



# General Certification Process for GP01 Management Systems Aviation and Defence

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This document is intended to set forth the Certification process for the management system of an organisation in the aviation or defence sector.

## **1. Certification Proposal**

### **1.1 General process**

Bureau Veritas Certification uses the applicant's website or application form to collect the following information:

- ✓ Organisation name and contact details (name, address, etc.)
- ✓ Requested certification (program, scope, sites concerned, etc.)
- ✓ Pre-audit request if applicable
- ✓ List of certifications and qualifications already obtained
- ✓ Completed activities (process, products, clients, etc.)
- ✓ Organisation structure (number of sites, employees, etc.)
- ✓ Percentage of total turnover generated from aviation, space and defence activities
- ✓ Number of employees working for aviation, space and defence activities (including share of central operations) and total employee numbers
- ✓ Identification of key aviation, space and defence clients (ex: the five largest)
- ✓ Global scope and scope of each site (to be confirmed by the auditor)

Bureau Veritas Certification also uses the following information to establish a certification proposal:

- The organisation is already certified and wishes to renew or extend the scope of the certification.
- The organisation is a multi-site or multi-branch organisation and is deploying a centralised system of management.

In compliance with § 8.1.2 of EN 9104-1 (and annex B), the proposal shall identify the structure to be certified by listing it in one of the following 5 categories (single site, several site, campus, multiple site, complex structure).

Specific annexes may be used to collect information required for certain certification processes.

Annex B of EN9104-1 gives details concerning application requirements, audit duration, certificate content and the data to be found in OASIS.

All sites must have a legally enforceable link with the 'central function', a centrally managed quality management system, a management review and internal audits. The central site may request the other sites implement corrective actions. It centralises the collection and analysis of data and has the capacity to initiate organisational changes.



## 1.2 Proposal

On the basis of the information provided by the organisation, Bureau Veritas Certification draws up a certification proposal in accordance with the national requirements set forth by the appropriate accreditation bodies and international requirements set forth by the IAF (International Accreditation Forum).

The technical and commercial proposal drawn up by Bureau Veritas Certification covers the initial assessment and follow-up audits to maintain certification. Details are found in the following documents:

- ✓ Financial proposal
- ✓ The present certification process
- ✓ The general service terms and conditions

The proposal does not include any complementary audit that could prove necessary should the organisation's management system be non-compliant with the selected certification program.

Bureau Veritas Certification may request the organisation provides all necessary information in the event activities, programs, specifications and/or premises are not accessible due to the restrictive or confidential nature of the information.

### **Initial certification:**

- ✓ Audit phase 1 must be conducted on site (except for EN 9120 in which case a remote audit is possible)
- ✓ Audit phase 2 must cover **all sites applying for certification,**
- ✓ In the event procedures cannot be audited, for reasons of confidentiality, they shall be excluded from the scope of certification unless an audit of a similar activity confirms the respect of the requirements.
- ✓ Audits phase 1 and phase 2 must not be conducted on the same day, or consecutive days (one following on from the other)
- ✓ If audits phase 1 and phase 2 are conducted more than 6 months apart, an additional audit phase 1 must be performed (following the drawing up of an amendment to the contract).

Audits phase 1 and phase 2 are planned for in the certification contract. They are scheduled so that the time period between phase 1 and phase 2 is between 45 and 90 days.

If, as requested by the organisation, phase 2 is planned within under 45 days of phase 1, and if phase 1 findings mean it is not possible to conduct phase 2 as planned, Bureau Veritas Certification reserves the right to invoice all costs relating to the postponement of the audit phase 2.

The list of entities to be audited during the audit program is as follows:

- ✓ **Initial audit :** all the sites are audited in accordance with all the points laid out in the applicable certification program
- ✓ **Renewal:** all the sites are audited in accordance with all the points laid out in the applicable certification program
- ✓ **Follow-up audit:** generally speaking, the head offices and all sites are audited each year except in the case of multiple site organisations (in this case all sites are audited during the certification cycle, 50% during Year 1, the others during Year 2)
- ✓ **All types of audit:** the purchases / procurement procedure is audited at all sites



For EN 9120, in the event of sampling, it shall respect the requirements laid out in the IAF MD1 manual; however, the sampling must be performed for each country covered by the scope.

**Renewal:**

- ✓ Renewal audits are scheduled at least three months before the end of the certification validity period to allow time for the renewal decision to be made before the end of this validity period.
- ✓ The scope of the certification is checked before each renewal audit.
- ✓ Any modification to client accreditation shall be examined by the audit team to analyse the impact on the certification program.

### **1.3 Certification contract**

The financial proposal, approved and signed by the organisation (SF01), forms the Certification Contract. On that document, the organisation may specify the time period when they would like to be audited. Upon receiving the document Bureau Veritas Certification performs the contract review and prepares the certification audit.

## **2. Bureau Veritas Certification Auditors**

All auditors are qualified auditors in accordance with the requirements of ISO 17021 and EN 9104-003 international standards. The auditors (Bureau Veritas employees or sub-contractors) are appointed by the manager of the aviation division according to three pre-requisites:

- ✓ Profile (QMS auditor)
- ✓ Experience (second and third party audits)
- ✓ Training (following and successfully completing an EN 9100 training program run by a ICOP TPAB (Training Provider Approval Body) certified organism

Auditors are registered in the OASIS database following authentication by the AAB committee.

Auditors have a solid experience in the aviation industry and the performance of management system audits for such sectors.

Auditors are appointed to conduct certification audits according to three criteria:

- Competence in the organisation's core activity.
- Proximity of the organisation's premises.
- Availability on the certification dates requested by the organisation.

Bureau Veritas Certification auditors are trained so as to ensure a field-based and pragmatic approach. Above all else, they assess the management system as a tool that enables the organisation to control and improve its activities.

## **3. Pre-audit**

A pre-audit is not part of the certification process. However, Bureau Veritas Certification may conduct them upon request by the organisation. A pre-audit is intended to assess compliance of the management system as regards the certification program requirements. It is not to be interpreted as a consulting service nor an internal audit.



Pre-audits are conducted by applying the same assessment process as that used for the certification process. However their duration and scope is inferior to a certification audit. COFRAC recommends not going beyond the equivalent of an annual follow-up; this limits the comprehensive nature of the evaluation to an assessment of part of the scope of the certification process or of the certification program's requirements.

A pre-audit is the observation of a situation at a given time. No action is taken after the submission of the pre-audit report.

It is not possible to have more than one pre-audit prior to an initial certification audit (interpreted as a consulting service).

Important, EN 9100 defines pre-audit as all an organisation's upstream audit certification activities. Further details are provided in section 4.

## 4. Certification audit

The following table presents the activities performed and those common to each step in the process:

		Pre-audit	Phase 1	Phase 2	Monitoring	Renewal	Special (Additional)
Common activities	Audit planning	X	X	X	X	X	X
	On-site audits		X	X	X	X	X
	Audit reports		X	X	X	X	X
	Non-conformity management			X	X	X	X

### 4.1 Activities before the audit

Bureau Veritas Certification performs a review of the proposal, to verify the information provided and the duration of the audit for phases 1 and 2.

#### **Objectives:**

- ✓ Exchange information between the organisation and the certification body (i.e. procedures and activities)
- ✓ Examine the application and scope
- ✓ Appoint a lead auditor
- ✓ Identify potential issues and request additional information if required
- ✓ Draw up and communicate the audit program draft



Before beginning the audit phase 1, Bureau Veritas Certification:

- ✓ Appoints an audit team with experience in the activities and planned scope of certification and/or technical experts as required;
- ✓ Takes into consideration any additional requirements and requests from the organisation and/or its client(s), unless they are inconsistent with the provisions of ISO/CEI 17021, to optimise the added value of the certification audit program
- ✓ Verify the duration of the audit complies with EN 9104-1

Bureau Veritas Certification shall transfer the contact details of the audit team to have time to react in the event of an objection on behalf of the organisation in relation to the appointment of an auditor.

For multi certification programs, it may be necessary to appoint several lead auditors for the different programs.

The audit plan is sent to the organisation.

The lead auditor schedules the audit in accordance with:

- ✓ The scope and complexity of the organisation's Quality Management System
- ✓ The organisation's procedures, including sequencing and interaction
- ✓ The criticality of the products and processes, notably special processes
- ✓ Product security data (ex: airworthiness, feedback from clients or the authorities)
- ✓ Internal audit schedule (performed and planned and the conclusions)
- ✓ Results of previous certification audits
- ✓ Performance indicators and outlook in terms of quality and on time delivery
- ✓ Conclusions of previous management reviews
- ✓ Client satisfaction and complaints data, notably requests for information received by the certification body; ex.: elements identified via OASIS
- ✓ Specific client legal and regulatory requirements concerning the QMS
- ✓ Available client performance information
- ✓ Changes in the organisation (ex: structure, means, commercial strategy, processes, technologies, review of new aviation, space and defence client requirements)
- ✓ The experience / training required and necessary skills of the audit team
- ✓ Company organisation chart
- ✓ Safety guidelines for the sites concerned, notably in the event a prevention plan is required
- ✓ Any additional information deemed important or useful by the organisation or requested by the auditors.

## **4.2 Certification audit phases 1 and 2**

Each on-site audit shall include, according to the circumstances, the following:

- ✓ A review of changes made to the Quality Management System since the previous audit
- ✓ A review of new aviation, space and defence client requirements, since the previous audit
- ✓ A review of the information concerning client satisfaction and requested corrective actions and related responses
- ✓ A meeting with top management
- ✓ An audit of the performance and efficiency of the Quality Management System
- ✓ An audit of the organisation's processes
- ✓ An audit of the continuous improvement of the Quality Management System
- ✓ An audit of follow-up actions from previous audits



The same lead auditor can only intervene on two consecutive certification cycles.

The purchases and procurement procedures must be audited each year and for all sites.

If several surveillance audits are conducted in the same year (ex.: every six months), the activities and points mentioned above can be divided among these audits.

#### **4.2.1 Audit phase 1**

This audit helps assess the organisation's level of preparation for the audit.

Phase 1 is conducted on site (EN 91xx) or off site (only for EN 9120). An off-site audit phase 1 in compliance with EN 9120 is conducted in accordance with the organisation's specificities (ex: size, location, risk, knowledge of previous audit team).

For multi-site organisations with one Quality Management System, the audit phase 1 shall include the assessment of the central function identified as having the authority for the management, control, audit, review and maintenance of the Quality Management System. Phase 1 integrates an appropriate number of sites that are representative of the technologies and activities of the organisation.

The lead auditor must collect enough information to be in a position to:

- ✓ Confirm the audit plan
- ✓ Verify the need for experts and/or additional auditors to establish a competent audit team
- ✓ Determine additional audit activities, as needed, to fulfil the requirements of the initial certification,
- ✓ Schedule phase 2 activities.

When an organisation declares the special processes are excluded from the scope of the certification, the audit team assesses the justification for the exclusion during the initial audit phase 1.

**The lead auditor asks the organisation to provide the following information and documentation at least 6 weeks prior to audit:**

- ✓ The quality manual
- ✓ The description of the procedures with their breakdown and interactions, notably outsourced procedures
- ✓ Performance and outlook indicators
- ✓ Evidence the requirements of the applicable 9100 standards are covered by the organisation's documented procedures implemented in the Quality Management System
- ✓ The interaction with the on-site support functions or with the remote sites
- ✓ Evidence of internal audits of the processes/procedures, including internal and external requirements in relation to the Quality Management System
- ✓ The conclusions of the last management review
- ✓ The list of all key (ex: the five largest) aviation, space and defence clients and any other client requiring conformity with 9100 standards, including the volume of activity for each client and their specific requirements in relation to the Quality Management System
- ✓ Evidence of client satisfaction and complaints status, including the control of client reports, their ranking and any specific requirements.



**A review of the organisation is conducted by the audit team to include the following points when applicable:**

- ✓ Number of employees (i.e. Full time, part time, temporary workers, contract agents) devoted to aviation, space and defence activities
- ✓ Number of teams or types of teams devoted to production and/or maintenance;
- ✓ Identification of major risks related to the processes and products
- ✓ Risk management and related tools
- ✓ Identification of special processes, performed or outsourced
- ✓ Regulatory requirements and approvals from the authorities
- ✓ Additional requirements concerning the configuration management
- ✓ Project / program management
- ✓ Continuous improvement activities
- ✓ Respect of on-time deliveries and performance quality indicators
- ✓ Identification of specific requirements/critical elements, including key characteristics
- ✓ Control of the production process
- ✓ Prevention programs (ex.: Foreign object debris / damage)
- ✓ Special working environments [ex: Electrostatic-sensitive device environment (ESDS), clean/white room]
- ✓ Presence of the client at the organisation [ex.: resident representatives, regular meetings, reason(s) for presence]
- ✓ Status of customer satisfaction and complaints, notably client reports and records
- ✓ Specific client accreditation status (ex.: limited accreditation, trial, suspension, withdrawal)
- ✓ Restricted accesses or proprietary / confidential client information
- ✓ 9100 standards exclusions (exclusions are limited to Article 7) and corresponding justifications
- ✓ Export restrictions / controls [ex.: International Traffic in Arms Regulations (ITAR), Export Administration Regulations (EAR)]
- ✓ The delegations of powers granted by the client for MRB (Materials Review Board) operations
- ✓ Client approved direct shipping / delivery operations.

The audit team begins recording objective evidence concerning the quality manual, the quality management system procedures, applicable processes and the conformity of the procedures with applicable 9100 standards.

The lead auditor uses the results of the above review and all information collected during the site visit to:

- ✓ determine the deployment of the quality management system
- ✓ determine the organisation's level of preparation for the audit phase 2
- ✓ identify elements that represent problems and potential non-conformities if they are not dealt with before the audit phase 2
- ✓ draw up a schedule for the audit phase 2, including all additional aviation, space and defence client requirements concerning the organisation's quality management system
- ✓ verify the scope of certification proposed and its applicability in relation to IAQG working methods and, if required, inform the organisation of the reasons for any changes to the scope proposed
- ✓ verify the information used to calculate the number of days required for the audit, make any recommendations and modify as necessary
- ✓ review audit phase 2 time and update the audit plan if applicable
- ✓ adapt the audit team for the audit phase 2, and include technical experts and/or translators as required
- ✓ identify all required changes to the contract and transmit the information to the organisation and to Bureau Veritas Certification

An audit phase 1 report is drawn up (Form 1 EN9101 downloadable from the IAQG website) and submitted to the organisation.



At the end of phase 1, the auditor also verifies:

- ✓ the regulatory and legal aspects the organisation should adhere to
- ✓ the information provided by the client relating to the business process

If, following the phase 1 audit, the lead auditor believes the organisation is not ready for phase 2, a new phase 1 audit shall be proposed and require an amendment to the contract is drawn up.

The lead auditor then prepares the audit phase 2 schedule following consultation with the organisation. The schedule is sent to the organisation at least 2 weeks before the audit phase 2 start date.

The projected schedule details the elements that will be assessed and a timeline. The schedule may be modified in line with last minute local constraints and takes into consideration the audit team's expertise.

#### **4.2.2 Audit phase 2**

**The objectives of this phase are to:**

- ✓ Conduct the audit
- ✓ Document the audit findings, the audit report (Form 5 EN9101), including the NCRs (Form 4 EN9101), the PEAR, Process Efficiency Assessment Reports, (Form 4 EN910), and the Quality Management System process matrix report (Form 2 EN9101)
- ✓ Verify and record the closure of NCRs
- ✓ Recommend or not for certification, renewal or maintaining certification
- ✓ Update the audit "program" if applicable

#### **4.2.3 Opening meeting (phases 1 and 2)**

The lead auditor calls the opening meeting that must be attended by the management of the organisation and those responsible for the functions or processes that are to be audited. A list of the names of those present must be recorded.

In the case of a multi-site structure, an opening meeting at each site must be held or a centralised meeting organised and attended by company representatives from each site, either in person or by tele-conference.

The objectives of the opening meeting are as follows:

- a) presentation of the participants and definition of their roles;
- b) confirmation of the scope of certification;
- c) confirmation of the audit program (including type and scope, objectives and criteria), any changes or important provisions, such as time and date of the closing meeting, intermediary meetings between the audit team and management;
- d) confirmation of the channels of communication between the audit team and the organisation;
- e) confirmation of the availability of the resources and logistics required by the audit team;
- f) confirmation of points relating to the confidentiality of any information;
- g) confirmation of health and safety measures for the audit team;
- h) confirmation of the availability, role and identity of guides and observers;
- i) information concerning reporting methods;
- j) information concerning the conditions under which the audit may be terminated prematurely;
- k) confirmation the lead auditor and audit team, as representatives of the certification body, are responsible for the audit and the performance of the audit plan, including audit activities and its progression;
- l) confirmation of the status of previous findings, when applicable;
- m) presentation of the methods and procedures used to conduct the audit on a sample basis;



- n) confirmation of the language used during the audit;
- o) confirmation that, during the audit, the organisation shall be informed of the progress made;
- p) provide an opportunity for the client to ask any questions relating to the audit.

#### **4.2.4 Site visit**

A site visit can be conducted to examine any changes made to the scope of certification or the installations since the last visit or to familiarise members of the audit team with the organisation's activities.

#### **4.2.5 Performance of the audit**

The audit is conducted according to the different methods as defined in the audit plan. The audit team will examine relevant audit trails to help determine the conformity and efficiency of the Quality Management System.

The on-site audit is based on interviews with employees, the observation of procedures and activities and the review of documents and records during which the auditor assesses whether the measures defined in the management system are implemented at all levels of the organisation and respect the requirements of the applicable standards. The auditor checks working methods correspond to the requirements of the selected certification program and, if applicable, procedures have been implemented to describe the activities and that corresponding recordings are correctly stored.

In order to have a better global view of the efficacy of the management system, the auditor will analyse one or more files and review their history to verify the system is appropriate and efficient.

This pragmatic field approach focuses on the notion of a tool that is adapted to the organisation's needs according to the risks it must control and the constraints it is subjected to.

If the organisation is organised into process performance teams, each team must be audited during the initial and renewal audits. For follow-up audits, the audit plan can include several teams as required.

Auditing several teams during the same day does not mean the total audit time can be reduced.

In the event special processes are identified in the audit plan, the audit team assesses the validation of each process and the measuring, monitoring and control of the processes.

NB: if one or more audits were performed by the client or by an independent specialised third party, the audit team shall take into consideration the conclusions of such audits.

#### **4.2.6 Closing meeting**

For audits that last several days, meetings can be organised at the end of each day to review progress and findings.

Non-conformities identified during the day can be analysed but may not be closed during the audit period, except in the event the deployment of containment measures is requested.

#### **4.2.7 Audit findings**

Before the closing meeting, the audit team identifies the changes likely to be required by the audit program (ex.: scope, time or timing of the audit, monitoring frequency, expertise of the audit team).



The closing meeting will include at least all of the following elements:

- ✓ An explanation to the organisation that the audit evidence collected during the audit was a sample and that it cannot be taken to cover the whole of the organisation's Quality Management System
- ✓ An explanation of the method used to conduct the audit to report the findings, including non-conformity ranking (major, minor)
- ✓ An explanation of the process used by the audit team to manage and close non-conformities and their consequences if applicable, in relation to the organisation's accreditation or certification
- ✓ Information to the organisation concerning the timing and deployment of corrective actions, if applicable
- ✓ Communication concerning all the activities to be performed by the audit team following the audit itself ( monitoring of corrective actions, submission of audit report)
- ✓ Communication of the recommendation for certification from the lead auditor based on the audit findings
- ✓ Communication to the organisation of the audit-related complaints and appeals process.

#### 4.2.8 Audit report

The audit report includes the following :

Type of structure	Mono-site	Multi-site	Campus	Several Sites	Complex set up
Audit phase					
Phase 1	Audit phase 1 report (Form 1)				
Phase 2 Monitoring Renewal	Process matrix (Form 2) ; per site PEAR (Form 3) ; per site or combined NCR (Form 4), if applicable Audit report (Form 5) Supplementary audit report (Form 6), if applicable				
Special Audit (Supplementary)	PEAR (Form 3) ; per site or combined; if applicable NCR (Form 4) ; if applicable Audit report (Form 5)				

At the end of each certification, monitoring or renewal audit, the audit findings and information are published in standard formats 1 to 6 of EN 9101. The report must be provided within 2 weeks of the closing meeting.

The content of the audit report, including remarks, must provide a faithful and independent vision of the status of conformity and assessment of the efficiency of the Quality Management System in a way that reassures the clients and attracts potential clients and that enables and assists during the supplier selection process and subsequent monitoring operations.

A summary of audit findings shall present all non-conformity information (i.e. the number, level, incidence). Audit data, including the required audit documents / recordings are uploaded into OASIS within the time periods specified in EN 9104-1.

Audit recordings include all information related to the audit (ex: lists of controls, questionnaires, notes, objective evidence provided).



The organisation shall provide copies of audit reports and related documents to its clients or potential clients as requested, unless objectively justified (ex: conflict of interest, confidentiality of data).

The organisation must provide its aviation, space and defence clients and the authorities with access to Level 2 supplier data in the OASIS database as requested, unless otherwise justified (ex. Competition, confidentiality, conflict of interests).

#### **4.2.9 Non-conformities**

Identified non-conformities shall always meet the following three criteria:

- They are objective and founded on the failure to comply with a specification of the certification program or a provision required by the organisation.
- They are based on evidence, never on presumptions.
- They are understood by the organisation.

During the audit, any non-conformities encountered are talked about with the organisation representative who can provide additional elements that could give a better understanding of the global context or situation.

If the non-conformity is upheld, it is formalised via a non-conformity report (NCR), that are not used in Phase 1 audits. The document provides the findings and objective evidence of the non-conformity in relation to audit criteria, notably the following information: confinement, correction, root cause, deployment of corrective action and closure.

Each NCR shall contain only one non-conformity. When non-conformities are identified, the audit team ranks the non-conformity as 'major' or 'minor':

- ✓ **Major non-conformity:** Not satisfying a requirement that is likely to lead to a dysfunction of the Quality Management System or reduce its capacity to ensure the control of procedures or the conformity of products;
- ✓ **Minor non-conformity:** Not satisfying a requirement that is not likely to lead to a dysfunction of the Quality Management System or reduce its capacity to ensure the control of procedures or the conformity of products.

Need for confinement in accordance with the organisation's corrective action procedures is reviewed by the audit team and recorded in the NCR (Form 4).

**A non-conformity that is repeatedly identified** or similar non-conformity that is identified during consecutive audits at one particular site/location shall be considered as a dysfunction of the corrective action procedure and lead to the issuance of a major non-conformity.

In the case of an initial audit, major non-conformities must be closed within 6 months of the end of the audit Phase 2. If not, a new audit Phase 2 is required.

N.B. non-conformity closure requirements are detailed in EN 9104-1.



#### **Following the issuance of a non-conformity, the lead auditor must:**

- ✓ In the event the non-conformity requires immediate confinement action, ask the organisation to define and report on the specific confinement actions (Form 4), notably concerning the **correction, within 7 calendar days of the audit and to give an opinion within the 14 calendar days that follow;**
- ✓ Ask the organisation to analyse and report on the NCR (see Form 4): the root cause and corrective actions deployed or planned, to eliminate the non-conformities that have been identified within the given time periods
- ✓ Agree with the organisation on the corrective action(s) and corrective action plans within **30 days** of the end of the on-site audit;
- ✓ Provide details of the evidence supporting the closure of the non-conformities; and
- ✓ Report to the organisation after having verified the corrective actions.

#### **4.2.10 PEAR**

The level of efficiency of each procedure in the production of the audited product (Chapter 7 of EN9100 standard) is recorded in the PEAR (Form 3)

N.B. Other processes may also be recorded using a PEAR form

#### **4.2.11 QMS process matrix report**

The QMS process matrix report is recorded by the audit team for each site they visit in order to show which process and which clauses of the QMS were audited. The form may be pre-filled before visiting the site and easily modified / updated as required for each visit.

N/E or non-assessed is not used for initial or renewal audits.

#### **4.2.12 Closing an NCR**

The NCR (Form 4) is used to document the control and closure of a non-conformity.

The assessment and closure of the corrective actions plan and associated corrective actions in relation to the non-conformity must not be performed during the audit during which the non-conformity was issued.

N.B. Confinement and corrective action can be assessed during the audit.

Control activities are performed as defined by the audit team leader. The control is performed on-site in the event it cannot be performed using the documentation and related objective evidence provided by the organisation.

The organisation has 60 days to close the non-conformity or the certification is suspended.

In the event the number and nature of the non-conformities (notably in terms of application) reveals a number of serious dysfunctions, the lead auditor may request a complementary audit (prior to any decision to certify) or additional audit is performed (after the decision).

The lead auditor only recommends the organisation for certification when all the non-conformities have been closed.



## **5. Certification**

### **5.1 Administrative process**

Upon reception of the audit report, an administrative review is organised to verify all pre-requisites have been fulfilled before moving on to the certification committee.

### **5.2 Certification decision**

The application is reviewed and approved by a certification committee.

*For multi-program certifications, Bureau Veritas Certification France shall coordinate all decisions concerning the certification.*

One or more Bureau Veritas Certification certificates are issued to the organisation. They state the following:

- ✓ The organisation's name.
- ✓ The applicable certification program.
- ✓ The scope of the certified activities.
- ✓ The site(s) concerned and their address.

If the sites have different scopes, certificates are delivered accordingly.

The original date of certification corresponds to the date of the initial decision of certification. The certificate expires three years after the date of the decision for certification.

This certification does not cover certification for the products or services provided by the organisation and does not exempt the organisation from respecting its legal obligations.

The certification committee may request additional information or demand that additional investigations be carried out before making a decision or may subject their decision to a complementary monitoring visit.

### **5.3 OASIS data management**

The organisation must appoint an OASIS administrator who records all data concerning each certified site and notifies the certification body of any changes made. The information must be recorded in OASIS prior to audit. The Bureau Veritas Certification client service can provide help for the recording of the data.

The organisation authorises Bureau Veritas Certification to enter data relating to the audit findings in the OASIS database.



## **6. Certification trademarks**

The certificate is delivered with the certification trademark and the model used. With the certificate, Bureau Veritas Certification also provides the organisation with the required instructions on certification trademark uses.

Certification trademarks are used to promote the certification of the organisation's management system and may be added to company documentation, but not on the products or product packaging.

The use of the certification trademarks is subject to the respect of the communications guide provided to all clients. Use of accreditation trademarks is forbidden (unless authorised by Bureau Veritas Certification). Bureau Veritas Certification supervises the use of logos and certificates during monitoring visits by verifying that the certification trademarks are:

- Fully reproduced, with the colour and format that comply with the corporate style guidelines
- Used to promote the certification of the organisation's system and not its products or services.
- Not used in any misleading way with regards the certification.

In accordance with ISO 17021 standard, Bureau Veritas Certification provides access to on-going active certifications via its website. The same information is available in OASIS.

EN 91xx certificates refer to document EN 9104-1, governing certification procedure EN 91xx. They also bear the COFRAC and IAQG logos.

The organisation also commits to the following requirements:

- To comply with Bureau Veritas Certification requirements when referring to the situation of the certification through communication means (website, brochures, advertising, etc.),
- To not make any misleading or false declaration concerning the certification,
- To not use or authorize the improper use of any certification document, either in part or in full,
- To cease immediately, in the event of the suspension or withdrawal of the certification, all communications referring to a status of 'certified' organisation,
- To modify all communication in the event the scope of the certification is reduced,
- To not refer to the certification of the management system in a way that may imply a product (including services) or a process is certified,
- To not imply the certification applies to activities not covered by the scope of the certification, and
- To not use certification in a way that could damage the reputation of Bureau Veritas Certification or the certification scheme and not prejudice the trust the public has in it.

The IAQG logo shall not be used by the organization.



## 7. Follow-up audits

Follow-up audits (referred to as monitoring audits in EN 9101) are conducted to ensure the certificate is maintained throughout its validity period by checking the quality management system continues to comply with the selected certification programme. In addition, they help detect weaknesses and identify improvement opportunities that can help the organisation to improve its performance with the implementation of continuous improvement initiatives.

Follow-up audits are on-site audits that do not necessarily cover the full system and that are planned to enable the certification body has continued confidence in the certified management system and in its capacity to remain in compliance with the certification requirements during the time period between two certification renewal audits.

A follow-up audit is scheduled within 12 months of the initial certification and at least once a year. The organisation is free to request they are conducted on another frequency (for example every 6 or 9 months).

Follow-up audits are partial audits whose content is defined and organised by the lead auditor during the initial certification audit.

Bureau Veritas Certification informs the organisation of the planned follow-up audit 30 days before it is due to begin.

Regulation concerning follow-up audits according to the structures audited are presented in Annex B of EN 9104-1.

The follow-up audit program must cover at least all of the following elements:

- ✓ Internal audits and management review
- ✓ A review of corrective actions deployed according to the non-conformities identified during the previous audit
- ✓ Treatment of complaints
- ✓ The efficiency of the management system regarding the performance of certified client objectives
- ✓ The status of planned continuous improvement actions
- ✓ Control of the daily operations
- ✓ The procurement procedure for all sites
- ✓ Review of any changes
- ✓ Usage of trademarks and any reference to the certification.

All paragraphs relating to the QMS (with the exception of exclusions) and all procedures that are part of the QMS must be audited during the follow-up audits in a certification cycle.

The audit methods used (ex: audits of specific problems, locations, products or sub-processes) must be based on the findings of the review of the data relating to the QMS and collected by the audit team.

The audit plan regarding the follow-up audit must take into consideration

- ✓ Changes made to the organisation,
- ✓ The composition of the audit team,
- ✓ The control of the procedures, indicators and product performance tracking over the previous 12 months (for quality and deadline compliance).



Detailed audit comments, including reference to the processes that were audited, the documentation and recordings, must be documented.

For follow-up audits, recommendation for maintaining certification, in light of the identified non-conformities, is recorded in the audit report (Form 5).

If more than one follow-up audit is conducted during a 12 month period (ex: every six months), the activities and elements mentioned in this paragraph can be divided between the audits.

## **8. Renewal audit**

Renewal audits are scheduled at least three months before the end of the certification validity period to give the organisation enough time to close any potential non-conformities before the expiry date of the certificate and the certification committee the time to make a decision concerning the renewal. The scope of certification is checked before each renewal audit. Any change in client accreditation status shall be examined by the audit team to determine the impact on the certification.

A renewal audit is performed in one phase, unless the organisation's quality management system has undergone major changes. The renewal audit takes into consideration the results of the latest follow-up audits.

Certification is valid for 3 years following the decision to renew.

### **Specific cases for organisations previously certified by a different accredited body**

The organisation agrees to provide the audit team with the following information:

- ✓ The valid certificate (accreditation, authenticity, validity, scope)
- ✓ Previous audit reports and absence of unclosed non-conformities,
- ✓ Customer complaints received and actions deployed
- ✓ Any commitment taken with the authorities regarding regulatory compliance

This information enables the audit team to verify:

- ✓ The scope of certification is the same as before,
- ✓ Any non-conformity previously identified has been closed,
- ✓ The efficiency of the customer complaints management system
- ✓ Regulatory compliance is correctly managed with the authorities

In accordance with EN9104-1, the above controls are performed on-site during a transfer audit. The validity of the transferred certification and the status of non-conformities identified during the previous audits is also checked by the 'transferring' certification body via Feedback OASIS.

During on-site audit renewal activities, the elements of the organisation's QMS and procedures that are not necessary for the QMS are audited in terms of conformity and efficiency.

The organisation's quality manual, procedure documentation and QMS must be examined to identify any changes made. Detailed audit comments, including reference to the procedures that were audited, the documentation and recordings, must be documented.

All non-conformities must be closed by the audit team before any recommendation for renewal.

The appointment of a new audit team can justify a partial audit or full audit phase 1 and also an on-site visit with the audit team.



Regulation concerning renewal audits according to the structures audited are presented in Annex B of EN 9104-1.

The decision to certify must be made before the previous certificate expires.

## **9. Extending the scope of certification**

At any moment the scope of certification may be extended to:

- ✓ Integrate other sites into the scope of certification
- ✓ Include other activities performed by the organisation
- ✓ Cover new certification standards.

An extension is usually made during follow-up audits to limit the additional costs involved.

Bureau Veritas Certification may launch a specific audit, if deemed necessary, to validate the certificate extension.

In the event the extension is anticipated, the certification contract shall include such a provision, otherwise, an amendment is made to correctly assess audit time and the sites included, in compliance with EN9104-1.

## **10. Transfer of certification**

Bureau Veritas Certification France can decide to take over an organisation's certification cycle.

To monitor the transfer of the application, a technical control is performed to check:

- The validity of the current certification (accreditation, authenticity, duration, scope, motive for transfer)
- Previous audit reports and the absence of unclosed non-conformities
- Complaints received and actions taken

Bureau Veritas certification reviews the contract and draws up a proposal to take over the organisation's certification cycle. Provisions concerning the performance of the audits and certification decision are identical to those laid out in section 4 above.

In the event of on-going corrective actions, Bureau Veritas Certification shall ensure all non-conformities are closed before issuing a certificate.

Following this control, Bureau Veritas Certification shall conduct an on-site follow-up audit after which the certificate is delivered (once all non-conformities noted during the follow-up audit are closed).

The expiry date of the certificate is the same as the previous certificate. Follow-up audits are scheduled and performed in line with the validity period of the certificate.

Transfers of certification that are requested for certifications that expire within a 12 month period require an audit in 2 phases.



## **11. Changes to the management system**

If major changes are made to the organisation's management system, such changes must be communicated to Bureau Veritas Certification as early as possible. The changes are assessed to verify their compatibility with the standards and certification programs. A special audit may be scheduled if required.

Minor changes made to the organisation's management system are communicated to the auditor and reviewed during the follow-up audits.

## **12. Short Notice Audits**

Bureau Veritas Certification may audit certified organisations at very short notice in order to investigate complaints (Feedback OASIS), following changes in the management system or to follow-up on suspended organisations.

The organisation must accept such audits (there can be a certain flexibility with the dates).

## **13. Suspension, withdrawal or cancellation of certification**

Bureau Veritas Certification reserves the right to suspend, withdraw or cancel a certificate already issued at any time during its validity period. A certificate may be suspended or withdrawn in the following situations:

- ✓ The organisation's management system seriously fails to respect the certification requirements
- ✓ The organisation fails to submit evidence conformity was restored within 60 days following notification of a non-conformity
- ✓ The organisation misuses the certification trademarks or Bureau Veritas Certification logo
- ✓ The organisation fails to comply with the technical and business agreements signed into with Bureau Veritas Certification.

Bureau Veritas Certification shall do everything in its power to enable the organisation to correct any non-conformities that may lead to the suspension of certification (3 months renewable once). Failure to meet these conditions will result in the certification being withdrawn and the contract terminated. The organisation must immediately cease referring to their certification. Failure to provide evidence corrective action has been deployed to close recurring non-conformities, the absence of information concerning performance, or lack of control of a situation can justify the suspension of certification. The organisation must inform its clients about its loss of certification.



## **14. Complaints**

Complaints from organisation are dealt with by the Marketing and Innovation department and replied to in writing.

Complaints brought by third parties are handled under the supervision of the Technical Management unit to determine if the complaint is related to a certified activity.

A root cause analysis is also performed

A reply is submitted to the complainant and all corrective measures are recorded.

Bureau Veritas Certification agrees to respect complainant and organisation confidentiality requirements.

All complaints relating to aerospace activities, EN91xx certifications, are dealt with to ensure notably that:

- all requests for corrective action are replied to within 30 days following reception of the complaint;
- when a reply is requested, it is provided within 30 days following reception of the complaint;
- if Bureau Veritas Certification decides an audit is required rapidly, it must be conducted within 90 days following reception of the complaint;
- the corrective actions procedure must ensure the resulting situation complies with the applicable standards following confinement actions, root cause analysis and the deployment of appropriate corrective actions to treat root causes and the date of the implementation of the corrective actions.

## **15. Appeals**

The organisation may appeal Bureau Veritas Certification's decision in the following situations:

- The application of the organisation is turned down,
- The certificate is not delivered,
- The certificate is suspended or withdrawn.

and in the event of specific certification decisions as provided for in the certification program.

Acknowledgement of receipt is sent without delay to the client.

Appeals are handled under the supervision of the Technical Management Unit.

Unless indicated otherwise in the case of a specific certification program, appeals are handled under the supervision of the Technical Management Unit.

For all decisions, the Technical Management Unit shall consult all authorised authorities or persons according to the situation and timeline (certification committee ...).

In all cases , the resolution is undertaken by an individual not involved in the certification activities that gave rise to the appeal.

A response will be given to the client in writing.



## **16. Confidentiality**

Bureau Veritas Certification administrative staff members and auditors are committed to treating as confidential any information or document obtained or created as part of the certification activities.

That confidentiality requirement may be waived in the following situations:

- Legal purpose or administrative request
- Written agreement granted by the organisation.
- Request from the accreditation body

In accordance with EN 9104, audit reports, certificates and certification status are recorded in OASIS.

## **17. Observer participation to audits**

Bureau Veritas Certification France may at times call observers to attend their certification or monitoring audits.

These observers may be:

- Bureau Veritas Certification France in-house auditors (as part of auditor qualification or supervision)
- Auditors from accreditation bodies or certification scheme prescribing bodies (Bureau Veritas Certification France audit as part of accreditation programmes)
- Members of the Bureau Veritas Certification network.

The organisation must accept the presence of these observers.

## **18. Changes to accreditation rules, applicable regulation or Bureau Veritas Certification requirements**

In the event of such changes, and if the changes impact on-going contracts, Bureau Veritas Certification shall inform its clients about the terms and conditions of the transfer in line with such changes.

Maintaining certification means respecting the terms and conditions that may be the subject of an amendment to the ongoing certification contract.