

# H&SMS CERTIFICATION REGULATION

## HEALTH AND SAFETY MANAGEMENT SYSTEM

# ISO 45001

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### Art. 1 – Scope and Application Field

This Regulation defines and rules the relationships between ASACERT as a Certification Body, hereafter named CB, and the Organisations requiring the Certification of their own Health and Safety Management System (H&SMS).

Furthermore it defines the ways and conditions for the Certification release, maintenance, extension, renewal, suspension and revocation and the rules for the use of the Certification and the ASACERT Certification Mark.

The access to the certification services is allowed to any requiring Organisation in compliance with this regulation, excluding the application of any kind of discriminating conditions.

The advice in defining and applying the Company's Management Systems doesn't fall within the services supplied by ASACERT as, in compliance with the standards for the accreditation of the Certification Bodies, Asacert doesn't carry out such activity outside the normal information and service functions to the Organisations certified or to be certified. Furthermore ASACERT doesn't make other companies carry out audit activities, doesn't offer nor supply internal audit services to its own certified clients and certifies management systems, which has possibly supplied internal audit services for, only after two years from the conclusion of the audits themselves. ASACERT doesn't certify other Certification Bodies for the activities of management system certification.

ASACERT certification isn't any simpler, easier, faster or less expensive, should the client Organisation have used the services of a specific advice company rather than another one. ASACERT certification activity isn't linked to activities of organisations supplying advice services, therefore actions will be taken, should any advice company assert unsuitably that the ASACERT certification will be influenced by the advisory request to the company itself.

### Art. 2 – Reference Documents

DOCUMENT	TITLE
<b>ISO/IEC 17021-1:2015</b>	"Conformity evaluation - Requirements for the bodies supplying audit services and certifications of management systems. Part 1 - Requirements"
<b>ISO 45001:2018</b>	"Sistemi di gestione per la salute e sicurezza sul lavoro - Requisiti e guida per l'uso"
<b>ISO 19011:2018</b>	"Guidelines for auditing management systems"
<b>Accreditation Body Requirements</b>	Available on Accreditation Body website
<b>IAF MD Documents</b>	Available on <a href="http://www.iaf.nu/articles/Mandatory_Documents_/38">http://www.iaf.nu/articles/Mandatory_Documents_/38</a>

### Art. 3 – Definitions

The certification is "Attestation of the conformity of products, processes, systems or people by third parties" (s. ISO/IEC 17000:2004).

The Conformity Certificate released by the CB is the document attesting that the requiring Organisation works with a H&SMS in compliance with the reference Standard ISO 45001:2018.

The definitions related to the terms used for the activities concerning the certification of the Safety Management Systems are those ones listed in the Standard ISO 45001:2018 and ISO 9000:2015 "Quality Management Systems: grounds and terminology" with the following specifications:

Organisation: Term used to state the subject who supplies a product or service requiring the certification;

CB: Certification Body;

TC: Technical Committee;

CSI: Committee for Safeguarding Impartiality or Committee for Impartiality;

Site: place or places where the Organisation carries out the Safety Management System to be certified;

Evaluation/Inspection: activity carried out by ASACERT to check the Organisation works in compliance with the reference Safety Management System;

Supervision: activity through which ASACERT checks the maintenance of the H&SMS conformity to the specified requirements;

Inspection Group (IG): group of inspectors charged by the CB with the evaluation of the Organisations' H&SMS;

Technical Area: area characterized by commonalities of processes relevant to a specific type of management system;

Anomaly: Non-conformity and Observation;

Finding: Non-conformity, Observation and Comment;

Non-conformity: implementation lack of one or more requirements of the standard which directly influences the H&SMS; fulfilment lack of the legislative and/or regulatory requirements related to the H&S management;

Observation: one or more requirements are partially failed to comply with, without any prejudice to the H&SMS effectiveness; isolated episode of unfulfilment of one rule requirement which doesn't prejudice the H&SMS effectiveness; application of the rule not totally in compliance with requirements such as formal or procedural lacks in the process management (the H&SMS is anyway under control).

Comment: remark not due to the verification of an objective situation of non-fulfilment of a requirement, but aimed at preventing such situation to occur (as it is potentially realisable) and/or giving directions to improve the Organisation's performances.

Inspection typologies:

PCI: Preliminary Certification Inspection

ICI: Initial Certification Inspection (always divided into Stage 1 and Stage 2)

PSI: Planned Surveillance Inspection

SSI: Supplementary Surveillance Inspection

CRI: Certification Renewal/Recertification Inspection (performed in one stage or divided into Stage 1 and Stage 2).

All inspections, except for the preliminary one (PCI), can be carried out with the inspectors of the Accreditation Body according to the CB needs.

#### **Art. 4 – Committee for Impartiality**

ASACERT certification activity is carried out in full observance of impartiality. In order to increase the guarantee level, the CB has a committee called Impartiality Safeguard Committee, which:

- supports ASACERT in the developing of the policies related to certification activity impartiality;
- opposes any trend that trade aspects, or aspects of any other nature, prevent a correct and objective certification activity;
- supplies suggestions on aspects which can influence the certification trust, including the public's transparency and perception;
- carries out a re-examination, at least once a year, of the impartiality of ASACERT audit, certification and decisional processes.

To carry out its duties at the best, the CSI is composed by the representatives of producers, consumers and ministries associations.

ASACERT CSI:

- guarantees the balance of the interests represented so that no one is predominant;
- can access to all necessary information to carry out its own duty;
- can take independent actions (for example by informing the authorities, the accreditation bodies, the interested parties), should the ASACERT Management not consider its own esteems about the impartiality management, respecting the confidentiality requirements under the following art. 13.

#### **Art. 5 – General**

The Organisation must have a documented management system (Manual, Procedures) in compliance with the requirements of the reference rules for the certification and must prove to operatively use the management system according to the system documentation requirements and the reference regulation concerning the application field of the system itself.

In particular each Organisation can require the certification of its H&SMS on condition that it:

- ✚ has a H&SMS which satisfies the requirements of the reference rule stated in the offer request;
- ✚ has been applying the H&SMS integrally for at least 4 months;
- ✚ has completed at least a full internal inspection cycle and carried out a management review;
- ✚ accepts the terms of the present Regulation;
- ✚ guarantees service to the CB Evaluation Group during the inspection visit with particular regard to the safety measures for the Inspectors as foreseen by the legislation in force and authorises the access to the areas and information necessary for carrying out the inspection.

## **Art. 6 – Occupational Health and Safety Management System Certification**

### *6.1 – Request Presentation*

The Organisation which intends to start the certification procedure with ASACERT has to present special estimate request by using the form supplied by the CB (form M-DCT01-0106), which it has to enclose the list of legislative prescriptions applicable to the process and activity related to the Occupational Health and Safety and the indication of the consultant / consulting company that has supported the organization in implementing the EMS (information that the organization will keep updated ongoing maintenance of certification).

On receipt of the request, the CB issues the "economical Offer", according to the supplied elements and the current tariff, which will be valid for a period of 60 days from the emission date.

On the basis of the indications supplied by the Organisation, especially relating the number of employees, the activities and, if applicable, the number and location of the branch offices and/or yards, the CB quantifies the inspection period and defines the reference EA sector for the Organisation and the Certification application field (Object) as well. The number of employees, the company activities and the possible branch offices/yards will be inspected and confirmed during the first audit in the company.

The inspection period can be changed also after the certification according to the yearly updated information about the number of employees, open and operative production places/yards, their complexity and geographical dislocation.

Should any discordance respect to the previous communication arise, both during the estimate request and yearly, the following possibilities could occur:

- ✚ reduction of the certification scope;
- ✚ definition of a further inspection to be carried out within a maximum period of 60 days;
- ✚ adequacy of the current inspection plan;
- ✚ deny of the certification.

Any extra charges due to the further inspections will be invoiced to the certifying/certified Organisation according to the ways provided in the offer.

In case of non-acceptance of the offer within 60 days, i.e. of non-beginning of the certification process within 12 months from the offer issue, should it have been accepted, it declines automatically without any penalties to be charged to the Organisation.

Furthermore this one has the possibility to represent, with the same modalities, a new estimate request which will be followed by the new offer by the CB.

The set of documents: "Application Form" (form M-DCT01-0106), "Economical Offer" (form M-DCT01-0103), "H&SMS Certification Regulation" (form M-DCT05-0105) is the contractual agreement between the requiring Organisation and the CB for the certification activity. The contract is valid, renunciation permitted to be forwarded according the ways under art. 9 of this Regulation.

The inspections will be carried out both at the Organisation offices and its production seats and/or yards, so as the IG can verify the real application of all requirements of the Standard ISO 45001:2018 concerning the typologies of the activities to be certified.

All activities/works within the certification scope have to be verified at the production seats/yards during the certification validity term.

In case ASACERT decides not to accept an application for certification as a result of the application review, the reasons that led to the non-acceptance are documented and made clear to the client.

### 6.2 – Preliminary Certification Inspection

The CI can be preceded by a Preliminary Certification Inspection (PCI).

Upon request of the Organisation, ASACERT carries out, before the certification process starts, a preliminary inspection in order to value the application status of the Safety Management System.

Such activity doesn't influence the forthcoming activities of the inspection process, which cannot undergo time decrease or changes of the defined procedure of the inspections due to particular results of the preliminary inspection.

For example, it won't be possible not to check any paragraph of the regulation, because already verified on the preliminary inspection, and to reduce the number of days/man foreseen in the offer as well.

The Preliminary Certification Inspection (PCI) is therefore in all respects outside the certification process.

The PCI take no longer than 1 day/man and are carried out following the same methodology as the ordinary documentary inspections. ASACERT doesn't manage the feedback with the company (acceptance of the CA, closing checks, etc.).

The preliminary inspections are always carried out for a money consideration according to the current tariff for the day/man charge.

### 6.3 – Inspection Planning

At least 5 days prior to the date of each audit, the Lead Auditor (LA) sends the audit plan to the Organization, containing, among other things, the dates and the sites where activities will be conducted, the expected duration of the activities, the roles of the audit team members. The LA also develops an audit program for the full certification cycle, including, for initial certification, the initial audit (stage 1 + stage 2 audit), the surveillance audits in the first and second year, and the renewal audit in the third year. For subsequent certification cycles, the audit program starts with the decision of the certification renewal and includes both surveillance audits and renewal audit in the third year. The audit program covers all the requirements of the management system as a whole and may be revised by the LA at the end of each audit, in relation to changes to the certification requirements, legal requirements, accreditation requirements, as well as changes of any kind that might affect the compliance of the management system with the reference standard, the variation of conditions relating to employees and business activities included in the management system, the location of potential sites / temporary sites and the activities being carried out, etc.

### 6.4 Inspection Groups



Together with the audit plan, the Organisation is communicated the LA and the Assessors who will carry out the first inspection. With reference to the following inspection, should ASACERT not transmit a communication about the IG change within 5 days from the inspection, the inspectors group is considered confirmed. The Organisation can reject the IG by forwarding a written communication to ASACERT within 5 days from the communication of the CB. The refusal has to be supported by grounded reasons. Upon request ASACERT supplies any further basic information on each member of the IG.

ASACERT IG always includes audit, H&SMS skills and technical competence in the field of the health and safety working the Organisation.

The tasks given to the audit team includes:

- examination and verification of the structure, policies, processes, procedures, records and related documents of the client relevant to the MS standard;
- determination that these meet all the requirements relevant to the intended scope of certification;
- determine that the processes and procedures are established, implemented and maintained effectively, to provide a basis for confidence in the client's MS;
- communicate to the client, for its action, any inconsistencies between the client's policy, objectives and targets.

Moreover to the inspections can participate:

-  training inspectors of the CB;
-  Organisation consultants.

These latest ones can participate as watchers, therefore without any right to intervene in the inspection.

In order to ensure that the assessment procedures adopted by ASACERT comply with the applicable standards, the Accreditation Body may require:

- The participation of its observers to the audits made by ASACERT;
- Carrying out visits to the certified organization, directly using their staff.

The participation of observers to audit and / or the possible visit conducted directly using personnel of the Accreditation Body is previously agreed between ASACERT and the Organization.

If the organization does not grant its approval, the validity of the certificate is suspended until it is not given the approval to verify, for a maximum period of 3 months.

Expired three months, in the absence of approval for the verification, certification is revoked.

The assessment methods used by the Accreditation Bodies are included in specific regulations and / or communications / circular available on their websites.

The Organization shall make available the Accreditation Body of the documentation that ASACERT has taken as a reference during the previous audit.

In the case of additional unannounced surveillance visits or at short notice (usually one week), in paragraph 6.8 of this Regulation, the IG will be chosen with particular caution because the members can not be objected to.

#### 6.5 – Inspection Management

Inspections of stage 1, stage 2, surveillance, renewal and the supplementary ones are organised as follows:

- ✚ an initial meeting with the Management and the Organisation Responsible people to confirm the scopes and modalities of the Inspection and the Inspection Planning;
- ✚ the inspection and the deepening of remarks arisen on previous documentary and/or field inspections and the verification of the acceptance of any exclusion;
- ✚ in case of positive result of the inspections under the previous point and of resolution of any possible interpretation divergence between ASACERT and Organisation, the real audit includes the Inspection in the Organisation in order to measure the correct realisation of the H&SMS in compliance with the reference documents;
- ✚ a final meeting to show the Organisation Management results and conclusions of the IG about the conformity of the H&SMS to the reference form, precisising any Non-Conformity, Observations and Comments. At the end of the meeting, the Lead Auditor (LA) gives the Organisation Management an Inspection Report describing the inspection results and any Non-Conformity, Observation and Comment.

The inspection results and the remark entity are ratified directly by the LA who, on behalf of the CB, has the authority to confirm the Organisation the obtained results on conclusion of the inspections.

The audit team shall interview the following personnel:

- i) the management with legal responsibility for Occupational Health and Safety,
- ii) employees' representative(s) with responsibility for Occupational Health and Safety,
- iii) personnel responsible for monitoring employees' health, for example, doctors and nurses. Justifications in case of interviews conducted remotely shall be recorded,
- iv) managers and permanent and temporary employees.

Other personnel that should be considered for interview are:

- i) managers and employees performing activities related to the prevention of Occupational H&S risks, and
- ii) contractors' management and employees.

The organization representative is requested to invite the management legally responsible for occupational health and safety, personnel responsible for monitoring employees' health and the employees' representative(s) with responsibility for occupational health and safety to attend the closing meeting. Justification in case of absence shall be recorded.

#### 6.6 – Inspection Follow-up

Should the IG, during the above inspections, incidentally, notice any non-observance of law requirements not concerning aspects directly correlated to the valued system but regarding other aspects of the activities carried out by the Organisation, for example aspects of environmental nature or linked to the product/service, without any duty to check such aspects, the IG has to inform the valued Organisation Management through special "confidential" document different from the inspection report. Such aspect will be valued during the next inspection, excepted for special cases for which it will be requested to the Organisation by the ASACERT technical management to solve it out in a determined short time.

In any case the results of the inspection of the IG are internally re-examined and in case further and formally ratified by the CB.

If the CB evaluation doesn't confirm the result reached and already ratified by the IG, the CB informs the Organisation accordingly in the shortest time as possible and anyway not longer than 10 days from the inspection through special written communication stating the changes to the previous result and their reasons.

Due to the Non-Conformities and Observations ratified, the Organisation has to send the CB, in the agreed times and on special forms, the related corrections, the causes and the corrective actions and state the realisation time. These can be collected by the IG directly at the end of the inspection. Should the ASACERT technical structure decide to change the inspection results, as above mentioned, the Organisation can be asked to send new corrections, causes, corrective actions and realisation time.

The CB values and approves the proposed corrective actions and, should it not consider them adequate, it informs the Organisation by written letter for the necessary reviews. The process for the certification release/maintenance/renewal cannot in any case go on until the Organisation sends the CB the necessary corrective actions; as a consequence the Organisation cannot undergo the analyse of the Technical Committee.

The Comments must be supported by the Organisation in writing. ASACERT will check the related considerations on the next inspections (surveillance/renewal/supplementary). The Comments not supported can be repropose as Observations.

### 6.7 – Certification inspections

The CI are carried out in two phases: stage 1 and stage 2 audit.

#### 6.7.1 Stage 1 Audit

During the stage 1 audit the ASACERT IG:

- ✚ checks the Organisation's H&SMS documents;
- ✚ values the Organisation site, including any particularities, and deepens the degree of preparation for the stage 2 audit with the company personnel;
- ✚ examines the level of adequacy and comprehension to the reference rule requirements, in particular regarding the most important aspects of the H&SMS processes, activities, performances and objectives;
- ✚ gathers the necessary information about the H&S MS application field, the processes and the equipment used, the levels of controls established, the sites, the reference legislative and regulatory requirements;
- ✚ re-examines the adequacy of the IG for the stage 2 audit, which it defines the details with the Organisation of;
- ✚ focuses on the planning of the stage 2 audit, acquiring enough knowledge of the H&SMS and the company's activities;
- ✚ values the planning and realisation of the internal audits and the 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.

The stage 1 audit is carried out at the offices of the client Organisation.

As stated under point 6.5 of this Regulation, at the end of stage 1 audit, the LA formalises the results of the stage 1 inspection and communicates them to the Organisation.

Should the determined anomalies lead, during stage 2, to the emission of N-C or more than 10 remarks, stage 1 and stage 2 audits will be divided by a period of time suitable for letting the Organisation solve the remarks (not longer than 4 months otherwise it will be necessary to remake the stage 1 inspection).

Otherwise the stage 2 audit can start straight away after stage 1 audit. Anyway the stage 1 and stage 2 audit are usually separated for organizations with an equivalent number of employees exceeding 25; both cases, small company and exceptionally company > 25, whenever stage 2 will start at the end of stage 1 audit, will be properly justified in the stage 1 audit report.

After the audit stage 1 may be reviewed the audit planning of stage 2, also in terms of man days and also to the needs of the customer to resolve problems identified in Stage 1. Should there not be any contrary communications, the planning of stage 2 audit already forwarded to the Organisation will be considered confirmed.

#### 6.7.2 Stage 2 Audit

During the stage 2 audit, which is always carried out at the Client's head office, the ASACERT IG verifies at least::

- ✚ the information and evidences about the compliance with all applicable requirements;
- ✚ the monitoring of the key objectives, consistently with the requirements of the applicable MS standard or other normative documents;
- ✚ the performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable MS standard or other normative document);



- ✚ the client's management system ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements;
- ✚ the operational control and the management of the aspects concerning the occupational health and safety;
- ✚ the internal audits and the management review;
- ✚ the management's responsibility towards the occupational health and safety;
- ✚ the overall correlations between: the rule requirements, the policy, the objectives, the compulsory applicable requirements, the personnel's responsibilities and skills, the performances and the results of the internal audit.

At the end of the inspection, the ASACERT IG analyses all the evidences arisen on the stage 1 and stage 2 inspections to re-examine every remark and agree the audit's conclusions. As stated under point 6.5 of this Regulation, at the end of the stage 2 audit, the LA formalises the results of the inspection and communicates them to the Organisation.

Then the LA forwards its own inspection report to the ASACERT technical structure.

#### 6.7.3 – Procedure for the Certification Release

The documentation of the practice is examined by the ASACERT Management before being submitted to the Technical Committee for the deliberation of the Certifications release. To have the certification practice analysed by the Technical Committee, at least one of the following terms have to occur:

##### **Condition 1**

- ✚ Non-Conformity 0 (zero)
- ✚ Observations up to 10 (ten) included;
- ✚ Comments no limitation.

In such case the Organisation has to define for each Non-Conformity and Observation noticed by the IG the treatment and corrective actions carried out. Such activity has to be carried out by using the "Findings Management File" (form M-DCT01-0207). All forms M-DCT01-0207 filled in have to be transmitted always to ASACERT as soon as possible. They can be collected filled in directly by the LA at the end of the audit.

The certification practice cannot be submitted to the committee if the ASACERT Technical Management and the LA haven't checked and accepted on a documentary basis, and if necessary through a supplementary inspection, the positive closing of the N-C and Remarks or the overcoming programme. Should a contrary communication by ASACERT miss within 10 days from the receipt of the corrections and the CA, these are considered accepted.

In case of positive verification by the Technical Management and the LA, the practice is forwarded to the Technical Committee which can deliberate the certification release. With reference to the number and the importance of the N-C and Remarks released, and the defined corrective actions as well, the committee can deliberate a Supplementary Surveillance Inspection (SSI) after the certification to be carried out by a time defined by the committee but anyway no longer than 6 months from the certification release date.

Such increase in the surveillance inspections needs guarantee that the Organisation measures are really effective, in a defined period of time, and in compliance with the Organisation Management System, made valid concerning the compliance with the certification general rules of the CB.

Should severe lacks of the effective application of the defined corrective actions arise during the supplementary surveillance inspection, the Technical Committee can deliberate the certification suspension.

To revoke the suspension, a new supplementary inspection SSI will have to be carried out. Such process is to be considered valid also for the planned surveillance inspections PSI.

The SSI carried out under such terms are charged at the Organisation.

In the other cases the practice can not be submitted to the Technical Committee and in particular:

##### **Condition 2**

- ✚ Non-Conformity 1 (one) or more;
- ✚ Observations over 10 (ten).

In such case, for each Non-Conformity and Remark noticed by the IG, the Organisation has to define the treatment and the corrective actions put into effect. Such activity must be carried out by using the " Remark Management File" (form M-DCT01-0207).

The certification practice cannot be submitted to the Technical Committee.

ASACERT carries out a Supplementary Surveillance Inspection (SSI) to check the overcoming of the N-C noticed and at least the Remarks overcoming programme.

In special cases, acceptable only by the ASACERT Technical Management, the overcoming of the N-C can be verified by forwarding Organisation's documents.

Should one or more documentary and/or supplementary surveillance inspections (SSI) lead the Organisation under "Condition 1" back, the practice can be submitted to the Technical Committee.

The documentary inspections and the SSI under such terms are charged to the Organisation.

If ASACERT is not able to verify the implementation of corrections and corrective actions of any NC within 6 months after the last day of stage 2, another stage 2 will be conducted prior to recommending certification.

#### *6.7.4 – Decisions for the Certification*

Upon positive response of the Technical Committee, verified the fulfilment of the economical duties of the Organisation, ASACERT issues the Conformity Certificate.

The CB sends the Organisation a letter to inform it about the obtaining of the Certification and encloses the Conformity Certificate. It includes: the Organisation's name, the address of its offices, the reference rules and/or regulations, the application object and limits of the certified Management System for the Occupational Health and Safety, the date and time of the certification validity.

Further to the certification release, ASACERT puts the Organisation's name into the list of the certified Organisations. Such list is updated in each meeting of the Technical Committee and is available to anyone requiring it.

On negative response of the Technical Committee inspection, ASACERT sends the Organisation a communication stating the reasons of the certification release refusal and specifying if it is necessary to carry out a field supplementary inspection or documentary evidences are enough to lead the company back to the above Condition 1 or Condition 2, from which the certification process starts again.

The Committee for Impartiality meets periodically by ASACERT and analyses some random certification practices to checks the right carrying out of the certification process by ASACERT as far as the impartiality guarantee concerned.

Should potential irregularities arise during the inspection of the Committee for Impartiality, which are not due to the Organisation, any necessary further inspections won't be charged to the Organisation. On the other hand, should any lacks be due to the Organisation, any extra charges for further inspections will be invoiced to the Organisation. The reasons of the extra inspections will be forwarded to the Organisation with the list of the related reasons.

Then the certification practice undergoes a new inspection by the specific Technical Committee which has to define the actions to be taken for solving any noticed remarks. ASACERT won't take any suspension and/or revoke measures until objective evidences arise supporting the measure itself.

Within max. 120 days the Technical Committee has to promote the measures necessary to solve the problems remarked by the Impartiality Safeguard Committee. After such term, ASACERT, during the first meeting of the above committee, will have to prove the obtained results arising from the deepening.

In any case, the Organisation accepts and authorises ASACERT to communicate the measure to the accreditation Body.

#### *6.8 - Certification Validity, Surveillance and Maintenance*

The certification is valid three years from the issue date reported on the Certificate (coinciding with the meeting date of the Technical Committee which has deliberated it) and undergoes 3 (three) "planned surveillance inspections" (PSI) by the Organisation, the first one is carried out within 12 (twelve) months from the date of the last day of stage 2 inspection, the second one by a year from the first inspection and the third by a year from the second one.

The third PSI coincides with the certification renewal inspection (CRI).

4 months earlier than the limit date to carry out the surveillance inspection, ASACERT reminds the Organisation the expiry and encloses, generally, the invoice related to the audit, together with any forms related to the active yards in case of Organisations of sector EA28. The precise audit date, and any yards to be visited as well, will be agreed between the Organisation and the LA.

Should the Organisation not have paid for the above invoice, anyway forwarded, yet on the surveillance inspection date, the certification can be suspended as per the hereunder art. 7.

The surveillance inspections aim to verify, at least:

- a) internal audits and management review;
- b) a review of actions taken on findings identified during the previous audit;
- c) complaints handling;
- d) effectiveness of the MS with regard to achieving the certified client's objectives and the intended results of the respective MS (s);
- e) progress of planned activities aimed at continual improvement;
- f) continuing operational control;
- g) review of any changes;
- h) use of marks and/or any other reference to certification.

Supplementary unannounced surveillance visits or at short notice (generally one week), can be carried out, should the CB decide to investigate complaints, or in response to changes, or as follow up on suspended clients. In this case ASACERT 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. The reasons to investigate will have to be supported by documentary evidences or written remarks to the CB. Should the IG during the inspections confirm the validity of the causes which lead to a Supplementary Inspection, the charges will be debited to the Organisation in the modalities defined on the agreement.

Should the IG indeed end the supplementary inspection without any evidence of the causes which led to the inspection itself, the charges will be on behalf of ASACERT.

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.

The certified Organisation has to promptly inform the CB in written about any severe changes made to the H&SMS. Such changes could make necessary a special SSI.

The maintenance of the Certification for the three-year validity undergoes the prescriptions under point 6.7.3. In particular, the certification maintenance is permitted on the occurring of Condition 1. Yet the ASACERT management can carry out Supplementary Surveillance Inspections (SSI), according the number and importance of the Non-Conformities/Remarks noticed during the PSI, to measure the effectiveness of the treatments and of the implementer corrective actions.

On occurring of Condition 2 under point 6.7.3, ASACERT suspends the Organisation certification, as under the forthcoming art. 7. The Organisation has to promptly send the defined corrective actions. ASACERT submits the practice to the Technical Committee to define the timing to carry out the SSI.

Only through a SSI, which leads to Condition 1 back, and after submitting the practice to the Technical Committee, ASACERT can revoke the suspension measure.

The results of the planned surveillance inspections (PSI) and of the supplementary surveillance inspections (SSI) are analysed by the Technical Committee to maintain the released certification. The Technical Committee can ask for any further extra inspections or deepening to the charged IG.

Other surveillance activities may include:

- ✚ enquiries from ASACERT to the certified client on aspects of certification;
- ✚ reviewing any certified client's statements with respect to its operations (e.g. promotional material, website);
- ✚ requests to the certified client to provide documented information (on paper or electronic media);
- ✚ other means of monitoring the certified client's performance.

Any findings highlighted by this additional method of investigation, as well as the lack of response from the customer, will be handled in the section 6.7.3 - Condition 1 or 2 - above.

### *6.9 - Certification Renewal*

The decision to renew the certification is normally made by the expiry of the three-year validity of the certificate. ASACERT can decide to grant the renewal of the certification even when the recertification process is completed within a year after the expiry date of the certificate (in this case the starting and end validity dates of the current certification cycle will be clearly indicated on the certificate, and the expiry dates of the previous certification cycle and the recertification audit date). Following the expiry of the certification, ASACERT can restore it within 6 months,

with a renewal assessment, provided that the pending certification renewal activities have already been completed, or after 6 months and within 1 year, with an assessment during at least as a stage 2 audit (and no less than the duration of a renewal).

In any case, if the certificate had a duration of less than 3 years, due to the postponed renewal, the principle that all the requirements and the whole scope of the certificate must be covered in the certification cycle, with surveillance assessments conducted at least once a year, remains fully applicable. If the assessment and decision activities are not completed within one year after the certificate expiration, it is only possible to proceed with a new initial audit (stage 1 + stage 2).

The planning of the Certification Renewal Verification is in any case carried out starting from the 4th month prior to the expiry date of the certificate.

With this advance ASACERT reminds the Organization of the need to carry out the renewal audit and generally attaches the relevant invoice, together with the possible form on which to indicate the sites active in the case of sector Organizations IAF28. The precise date of the audit, as well as any construction sites to be visited, will be agreed directly between the Organization and the LA.

Should the Organisation not have paid for the above forwarded invoice yet on the inspection renewal date, the certification can be suspended as foreseen under the forthcoming art. 7. In any case the new certification will be forwarded only after the invoice payment.

The renewal audit is planned (also considering the results of previous audits) and carried out addressing the following:

- ✚ the effectiveness of the MS in its entirety in the light of internal and external changes and its continued relevance and applicability to the scope of certification;
- ✚ demonstrated commitment to maintain the effectiveness and improvement of the MS in order to enhance overall performance;
- ✚ the effectiveness of the MS with regard to achieving the certified client's objectives and the intended results of the respective MS (s).

The renewal audit considers the H&SMS performances in the previous certification period and includes the re-examination of the reports of all surveillance audits.

Should the H&SMS, or the surrounding situation, have undergone significant changes (for example in case of substantial legislative changes), ASACERT can deem necessary to carry out a renewal audit divided into stage 1 and stage 2 as under the previous points 6.7.1. and 6.7.2 of this Regulation.

The RCI leads to a new examination of the H&SMS documents and a revaluation inspection of the whole H&SMS according to the modalities described in the previous points 6.7.3 and 6.7.4.

The Certification renewal at the three-year validity expiry undergoes the prescriptions reported in point 6.7.3. In particular, the certification is renewed on occurring of Condition 1. Yet the ASACERT management can, with regard to the number and importance of the Non-Conformities and Remarks noted in the CRI, carry out Supplementary Surveillance Inspections (SSI) to measure the effectiveness of the treatments taken and the implemented corrective actions as well.

On occurring of Condition 2 defined under point 6.7.3, ASACERT doesn't renew the certification to the Organisation. The certification practice cannot be submitted to the Technical Committee.

ASACERT carries out a Supplementary Surveillance Inspection SSI to verify the overcoming of the N-C noticed and at least the programme of the Remarks' overcoming.

In exceptional cases, acceptable only by the ASACERT Technical Management, the NC overcoming can be verified according to the forwarding of documents by the Organisation.

Should one or more documentary inspections and/or supplementary surveillance inspections SSI lead the Organisation back to "Condition 1", the practice can be submitted to the Technical Committee.

The documentary inspections and the SSI carried out in such term are charged to the Organisation.

The Technical Committee can ask any supplementary inspections or deepening to the appointed IG.

#### *6.10 - Expansion and reduction of the certification scope*

The Organisation can ask the CB to extend the certification and other activities, not included in the released certification.

Similar request can be presented to the CB in case of reductions or exclusion of activities, according to the previous point 6.8.

The above extensions or reductions could require a revision of the conformity certificate previously released.

Upon a written request, the CB will establish, further to the examination of the presented documents, whether a supplementary inspection has to be carried out or it can be avoided, by integrating it with the first planned surveillance/renewal inspection.

Changes to the certification scope can also be proposed by the LA to the Technical Committee, through the records included in the audit report, based on the activities checked at the client's site(s) during the audit.

#### *6.11 – Acknowledgement of the certifications released by other Certification Bodies - Maintenance and Renewal*

Should ASACERT receive an estimate request by Organisations already certified by other certification bodies, it carries out a re-examination similar to the one described under point 6.1.

Should the Organisation have been certified by a CB not accredited for the EA sector by a body signing the accreditation agreements EA, PAC, IAAC o IAF MLA or accredited for the sector EA by a body not signing the agreements EA, PAC, IAAC o IAF MLA, it will be issued an estimate for a new certification and the process will be the same as point 6.1-6.7.4.

Changes of the normal ASACERT rules are not foreseen for the release of new conformity certifications.

Should the Organisation have been indeed certified by a CB accredited for the EA sector by a body signing the agreements EA, PAC, IAAC o IAF MLA, after positive verification of the certification and accreditation validity status, it can be issued an estimate for the certification maintenance, which will lead to a pre-transfer documental analysis (followed by a decision of the Technical Committee) covering at least the following aspects:

- ✚ Congruence between sector of actual activity and EA certification sector;
- ✚ Reason of the CB change;
- ✚ Accreditation status of the certifying CB:
  - Accreditation of the CB under validity for the specific sector;
  - Analyse of any possible suspensions/revocations warned by the CB on behalf of the accreditation Body;
- ✚ Status of the certification released to the Organisation
  - Certification in the process of validity;
  - Congruence between activities covered by the Management System and issued certification
  - Eligibility of any non-applied requirements.
- ✚ Analysis of the audit reports issued by the certifying CB on the last assessments up to the most recent renewal or certification audit and of the corrective actions defined by the Organisation.
- ✚ Any complaints received by the Organization and related actions taken.
- ✚ Possible implications of the Organization with Regulatory Bodies in relation to compliance with legislative and / or regulatory provisions.

Following the positive outcome of the aforementioned checks, the Technical Committee may express itself favorably on the certification transfer and the periodicity already in place regarding the subsequent surveillance and / or renewal assessments may be maintained.

So far as:

- it is not possible to make any contact with the transferring CB, or
- there is no confirmation on the validity of the certificate by the transferring CB, or
- there are not enough audit records (including checklists) for the current certification cycle, the pre-transfer documental analysis will be carried out partially or totally on site (if anything a new certification audit will be carried out in the event that there are no records available relative to the assessments of the current certification cycle)

the pre-transfer document verification will be carried out partially or totally onsite (if anything a new certification will be carried out in the event that there are no records available relative to the audit documents of the cycle in progress).

After the positive outcome of the pre-transfer documental analysis on site, the Technical Committee can express itself favorably on the certification transfer and the periodicity already in place regarding the subsequent surveillance and / or renewal assessments may be maintained.

In the event that the accreditation of the transferring CB is suspended, it is mandatory to carry out an on-site assessment of at least 1 manday before being able to transfer the certificate.

In the event that the accreditation of the transferring CB is revoked, it is mandatory to carry out an on-site assessment at least equal to a stage 2 audit, if within 6 months from the revocation, before being able to transfer the certificate. If more than 6 months have passed from the revocation, it is necessary to proceed with an initial assessment.

For the purpose of determining the audit duration, ASACERT takes into account the provisions of the IAF MD5 guide.

In any case, the ASACERT Management, in case of any technical needs, can increase the number of days compared to what is expected.

The continuation of the certification process then proceeds according to the same procedures defined by point 6.2. and subsequent. Following the issue of the certificate, ASACERT will inform the previous CB.

#### *6.12 - "Multisite" Organizations Certification, based on sampling*

This paragraph is applicable to organizations engaged in similar activities in different sites, which have a defined headquarters, where the activities are planned, controlled and managed and a network of local offices or branches, where the activities are wholly or partly carried on. Processes at all sites must be the same type and be carried out based on similar methods and procedures. The H&S MS should be centrally managed and subject to central management review.

All relevant sites (including the central administration function) shall be subject to internal audit program and must have been audited before the certification process. The organization must demonstrate its ability to obtain and analyse data from all sites (including head office) and must also demonstrate authority and capacity to implement the necessary changes, if appropriate (eg data from documents and amendments to system, management review, complaints, AC, internal audit and evaluation of the results, changes in legislative requirements).

The sample size to be audited for certification, surveillance and recertification is determined by ASACERT, according to, for example, the complexity of the activity, the size of sites to be audited and magnitude of the differences occurring between the different sites. Before the offer to the Organisation, must be provided all information necessary to identify the activities covered by the H&S MS and their complexity, including the peculiarities of each site, to allow an accurate identification of the sample.

The organization must provide to ASACERT, when requesting offer, which sites are to be included in the certification and which to exclude. Where nonconformities arise at any site, even during an internal audit or an audit ASACERT, the organization must carry out appropriate investigations to verify whether the same anomaly can also occur at other sites. Any corrective actions must be undertaken both at central and at local level and in any case must be demonstrated to ASACERT carrying out appropriate investigations in this regard. ASACERT requires the evidence of actions taken by the Organization and may increase the frequency and / or sample sizes to make sure that control has been restored.

Where there are non conformities, certification will not be released to any site. It will not be eligible to exclude a site in process, if in that site were detected nonconformities, to solve the problem.

Documents relating to the certification will make explicit reference to activities and sites certificates. If a single certificate is released for each site, it will be made reference to the certification "multisite". All certificates will be revoked if a site fails to comply with any requirements necessary to maintain certification. The Organization undertakes to inform ASACERT on the closure of a site included in certification. New sites can be added to the certification, usually during the surveillance audit or renewal, always respecting the rules listed above. The site / group of sites to be added will be considered similar to initial certification.

The criteria for making the sampling will be partly selective and partly coincidental. At least 25% of the sample will be chosen at random. We will try to select a sample that can include the main differences between the various possible sites within the validity period of certification. The site selection will consider, for example, the results of internal audits and management reviews, complaints, corrective and preventive actions, significant changes in the size of sites, changes in work shifts and procedures, complexity of the H&S MS and processes, changes compared to previous audits, maturity and level of knowledge of H&S MS of the Organisation, cultural differences, language and legal requirements reference, geographical dispersion. The sample can also be determined after the initial audit at Headquarters. In any case, the headquarters will be communicated to the sample to be audited.

In general, always respecting the above rules, the minimum number of sites to be audited is  $\frac{1}{2} n$  ( $n$  = number of sites) for the ICI,  $0.6 n \frac{1}{2}$  PSI and  $0.8 n \frac{1}{2}$  for the CRI. Its headquarters are always audited. The sample may still be increased by ASACERT sites where large, complex activities, presence of shifts, changes in activities, complaints, results of internal audits and management reviews and in any other case where ASACERT thinks that the risk that their assessment of the conformity of the H&S MS is not sufficient considering a number of sites following the rule

above. The number of days / man for the verification for each site will be determined according to the requirements of the IAF document MD5 on the number of employees. The total number of mandays can not be less than that calculated using the IAF MD5 document where all employees work in a single site. In the event that the organization intends to add a group of sites to the certification, the group itself will be considered as an organization "multisite" for the determination for the sample. After the certification of the new group, the same will be accrued prior to the calculation of the sample on a PSI and CRI.

#### **Art. 7 - Certification Suspension**

The CB can suspend the certification validity for a determined period of time, should special situations occur such as:

- ✦ the Organisation has temporary suspended the H&SMS application;
- ✦ the Organisation doesn't permit the realisation of the PSI or SSI or RCI;
- ✦ the Organisation isn't available for inspections together with inspectors of the Accreditation Body;
- ✦ the corrective actions due to the remarked non-conformities are not carried out;
- ✦ it occurs irregularities in using the CB Mark and/or Certification or the CB Accreditation Body's Mark;
- ✦ the H&SMS doesn't guarantee the respect of the compulsory requirements regarding the Occupational Health and Safety;
- ✦ the occurring of problems linked to the compulsory requirements of the offered product / service or the interested management system;
- ✦ the non-communication to the CB about any changes of its own management system;
- ✦ the non-communication to the CB about judiciary and/or administrative procedures;
- ✦ the condemnation of the Organisation for the non-respect of the compulsory requirements concerning the management system under certification;
- ✦ the missing management of complaints or remarks directly linked to the lacks of the certified management system.
- ✦ the Organisation's non-respect, after formal reminder, of the financial commitments towards the CB; a serious breach of regulation necessitating the involvement of the competent regulatory authority (provided by the certified client or directly gathered by the audit team during an audit; ASACERT will decide on the actions to be taken, including a suspension of the certification, in cases where it can be demonstrated that the system seriously failed to meet the OH&S certification requirements).

Should the Organization asks for the suspension of certification (for a period that should not exceed 6 months), the ASACERT Management, after deepening the reasons, will notify the Organization by registered letter with return receipt, disclosed by fax, or by certified email, the acceptance of the request and the conditions under which the suspension can be revoked. If one of the administrative / management conditions set forth in the list above is fulfilled, the suspension provision is approved by the ASACERT Management, if necessary after consultation of qualified Technical Committee with reference to the technical areas.

If one of the technical conditions listed above is fulfilled, the suspension provision is approved by the qualified Technical Committee with reference to the technical areas.

In any case, the ASACERT Management notifies the Organization by registered letter with return receipt, disclosed by fax, or by certified email, the reasons for the measure taken, the duration of the suspension (also in this case generally not exceeding 6 months) and the conditions under which it may be revoked.

The suspension provision comes into force on the date of the registered letter (or certified email). The certification issued and subsequently suspended cannot be used in any case (for example participation in public tenders) starting from the day of receipt by the Organization of the Registered letter with R.R., or certified email, sent by ASACERT.

The Organization accepts and authorizes ASACERT to make public, through its own website, the possible suspension provision.

The suspension will be revoked only after the CB has verified the satisfactory restoration of compliance with the requirements specified through a supplementary surveillance audit.

The suspension withdrawal provision is resolved by the ASACERT Management in administrative / management cases or, for the technical cases described above, by the qualified Technical Committee with reference to the technical areas. The revocation of the suspension starts from the date of the communication sent via R.R. or by certified email.

The expenses related to the consequent additional verifications, at the ASACERT headquarters and / or at the company headquarters, are charged to the Organization.

#### **Art. 8 – Certification Revocation**

The CB revokes the certification if the Organisation:

1. hasn't eliminated, in the ways and times established, the terms which have led to the certification suspension;
2. breaches the compulsory H&S rules;
3. stops the activities for which it had got the certification of its H&S MS;
4. goes into liquidation or under judicial or extraordinary administration or a bankruptcy proceedings is open;
5. has definitive convictions, become final, charged to its representatives, for facts regarding the non-respect of the compulsory requirements of the management system object of certification;
6. doesn't respect, after reminder, the financial commitments towards the CB, in the stated terms;
7. breaches regulation necessitating the involvement of the competent regulatory authority, provided by the certified client or directly gathered by the audit team during an audit; ASACERT will decide on the actions to be taken, including a withdrawal of the certification, in cases where it can be demonstrated that the system seriously failed to meet the OH&S certification requirements).

The decision for the certification revocation is taken by the ASACERT Management or the Technical Committee charged for the specific sector EA, generally according to the reasons' type: administrative/legal or technical. After the certification revocation the contract between the Organisation and ASACERT is rescinded.

The certification revocation takes effect from the date of the communication transmission, anticipated by fax, sent by registered letter with return receipt, or by certified email, by the ASACERT Management to the certified Organisation.

The ASACERT Management notifies the Organisation the measure reasons in the sent communication.

At the date of the certification revocation the Organisation has to pay for a penalty equal to the 80% of the amount of the activities still to be carried out in the three years period of the certificate validity.

The certification revocation implies the Organisation cancellation from the list of the certified companies; the Organisation has to give the CB the original conformity certificate in its hands back and eliminate any copy, and stop using the certification mark in any form and way as well.

The Organisation accept and authorises ASACERT to make the revocation public through ASACERT website, and therefore to communicate the revocation measure to the Accreditation Body and, if applicable, to any other Institutional Body.

The CB reserves the right to ask the compensation for damages.

#### **Art. 9 – Termination**

The Organization may terminate the contract, by registered letter with R.R.:

- upon expiration of the validity period of the certificate, before its renewal and post second surveillance audit, giving formal cancellation of the contract within the 30 calendar days following the second surveillance audit of the three-year period;
- in the case of changes specified at art. 10;
- at any other time, with the payment of a cancellation fee equal to 80% of the agreed amount for the validity of the three-year period of the certificate, provided by the valid contract.

The issued certification ceases its validity on the expiry day specified on the certificate, in the case in which the renunciation occurs after the second surveillance audit, or, in the other cases, on the date planned for the execution of the surveillance audit, for which the Organization is no longer available.

The Organization accepts and authorizes ASACERT to make public through its website, and to transmit it to the Accreditation Body, as well as to other Bodies, if applicable, the termination of the validity of the certificate.

#### **Art. 10 – Change to requirements for certification**

In case of changes to the certification scheme of the CB and/or this Regulation, except for the necessary or the related to normative or the regulamentary ones, among which the changes of the reference documents under art. 2 in an unexhaustive way, or related or consequent to themselves, or the changes necessary or related to the respect of regulations, instructions or fulfilments necessary and/or suitable for obtaining or keeping the ASACERT accreditation, the CB will inform the Organisation and state the kind of changes and the date within which the Organisation will have to adjust.



The Organisation, in case of non-acceptance of the proposed changes, can reject the certification through written communication to the CB according to the modalities under art. 9, i.e. by registered letter with return receipt, with effect as from the date of the receipt by ASACERT, only if such changes are substantial and important for the change of the CB certification scheme and/or this regulation and are substantial and too expensive for the Organisation causing severe changes in the company's management system and ordinary operativity.

Any costs for evaluation activities arising from the above changes will be charged to the valued Organisation.

ASACERT verifies that each certified client complies with the new requirements either during the first audit, or through records sent by the client and/or through SSI.

## **Art. 11 – Responsibilities and Duties**

### *11.1 - Compulsory Requirements linked to the management system and limits of the related controls.*

The H&SMS certification doesn't relieve the Organisation of its responsibilities towards the employees and the third parties in general and of the fulfilment to carry out its activities for the conformity of the supplied goods and services, the regulations from Laws and other acts having the binding force of a law (such as Directives and Regulations), or from technical rules, applicable contractual bonds and/or agreements.

The certification concerns only the conformity of the Organisation's management system to the reference rule and therefore isn't a certificate of the respect of the above compulsory requirements.

The CB has the responsibility of verifying, according to a sampling compared to the audit time, that the Organisation knows and is able to manage all the compulsory aspects linked to the management system subject of the certification.

The ASACERT activity cannot be considered substitutive or alternative to the Public Authority's ones. The certification cannot be considered a means to avoid and/or reduce any possible checking activities by the Public Authority.

Therefore the Organisation is the only responsible for the respect of the legislative instructions in force related to the Organisation itself and/or the supplied products/services, except for any guarantee responsibilities or duties by the CB.

The Organisation shall be able to demonstrate that it has achieved compliance with the legal OH&S requirements that are applicable to it through its own evaluation of compliance prior to the Certification Body granting certification.

Where the Organization may not be in legal compliance, it shall be able to demonstrate it has activated an implementation plan to achieve full compliance within a declared date, supported by a documented agreement with the regulator, wherever possible for the different national conditions. The successful implementation of this plan shall be considered as a priority within the OH&SMS.

Exceptionally the Certification Body may still grant certification but shall seek objective evidence to confirm that the organization's OH&SMS:

- a. is capable of achieving the required compliance through full implementation of the above implementation plan within the due date,
- b. has addressed all hazards and OH&S risks to workers and other exposed personnel and that there are no activities, processes or situations that can or will lead to a serious injury and/or ill-health, and
- c. during the transitional period has put in place the necessary actions to ensure that the OH&S risk is reduced and controlled.

Furthermore the Organisation commits to supply all the ASACERT IG members and any possible Observers all the necessary information about the specific risks of the working environment where they're going to operate, the adopted prevention and protection measures and the established emergency plans, and supply all the necessary Systems of individual Protection as well.

### *11.2 – Duty to inform about eventual current legal and/or administration Procedures*

Should ASACERT receive official information about involvements in legal proceedings due to laws on the Occupational Health and Safety and anyway regarding the system subject of certification, the Management will officially forward such information to the Technical Committee and to the accreditation Body for its competence.

Furthermore the Organisation commits to promptly inform the CB of all the different situations noticed by the Inspection Authority and any suspensions or revocation of authorisations, licences, etc. concerning the production/supplying of products/services linked to the certification as well.

Moreover it has to immediately communicate the CB any judiciary/administrative proceedings in progress, regarding the subject of the certification, except for the limits imposed by Law. The Organisation has to constantly inform the CB about such situations evolving.

#### *11.3 – Clause of responsibility limitation*

The Organisation commits to guarantee the completeness and truthfulness of the documents and the information put at the charged IG disposal.

The CB is expressly excused from any responsibilities in case of missing or incomplete data communication, and in case the data themselves don't correspond to the real company's situation as well.

If ASACERT requirements for issuing certifications fail, ASACERT gives prompt notice to the clients. The Parties expressly agree that ASACERT will be liable for possible damages in favour of the customer, and only after the decision specified under Art. 16 of this document, within the limits of the sums paid by the customer for the annual surveillance audit.

#### *11.4 – Maintenance of the conformity of the Management System to the requirements and possible changes*

The certified Organisation commits to maintain its structure in conformity with the requirements demanded by the rules stated in the certification, during the whole period of the certification's validity.

In case of changes regarding:

- a) the legal, commercial, organizational status or ownership;
- b) organization and management (e.g. key managerial, decision-making or technical staff);
- c) contact address and sites;
- d) scope of operations under the certified MS;
- e) major changes to the MS and processes.

the Organization will have to give preventive written communication to the CB, which can accept the variations or arrange the execution of a supplementary surveillance inspection.

Particularly should the Organisation intend to modify the scope of certification, it has to send a written request to the CB; with reference to the requested changes, ASACERT will value the necessity to carry out a Supplementary Surveillance Inspection.

### **Art. 12 - Management of the certification mark and the conformity certificate**

#### *12.1 – Authorisation*

With reference to the communication of the release of the conformity certification to the Standard ISO 45001:2018 and during the period of validity of the certification itself, the Organisation is authorised to use the certification mark and the certification of property conformity of the CB in the ways and terms described in the following points. The certificate and the file including the certification mark to be used are sent to the Organisation after the positive decision of the ASACERT Technical Committee and should there be no outstanding administrative invoices.

#### *12.2 – Characteristics of the certification mark*

The mark use is optional; yet, if the certified Organisation would like to make use of such faculty, it will have to use the mark according to the following specifications.

The certification mark recalls the ASACERT Company's logo, that can be used by ASACERT only.

The Asacert company's logo is made up of the following elements:

the Logo (writing ASACERT), the sketch of the lozenges, the horizontal line, the abbreviated name "Assessment & Certification".

#### **Asacert Logo**



The following figure 1 shows the the Ascert mark for ISO 45001 certification. The mark graphic develops horizontally. From left to right: the graphical element of the lozenges, on their right the ASACERT Logo, under this one the line and right here under the expressions "ISO 45001" and "Health and Safety Management System".

**Figure 1**



For the detail related to the coupling between the ASACERT certification and the Accreditation Body mark, which the Organisation can use if ASACERT has the accreditation in the specific sector EA, the regulations of the mark have to be respected, which is stated in the Accreditation Body's site, in any moment in the updated version, in addition to the requirements of the present article.

The Marks, or their combinations, used on documents or website can be reduced respecting the readability needs and keeping the dimension ratio. Likewise, for applications on big-size objects, the Marks can be enlarged, always keeping the dimension ratio.

The surveillance on the correct structure of the Ascert certification mark and the Accreditation Body mark, and on their right use as well, is carried out by ASACERT both through the surveillance inspections and the documents and/or documentary information found on the market.

#### *12.3 – Use of the certification mark and the conformity certificate*

The mark can be used, combined to the certified Organisation's name/mark on headed paper, stationery, advertising and promotional material, but it cannot be used on a product nor product packaging, or applied in such a way to be mistaken for a product certification or to be extended to other schemes or systems not included into the conformity certification released by ASACERT. The ASACERT mark cannot be affixed to laboratory test, calibration or inspection reports or certificates.

It's very important that the system certification isn't confused with a product certification and that it is not extended to other sites which are not part of the released certification scope. There shall be no ambiguity, in the mark or accompanying text, as to what has been certified and which CB has granted the certification.

The Conformity Certificate can be used by the certified Organisation with informative aims, as long as it is reproduced faithfully in each part; it can be enlarged or reduced uniformly as long as the content remains readable and the contours and contents are unchanged.

The certified Organisation has to assure that the use of the mark and the certificate is enough for a correct information towards third parties concerning its activities really covered by the obtained certification.

Revisions of the conformity certificate, arisen by any kind of change - for example revision of the reference standard, change of the company name, etc. - will be invoiced at the rate of 100 € + VAT or as otherwise specified in the ASACERT offer or in other document. Also any possible communication regarding the certification validity or the certification process status will be invoiced at the same rate.

Furthermore, the certified organization must not make, or permit, statements that may mislead about certification.

Statements on product packaging (that which can be removed without the product disintegrating or being damaged) and on accompanying information (that is separately available or easily detachable) shall in no way imply that the product, process or service is certified by this means, and shall include reference to: identification of the certified client, the type of management system and the applicable standard, the certification body issuing the certificate).

#### *12.4 – Incorrect use of the certification mark and/or the conformity certificate*

Should occur an incorrect use of the certification mark, of the accreditation Body's mark and/or of the conformity certificate or should the client provide incorrect information, that is should the certified client:

- a) not conform to the requirements of ASACERT when making reference to its certification status in communication media such as the internet, brochures or advertising, or other documents;
- b) make or permit any misleading statement regarding its certification;
- c) use or permit the use of a certification document or any part thereof in a misleading manner;
- d) upon withdrawal of its certification, continue its use of all advertising matter that contains a reference to certification;

- e) not amend all advertising matter when the scope of certification has been reduced;
- f) allow reference to its MS certification to be used in such a way as to imply that the CB certifies a product (including service) or process;
- g) imply that the certification applies to activities and sites that are outside the scope of certification;
- h) use its certification in such a manner that would bring the CB and/or certification system into disrepute and lose public trust;

or should the mark be used on the products, packing, adhesive tape, product technical sheets, lab certificates, etc., ASACERT will have to take measures towards the certified Organisation considered suitable for protecting the integrity of its own image and safeguarding the organisations and/or people who can be misled because of the incorrect use of the above documents or of the incorrect information provided.

#### 12.5 – Corrective actions

After an incorrect use of the certification mark, the accreditation Body's mark and/or the conformity certificate, ASACERT asks the Organisation for adequate corrective actions which leads to the restore of a suitable use of themselves.

In any case, the corrective actions will be defined considering the type of incorrect use and its consequences; legal actions can be taken should the mark and/or certificate haven't been used in accordance with the contractual agreements.

The corrective actions requested by ASACERT will have to immediately be carried out by the Organisation.

#### 12.6 – Certification suspension

Should the incorrect use of the certification mark and/or the conformity certificate have led discredit to the image of the CB, ASACERT can suspend the certification released by the Organisation and ask for the compensation of any damages. The suspension notify will be sent to the certified Organisation through registered letter and a copy to the Accreditation Body, if the released certificate is under accreditation.

The certification suspension can be decided by the CB also if the Organisation refuses to carry out the corrective action requested because of an inappropriate or incorrect use of the certification mark and/or the conformity certificate.

### Art. 13 – Protection of the personal data

In compliance with the legislation of personal data protection, the "preventive informed consent" by the Organisation is essential condition for the CB in order to carry out contractual relationship and the related evaluation and certification activities. ASACERT guarantees the most complete confidentiality and care of the data, which will be treated according to regulation in force.

In particular ASACERT guarantees to the client that:

- ✚ Official holder of the data is ASACERT UK Ltd.
- ✚ During the fulfilment of the service, employees and/or collaborators can get to know about the data, which are from time to time interested or involved in the respective duties, according to the received information. The list of the people in charge is constantly updated and can be communicated together with more detailed information on subjects who can be informed of the data as a delegate upon specific request at the ASACERT UK Ltd office.
- ✚ The entrusted data won't be give up or communicated to third parties, i.e. Organisations, legal bodies, natural person not collaborating with ASACERT and not signing with it a contract for the Clients' information confidentiality. The data treatment will be therefore assigned exclusively to inner or outer personnel, who has subscribed with the ASACERT management commitment to guarantee the confidentiality (gentlemen's agreement).
- ✚ The ASACERT information systems are adequately protected from external intrusions and from the internal ones as well. All systems are in accordance with the law as for the adequacy to the consolidation act on privacy.
- ✚ The Client is given full and complete leave to require the immediate cancellation and/or destruction of the personal data except for the ones ASACERT is obliged to keep by law (tax documents - both papery and electronic). In case of cancellation, ASACERT won't be able to carry out any activities, should this request occur during the service supplying, and will stop the activities in progress, reserving the faculty to ask the Organisation for the whole amount agreed in the contract/offer.
- ✚ The use of the personal data for the sending of commercial documents will be carried out only and exclusively without the aid of automatic systems, with the immediate possibility that such sending are suspended immediately.
- ✚ The complete and wide report on the personal data is available upon request. Such report will be released in case of signing of the contract for the services supply or upon request from the Client or potential Client.

On signing this Regulation, the Organisation, informed about what above specified, authorises ASACERT to treat the data described in the hereunder list as confidential information, in compliance with its policy of data protection and with its processes that ensure the secure handling of confidential information, and in particular authorises ASACERT to:

1. treat the personal data and any possible sensible and judicial data necessary for supplying the service;
2. treat the personal data and any possible sensible and judicial data by using protected information technologies;
3. use communication systems with the client to send informative reports, also commercial ones;
4. public information regarding issued certificates, suspensions and/or revocations;
5. communicate information regarding revocation, if applicable, to Institutional Bodies or other Bodies;
6. inform anyone of the certification validity status, when requiring it (for example if the certification is suspended, revoked or reduced);
7. communicate, upon request, the name, related normative document, scope and geographical location (city and country) for the certification of the Organization itself;
8. treat the information concerning the client from sources different from the client itself (for example complainant, regulators).

#### **Art. 14 – Complaints**

The Organisation can make complaint, in words or in written, about its contractual relationships with the CB. Such complaint can arise from problems occurred during the certification process, such as, for example, delays in the fulfilment of the different phases or behaviours considered incorrect by inspectors or the CB personnel. Complaints can be made to ASACERT also by clients of ASACERT certified Organisations or by third parties towards the Organisations themselves.

The CB arranges the recording of the complaints (confirming the receipt to the complainant within 5 working days), analyses them and informs the claimer within 30 (thirty) days about the decided actions.

Submission, investigation and decision on complaints shall not result in any discriminatory actions against the complainant.

#### **Art. 15 – Appeals**

The appeal springs from the Organisation's dissent from a decision taken by the CB on the certification process.

The appeal has to reach the CB in written within 30 days from the document date, which it is referred to, and include the complainant's data, the reference to the act against which it has been lodged and the reasons, supported by any documentary evidence. ASACERT confirms in written within 30 days from the receipt data it has received the appeal and supplies reports on the results and, when applicable, on the progress.

The decisions concerning the appeal are taken, re-examined and approved by the ASACERT management and anyway not by subjects involved in the appeal contents, who are in any way advised. Should the appeal result not be accepted by the Organisation, the dispute will be handled by a Commission made of a CB representative, an Organisation representative and a third party, as a President, appointed by the previous ones by mutual consent to re-examine the appeal and come to a friendly solution of the dispute itself.

#### **Art. 16 – Contentious procedures**

All disputes unsolved by the application of art. 15 can be referred to the decision of a Single Arbitrator to be appointed in compliance with the Regulations of the National Arbitration Chamber of Milan - Italy.

The Parties declare expressly to know and accept the mentioned National Arbitration Regulations. The Single Arbitrator decides customary and fairly, in compliance with the mandatory provisions of the Italian Code of Civil Procedure (art. 816 and following CPC).

The costs are charged to the losing Party at the rate of 80%.

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For acceptance of this Regulation and its changes and/or integrations (the Organisation commits to periodically consult the web site [www.asacert.co.uk](http://www.asacert.co.uk) for any change):

Date: \_\_\_\_\_

Signature of the Legal Representative: \_\_\_\_\_