - the justification must be fixed in writing and recorded in the audit documentation.



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**Audit Stage 2:** On-site assessment of the implementation and effectiveness of a management system; this will be the basis of issuance of certificate.

**Surveillance Audit 1:** Periodic audit performed to ensure that the organization still meets the quality management system requirements; the implementation and effectiveness to the organization. The objective is maintenance of the certificate.

**Surveillance Audit 2:** Periodic audit performed to ensure that the organization still meets the quality management system requirements; the implementation and effectiveness to the organization. The objective is maintenance of the certificate.

**Re-Certification Audit:** Review of overall management system implementation and effectiveness in the organization with respect to the new issue of the certificate.

**Extension Audit:** Evaluation of the effective management system at a certain location; the objective is to change the scope of the certificate.

**Unannounced Audit:** Audits of certified clients at short notice, or unannounced to investigate complaints, or in response to changes, or as follow up of suspended client certifications.

**Combined, joint or integrated audits:** A combined audit is when a client is being audited against the requirements of two or more management systems standards together. A joint audit is when two or more auditing organizations cooperate to audit a single client.



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An integrated audit is when a client has integrated the application of requirements of two or more management systems standards into a single management system and is being audited against more than one standard.

**The scope of the certification:** This scope includes the areas of activity, products/services and processes of the organization.

In case of including design and development in the scope of the management system the audit documentation and the certificate shall include design and development.

**Nonconformity:** Nonconformity is the non-fulfilment of one requirement of the standard. Two types of nonconformities:

**a) Major nonconformity (NCA):** A nonconformity that limits the ability of the management system to achieve its intended results  
Nonconformities can be categorized as major

☐ If there is considerable doubt that efficient process control is in place or that products or services fulfill the specified requirements.

☐ If several minor nonconformities which relate to the same requirement, or the same problem could represent a system-related failure and therefore result in a major nonconformity.

**b) Minor nonconformity (NCB):** Nonconformity that does not limit the capability of the management system to achieve the intended results.



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**Follow-up Audit:** On-site assessment of the implementation and effectiveness of corrections and corrective actions for nonconformities issued during the audit.

**Evaluation of documentary evidence:** Off-site assessment of the implementation and effectiveness of corrective actions in connection with nonconformities identified during the audit. The assessment is carried out by means of documents that are submitted (documents or records).

**Correction:** Action to eliminate a detected nonconformity  
**Corrective Action:** Action to determine the cause of nonconformity

**Audit day:** An audit day comprises 8 hours. Where it seems useful, a 10 hour audit day might be accepted.

**Appointed Person:** Appointed individuals to perform a defined task on behalf of the certification body's head, or specialist manager (i.e.) QM Managers or veto persons.

**Observers:** The presence and justification of observers during an audit activity shall be agreed to by the certification body and client prior to the conduct of the audit. The audit team shall ensure that observers do not influence or interfere in the audit process or outcome of the audit. Note: Observers can be members of the client's organization, consultants, witnessing accreditation body personnel, regulators or other justified persons.

**Guides:** Each auditor shall be accompanied by a guide, unless otherwise agreed to by the audit team leader and the client. Guide(s) are assigned to the audit team to facilitate the audit. The audit team shall ensure that



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guides do not influence or interfere in the audit process or outcome of the audit.

### 4. Responsibilities

#### 4.1 Director of Certification

The director of the Certification is responsible for: Decision making and to grant or refuse the Halal certificate. Should have not participated in the audit of the required decision making.

#### 4.2 QM Manager

The QM manager is the representative of the certification body. He is the direct superior of the local auditors and the local certification personnel in all matters concerned with management system certification. The QM Manager is responsible for

- Application reviewer
- Evaluation of audit reviewer (reports, checklist, FT study etc...)
- selection and appointment of auditors, senior auditors and veto persons,
- Review and approval of certification files with regard to content and adherence to the rules, involving competent auditors if necessary. These auditors must not have been part of the certification process activities.

#### 4.3 Auditors

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



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Within the audit team, the lead auditor has the following additional responsibilities:

- Determination of scope of the management system in agreement with the customer.
- Determining if the Stage 1 Audit can be performed on site during the same period as the Stage 2 Audit. Approval by the certification body is needed for this purpose. In the case of branch offices/outside locations with certification authority, the QM manager decides.
- The audit team leader, in consultation with the audit team, shall assign to each team member responsibility for auditing specific processes, functions, sites, areas or activities. Such assignments shall consider 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.
- Assessment of the calculation of audit effort /audit program.  
Assessment contains:
  - Audit effort (no. of employees, grounds for reduction),
  - scope,
  - sites,
  - nonconformity management.





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- Drafting of an audit plan and report for the Stage 1 audit including assessment of the MS documentation in the case of first certification.
- Evaluation of the previous period (last 3 years) in the case of recertification audits. In addition, evaluation of the MS documentation with report in the case of significant changes to the MS documentation.
- Drafting of the audit plan and the report for the Stage 2 audit in cooperation with the audit team.
- Documentation of audit findings and any nonconformity in consultation with the audit team.
- Recommendation for issue / maintenance of the certificate or required corrective action or extension of its scope.
- Submission of the complete certification documents to the certification body in good time for release (at the latest 1 month after the end of audit or after completing the nonconformity management).

Within the context of the competent certification decision, lead auditors permanently employed in AHF who are not involved in the audit procedure can be included in the review and release process (veto persons). In case of a revised calculation of the audit effort / audit program the auditor is responsible for the new calculation.



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### 4.4 Technical experts, translators, interpreters, observers and auditors-in-training

Technical experts, translators, and interpreters can be employed to complete competence requirements for an audit team. They always act under the direction of the audit team leader. The time spent by any team member that is not assigned as an auditor (i.e. technical experts, translators, interpreters, observers and auditors-in-training) shall not count in the above established audit time.

### 4.5 Certification service

The certification committee members review the decision to grant or refuse the Halal certificate and the certification department maintains and updates the reports of auditors with regard to all AHF auditors. They prepare the issue of the certificates and send them to the customers. They file the certification records.

## 5. Procedures

The process is initiated when an applicant makes an inquiry, or an order is received through sales activities. The applicant is informed of the basic certification process.

### 5.1 Customer Inquiry

The application form for the preparation of Proposal and the Certification Procedure is sent to the applicant so that an application can be prepared and completed. Once receiving the application form and documents the appointed reviewer reviews all management documents of the client Based on the information from the questionnaire, the costs and times are calculated, the audit program (calculation of the audit effort/ audit program) defined. The offer is



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completed and after acceptance, a contract is concluded with the applicant. When the certification body declines an application for certification as a result of the review of application, the reasons for declining an application shall be documented and made clear to the client. The quality management shall 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 the certification body. Where necessary the audit program/calculation of the audit time requirements has to be adapted. In case of combined, joint or integrated audits the audit time shall be calculated according to the audit time calculation procedure.

The audit process begins following the conclusion of the certification agreement and is divided into:

### **Application form:**

AHF requires the applicant for the Halal certificate to provide detailed information concerning its legal status/entity, raw materials, operations, product safety management system related issues i.e. HACCP studies, the number of shifts and number of employees in each shift, etc. Applicants should submit a list of management documents and all products produced by the company. AHF sends information about the Halal certification requirements to provide detailed information.

The process is initiated when an applicant makes an inquiry, or an order is received through sales activities. The applicant is informed of the basic certification process. The application form for the preparation of a financial proposal is sent to the applicant so that an application can be prepared and completed. Once receiving the filled application form, the admin team will send the filled application form to the quality and control department without making any changes. The quality department will calculate the man-days based on given information by the client in the application and send to the admin department.



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Applicants should submit a list of management documents and all products produced by the company.

Application review:

Before proceeding with the audit, AHF conducts a review of the application and supplementary information for certification to ensure that:

- a. The information about the Client and its production is sufficient for the conduct of the audit.
- b. The requirements for certification are clearly defined and documented and have been provided to the Client.
- c. Any known difference in understanding between AHF and the Client is resolved.
- d. AHF has the competence and ability to perform the Certification activity.
- e. The scope of certification sought, the location(s) of the Client'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.).
- f. Records of the justification for the decision to undertake the audit are maintained.

Once all documents and the application form are drawn. AHF has an appointed person, quality manager, to review the management system of the client. After reviewing the Application, AHF decides whether to accept the Application or not. If the AHF does not accept the application for certification due to the lack of necessary resources and/or competence of the Certification Body or non-compliance of the Client's production with the requirements on Halal production, AHF informs the Client about this and explains the reasons for the refusal (in all cases the Application review fee is



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non-refundable). AHF does not provide any advice on the achievement of compliance of the Client's products with the Halal standards. If the documents are found complete in all aspects, the application is ready for further submission at the next stage for scrutiny and audit approved by the general manager and the certification director.

### 5.2 Audit Preparation

An audit team is appointed, and the customer is informed of the team members once the contract is signed. Clients must be informed in advance that they can object impartially to any member of the audit team (auditor or expert). The members of the audit team must fulfill the requirements described in Competence and Requirements of Auditor. In the case of dependent and auditing branch offices, the audit team and the audit time has to be approved by persons appointed by the certification body prior to the audit.

Control department will plan the audit by keeping in view the economical routes and audits of other companies nearby. While planning, the control department will choose the best economical route and schedule the audits in a way that auditors can perform their tasks comfortably. After finalization of routes, traveling and accommodation arrangements, the Control department will propose the audit date to the client. Upon confirmation received from the client, the control team will confirm all the traveling and accommodation arrangements and inform the respective auditors. Control department may only change the audit schedule based on the clients request after getting approval from top management. Control team / Lead auditor will prepare the audit plan and send it to the client.

The criteria for composing the audit team are:

- the audit must be performed under the leadership of a nominated lead auditor,



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- Audit team must consist of at least two (2) personnel, one of them is a technical auditor and the other is a halal Islamic affairs expert.
- at least one member of the audit team must have the technical sector competence with respect to the scope of the audit. This is also required for Stage 1 audits. In audits of more than one management system by the same team, the competence requirements must be fulfilled for each standard.
- The auditor and other involved people, who are employed for the audit team, are free from conflict of interests.

The audit team leader is responsible for ensuring that technical competence is always present during the audit. The auditors may work as a team or independently. If work is performed in shifts, the different shifts must be taken into consideration during audit planning (processes and control mechanisms). If every shift is not audited, the reason must be stated in the audit report. In situations where a customer provides a product or service at temporary sites (i.e installation sites, project locations etc.) it is important that evaluations of such sites are incorporated into the certification and surveillance program. The need for visits will depend on the relevance of these sites. The reasons for the selection of the specific sites must be documented in the audit report (reasons: special product-specific/service-relevant features, size, complexity, only site, results from previous audits).

### 5.2.1 Stage 1 audit

The objectives of stage 1 audit is to provide an illustration for planning stage 2 audit by gaining an understanding of the product safety management system in the context of the Client's food safety hazard identification, analysis, HACCP plan and PRPs, policy and objectives, and, in particular, the Client's state of preparedness.



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Stage 1 audit can be carried out at the premises of AHF or at the applicant's organization premises according to complexity of production or service in order to achieve the desired objectives of an audit.

a. In the case of categories A, B, F, J, H, G (Annex A of GSO 2055-2:2021), it is not necessary that stage 1 audit be on-site. However, it is up to the audit team to decide to carry out an on-site audit. In categories C, D, E, I, and K (Annex A of UAE/ GSO 2055-2:2021) it is obligatory that stage 1 audit is done on-site.

b. Where stage 1 audit has not been performed on-site, the duration of stage 1 audit may not exceed 20% of the total audit time. Where it covers on-site work, duration of the stage 1 audit may not exceed 30% of the total audit duration.

AHF performed the Stage 1 audit to

a. audit the client's management system documentation

b. evaluate the client's location and site-specific conditions and to undertake discussions with the client's personnel to determine the preparedness for the stage 2 audit.

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. Collect necessary information regarding the scope of the management system, processes and location(s) of the client, and related statutory and regulatory aspects and compliance (e.g. quality, environmental, legal aspects of the client's operation, associated risks, etc.).

e. Review the allocation of resources for stage 2 audit and agree with the client on the details of the stage 2 audit.



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f. Provide a focus for planning the stage 2 audit by gaining a sufficient understanding of the client's management system and site operations in the context of possible significant aspects.

g. Evaluate if the internal audits and management review are being planned and performed, and that the level of implementation of the management system substantiates that the client is ready for the stage 2 audit.

When part of the production process is outsourced, stage 1 audit reviews the documentation included in Halal requirements and/or the product safety management system to determine if the combination of control measures is suitable for the Client and conform to requirements of Halal standards.

AHF shall document Stage 1 audit findings and communicate to the client, including identification of any areas of concern that could be classified as nonconformity during the stage 2 audit. AHF also informs the results of stage 1 audit to the applicant which may lead to postponement or cancellation of stage 2 audit.

Any part of the product safety management system that is audited during stage 1 audit and determined to be fully implemented, effective and in conformity with requirements, may not need to be re-audited during stage 2 audit. However, the AHF ensures that the already audited parts of the product safety management system continue to conform to the certification requirements. In this case, AHF shall include these findings in stage 2 audit report and shall clearly state that conformity has been established during stage 1 audit.

A detailed report on the first phase of the audit showing the audit results (consistent with the client's production objectives for the first phase of the audit) as well as potential areas of concern that can be identified as inconsistencies during the second phase of the audit is granted to the Client and after that the date of the second stage of the

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audit is agreed with the Client. If there are serious inconsistencies during the first stage of the audit, the Client is given some time to correct these inconsistencies.

The interval between the first and second stages of the audit is established considering the interests of the Client and giving them time to correct potential non-conformances but cannot exceed 6 (six) months. If non-conformances are not eliminated and/or this elimination is not accepted by AHF within this period, the Stage 2 audit is canceled. At the end of the Stage 1 Audit, the exact formulation of the scope of the certificate must be established in agreement with the customer not later than four weeks before the Stage 2 audit.

### 5.2.2 Stage 2 audit

The purpose of the second stage of the audit is to check the effectiveness of implementation of the requirements of the production of Halal products by the Client and verification of compliance with the stated standards. The audit commences with an opening meeting. The task of the audit team is to review the practical application of the management system and to assess it for fulfillment of the requirements of the standard. The second stage is always carried out in the client's production facility and includes the following

- a. Collection of information and evidence of compliance of production with Sharia Law and the requirements of the declared standards.
- b. Monitoring, measuring, reporting and reviewing compliance with the basic requirements and objectives of the stated standard.
- c. Verification of the production ability to comply with regulatory and legal requirements and the requirements specified in the Halal Certification Agreement.
- d. Internal auditing and management review.
- e. Management responsibility for the client's policies
- f. Links between the normative requirements, policy, performance objectives and targets (consistent with the expectations in the



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applicable certification standard or other normative document), any applicable legal requirements, responsibilities, competence of personnel, operations, procedures, performance data and internal audit findings and conclusions

g. Verification of Halal production control products.

h. Checking of the non-conformances/faults management system.

This is carried out by means of questions put to the staff, viewing of other documents, records, orders and guidelines as well as by an on-site visit to the relevant areas. The audit record serves as a guide during this process. During the audit, the audit team shall periodically assess audit progress and exchange information. The audit team leader shall reassign work as needed between the audit team members and periodically communicate the progress of the audit and any concerns to the client (e.g.: daily closing meetings).

The audit team analyzes the results and evidence gathered during both phases of the certification audit to review the audit findings, agree on the audit conclusions and draw up an audit report. The client shall be given an opportunity for questions. Any diverging opinions regarding the audit findings or conclusions between the audit team and the client shall be discussed and resolved where possible. Any diverging opinions that are not resolved shall be recorded and referred to the certification body. At the end of the on-site audit, a final closing meeting takes place. AHF has assigned the responsibility to the Quality manager to review all information and results related to the evaluation and submit to the certification department for further proceedings. The delay of the stage1 and stage 2 should not exceed 6 months.

### 5.2.3 Audit Findings/Documentation of the audit

The auditors record their findings during the audit either by hand or electronically. The requirements of the document "Standard Specific Documentation must also be taken into consideration. The findings are assigned to requirements of the standard and evaluated as regards the following:



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- Conformity,
- Opportunity for improvement,
- Nonconformity (Major/Minor NC).
- Observation

The audit report is prepared based on the audit findings.

Nonconformities and potentials for improvement are documented in the audit report. Action plans for nonconformities are prepared by the customer in consultation with the audit team leader.

A finding of nonconformity shall be recorded against a specific requirement of the audit criteria, contain a clear statement of the nonconformity and identify in detail the objective evidence on which the nonconformity is based. Nonconformities shall be discussed with the client to ensure that the evidence is accurate and that the nonconformities are understood. The auditor, however, shall refrain from suggesting the cause of nonconformities or solutions to them.

The action plan with root cause analysis, specific corrections and corrective actions regarding the nonconformities must be submitted by the client within 30 calendar days following the last day of the audit.

### 5.3. Certificate Issue and Surveillance

#### 5.3.1 Certificates

In general, the validity of the certificate does not exceed three years from the issue date. Expiry of validity depends on the date of certificate decision. Halal certificate issued to clients valid for three years. The Certification department will start coordinating with the client four months before the actual audit date, so that it will not exceed more than 1 year. The Issued



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Halal Certificate shall be valid for 3 years. Generally, only a valid certificate issued by an accredited certification body can be transferred. If that prerequisite is not satisfied, the individual case must be judged on its merits.

It is not possible to transfer suspended certificates or certificates which are under the threat of suspension. Any unresolved nonconformities have to be clarified with the previous certification body prior to transfer wherever practicable. Such nonconformities must otherwise be reviewed in the course of the audit.

A certificate can be issued with the date of completion of the Pre-Transfer Review as date of issue (subject to the usual release process) if there are no longer any unresolved or potential problems.

Future surveillance and recertification audits are based on the previous Surveillance and Recertification program.

Deadlines for the release of the certification procedure:

- Procedures without NC: 3 months.
- NCs: 4 months

The deadline is always calculated from the last day of the Stage 2 audit.

### 5.3.3 Surveillance Audit

- AHF will conduct surveillance audits for first and second years following the certification decision, in order to ensure continued compliance of Halal product/service with the requirements of the Halal certification, giving due regard to the requirements of the Halal product/service standard to which the Halal certification has been conducted and taking account of the nature of Halal product/service , requirements of the Halal certification, any nonconformities detected in the Halal product/service or Halal production/service premises or any complaints received with regard to certified Halal product/service.



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- The intent is to ensure that any changes to the scope of the Halal certification audit are captured and monitored regularly to determine if the Halal certification is still representative of the actual management system. Surveillance audits will be conducted at the client site.
- Surveillance audits shall be conducted at least once a year. The date of the first surveillance audit following initial certification shall not be more than 12 months from the last day of the stage 2 audit. The deadline is calculated from the last day of the Stage 2 audit in each case. A Lead Auditor must participate in surveillance audits. The sector competence must be present in the audit team.
- During preparation of the audit, the audit team leader initiates an inquiry to the customer regarding changes in the structural and procedural organization, the size of the company and the company activities. This includes in particular a review of the current system documentation. In addition, materials used for public relations (e.g., Internet, advertising material) can be used for preparation purposes.
- Regular surveillance audits are carried out on the same principle as certification audits, but the audit program can be much shorter, depending on the complexity of the audited production, the results of previous audits and the established frequency of periodic audits. Surveillance audits are on-site audits, but are not necessarily full system audits, and are planned together with the other surveillance activities so that AHF can maintain confidence that the certified production continues to fulfill requirements between recertification audits. The surveillance audit programme shall include, at least:
  - Internal audits and management review
  - A review of actions taken on nonconformities identified during the previous audit.
  - Treatment of complaints

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- Effectiveness of the management system with regard to achieving the certified client's objectives,
- Progress of planned activities aimed at continual improvement.
- Continuing operational control;
- Review of any changes
- The use of Halal Mark and/or any other reference to certification.

- AHF also regularly reviews the documentation provided by the Client, and upon the expiration of the certificates provided, requests the new ones. The Client is given a certain amount of time to provide the updated certificates. If the renewed certificates are not provided at the set time, the validity of the Halal Certificate issued is suspended or revoked.

- In all cases, the procedures with regard to reports issued as a result of surveillance shall be determined by the Halal Certification Committee.

- Surveillance activities shall include on-site audits assessing the certified client's management system's fulfillment of specified requirements with respect to the standard to which the certification is granted.

Other surveillance activities may include

- a) enquiries from the AHF to the certified client on aspects of certification,
- b) reviewing any client's statements with respect to its operations (e.g. promotional material, website),



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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.

- When continuing use of a certification mark is authorized for placement on a product (or its packaging, or information accompanying it) of a type which has been certified, surveillance shall be established by AHF and shall include periodic surveillance of marked products to ensure ongoing validity of the demonstration of fulfillment of product requirements.

- When continuing use of a certification mark is authorized for a process or service, surveillance shall be established and shall include periodic surveillance activities to ensure ongoing validity of the demonstration of fulfillment of process or service requirements.

- In case of nonconformities, the audit team leader should proceed as in the certification audit. Suspensions of the certificate must also be considered. When Halal production premises are audited and if non-conformances that directly affect Halal product safety are detected samples may be taken for the surveillance purposes. The audit file is then reviewed by the appointed decision committee after closure of all NCs.

- Decisions on continuing with existing Halal certification (certificate maintenance) will be made based on sufficient evidence that the client organization has continued to satisfy requirements of the management system standard(s).

- Decision for the date of the surveillance audit will be based on the date of certificate release by AHF during the previous audit cycle.

### 5.3.4 Recertification audit

- AHF conducts Recertification Audits as a gauge of continued fulfillment of audit requirements and scope relevance for the Halal certificate owners



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(certified organization) once they submit a recertification application six (6) months prior to the expiry date of current Halal certificate.

- The recertification audit will only be conducted upon client extension of the contract for audit services. In case of contract termination, no recertification audits will occur to continue the client organization's certification in the next cycle.

- The recertification audit will consider the results of prior audits and ensure that the client organization can demonstrate continued effectiveness of its management system against standards.

- The intent is to ensure that any changes to the scope of the certification audit are captured and monitored regularly to determine if the certification is still representative of the actual management system.

- In most cases, recertification audits are conducted in one stage. Recertification could be done in 2 stages if there are any major changes in the clients systems.

- The time interval for addressing non conformances in case of recertification audits varies depending on the clients' certificate validity.

- Halal certificate owners who failed to renew their certificates will not be allowed to use the Halal mark at the premises or on the manufactured products. Gap-free recertification is also possible if the certification decision has been made 3 months at the most before the expiration date. Competence requirements for the auditors in a recertification audit will remain the same as for the initial audit. The auditor asks the company about any changes in the structural and procedural organization of the company, the size of the company, the company activities and the scope. In determining the calculation of the audit effort / audit program he shall take into account the results of previous audits and decide to waive the audit stage 1. It may be necessary to perform a Stage 1 audit in the context of a recertification audit if there have been significant changes to the management system or in relation to the activities of the company (e.g.





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changes in the law). The documentation shall be in the calculation/ audit program.

- In case the AHF has not completed the recertification audit or AHF is unable to verify the implementation of corrections and corrective actions for any major nonconformity prior to the expiry date of the certification, then recertification shall not be recommended, and the validity of the certification shall not be extended. The client shall be informed, and the consequences shall be explained by AHF.

- Following expiration of certification, AHF can restore certification within 6 months provided that the outstanding recertification activities are completed, otherwise at least a stage 2 shall be conducted. The effective date on the certificate shall be on or after the recertification decision and the expiry date shall be based on prior certification cycle.

-Recertification audits include a review of management system documentation with confirmation of the review in the audit report. If there have been significant changes, the result of the review must be documented separately, and an onsite audit carried out. The results of the previous surveillance program(s) over the course of the certificate validity shall be considered. All requirements of the standard must be audited. The audit methodology is equivalent to the methodology of a Stage 2 audit.

Following points should also be reviewed in the recertification audit:

- effectiveness of the interaction between all quality management elements in the management system with regard to internal or external changes, and the continuing significance and applicability of the management system within the scope of the certification,
- verification that the obligation to maintain the effectiveness of the system and to improve it has been fulfilled in order to increase overall performance capacity within the organization,



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- verification that the certified management system contributes to achievement of the policies and objectives of the organization.

Audit performance, documentation and also issue of certificates shall be performed in accordance with the rules applying to certification audits.

Normally the certification decision should be made before the expiration date of the certificate.

### 5.3.5 Extension audit

An extension audit can be performed to expand / extend the scope of an existing certificate. The extension / reduction audit may be carried out within the scope of a surveillance audit, re-certification audit or on an independently selected date. The validity period of the certificate remains unaffected. Exceptions have to be justified in writing. The audit team leader / audit team will review the MS documents concerning the extended areas / new locations and audit all requirements which are affected by the extension.

The further procedure regarding the documentation and release of the audit procedure corresponds to a certification audit.

### 5.3.6 Short-notice audits

AHF conducts 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

- the certification body shall describe the conditions under which these short notice visits are to be conducted,
- the certification body shall 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.



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Auditors can terminate the audit if they feel intimidated during any audit (Certification, Surveillance, Recertification, short notice audit etc.), and can refer the case to management for swift response on the next steps in that case. In case of serious intimidation, the relevant regional authorities can also be informed.

To reduce pressure before the certificate is issued, all applications are currently reviewed by three personnel not involved in the audit process for that company, to ensure that no interest or pressure shall predominate.

### 5.3.7 Transfer of certificates from other Certification Bodies

The following minimum requirements shall apply:

#### Prerequisites

As a rule, only certificates issued by accredited certification bodies can be transferred; the accrediting body must have signed the cooperation for Accreditations Multilateral Agreements (MLA). Companies with certificates from non-accredited certification bodies are to be treated as new customers.

#### Pre-Transfer Review

A Pre-Transfer Review must be conducted by a competent auditor always. This generally comprises review of important documents and a visit to the customer. Additional audit time might be necessary. The audit time depends on the size and complexity of the organization. If necessary, the additional audit time has to be documented in the calculation / Audit program. The Pre-Transfer Review must cover the following aspects:

- confirmation that the certified activities of the customer are covered by the scope of our own accreditation
- the reasons for transfer of the certificate
- confirmation that a valid management system certificate with regard to term of validity and performance profile of the customer, issued by an accredited certification body, is to be transferred;



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- review of the previous reports on the certification or recertification audit and the subsequent surveillance audits and of all nonconformities dealt with in these reports: this discussion should also include all other available relevant documents and records on the certification process, such as hand-written notes and checklists.
- any complaints received and the action taken.
- the stage of the current certification cycle.

If the transfer is performed within the framework of a surveillance / recertification audit, the pre-transfer review can be performed in connection with the audit.

Performing the transfer audit in connection with the recertification audit, the form of the assessment of the certification period is substituted by the checklist / documentation on certificate transfer.

### **Certificates**

Generally, only a valid certificate issued by an accredited certification body can be transferred. If that prerequisite is not satisfied, the individual case must be judged on its merits.

It is not possible to transfer suspended certificates or certificates which are under the threat of suspension. Any unresolved nonconformities have to be clarified with the previous certification body prior to transfer wherever practicable. Such nonconformities must otherwise be reviewed in the course of the audit.

A certificate can be issued with the date of completion of the Pre-Transfer Review as date of issue (subject to the usual release process) if there are no longer any unresolved or potential problems.

Future surveillance and recertification audits are based on the previous Surveillance and Recertification program.



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### 5.4. Suspension, withdrawal, limitation of the scope of certificates

Suspension, withdrawal and limitation of the certification is laid down in the higher-level work instruction program Suspension, Withdrawal and Cancellation of Certificates. In addition to the reasons for suspension of certification given in the program, certificates are suspended if

- The deadline for nonconformity management (3 months) is exceeded,
- The deadline of 12 months following the date of the certification decision for the first surveillance audit which follows the initial certification is exceeded,
- A surveillance audit has not been performed each calendar year.

If some aspects within the scope of the certification do not fulfil the requirements of the standard to be certified on a permanent basis, the scope must be limited by removing these aspects.

## 6. Annex

### 6.1 Notes on the calculation

#### Note 1:

#### Normal certification (one legal entity)

If an organization with several locations is a legal entity and if no random sample concept is wanted, the time and cost for the auditing can be calculated as if the activities are all carried out at one location.

The minimum total audit time, which must never be less, is the time which would be calculated if all activities were performed at one single location (i.e. all the employees of the organization at one and the same location).

All locations are visited each year.

The auditor days are assigned to the individual locations in "an appropriate way" relative to the specific conditions at the locations.



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### 7. Applicable Documents

Questionnaire / application in Preparation for the Certification  
Proposal (Quotation)  
A Team and Audit Plan  
List of Participants  
Audit Schedule (AHF-F-030)  
Audit Report (AHF-F-018)  
Handwritten Note (if applicable)

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