



EXTRAORDINARY EVENT POLICY

AHF-P-20
Rev: 1.0
Date: October 22
2024

Date	Release/Amendment summary	Revision	Pages affected	Author	Approval
10/18/2024	Formatting and Navigation Fixes	v1	1-8	Mazhar Hussaini	Mohamma dHussaini

Extraordinary Event policy

Definitions:

Accredited Body: Accredited conformity assessment body

Client: Certified organization and Applicant certified organizations

Remote audit: The use of Information and Communication Technologies (ICT) in auditing/assessments e.g. video conferencing, calls, emails, mobile apps etc.

Response plan: Documented plan for the management of accredited certifications in extraordinary event(s) to ensure integrity and confidence is maintained.

Introduction:

The extraordinary event can impact certification and accreditation activities through imposed travel, lockdowns, social distancing, and medical restrictions. As such our actions henceforth

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will be directed by procedure 39 which was documented as per IAF ID3:2011 "Informative Document for Management of Extraordinary Events or Circumstances affecting Accreditation bodies, Certification bodies and certified organizations for an understanding for an alternate framework for the proper maintenance of clients certifications.

AHF recognises the impact of these extraordinary events and that the certification bodies are likely to need to use remote auditing techniques to evaluate ongoing compliance of many certified clients. It also further recognises that remote audits may not be appropriate or possible in every circumstance and that other means of evaluating the integrity of certification will be required.

It also recognises that there will be circumstances where an effective evaluation of ongoing conformance to a certification standard is not possible or appropriate and alternative approaches may not be viable. AHF will be flexible in our approach and our response by virtue of our specific operation and client circumstances.

This policy is to be read and applied in conjunction with IAF ID3:2011. These requirements do not override requirements in standards or schemes. Where a standard or scheme provides no flexibility for alternative arrangements, guidance and agreed approach shall be sought from the accreditation organizations and/or the scheme owner. This policy is solely in respect of extraordinary events matters and is subject to ongoing review and revision in consideration of the rapidly evolving situation and its impact on the operating environment.

Event Response Plan

AHF response plan is formulated in conjunction with:

IAF ID3:2011 .a

Program and scheme requirements including directives issued in response to Event .b
circumstances.

Guidance and directives issued by IAF. .c

IAF ID 12:2015 Principles on Remote Assessment .d

AHF use of information and communication technology (ICT) shall be in accordance with:

AHF procedure .a

IAF MD4:2018: IAF Mandatory Document for the use of Information and .b
Communication Technology (ICT) for Auditing/Assessment Purposes.



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IAF ID 12:2015 Remote assessments used by Accreditation Bodies in order to .c
complement traditional oversight techniques.

AHF will ensure the integrity, confidentiality and security of all remote audit records and
information.

This response plan will be maintained, reviewed, and updated as required.

AHF will ensure that we have the competence and resources to implement our circumstances
events response plan.

This response plan shall be made available to the Accreditation organism upon request.

Audit and Certification Requirements

In addition to the guidance provided by IAF ID3:2011, where applicable, the response plan
shall satisfy the following requirements: Initial and Recertification Audits

AHF would avoid conducting remote audits for Initial and Recertification audits. However,
where this does occur, AHF shall document the planning and execution of the audit and
demonstrate how it has safeguarded the integrity and robustness of the outcome.

Surveillance audits

On site surveillance audits may be replaced by remote audit techniques.

Note: Physical audits are to be conducted during normal circumstances or when health and
safety is not an issue. However, in these extraordinary times, e.g. Pandemic, it is not possible
to conduct traditional audits. Hence, remote audits indicated above can be conducted in place
of traditional audits.

Principles on Remote Assessment

The objective of a remote assessment is to establish the level of confidence in the
Conformity Assessment Body's certification process by direct observations carried
out through an electronic medium. Remote assessments provide the opportunity for
increased efficiency, increased safety, better timing, inclusion of CAB and client personnel
that

may not be easily accessible, and avoid travel delays and restrictions.

Criteria for initiating a remote assessment shall be as follows.



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The use of remote assessments by AHF of its clients may be on a voluntary basis, by mutual agreement, or may be initiated by the AHF for its assessment needs (surveillance, investigations, verifications, etc.). -1

When possible, the scope, planning, assessment process and documentation of the assessment should follow ISO 19011. -2

Remote assessments may be considered for use when: -3

Travel to a client or specific location is not reasonable (i.e., for safety reasons, travel restrictions, etc.). (i)

There are unavoidable changes in scheduling for the Assessor or Client (i.e., personal issues, change in business priorities, etc.). (ii)

The number of sites to be assessed is difficult for the CB to completely fulfill within its time frame. (iii)

The client has a systematic implementation of its management system where records, data, etc. can be reviewed at any site, despite where the work is being performed. (iv)

The assessment is for a minor extension to scope of certification. (v)

The client has a proven track record of conformance at the location of the remote assessment. (vi)

The risk level of the assessment is of low concern to the CB. (vii)

An activity or activities planned for the on-site assessment could not be completed and extending the on-site assessment is not the best resolution. (viii)

The situation requires the assessment team to come back for a follow up assessment, but another visit is not easily achievable within a short time frame. (ix)

Remote assessments may be less favorable in the following scenarios: -4

When the client has a history of nonconformance at the location being assessed. (i)

During initial assessment activity of a new client facility, scope, or significant change. (ii)

When no on-site assessment has taken place for an extended period of time. (iii)

Corrective Actions

Provided it can ensure the effectiveness of its procedures, we will use alternative methods to close out any non-conformities such as reviewing documents or records submitted by our client or otherwise use remote techniques to do so. Where an open non-conformity cannot be evaluated by remote audit techniques, we will evaluate the risks to continued certification and

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act accordingly. This may lead to escalating the nonconformity to suspension of certifications or extending the time to enable the evaluation of the non-conformity.

Where an open nonconformity is evaluated and it cannot be closed, the usual process concerning non-conformity management prevails.

Records

AHF shall evaluate and document each client and occasion for which its extraordinary events response plan is applied. This shall include the evidence considered in determining the extent to which the client and traditional audit arrangements are affected by these events.

E.g.:

- Continuation of the lockdown or Movement Control Order - Prohibition of travel to affected regions or areas.
- Social distancing rules imposed which may impact traditional audit arrangements e.g no of participants allowed in one setting to limit the risks of infection and the distance between individual(s) in a physical setting.
- The balance of risks to the auditor's health versus traditional audit arrangements.
- The possibility of staff being quarantined or isolated.

Informing Accreditation organisms

AHF will maintain a record that identifies each occasion where the extraordinary events response plan has been applied (e.g., a register). This information shall be made available to the Accreditation organisms upon request.

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