



Management Systems Handbook

Let's work with your
team to accomplish your
ISO objectives



08134831027

Visit www.iema.org/Isocertification

Contents

Revision History	3
Related Documents	3
1 Management System Certification Handbook	4
2 Accreditation Status	4
3 The Recognition Process	4
3.1 Initial Inquiry	4
3.2 Application for Certification and Assessment	5
3.3 Client Contact	5
3.4 Gap Analysis	5
3.5 Preliminary Assessment Audit (Stage 1 Audit)	5
3.6 Documentation Review (Stage 1 Audit)	6
3.7 Certification Audit (Stage 2 Audit)	6
3.8 Certification Audit Report	7
3.9 Non-Conformities	7
Major Non-Conformances	7
Minor Non-Conformances	7
Observations	8
3.10 Certification Decision	8
3.11 Certificates	8
3.12 Scope of Certification	8
3.13 Refusal of Certification/Recognition	9
3.14 Surveillance Audits	9
3.15 Re-Assessment Audits	9
3.16 Suspension or Refusal of Certification	9
3.17 Cancellation of Certificate	10
3.18 Variations to Certification	10
3.19 Reduction in Scope of Certification	10
4 Use of the IEMA Certification Mark	11
5 Use of Accreditation Symbols	11
6 Confidentiality	11
7 Additional Obligations	11
7.1 Complaints	12
7.2 Certification Agreement	12
7.3 Assessment Scheduling	12
7.4 Misleading Statements	12
7.5 Changes to Circumstances	12
7.6 Observers	13
8 Complaints and Appeals	13
9 The Role of the Authorized Representative	14

Revision History

Rev No.	Revision Date	Author	Approved by	Page No.	Sec. No.	Brief Description of Change
1	1 January 2022	Amagwu Ifeanyi	Raymond Smith			New - Transfer of NCSI Terminology to IEMA

Related Documents

Document Number	Title

1 Management System Certification Handbook

This certification handbook is designed to assist your organization on the requirements for certification to Management Systems Certification and specifically Quality Management Systems (ISO9001, Environmental Management Systems (ISO14001), Safety Management Systems (OHSAS18001 and AS/NZS4801), Safety Map and National Self Insurer Tool (NAT).

2 Accreditation Status

Certification to these schemes is accredited.
IEMA holds accreditation for this standard with IBSTAC as per Table 1.

Table 1: Accredited Bodies by Scheme

Scheme	IBSTAC	ANAB
ISO 9001	Yes	No
ISO 14001	Yes	No
OHSAS 18001	Yes	No
AZ/NZS 4801	Yes	No
Safety Map	Yes	No
National Self Insurer Tool	Yes	No

3 The Recognition Process

The following section outlines the steps that apply during the IEMA recognition process for Management Systems schemes.

IEMA reserves the right to provide its clients and those that request quotations with marketing and technical information relating to standards, training and compliance services.

3.1 Initial Inquiry

IEMA will respond to either verbal or written expressions of interest from organizations interested in one or more of our programs. If your organization is located near one of IEMA's offices, an advisory visit may be arranged to discuss your recognition requirements and how IEMA can help your organization achieve them.

IEMA will also, on request and receipt of a Request for Quotation, prepare a proposal tailoring our services to your organization's needs.

3.2 Application for Certification and Assessment

Receipt of your organization's Application form (or authorized acceptance of a valid IEMA proposal), along with the accompanying payment of the non-refundable application fee (or invoicing instructions) together with this document forms the contract between your organization and IEMA.

Your requirements will be entered into our database and a Client Manager will be appointed to look after your certification or assessment requirements. The Client Manager will be your primary point of contact with IEMA and is responsible for ensuring that our certification/assessment services are delivered to your organization in the most effective manner possible.

3.3 Client Contact

As soon as practicable after receipt of your signed application/proposal, an IEMA Client Manager (or nominated representative) will contact your organization. The Client Manager will seek to establish a working relationship between your organization and IEMA, and to confirm your recognition requirements in terms of the certification or assessment services, standards or codes of practice, locations, and activities and/or products to be included in the scope of certification.

The Client Manager (or nominated representative) will seek to gain an appreciation of the structure of your organization and the activities being conducted. In particular the Client Manager will:

- Seek an appreciation of the nature and scope of the organization's activities, structure and location(s), including any activities for which confirmation is being excluded; and
- Determine the status of system documentation and implementation including organizational policies, objectives and targets.

If you are working with a consultant it is often useful for that person to be party to the communication process.

3.4 Gap Analysis

A Gap Analysis approach often proves an invaluable tool in determining system implementation, particularly for new systems that are still in the early stages of development. This one-off assessment includes the identification of gaps against the requirement of the nominated Standard or Code of Practice. At the conclusion of the Gap Analysis you will receive a report which highlights any gaps as well as options for next steps on your path to certification. The results of a Gap Analysis are not directly linked to any subsequent Certification Audits.

3.5 Preliminary Assessment Audit (Stage 1 Audit)

In order to gain certification to a management system scheme your organization is required to have an initial audit followed by a certification audit. An initial audit determines your readiness for certification.

The initial audit will be carried out by a qualified assessor. It is a requirement that the assessment be carried out at your site. If you have multiple sites not all of the sites are required to be included in this audit.

Your organization will receive a written report which outlines the readiness for the Certification Audit. The findings from the initial audit must be satisfactorily addressed prior to the certification audit.

3.6 Documentation Review (Stage 1 Audit)

Prior to, or conducted as part of the Certification Audit (program dependent), IEMA undertakes a review of your organization's system documentation, including policy manuals, procedures and other relevant supporting documentation. This review may be combined with or separate to the Pre-Assessment Audit.

This step gives your organization the opportunity to demonstrate that all documentation required by the relevant standard or code of practice has been prepared, is controlled where necessary, and is monitored and updated as required.

A Document Review report is provided, and outlines any perceived deficiencies in documentation, relevant to the Standard or Code of Practice, as well as any opportunities for improvement. Deficiencies raised in this report must be addressed in a timely manner as advised in the report.

From your documentation, a checklist and plan for the certification audit is prepared, based on your organization's system and documented procedures. This ensures the audit team is focused on the way your organization operates when the Certification Audit is performed.

3.7 Certification Audit (Stage 2 Audit)

The purpose of the Certification Audit is to establish whether your organization's management system has been implemented and complies with the relevant standard or code of practice by examining actual practices, documentation and records and comparing them against the organization's policies and procedures. The audit process is, effectively, an undertaking to establish that your documented policies and practices are understood by your personnel and have been effectively implemented.

Audit teams will be led by appropriately qualified and experienced auditors and, where required, witness auditors, observers and/or technical specialists acting as advisers to the audit team may also be present. These specialists bring current specialized knowledge of the activities being audited to the audit team and ensure that the audit provides a relevant and practical review of aspects critical to the business. When specialists are used, care is taken to ensure that your commercial confidentiality is not jeopardized. Your organization has the right to reject any specialist who is not acceptable to your organization, provided that an alternative may be substituted.

If not conducted at a Pre-Assessment Audit, the Certification Audit provides an opportunity for IEMA to verify the audit durations as specified in your application/proposal and if required, vary the durations accordingly.

3.8 Certification Audit Report

At the conclusion of the audit, the audit team will prepare a written report on the audit findings and the audit team leader will present these findings to your organization's senior management at the exit meeting.

The audit findings include a summary of the overall compliance of your system with the requirements of the relevant standard(s) or codes of practice. The final report may be subsequently provided after completion of the Audit.

The audit report will include the following information;

- An executive summary of the overall findings (conclusions) on the effectiveness of your system in meeting the requirements of the standard
- Ratings of the non-conformances against each KPI and each standard
- Suggestions for continual improvement
- Positive finding areas
- Times allocated for the activity, number and type of interviews conducted with consumers

Non-conformities will be discussed with your team during the auditor's visit and outlined at the exit meeting. Non-Conformities are categorized as Major, Minor and Observations.

If you are unclear regarding the meaning of anything in your report, please contact your IEMA Client Manager.

It is your organization's responsibility to respond to the non-conformities detailed in your audit report by the designated time frame. Failure to do so may result in suspension or cancellation of your certification.

3.9 Non-Conformities

All non-conformances must be closed prior to the awarding of certification to the organization. Specific audit findings are categorized as follows and are applicable during the certification and verification audit activities:

Major Non-Conformances

Major Non-conformances are audit findings that reveal that the integrity of the Management System has been compromised and must be rectified before certification is granted.

Major Non-conformances are required to be closed out on site.

Minor Non-Conformances

Minor Non-conformances are audit findings that reveal an isolated incident of non-compliance that has no direct impact on the integrity of the product. Agreed proposed corrective action plans (CAPs) (detailing correction, cause identification and long term fix) must be received within two (2) weeks of the nonconformity being identified.

Observations

These are comments, which may include praise, opportunities for improvement, or comments that may be relevant for the next audit. Actions do not necessarily have to be taken for observations however, it is recommended that these have been considered as part of your continuous improvement process.

3.10 Certification Decision

After confirmation that any necessary corrective actions have been taken, which may involve a follow up visit by the IEMA Assessor, the findings and recommendations made in the audit report are subject to an internal review process prior to certification being granted.

3.11 Certificates

When your organization has achieved certification, IEMA will provide you with a Certificate as a statement that your organization has achieved certification to the relevant standard(s). The certificate will include important data such as your organization's certification number, the standard for which certification has been granted, and the date of certification. The certificate should be displayed where it will be seen by customers and potential customers.

When copies or elements of the certificate are used in tenders or offered to potential or existing customers, the certificate should be accompanied by the scope of certification document (if issued separately) as it is important for them to understand the scope of activities for which certification has been granted (see 'scope' below).

Incorrect use of the certificate can result in a customer being misled as to the extent of your organization's certification. Clients are obliged to ensure that IEMA has been formally notified of the latest address, ownership, changes to key management responsibilities, major management system changes and capability information so that the certificate maintains its currency. Failure to do so may compromise your organization's certification status.

All original certificates remain the property of IEMA Group ANZ Pty Limited and must be returned on request.

3.12 Scope of Certification

The scope of certification fully details the scope of your organization's certification in terms of:

- Names and addresses of all locations covered by the certification;
- Achievement of certification to the relevant standard(s) or code(s) of practice
- The capability statement (range of products, services, and activities) for each location covered by the certification and
- Any specific exclusions from the scope of certification

Clients are obliged to ensure that IEMA has been formally briefed in a timely manner when any variations occur. Clients should not wait until the next scheduled assessment to notify IEMA. Failure to do so may compromise the organization's certification status.

3.13 Refusal of Certification/Recognition

In the event that your organization is unable to comply with the requirements of the relevant standard, IEMA may refuse to grant certification. The decision to refuse certification, and the grounds for that decision, will be communicated to your organization in writing.

3.14 Surveillance Audits

IEMA is required to conduct an assessment at your organization at a minimum of 12 monthly intervals. Assessments may be conducted more frequently at 4, 6 or 9 month intervals.

Please discuss this with your Client Manager if you would like further information on increased frequency assessments and the value that these provide to your organization.

The first surveillance audit may not be delayed beyond ten (10) months from the certification audit.

3.15 Re-Assessment Audits

The re-assessment cycle for Management System programs is three (3) yearly. Your reassessment audit must be conducted within three (3) years of the initial certification or last recertification. If not completed and processed within the required time frame, your certification is no longer valid.

The re-assessment audit must take place three (3) months prior to the expiry date. Extensions on the re-certification dates are not permitted.

3.16 Suspension or Refusal of Certification

When an organization's certification is suspended or refused, the organization shall, for the period of suspension or refusal:

- Withdraw and cease to use any advertising or promotional material that promotes or advertises the fact that the organization is certified
- Ensure that all copies of certificates and scopes of certification are removed from areas of public display and
- Cease to use the certification mark on stationery and other documents including media and packaging that are circulated to existing and potential clients, or in the public domain

The organization shall advise IEMA in writing of action taken with respect to the requirements listed above;

- IEMA shall advise the organization in writing of the certification processes that will need to be completed to restore certification; and
- During the period of suspension the organization shall continue to pay all fees levied by IEMA

3.17 Cancellation of Certificate

When an organization's certification is withdrawn, the organization shall immediately:

- Cease any advertising and promotional activities that promote the fact that the organization holds certification
- Withdraw and cease to use any advertising and promotional material that promotes the fact that the organization holds certification
- Cease to use relevant certification marks in any way to promote the fact that the organization holds certification and
- Return all certificates and pay outstanding fees

3.18 Variations to Certification

Your organization is required to advise IEMA if there are any significant changes to your organization or the product.

Variations to certification may originate from:

- Variations to the scope of certified product
- Major nonconformities
- Voluntary withdrawals
- Withdrawal of certification by IEMA Group
- Change of certification scope
- Change of ownership
- Change of management
- Change of company name
- Change of ABN etc.

IEMA will determine if the degree of change is significant to require an additional assessment or if the changes can be assessed at the next schedule audit or if the product requires re-assessment.

3.19 Reduction in Scope of Certification

When an organization's scope of certification is reduced, IEMA shall issue revised certificates and scopes of certification as appropriate and the certified organization shall:

- Return all superseded certificates
- Ensure that use of the certification mark is adjusted to reflect the reduced scope of certification
- Ensure that all advertising and promotional activities and materials are adjusted to reflect the reduced scope of certification and
- Pay any fees that are applicable for the facilitation of this activity

4 Use of the IEMA Certification Mark

You are entitled to use the appropriate IEMA 'kitemark' and the JAS-ANZ logo whilst you maintain certification to this program with IEMA. For a copy of the logo, visit our IEMA website at www.IEMAGroup.com Use of the logo is subject to Condition and rules of its application.

5 Use of Accreditation Symbols

Organizations that have been granted certification are entitled to either the JAS-ANZ or the ANAB Accreditation Symbol depending on the accreditation mark on your certificate. The rules for the use of this mark are governed by Accreditation Body. The Accreditation marks may be used in conjunction with IEMA Accreditation marks.

Specific guidance on the use of the Accreditation Marks are documented in;

- How to display the ANAB Accreditation Recognition Mark
- How to display the JAS-ANZ Accreditation Recognition Mark

6 Confidentiality

IEMA will treat all information in accordance with the Privacy Amendment (Enhancing Privacy Protection) Act 2012

7 Additional Obligations

Following certification, there are a number of managerial responsibilities which your organization will need to observe to maintain IEMA's certification. These include:

- Continued compliance with the relevant systems standard(s) or code(s) of practice;
- Compliance with the IEMA Standard Commercial Terms and Conditions and obligations as specified in this document as well as other guidance documentation that may be specifically provided from time-to-time;
- Conduct of regular internal reviews of your system, with appropriate documentation of such reviews and of any subsequent corrective actions;
- Notification to IEMA of any significant changes in the structure (key responsibilities and management system), ownership and operations of your organization to enable the impact of such changes on the certified ownership system to be evaluated; and
- Notification to IEMA of any litigation or serious events or matters that relate to the scope of your certification.
- Payment by the prescribed dates of all fees and expenses set and applied by the Board (and or its nominee) for continuance of certification
- Notify IEMA without delay any significant event which includes but is not limited to fatal incidents, serious injuries, occupational disease or legal action by a regulatory authority (Safety Management Systems only)
- Notify IEMA at the time of surveillance or recertification assessment of any OHS related findings by third-parties (Safety Management Systems only)

7.1 Complaints

Your organization is required to keep a record of all known complaints. These records must be made available to the audit team and IEMA when requested.

Your organization is required to demonstrate that you have taken appropriate action to address these complaints through investigation and correct any deficiencies found. These actions must be documented.

7.2 Certification Agreement

Your organization is required to meet the requirements of the Certification Agreement. This requires that your organization and products remain compliant with the scheme requirements at all times and the conditions of certification at all times.

Your organization is required to implement appropriate changes as communicated by IEMA in a time appropriate manner.

7.3 Assessment Scheduling

Your organization is required to make all necessary arrangements to allow the evaluation and surveillance activities to take place. This includes but is not limited to; Equipment, Product, Locations, Personnel and Sub-contractors.

7.4 Misleading Statements

Your organization is not permitted to use its product certification in a manner that could bring the IEMA into disrepute. This includes making misleading or unauthorized statements. If you are unsure if a statement could be misleading you are advised to contact IEMA prior to making the statement. Statements include but are not limited to the use of the logo on non-certified product, advertising (including your website) and internal communication.

If your organization is required to provide copies of their certification documents these must be reproduced in its entirety. Failure to do so may be misleading to the recipient as to the scope of certification.

7.5 Changes to Circumstances

Your organization is required to advise IEMA of any changes without delay to circumstances that may affect certification. Examples of such changes include but are not limited to;

- Authorized Representative
- Business name (Legal entity) and Trading Name (where applicable), ABN
- Ownership
- Contact details
- Location, site addresses
- Business activity(ies), scope of certification (Products and Processes)
- System Management Number of employees, covering all shifts and sites
- Billing Details

7.6 Observers

From time to time IEMA requires an Observer to be in attendance at an audit. This may be related to training of new staff and witness assessment of existing staff. It is a requirement of certification that your organization allows these activities to occur.

Failure to allow this activity to occur may result in cancellation of your certification.

IEMA will, at all times, ensure that the use of observers is kept to a minimum and your organization will be advised prior to the assessment activity.

The Observer does not take an active part in an assessment.

8 Complaints and Appeals

Appeals against certification decisions and / or complaints against service delivery levels may be raised with your Client Manager. If you remain dissatisfied, contact the IEMA General Manager Compliance and Risk in writing.

All complaints will be investigated and the originator of a complaint will be advised of the outcomes, as appropriate.

IEMA will also investigate legitimate documented complaints, relevant to operation of the system, from customers of certified organizations and the accreditation body. Certified organizations shall, at all reasonable times, provide representatives of IEMA with access to its premises and records for the purposes of investigating such complaints.

If your organization's application for certification has been refused; or your certified organization's certification has been suspended, withdrawn, or reduced in scope, you may appeal against the decision to a Review Committee constituted and operated as set out below:

The appellant shall, within 28 days of the disputed advice from IEMA, lodge a notice of appeal with an affidavit as to the grounds of appeal with the IEMA Group ANZ Pty Ltd.'s Managing Director in writing;

- The CEO or equivalent shall advise the IEMA Group Regional APAC Executive within 14 days of receiving the appellant's notice
- The Executive shall then establish a Review Committee upon payment of the fees set by the Executive for consideration of the appeal
- The Review Committee shall consist of three persons considered as experts in the area of technology or business relevant to the appeal. The Review Committee shall be constituted as follows:
- One person expert in the relevant area of technology or business appointed by the Board; and

- Two persons selected by the appellant from a list of four persons nominated as eligible by the Board
- The appellant shall represent himself and no legal representation will be allowed unless approved by the Review Committee; and
- The Review Committee will carry out investigations as are required, including assessment of information supplied by the appellant and, within a reasonable time, decide by majority vote whether or not to reverse the original decision. The Managing Director or equivalent shall give notification of the decision to the appellant within 14 days of the Review Committee decision

To raise a complaint or appeal against the service delivery by IEMA or audit outcome please notify; Vincent

Amagwu Ifeanyi
GM Compliance and Risk (IEMA)
Email: ifeanyiamagwu@iema.org
Phone: 08134831027

The Role of the Authorized Representative

The Authorized Representative nominated by your organization is the primary point of contact for IEMA for all matters concerning your IEMA certification or assessment. The person who has been nominated as the Authorized Representative does not need to have responsibility for maintenance of the management system, but must have sufficient authority to discuss and make agreements with IEMA on matters associated with the organization's certification or assessment.

It is also important that your organization keeps IEMA informed of any changes in Authorized Representative.