

# Great Western Registrar LLC



## **Management System Policy and Procedure Manual**

Based on the requirements of ISO17021, AS9104 and  
Associated ANAB Accreditation Rules

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Uncontrolled if printed

# **Section 1**

## **Great Western Registrar LLC:**

Provides 3<sup>rd</sup> party certification services and is a limited liability organization, incorporated by the State of Arizona.

## **Quality Policy:**

GWR management and personnel are committed to providing impartial, competent and objective certification services that are free from conflict of interest. This policy is managed through assessing risk, conducting impartiality reviews and requiring open communications with its clients and auditing personnel. GWR is committed to remaining focused on customer needs and expectations and continually improving its certification system.

## **Corporate Policy/Objective:**

Partner with quality minded organizations to provide knowledge, impartial, comprehensive and cost effective assessments and registration services. Assist organizations in maintaining and improving the quality of their business through the use of the ISO family of standards.

## **Culture Statement:**

Provide a fun working environment that supports open communication and knowledge sharing at all levels. This will drive strong relationships, efficiency of process and meaningful interaction. GWR cares about the success and growth of their employees and clients. We will surround ourselves, our business & our clients with people that understand that our services are based around creating a team. No one can be successful unless they realize the need for a team.

## **Section 2**

### **Legally Enforceable Agreements:**

Great Western maintains legally enforceable agreements with each client. These agreements outline the responsibilities for GWR and its certification activities and the client responsibilities for maintaining a quality management system that meets the requirements of GWR and the standards for which they are seeking certification.

Great Western maintains legally enforceable agreements for contracted auditors.

Great Western Registrar does not outsource any certification activities.

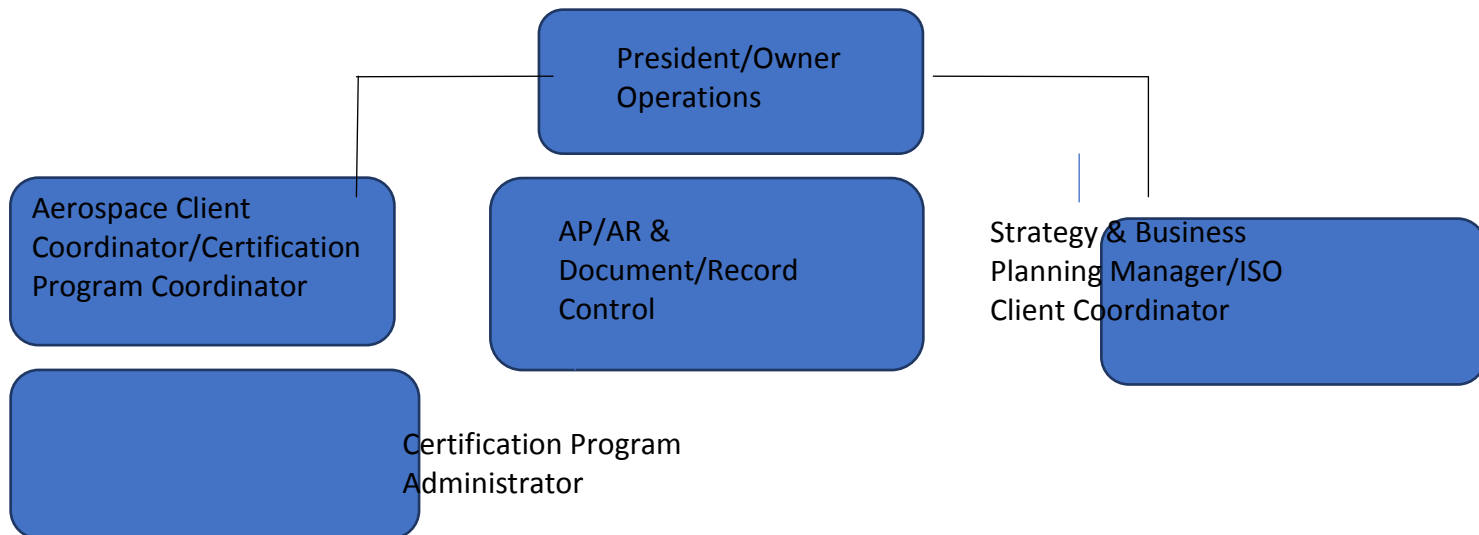
### **Management of General Policies:**

**Through the GWR management of its services and processes the following are addressed:**

- GWR will periodically perform risk and liability analysis and review the results including residual risk.
- GWR will NOT certify another CB's management system.
- GWR will NOT provide management system consultancy.
- GWR will NOT provide internal audit services to their certified clients.
- GWR will NOT outsource audits to a management system consultancy organization.
- GWR will NOT market its services as linked to a management system consultancy organization.
- GWR will evaluate the potential impartiality risk associated with the conduct of audits.
- GWR will ensure that personnel (both internal and external) shall act impartial.
- GWR will ensure that impartiality is reviewed by their AIB on a yearly basis.
- GWR will evaluate the finances and sources of income for threats to impartiality by the AIB.

## Section 3

### Organizational Chart



## Section 4

### Determining and Maintaining Competency:

GWR management determines the knowledge and skill required for all personnel involved in the certification of client management systems. The set of skills and knowledge will differ, based on the function each individual is required to perform.

### Administrative Personnel:

Initial evaluation of knowledge and skills is conducted through Resume review, CV review, or Interview. Once hired, competency, knowledge and skill is evaluated by the President during daily activities for all administrative personnel. These evaluations will be recorded and provided to the individual personnel during yearly reviews. The President or designee identifies the skill sets needed for the office processes and completes on-the-job training. The GWR training matrix identifies the required knowledge needed and how personnel achieved this knowledge. Yearly reviews identify what additional knowledge or skill is needed to ensure competency for the assigned responsibilities.

### Auditors:

Auditor competency and evaluation methods are outlined in the **GWR Process Manual for Conducting Audits and Maintaining Competencies**

### **Certification Decision - Review Board:**

All GWR review board personnel must be either a manager of GWR or credentialed auditor that is contracted by GWR. The GWR review board personnel must be knowledgeable and skilled based on the requirements for auditors and deemed competent to perform reviews and make cert decisions. These cert decision makers must also have understanding of the applicable standard for which the review will take place and cert decision made.

The competency of the cert decision makers (review board personnel) will be evaluated during yearly reviews. These decisions makers will be different from those that carried out the audit.

It is GWR process that only review board members will make decisions regarding granting or refusing certification.

## **Section 5**

### **Control of Documents:**

GWR controls internal and external documents necessary for the support of the GWR accredited certification program. It is the responsibility of the document control manager to ensure proper control and availability of relevant documents.

**All approved and issued documents will be available on the GWR server. Documents that are printed are considered unapproved and for reference only.**

- Identified process owners shall have the responsibility to approve documents that support their process prior to issue.
- When necessary, documents are reviewed and updated for re-approval and re-issue.
- Applicable Documents will be identified by name and revision date.
- All approved and issued documents will be controlled on the GWR server.
- All documents are to remain legible and readily identifiable.
- All documents of external origin are identified and their distribution controlled.
- When a document is revised and re-issued, the previous revision is removed from the GWR server.

### **Control of Records:**

**The following is a list of GWR required records and their retention period:**

Administrative Personnel Records = 7 years  
 Management Records = 7 years  
 Client Certification Program Records = 7 years  
 Financial Records = According to applicable law  
 Contract Auditor Records = 5 years

Records will be stored electronically on a password protected server, or in file cabinets and available to relevant personnel.

All information is kept confidential and will not be transported, transmitted or transferred in any way that could jeopardize confidentiality.

**Public Information:**

GWR maintains a public website that includes all information regarding policies and processes associated with its services. This manual is available for public view on the GWR website. GWR will ensure that information provided is accurate and not misleading.

**Certification Documentation Content:**

Should a positive decision be made for certification of a client QMS, the certification documents will contain:

- the name and geographical location of each certified client (or the geographical location of the headquarters and any sites within the scope of a multi-site certification);
- the effective date of granting, expanding or reducing the scope of certification, or renewing certification which shall not be before the date of the relevant certification decision
- the expiry date or recertification due date consistent with the recertification cycle
- a unique identification code
- the management system standard and/or other normative document, including indication of issue status (e.g. revision date or number) used for audit of the certified client
- the scope of certification with respect to the type of activities, products and services as applicable at each site without being misleading or ambiguous
- the name, address and certification mark of the certification body; other marks (e.g. accreditation symbol, client's logo) may be used provided they are not misleading or ambiguous;
- any other information required by the standard and/or other normative

document used for certification

- in the event of issuing any revised certification documents, a means to distinguish the revised documents from any prior obsolete documents

## **Section 6**

### **Corrective Action and Nonconformance:**

GWR shall take actions to eliminate the causes of nonconformities in order to prevent recurrence. These actions shall be appropriate to the impact of the problems encountered.

When nonconformities are identified, the process owner is responsible for the following:

- Recording the non-conformity on the action item list.
- Determine the cause of the nonconformity.
- Correct the non-conformity.
- Evaluate the need for any actions to ensure that the nonconformity does not recur.
- Determining and implementing, in a timely manner, the actions needed.
- Recording the results of actions taken.
- Reviewing the effectiveness of corrective actions.
- Updating the action item list as appropriate.

It is GWR policy that ALL actions, whether corrective or improvement in nature, are to be recorded on the action item list. This list is maintained by the President for continual review and determination of the progress of implementation of corrective actions and improvement projects.

The President reviews the status with process owners at planned intervals. The action item list is updated according to input from process owners.

Should a nonconformity be identified based on a complaint, it is the responsibility of the President to collect information to determine the cause. The President will then assign corrective action responsibility to the process owner or individual for which the complaint was recorded. (See Resolution of Appeals/Complaints)

### **Internal Audit:**

At least once every 12 months, or as needed, GWR personnel or outsourced designee, will conduct an internal audit of the GWR management system. The internal audits will be planned based on importance of the processes and areas to be audited, as well as the results of previous audits.

Internal auditors and outsourced designees will be required to successfully pass an internal audit training and assessment prior to conducting any internal audits.

- Internal auditors shall not audit their own work.
- Process owners will be made aware of the outcome of the audit.
- Process owners will be required to take appropriate action on any results.
- Internal auditors are to identify any opportunities for improvement.

An internal audit schedule will be identified based on GWR processes and their importance. The schedule is for planning purposes only and may be revised based on client feedback, accreditation body findings and internal work load. Internal audit reports will be identified using the GWR Internal Process Effectiveness Report.

### **Management Review:**

At least once per calendar year GWR management will review its management system to ensure continuing suitability, adequacy and effectiveness. This review shall include review of the stated policies and objectives related to the fulfilment of 17021 and other applicable sector requirements.

### **The input to these reviews shall include:**

- A) Results of internal and external audit
- B) Feedback from clients and interested parties related to the fulfillment and of ISO/IEC 17021
- C) Safeguarding impartiality
- D) The status of corrective actions
- E) Status of actions to address risk
- F) The follow-up actions from previous management reviews
- G) Fulfillment of objectives
- H) Changes that could affect the management system
- I) Appeals and complaints (including client customer complaints)
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### **The output are decisions related to:**

- Improvement of the effectiveness of the management system and its processes.
- Improvement of the certification services related to the fulfilment of 17021 and sector requirements.
- Resource needs.
- Any revisions of the organizations policy and objectives.



## **Section 7**

### **Appeals and Complaints:**

#### **Appeals:**

Should any client or other interested party disagree with decisions made by GWR management or its representatives, that party has the right to appeal the decision.

**Should the interested party communicate its intent to appeal, the process is as follows:**

- The appeal should be submitted to GWR within 10 working days of the disputed decision.
- GWR management will provide the appellant with a form to record the specific details and justifications for the appeal.
- The appeals handling process is then assigned to a person/manager, that was not involved in the audit activities or certification decisions for which the appeal is being submitted, to investigate and validate.
- The assigned individual will add the appeal to the action item list on the “appeals” worksheet and complete the appropriate information and assign an appeals number.
- The investigation shall include collection of sufficient information and evidence to draw a valid conclusion on whether the appeal should be upheld or overturned.

#### **This information may include:**

- Results of previous similar appeals.
- Actual records related to the appealed decision.
- Conversations with both the original decision maker and the appellant to draw a conclusion.
- The investigator shall acknowledge receipt of the appeal to the appellant, and keep the appellant informed of progress during the investigation.
- The decision is to be communicated to the appellant by, or reviewed and approved by individuals not previously involved in the subject of the appeal.
- Formal notice (i.e. E-mail, letter) will be given to the appellant at the end of the appeal handling process.

## **Complaints:**

Should GWR receive a complaint, the President or designee of GWR, will confirm whether the complaint relates to certification activities/services that it is responsible for, and shall take appropriate action.

Should GWR receive a complaint that relates to a certified client, the examination of the complaint will be assigned to the appropriate manager for investigation, examination and action as it relates to the complainant and to the subject of the complaint. This investigation could include a short notice audit, or suspension of certification.

The assigned manager will add the complaint to the action item list on the “complaints” worksheet.

Should the investigation conclude that it is a valid complaint about the client, the manager will contact the client and inform them of the appropriate actions that will be requested.

## **The complaints receiving process may include but not limited to:**

- Complaints received via client feedback/performance evaluation.
- Complaints received via OASIS or IAQG member company feedback.
- Complaints received via Accreditation Body.

Appropriate information will be gathered to draw a conclusion on the validity of the complaint. Should the complaint be determined valid, the investigator may ask for correction and corrective action, or take other actions to resolve the issue. This may include making public the resolution.

## **Section 8**

### **Management of Confidentiality and Impartiality:**

#### **Confidentiality:**

GWR has a legally enforceable agreement with all clients, committees, auditors, personnel and managers that ensures confidentiality with regard to information obtained or created during certification activities. These agreements explain the requirements for keeping information confidential.

The contracts by and between GWR, its client and auditors, outlines and describes the requirements for disclosures and consents.

During on-site audit activities, auditors are required to explain the GWR process and confirm that they have a confidentiality agreement on record with GWR.

All records that contain information regarding applicants, clients and personnel will be kept electronic and password protected. No confidential information will be transported, transmitted or transferred without consent.

It is an ICOP/IAQG requirement that some documented records be uploaded into an International repository (OASIS) for the purpose of review by the sector and other interested parties. GWR uploads the required information, however, GWR does not take responsibility for the control of these records with regard to confidentiality. GWR does not control this repository.

### **Impartiality:**

GWR is responsible for the impartiality of all aspects of the certification services provided to their clients. All GWR managers are committed to remaining impartial when making decisions and carrying out the management system certification activities on behalf of their clients. GWR manages and ensures objectivity during certification activities.

All managers, board members and auditors are trained in the identification, analysis and risks related to conflict of interest. All relevant personnel are provided information regarding the perception of conflict of interest.

To mitigate risk to conflict of interest, prior to ALL audit activities, auditors are required to sign an agreement that provides GWR with assurance that there is no conflict of interest posed when accepting an audit assignment.

GWR does not market or offer as linked with their activities, any consultancy organization.

All personnel, whether internal or external, are required to reveal any situation known to them that can present them or the certification body with a conflict of interest.

GWR has implemented an Advisory/Impartiality Board. This panel is consulted should any threats to impartiality or conflict of interest pose a risk to the certification program of GWR. Should GWR Management or the AIB identify any threat to impartiality, GWR will take appropriate action to eliminate and mitigate the threat. The individuals that are represented on this board pose no conflict of interest to GWR clients. This board meets at least once per calendar year, or when necessary and requested by GWR or members of the board. The AIB has created a charter for their process.

## **Section 9**

**Notification of Changes:**

It is GWR policy to notify clients of any changes to requirements for certification. Should the new requirements have an effect on the certification program of the client, GWR will verify that the client has implemented the change/s.

GWRs legally enforceable arrangement with its clients outlines the requirements for the client to inform GWR of any changes in their certified system. These notifications are required to be recorded through e-mail or the GWR client notification of change form.