QUESTIONS AND ANSWERS

QUESTION	ANSWER
QUESTION 1: Oswald.Ogrin (DAKKS), 24/01/2019 It seems to me, that we need in Germany an interpretation to IAF MD 22, cl. 8: 8. INFORMATION REQUIREMENTS G 8.5.3 The legally enforceable arrangements shall also require that the certified client informs the Certification Body, without delay, of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority. Proposed interpretation • serious incident = Fatal accidents, mass accidents and accidents with serious health problems. • breach of regulation = An act or instance of breaking a law or regulation or of nonfulfillment of an obligation or promise, for example: contravention, infraction, infringement, transgression, trespass, violation. Note to "serious incidents": we have in Germany about 1 million reportable accidents per year (> 3 days). I am sure, MD 22 does not mean all this accident. Any other interpretation? Note to "breach of regulation": I suppose here, that we talk about breaches with impact on health and safety with involvement of the authorities. Any other interpretation? Based on this proposal, I will have to make a notification to all CB and certified clients on our website. Please let me know your opinion, as maybe this topic is relevant for all members.	**ANSWER 1** We should underline that the sentence "serious incident or breach of regulation" shall be understood in relation to the duty for a certified organization to be able to maintain its state of legal compliance, as a prerequisite for the effectiveness of its OH&SMS. Therefore, a **CAB shall become aware of any serious incident related to occupational health and safety**: • **either being directly informed by the organization (§ G 8.5.3)** G 8.5.3 The legally enforceable arrangements shall also require that **the certified client informs the Certification Body, without delay**, of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority. • **or even acting proactively, for example paying attention to the media (§G 9.6.4.2)** G 9.6.4.2 Independently from the involvement of the competent regulatory authority, a special audit may be necessary **in the event that the Certification Body becomes aware that there has been a serious incident** related to occupational health and safety, for example, a serious accident, or a serious breach of regulation, in order to investigate if the management system has not been compromised and did function effectively. The Certification Body shall document the outcome of its investigation. • **in order to understand if the causes may be connected to a compromised functioning of the OH&SMS and being in position to take the necessary measures (G 9.6.5.2).** G 9.6.5.2 Information on incidents such as a serious accident, or a serious breach of regulation necessitating the involvement of the competent regulatory authority, provided by the certified client (see G 8.5.3) or directly gathered by the audit team during the special audit, (G 9.6.4.2) **shall provide grounds for the Certification Body to decide on the actions to be taken, including a suspension or withdrawal of the certification**, in cases where it can be demonstrated that the system seriously failed to meet the OH&S certification requirements. Such requirements shall be part of the contractual agreements between the CAB and the organization. The detailed **definition and threshold of application of such requirement are left to the interpretation of the NAB** in relation to the specific context in which they operate.
QUESTION 2: Steve Keeling (JAS-ANZ), Jack.Sondi (auditor India), 21/01/2019 At clause 5 of IAF MD5, it is stated that "The CAB shall obtain an update of client data related to its management system as a part of the surveillance audit".	**ANSWER 2** We agree with your answer as it is clearly **part of the surveillance planning and not during it as, otherwise, it is too late to take any actions.**

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The same is stated in IAF MD22 (for OHSMS scheme) at B.5. Since this has been stated at a section where the focus is more on the man-days to be spent and adjustments if any, I opine that the CAB needs to get this update before a surveillance audit so that any adjustments in audit time can be made before reaching the site. However, the confusion lies with the phrase "...as a part of surveillance audit" and not "surveillance planning". That means the audit team can get an update from the client during the surveillance audit. With this I am not so comfortable, since the team may find surprises and maybe cannot adjust the man-days then and there. What are your thoughts on this?	Furthermore, the CB's processes have been established mainly in line with the requirements of ISO 17021-1, where this is clarified, and this type of requests (i.e. terms & conditions) are part of a legally binding contract between the CB and its customer. IAF MD5:2019, clause 5: "… The CAB shall obtain an update of client data related to its management system as part of each surveillance audit…" See also Q38.16 of EACC Berlin 3/4/2019.
QUESTION 3: Ivan Savov (EFAC, European Risk Policy Institute), 21/01/2019 There is one comment from EFAC, which does not fit the comment table, so I am posting to you in its full text: INAB have issued an implementation plan that states ISO 17021-10 should be fully implemented by end March 2020 (see link in my e-mail to INAB below), whereas the proposed Mandatory Document states that ISO 17021-10 should be used (assumingly from the application date). Were INAB correct in allowing an implementation period of 2 years for ISO 17021-10? If no, we would not have any comment on the proposed draft. If what INAB have stated in their implementation plan is correct (that the IAF endorsement of a 2-year implementation plan applies to ISO 17021-10:2018), then the proposed draft contradicts IAF's own guidance.	**ANSWER 3** We support Joan's reply in relation to what INAB has eventually indicated in their implementation plan. For IAF point of view, as you know IAF MD 22:2018 has an "immediate" implementation to support the accreditation activities for ISO 45001 and OH&SMS in general, and the migration accredited activities from OHSAS 18001 to ISO 45001. Competence requirements were already indicated in Appendix A and, after the publication of ISO/IEC TS 17021-10:2018, this appendix has been superseded, as it was already foreseen. Competence requirements haven't changed with the publication of ISO/IEC TS 17021-10:2018. So, for this reason, we haven't defined a specific IAF transition period as it is connected directly with the application of IAF MD22:2018. This will not change with the actual revision process of IAF MD22:2019.
QUESTION 4, Slim Dhahri through IAF website Inqury, 16/7/2019 **1.** Could you please clarify **difference between chapter 4.2.3 of MD17 & 4.2.4 iii) of MD17?** 2. So, to grant initial accreditation is it mandatory to perform a witness evaluation for each critical code before issuing certificate. Or according to 4.2.3, we can grant initial	**ANSWER 4** Based on the question you have posed, we would like to clarify the following: • Clause 4.2.3 is defining the basic criteria to be utilized for performing the requested witnessing activities in the different technical clusters of each MS scheme in a period of 5 years/10 years of accreditation respectively. Therefore, the execution of the requested witnessing activities are not directly connected with the chosen accreditation cycles. • Clauses 4.2.4 i), ii) and iii) are instead defining the witnessing rules to be applied when there only one critical code (i)), more than one critical code (ii)) or when it is not possible to perform a witnessing activity in the IAF codes identified as critical (iii)) and therefore there is a need to agree between AB and CB how to do it using two identified options with conditions to grant accreditation or maintaining it. For answering your question, we shall refer to clause 4.2.4 and not to clause 4.2.3. In fact clause 4.2.4 defines the rules for granting initial accreditation (and extension) of each MS scheme,

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accreditation for all requested codes and then we define a witness program for a period of 5 or 10 years	whichever is the duration of the accreditation cycle chosen by a NAB (i.e. 2, 3, 4 or 5 years maximum), which shall not be confused with the first period of five years referred by clause 4.2.3, which starts after granting the accreditation. Such rules require performing a witness evaluation for each IAF critical code before granting the accreditation for that critical code, which automatically entails the accreditation in other non-critical codes included in the cluster. The rules are applied in a different way for critical codes identified with an "and" or an "or" as specified in the examples 4.2.4 i) and ii). Clause 4.2.4 iii) states clearly that, only if it is not possible to perform a witnessing activity in an IAF critical code, the AB can agree with the CB to grant the accreditation performing an office assessment on condition that the CB has demonstrated its competence in all the codes of the cluster, and that that the witnessing activity in the critical code/s takes place (with positive results) before any certificate in the critical code/s, based on accreditation, is issued."
QUESTION 5, Gaudi Manfred through IAF website Inqury, 16/7/2019 1. According to IAF MD 1:2018 I see no obstacle in certifying an organization with **2 sites**, assuming that eligibility according to clause 6.1 is given (similar activities and processes). a) **Certification audit:** Central Function at Site 1 plus Site 2 complies with 6.1.3.3 b) **Surveillance 1:** Central Function at Site 1 plus Site 2 complies with 6.1.3.3 c) **Surveillance 2:** Central Function at Site 1 plus no more Site complies with 6.1.3.3 Calculation: 0.6 x SQRT(2) = 0.6 x 1.4 = 0.8 sites) Clause 6.1.3.4 is complied with by auditing Site 1 = Central Function) every year. If no risks would be identified, clause 6.1.3.5 would not apply. The sole obstacle could be Clause 6.1.2.2, which requires at least 25% of the sites by random sampling. This might be critical. 2. However, MD 1 is obeyed without any doubt for **3 sites.** If clause 6.1.2.2 would be fully implemented, this also would not work for 3 sites, as this would result in: **a) Certification audit:** Central Function at Site 1 plus Sites 2 and 3	**ANSWER 5** 1. According to IAF MD 1:2018 I see no obstacle in certifying an organization with **2 sites**, assuming that eligibility according to clause 6.1 is given (similar activities and processes). a) **Certification audit:** Central Function at Site 1 plus Site 2 complies with 6.1.3.3: **Agreed** b) **Surveillance 1:** Central Function at Site 1 plus Site 2 complies with 6.1.3.3: **Agreed** c) **Surveillance 2:** Central Function at Site 1 plus no more Site complies with 6.1.3.3 Calculation: 0.6 x SQRT(2) = 0.6 x 1.4 = 0.8 sites) : **Agreed** Clause 6.1.3.4 is complied with by auditing Site 1 (= Central Function) every year. If no risks would be identified, clause 6.1.3.5 would not apply. The sole obstacle could be Clause 6.1.2.2, which requires at least 25% of the sites by random sampling. This might be critical. I think when we are considering only 2 sites random sampling is difficult, 2. However, MD 1 is obeyed without any doubt for **3 sites.** If clause 6.1.2.2 would be fully implemented, this also would not work for 3 sites, as this would result in: **a) Certification audit:** Central Function at Site 1 plus Sites 2 and 3:

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b) **Surveillance 1:** Central Function at Site 1 plus Site 2, whereas 25% would mean 1 site by random sampling (?) c) **Surveillance 2:** Central Function at Site 1 plus Site 3, whereas 25% would also mean 1 site by random sampling (?)	**For the initial audit you would only need to audit 2 including the central function (square root of 3 is 1.73 so rounded up to 2, however there is nothing wrong with covering all 3.)** **b) Surveillance 1:** Central Function at Site 1: plus Site 2, whereas 25% would mean 1 site by random sampling (?): **Agreed** c) **Surveillance 2:** Central Function at Site 1 plus Site 3, whereas 25% would also mean 1 site by random sampling (?) **Agreed** **Final considerations** Overall, I think that the opinion stated b Mr. Gaudi is correct although I am not sure that he would have to cover all 3 sites in an initial of a 3 site organisation. The main question seems to be about random sampling, I agree that for an organization of 2 sites random sampling is actually impossible because you always have to cover the central function, therefore I cannot see how clause 6.1.2.2 can be complied with. There is no restriction n MD1 regarding the minimum number of sites to consider an organization to be multi-site. However, I would always come back to the reason for the audit, the mathematics are important but the important thing s to be sure that the sample clearly covers the activities and the processes across the organization