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# 1 Introduction

This scheme document sets out the requirements for Management Systems Certification in general and contains specific information to describe the requirements to achieve certification to the following certification standards:

- ISO 50001:2018 Energy management systems — Requirements with guidance for use
- ISO 9001:2015 Quality management systems – Requirements
- ISO 14001:2015 Environmental management systems – Requirements with guidance for use
- ISO 45001:2018 Occupational Health and Safety Management Systems – Requirements with guidance for use
- ISO 37301:2021 Compliance management systems - Requirements with guidance for use

General information is given in the main body of this document and specific information for each certification standard listed above is given in the Annexes to this Scheme Description Document.

This scheme document is designed to comply with the various requirements of the current versions of the following accreditation standards:

- ISO 50003 Energy management systems – Requirements for bodies providing audit and certification of energy management systems
- ISO 17021-1 Conformity assessment – Requirements for bodies providing audit and certification of management systems Part 1: Requirements
- ISO 17021-2 Conformity assessment — Requirements for bodies providing audit and certification of management systems — Part 2: Competence requirements for auditing and certification of environmental management systems
- ISO 17021-3 Conformity assessment — Requirements for bodies providing audit and certification of management systems — Part 3: Competence requirements for auditing and certification of quality management systems
- ISO 17021-10 Conformity assessment — Requirements for bodies providing audit and certification of management systems Part 10: Competence requirements for auditing and certification of occupational health and safety management systems
- IAF MD 1 IAF Mandatory document for the audit and certification of a management systems operated by a multi-site organisation
- IAF MD 2 IAF Mandatory document for the transfer of accredited certification of management systems
- IAF MD 4 IAF Mandatory document for the use of information and communication technology (ICT) for auditing/assessment purposes
- IAF MD 5 determination of audit time of quality, environmental, and occupational health & safety management systems
- IAF MD 11 IAF mandatory document for the application of ISO 17021-1 for audits of integrated management systems
- IAF MD 22 Application of ISO 17021-1 for the certification of occupational health and safety management systems (OH&SMS)
- IAF ID 3 IAF Informative document for management of extraordinary events or circumstances affecting ABs, CABs and certified organizations


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## 2 Scope

This scheme provides an ongoing independent, third party audit and certification of an organisation's documented Management System to ensure that the requirements of the appropriate certification standard are satisfied, demonstrated and maintained in accordance with the requirements of this Scheme Description Document.

## 3 Who can apply?

Any organisation can apply for Certification.

However, CIBSE Certification cannot under any circumstances certify another Certification Body for its quality management system.

Third party Certification can be used to demonstrate your commitment to interested parties and stakeholders as well as to show conformity to applicable legal requirements.

## 4 Open to all

Our Management Systems Certification scheme is open to any organisation that wishes to be assessed, certified and registered to one of the certification standards listed in section 1 above.

## 5 Technical Requirements

There are no specific technical requirements other than to successfully demonstrate conformity to the requirements of the Certification Standard against which you have chosen to be assessed.

Providing your organisation has developed and fully implemented the requirements of the chosen Management System Standard, it may apply.

All applicants for Certification and Registration must fulfil all of the applicable application requirements of this Scheme Description Document.

Once certified, compliance with all other requirements for this scheme description document must be complied with along with any other requirements imposed by CIBSE Certification of which you will be notified from time to time.

## 6 Confidentiality and impartiality

Policies and procedures have been defined and developed to help ensure all aspects of the certification processes and activities are carried out in an honest, impartial and unbiased manner that is fair and equitable for all applicants. All applicable legislative and statutory requirements will be complied with at all times in the performance of certification activities.

Certification is never restricted on the grounds of undue financial or other limiting conditions, such as membership of an association or group unless the scheme owner sets such a restriction. We never use procedures to unfairly impede or inhibit access by applicants and candidates to our certification schemes.

All certification requirements, evaluations and decisions will be based only on the defined criteria and no outside influence will be considered e.g. those from commercial, financial or other pressures to compromise impartiality.



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## 7 Information disclosure

We may disclose non-confidential information, either publicly or to specific interested parties, as follows:

- Where there is a legal requirement to do so
- Where information is already in the public domain
- In response to complaints

We may disclose information about certified clients, publicly or to third parties, where there is a legal requirement to do so or where information is already in the public domain. The client will be notified of the information to be provided unless prohibited by law.

Information about the certified client from sources other than the client itself e.g. from a complainant or regulators will be treated as confidential and not disclosed to the certified client unless required to do so under a legal obligation.

Once you have been granted certification we will also disclose information related to that certification on our website. We will include details of your organisation e.g. name, address, phone, email and also the scope of the certification granted. Along with this we may include information regarding the status of your certification e.g. if it is suspended or withdrawn. In some special cases we can withhold information at your request but only if there are clear reasons to do so, e.g. security or safety reasons.

No other information about a particular certified client will be disclosed to a third party or placed in the public domain by CIBSE Certification without the written consent of the certified client.

## 8 Certification & Listing on the Register

In order to become certified and to appear on the Register you will be required to make an application for certification and registration using the process described below.

All applications are checked to ensure they fall within our scope of accreditation (for accredited certification) and that we have the necessary competence to perform the necessary audits.

Once it is confirmed that all auditing and close out of any nonconformities (NCRs) has been completed and all fees paid a review of the certification file is made by CIBSE Certification and a decision regarding certification will be made.

You will be informed regarding this decision and if it is positive your organisation will be added to the online register and your certification documents issued i.e. certificate.

Initial certification is for a period of three years' contingent upon complying with all maintenance requirements that must be met.



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# 9 Overview of the Certification process

# 10 Step 1 - Applications for management systems certification

## 10.1 Application Process

The process for application and the performance of audits is summarised in the flow chart shown above.

## 10.2 Types of application

To apply for certification you need to complete the application form (Form CCF 500IMS) making sure that you provide all of the information requested. Failure to provide all of the information we need may result in delays or affect our ability to provide a quotation.

Applications are of the following main types

- Applications for new certifications (i.e. the system is not currently certified by another accredited certification body)
- Extensions to a currently certified Scope i.e. to add previously excluded or new elements of a location or previously excluded or new processes; and
- Transfer of certification from other accredited Certification Bodies (for further information refer to Annex 5 below).

## 10.3 Multi-site certifications

We accept applications for single-site certification i.e. a single certificate covering a single location, and we also have the ability to offer certification on a multi-site basis, which is the certification of multiple sites on a single certificate, please see Annex 6 below.



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## 10.4 Scope and Boundary of your Management System

We need you to tell us what the scope and boundary of your management system is. This scope and boundary should include those areas and processes that you would like stated on the certificate at the end of the certification process.

Scopes and boundaries can be a site or location, list of activities and/or facilities, a process (or a group of processes) or an entire organisation at one or several sites under the control of your organisation and may include transport.

It should be noted that boundaries need not be physical boundaries, provided that it is possible to clearly describe the boundary.

Scopes and boundaries might look like the examples below but other ways of wording them will be acceptable so long as they are clear, unambiguous and verifiable.

- "Design, manufacture, and supply of metal boxes at our facilities in Bradford."
- "Design, manufacture, and supply of metal boxes at our facilities in Bradford, Newcastle and Manchester."
- "Manufacture, and supply of metal boxes at our facilities in Bradford."
- "Energy management at the whole production and warehouse facility at Acacia Avenue, Bradford, Yorkshire."
- "Energy management at the Product 1 production hall located at Acacia Avenue, Bradford, Yorkshire."
- The general office facilities located on Floor 3, 99 Front Street, Portsmouth and the engineering process located in Area 3 of our in Factory building #3 at our factory located in Southampton".

## 10.5 Determining the audit duration

Audit duration is calculated using the guidance in the following Annexes depending on the type of certification for which you are applying.

Further information is included in Annexes listed below:

- Annex 1 – Energy management systems
- Annex 2 – Quality, Environmental, Health & safety and Compliance management systems

## 10.6 Application Review and Processing

All applications are checked:

- To ensure eligibility and completeness by undergoing a contract review process
- To ensure that the proposed certification is within our UKAS accredited scope (if applicable) and that CIBSE Certification have the required competencies to perform accredited certification applied for
- Ensure we have the resources to provide the certification services to the clients desired timescale and at their geographic locations
- That all necessary information has been submitted (and is valid) and that the necessary declaration has been signed

Following a review of the information submitted at the application stage it may be necessary to decline to quote. Reasons for declining to quote will be communicated to the applicant.

Once the application is accepted a quotation will be issued.



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### 10.7 Quotation

A quotation is prepared which includes your proposed scope and boundaries of certification, the certification fees, and the number and duration of audits, including audits to additional site(s) where applicable.

See Annex 4 for details.

### 10.8 Quotation issue and acceptance

CIBSE Certification will issue a quotation to you with details of the method of acceptance, and upon receipt of your acceptance we will issue an invoice to you for the initial audit fees (see Fee Sheet), which must be paid in full prior to the commencement of any audit work. Travel, accommodation, and subsistence expenses (if applicable) are invoiced after each audit has concluded (see Fee Sheet).

## 11 Step 2 - Audit Planning and auditor selection

The evaluation process is a 2-stage process that is described below. The information gathered during this evaluation is used to provide the evidence against which the Certification decision is made.

### 11.1 Audit team selection

The audit team is selected on the basis of their knowledge of the audit standard(s), knowledge and experience of the customer's product/service and business processes, and demonstrated competence auditing to the requirements of the Management Systems Standard.

Sometimes it will be necessary for our audit teams to be accompanied by technical experts in the product/service area. Prior to any audits CIBSE Certification will provide the name of, and, when requested, make available basic background information on each member of the audit team with sufficient time for the Organisation to object to the appointment of any particular Auditor or Technical Expert, and for CIBSE Certification to assemble an alternative audit team in response to any valid objection.

The use of technical experts, translators, interpreters, observers and auditors-in-training do not count as part of the audit team and are therefore not included in the audit duration.

### 11.2 Audit attendees

The Audit team attends all audits. The names of the audit team will be communicated to you prior to the audit. If you have any reason to object to the assigned audit team you may do so in writing.

You are required to make provisions, where applicable, to accommodate the presence of observers (e.g. accreditation auditors, CIBSE Certification staff or trainee auditors). Such attendees will not be included in our charges to you.

We will inform you and agree the presence of observers during any audit prior to the conduct of the audit. The audit team will ensure that observers do not influence or interfere in the audit process or outcome of the audit.



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### 11.3 Guides

Each auditor must be accompanied by a guide facilitate the audit, unless otherwise agreed to by the audit team leader and the client.

### 11.4 Audit plans

An audit plan will be sent to your nominated contact prior to the first stage of the initial audit process, the date(s) and locations of the audit will be agreed upon in advance with your nominated representative.

Audit plans inform you of what elements of Management System will be audited with approximate timings (if appropriate) so that you can be prepared for the audit.

Please bear in mind that audit plans are only a guide and audit teams may vary them whilst on site depending on what audit trails they need to follow or to fit with any operational requirements you may have.

### 11.5 Audit curtailment or changes to audit scope

Once an audit starts there are potential circumstances where an audit might need to be curtailed or in some cases abandoned. These include, but there may be other situations at the discretion of the Lead Auditor:

- Evidence that the audit objectives may be unattainable
- An immediate and significant risk (e.g. safety) to the audit team is present
- Lack of access to documentation and records required to perform the audit
- Persistently or seriously failed to meet certification requirements
- Lack of cooperation with the audit team or time wasting

In such circumstances the Lead Auditor will report this to the client and, where possible, to the CIBSE Certification office. Appropriate action will be taken, such as:

- Modification of the audit plan
- Changes to the audit objectives or audit scope
- Termination of the audit

The Lead Auditor will document the decisions and the actions taken to the best of their ability and this will be provided to CIBSE Certification and to the client.

Where the client disagrees with any such action they can invoke the complaints procedure, see CCP 101.

## 12 Step 3 - Initial Audits

Initial audits are performed in a two-stage process. The duration of the Stage 1 audit will be detailed in the quotation. The Stage 2 audit duration may in some circumstances be altered if the Stage 1 audit indicates that change is necessary e.g. if the complexity of the your business is deemed to be different to the description in your application.

The Stage 1 and Stage 2 audits are generally conducted with a planned period of time between them to allow the company time to deal with any issues that arise at the Stage 1



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audit and to allow CIBSE Certification to finalise any resources required for the Stage 2, (see Note below).

Note: In determining the time interval between Stage 1 and Stage 2 audits, consideration is given to the needs of your organisation to resolve observations/opportunities for improvement raised at the Stage 1 audit. Where this interval exceeds 180 days for whatever reason, CIBSE Certification reserves the right to repeat both the Stage 1 and Stage 2 audits, as necessary.

## 12.1 Stage 1 audits

The duration of a Stage 1 audit is detailed in the quotation. The purpose of this audit is to assess your organisation's preparedness for the Stage 2 audit, and this involves:

- Gathering information regarding the scope and boundary of the Management System, the processes involved, and relevant statutory and regulatory requirements and compliance (e.g. energy use directives, environmental, health and safety, legal aspects of your organisation's operation and associated risks etc.)
- Confirmation of the information submitted by you that is used as the basis of the quotation is correct – we check this to ensure the audit resources are adequate and may result in adjustment of the Stage 2 audit time; either an increase or decrease as necessary
- A review of the documented results of the management system planning process e.g. documented processes and procedures, policies, energy reviews, quality plans and associated records
- Performing a review of the improvement opportunities identified by you and the related objectives, targets and action plans
- Review of the description of your organisation's facilities, equipment, systems or processes for the identified scope and boundaries – this may be graphical or narrative description
- An audit (see note 1 below) of the management system documentation
- Perform checks (see note 2 below) that internal audits and management review are being planned and performed
- A review of the audit location and to note any site-specific conditions that could affect the Stage 2 audit
- Discussions with your personnel to assess their understanding of the requirements of the Management System
- Confirm and/or adjust allocation of resources for the Stage 2 audit taking into account the Stage 1 requirements above and agreeing the details of the Stage 2 audit plan

Note 1: The management system documentation review may be undertaken at your organisation's premises or remotely if it is viable and appropriate to do so. The purpose of this review is to confirm that you have covered all of the requirements of the Management System adequately, and that appropriate documented procedures and records are in place.



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Note 2: Before subjecting your Management System to a third party audit, we recommend that you operate it for a minimum period of 3 to 6 months and that you perform a full set of internal audits with a review of the results through a formal recorded management review.

It is acceptable to combine the documentation for several management systems (such as for quality, environmental or health and safety) as long as all specific requirements for each can be clearly identified e.g. by the use of clause numbers from the standards, together with the appropriate interfaces to the other systems. The documentation should adequately describe the management system and make clear the relationship, if any, to any other related management system you may have.

The audit team leader will advise your management representative(s) of one of the following outcomes of the Stage 1 audit:

- On the basis of the evidence seen, the Stage 2 audit can proceed and a date will be agreed for that, if not already done so. This would be contingent upon the receipt by CIBSE Certification of acceptable actions to any observations/opportunities for improvement raised at the Stage 1 audit
- On the basis of the evidence seen, the Stage 2 audit cannot proceed due to the nature of the observations/opportunities for improvement raised at Stage 1 audit. In which case a re-audit (see Note below) will be required following receipt by CIBSE Certification of notification of actions to the observations/opportunities for improvement raised at the initial Stage 1 audit.

Note: Further re-audits, if required, are subject to additional charges at the prevailing audit day rate plus expenses incurred. Please refer to Fee Sheet for confirmation of our charges.

At the end of the Stage 1 audit you will be provided with a documented report of the audit team's activities, including identification of any areas of concern that could be classified as nonconforming during the Stage 2 audit. This report is also copied to CIBSE Certification and serves to allow CIBSE Certification to plan the Stage 2 audit in terms of resource provision and audit time, if necessary.

See section 12.4 below for information about reports.

## 12.2 Stage 2 audits

The purpose of the Stage 2 audit is to evaluate the implementation, including effectiveness, of your organisation's Management Systems. To achieve this our auditors will perform audits that cover:

- Determination of conformity to all of the normative requirements of the Certification Standard, including but not limited to:
  - Monitoring, measuring, reporting and reviews of performance against policies, key objectives and targets
  - All documented elements of the management systems
  - Applicable statutory and regulatory compliance
  - Operational control of processes



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- Performance and reporting of internal audits, management reviews, and actions arising
- Key management responsibilities and delegation of authority
- Links between the normative requirements, policy, performance objectives and targets
- Competence of personnel

See section 12.4 below for information about reports.

## 12.3 Audit performance

### 12.3.1 Opening meeting

All audits start with an opening meeting between the audit team and your organisation's management representatives to explain the purpose of the audit, the scope, reporting method, final agreement of the audit plan and any changes needed and the approximate time and purpose of a closing meeting.

### 12.3.2 Closing meeting

At the end of the audit, the audit team holds a closing meeting with your organisation's management representatives to discuss any nonconformities and/or observations/opportunities for improvement that have been raised.

The audit team makes a written recommendation in the audit report to CIBSE Certification stating whether your organisation should be recommended for certification, subject to notification and receipt of evidence of satisfactory corrective actions addressing any nonconformities and/or observations/opportunities for improvement raised, or whether a full or partial re-audit is required.

> Note: Audit teams do not make certification decisions. Any recommendation they make is taken into account but may be disregarded during the decision making process.

Opening and Closing meetings are recorded in the relevant audit report forms.

## 12.4 Audit reports

After every audit you will be issued with an audit report. The audit report is issued to you containing all of the information about that audit including a list of any nonconformities and observations/opportunities for improvement.

When a report is returned to CIBSE Certification by you it is checked and if the information in response to any nonconformities and/or observations/opportunities for improvement are not acceptable or are incomplete, the report will be returned to you to reconsider the details of the submitted responses and provide a further response.

Where the nature of the nonconformity allows verification of corrective action by correspondence i.e. by reviewing your written response as indicated on the audit report we will do so. Where evaluation by correspondence is not possible other means may be employed that could include another partial or full audit.



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On receipt of an Audit report from the client with completed corrective actions, the report is passed to the Lead Auditor to review the responses.

In most instances objective evidence will be required, of actions taken against NCRs issued, to enable the review of the actions taken by the client to be verified.

The evidence of effective corrective action supplied to support the actions will be reviewed and each nonconformity report will be annotated to indicate that the actions taken/proposed are either acceptable or not acceptable and the report returned to CIBSE Certification with a copy to the client.

When the responses are acceptable the report is used as part of the evidence for the certification decision i.e. Issue new, revised or ongoing certification.

Where it is not possible to resolve nonconformities issued at any audit, certification is suspended and may only be reinstated upon the successful completion of a further surveillance audit.

### 12.4.1 Stage 1 audit reports

You are required to respond to CIBSE Certification with completed correction and corrective actions within 45 days of the audit for Stage 1.

The reports of Stage 1 audits contain information regarding the fulfilment of Stage 1 audit requirements and whether progress to Stage 2 is appropriate.

### 12.4.2 Stage 2 audit reports

You are required to respond to CIBSE Certification with completed correction and corrective actions within 45 days of Stage 2 audits, recertification audits and special audits.

These audit reports give one of the following recommendations:

(i) Certification should be continued

(ii) Certification should be continued subject to addressing any nonconformities and/or observations/opportunities for improvement within 30 days

(iii) That a special audit be performed, this is usual when major nonconformities are issued. Special audits must be conducted within 12 weeks (or less if stipulated by the audit team) to review the effectiveness of your actions and to close out nonconformities

### 12.4.3 Reports of special audits and short notice audits

You are required to respond to CIBSE Certification with completed correction and corrective actions within the timescale indicated in the report of the special audit.

These audit reports give one of the following recommendations:

(i) Certification should be reinstated, if it was suspended, or continued

(ii) Certification should be reinstated, if it was suspended, or continued subject to addressing any nonconformities and/or observations/opportunities for improvement within the timescale indicated in the report.

(iii) That another special audit be performed, this is usual when action to clear nonconformities is not shown to be effective. This would also include a warning that



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the CIBSE Certification decision makers may take action to continue to suspend certification or even to move to withdraw certification. All special audits must be conducted within 12 weeks (or less if stipulated by the audit team) to review the effectiveness of your actions and to close out the major nonconformities.

## 12.5 Nonconformity (NCR) classification

The following classification will be used for all nonconformities issued.

## 12.6 Minor NCR

Defined in ISO 17021-1:2015 at clause 3.13 as a" nonconformity that does not affect the capability of the management system to achieve the intended results"

Minor NCRs exist when there is a deviation from the normative reference e.g. the documented management system or the certification standard (e.g. ISO 9001) against which the process has been audited. Nonconformities can also arise from errors or omissions in regard to any of the above. Note that NCRs can only be issued where there is objective evidence available to substantiate the auditor's claim of nonconformity.

All Minor NCRs issued must be closed before initial certification can be granted – this closure is usually performed remotely using evidence supplied. Minor NCRs issued during surveillance audits must be cleared by the date given in the audit report or by the next planned audit depending on the audit team leader's entry on the audit report.

In all cases actions against Minor NCRs are checked for effectiveness at the next scheduled audit.

Where minor NCRs are not closed effectively these could lead to the issue of major NCRs at a future audit.

## 12.7 Major NCR

Defined in ISO 17021-1:2015 at clause 3.12 as "nonconformity that affects the capability of the management system to achieve the intended results".

Nonconformities could be classified as major in the following circumstances:

- If there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements
- A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Major NCRs exist when there is a deviation from the normative reference e.g. documented management system or the certification standard (e.g. ISO 9001) or QMS does not conform to the requirements of the assessment standard or other normative document against which the process has been audited such that there could be a potentially serious or fundamental breakdown of the systems that could lead to a nonconforming product or service being issued or otherwise put to use. Note that a number of minor nonconformities in the same area or against a particular clause from the assessment standard can lead to a major NCR.

Where a Major NCR is issued prior to initial certification it will result in the recommendation that certification not be granted. Certification will only be granted after the Major NCR has been confirmed as closed, possibly by a re-audit, or in some cases remotely using evidence supplied.



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Any Major NCR or multiples of Minor NCRs may result in the audit team leader recommending a suspension or withdrawal of certification depending upon the impact of the NCRs on the certified management system.

In all cases actions against NCRs are checked for effectiveness at the next scheduled audit.

### 12.8 Opportunity for improvement (OFI)

OFIs are raised where there is not enough objective evidence to confirm nonconformity, and yet there appears to be the suggestion that if it is not dealt with, a situation could develop which could lead to nonconformity (either minor or major).

OFIs are essentially items for improvement or possible future NCRs. Action on these is not mandatory but is recommended.

## 13 Step 4 – Review of the Certification File and Certification Decision

### 13.1 Certification file review

Once it is confirmed that all the information required to make a certification decision has been collected, it is reviewed by CIBSE Certification to determine compliance with the certification requirements.

An authorised member of the CIBSE Certification staff, independent of the audit team, will then make a decision regarding certification.

You will be formally informed regarding this decision and if it is positive CIBSE Certification will issue certification documents to you e.g. a certificate. You will also be required to pay any website listing fees upon initial certification and annually thereafter while certification is held in force.

Where certification decision is negative, i.e. not to approve certification you will be formally informed of that decision including the reason. This will also confirm what action is to be taken next e.g. a full or partial re-audit. Details of the additional costs associated with full or partial re-audit will also be confirmed. You may decide to either go ahead with re-audit or to withdraw from the certification process.

When it has not been possible to verify the implementation of corrections and corrective actions against any major nonconformity within 6 months after the last day of the Stage 2 audit, CIBSE Certification is required to conduct a repeat Stage 2 audit prior to any recommendation for certification being made.

There is a complaints and appeals process that you may initiate if you feel that any decision regarding your certification is not appropriate or correct, see CCP 101 for complaints, available on the CIBSE Certification website.

Initial certification is for a period of 3 years contingent upon satisfactory surveillance audits for the maintenance of certification, see section 14 below.

### 13.2 Certificates and website listing

Certificates to confirm your conformity with the certification standard are issued upon satisfactory completion of the certification process and a positive certification decision. Certificates show:



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1) Your company name and address
2) The certification standard i.e. ISO 9001, ISO 50001
3) The certified scope and boundary
4) A unique certificate reference number
5) Initial issue date, revision number and the issue and expiry dates of the current revision

Note: Certificates always remain the property of CIBSE Certification Limited.

In addition to being issued with a certificate, the details of your organisation, the scope and boundary of certification and certificate number are made accessible to the public through the CIBSE Certification Limited website.

Such public listing is a mandatory requirement of Management Systems Certification by CIBSE Certification.

# 14 Step 5 - Maintenance of Certification and website listing

It is your responsibility to make sure that you comply with these maintenance requirements. Failure to do so may put your ongoing certification at risk.

Certification and website listing of your management systems certification is maintained according to the following requirements:

## 14.1 Surveillance audits

Surveillance audits are conducted in a similar manner to Stage 2 audits but only sample aspects from the certification standard. A sampling audit is used to confirm that your organisation continues to satisfy the requirements for certification.

The number, frequency, and duration of surveillance audits are determined at the Stage 2 audit and recommended by the audit team. This recommendation takes into consideration the performance and complexity of your management system however CIBSE Certification makes the final decision.

In all cases, for all management systems certificates, the first surveillance audit will take place within 12 months of the certification decision.

During surveillance audits, nonconformities or opportunities for improvement may be raised (where appropriate).

To maintain certification your organisation must return any nonconformity reports to CIBSE Certification together with details of completed corrective actions, or planned corrective actions (with timescales), and objective evidence where required by the audit team. This information must be sent to CIBSE Certification within the timescale given in the audit report.

Following each surveillance audit, the audit team leader will issue you with a surveillance audit report, which is copied to CIBSE Certification. See section 12.4 above for information about reports.

### 14.1.1 Extension to scope audits

In some circumstances, following an appropriate formal application using the initial application process (see section 10 above), the scope of management systems certification



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can be extended during a certification period. In such cases the extension to scope may take the form of a special audit or, if appropriate, during an already planned surveillance audit.

## 14.2 Special audits and short notice audits

### 14.2.1 Special audits

As detailed above, suspension of certification can only be lifted following a further successful audit, a special audit, after a specified period of time (not more than 12 weeks) specified by the audit team leader. If suspension cannot be lifted for any reason(s), the certificate(s) and authority to use the CIBSE Certification Mark(s) will be withdrawn and cancelled. You will be issued with a written audit report that is copied to CIBSE Certification.

See section 12.4 above for information about reports.

### 14.2.2 Short notice audits

It may be necessary for CIBSE Certification to conduct audits of certified clients at short notice to investigate complaints, or in response to significant changes in your organisation's management system, or as a follow up when certification has been suspended for some reason. In such cases:

a) CIBSE Certification will advise you in advance that these short notice audits are to be conducted, and

b) CIBSE Certification will exercise additional care in the assignment of the audit team because of the lack of opportunity for any objection to audit team members

You will be issued with a written audit report that is copied to CIBSE Certification.

See section 12.4 above for information about reports.

## 14.3 Recertification audits

Recertification takes place after 3 years. During the third year of certification, and at least one month prior to the previous certification expiry date, a recertification audit shall be conducted.

Recertification follows a similar way as for the initial certification Stage 2 audit. This is a full review of ongoing eligibility to be certified and will cover all normative clauses of the certification standard.

The duration of a recertification audit is determined by the audit team leader at the surveillance audit that immediately precedes the recertification audit and will ensure that your organisation's management system continues to:

- Be effective and accurately reflect your organisation's management activities
- Facilitate continued improvements and enhances system performance and customer satisfaction
- Contributes to the achievement of your organisation's Policy and objectives

Recertification audit activities may need to have a Stage 1 audit in situations where there have been significant changes to the management system, your organisation, or the context in which the management system is operating (e.g. significant changes to legislation).



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At the conclusion of the recertification audit the audit team leader will hold a closing meeting with your organisation's management representatives to discuss any nonconformities and/or observations/opportunities for improvement, and to confirm their recommendation for certification going forward. The audit team leader will issue you with a recertification audit report, which is copied to CIBSE Certification. See section 12.4 above for information about reports.

### 14.3.1 Recertification decisions

CIBSE certification makes decisions regarding the renewal of certification based on:

- The results of the recertification audit
- The results of a review of the management system performance over the preceding 3-year certification cycle
- Review of any complaints received from users of certification relating to the certification client

| Situation | New Certificate Details | Certificate Dates |
|---|---|---|
| On occasions when recertification audits are successfully completed prior to the expiry date of the existing certification. | The expiry date of the new certificate is based on the expiry date of the existing certificate. | In such cases the earliest issue date on the new certificate will be the date of the recertification decision. |
| CIBSE Certification has been unable to perform a recertification audit by the expiry date of an existing certificate. | Recertification cannot be recommended and a new certificate will not be issued. | CIBSE Certification will contact the certification client to explain the consequences and any options open to them |
| CIBSE Certification has not been able to verify the implementation of corrections and corrective actions for any major nonconformities prior to the expiry date of the certification. | Recertification cannot be recommended and a new certificate will not be issued. | CIBSE Certification will contact the certification client to explain the consequences and any options open to them |
| An existing certificate has expired | CIBSE Certification can restore certification within 6 months provided that all outstanding recertification activities are completed i.e. audits and actions against any NCRs issued.<br><br>Otherwise a new application will have to be made and a Stage 2 audit conducted (and possibly a Stage 1 | The issue date on the new certificate will be the date of the recertification decision or a date soon after and the expiry date shall be based on prior certification cycle.<br><br>In the case of a new application a new certificate will be issued with start and end dates reflecting this. |



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| Situation | New Certificate Details | Certificate Dates |
|---|---|---|
| | audit also) in order to reinstate certification. | |

# 15 Inform CIBSE Certification

## 15.1 Changes and events

Certified organisations shall inform CIBSE Certification of any change to their status within seven working days, such changes include but are not limited to:

- Major complaints
- Changes to the activities performed within the scope and boundary of the management system
- Major changes to the management system and its processes
- Legal actions
- Any other actions or events that could have a detrimental effect on their management systems certification
- The organisational competence to comply with the certification standard

## 15.2 Other Changes of Details

Any change in the details of your organisation shall be notified to CIBSE Certification in writing (i.e. letter, fax, or email) within 14 days. Changes that should be notified include:

- Name
- Address
- Trading/legal status/ownership
- Trading name
- Any significant change that may affect your management system certification – if in doubt please contact us to discuss the change
- Changes that affect your ability to meet the certification requirements of this scheme description document

# 16 Fees

Fees are payable at the time of application and before the certification evaluation process commences and again at defined intervals during the term of certification. Please read your quotation letter, in conjunction with a current copy of Fee Sheet, carefully so that you understand your obligations regarding payments.

Failure to make correct payments will result in suspension and ultimately withdrawal of your management systems certification.

The appropriate application fee must accompany all applications. Where the fee is not paid the application will not be processed.

Our fees are published on our fee sheet.



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## 17 Use of the CIBSE Certification certificate and certification marks/logo

There are restrictions on the use of the CIBSE Certification scheme marks. These restrictions are described in document CCP 109 Use of Certification Marks.

Note that the certification marks for any management system certification must not be affixed to any product or used in such a manner that could:

- Lead to an assumption of certification to a product or service certification scheme, or
- To suggest certification of a product or service not included in the scope of the ISO 9001 certification

See section 18 below for information related to actions to be taken when certification is suspended, withdrawn or reduction of scope.

To assist you in the use of the logos, Style Guides are available, containing the logos and the rules for their use is also available, only to those currently certified by CIBSE Certification.

- CCP 506 - Management Systems Style Guide

## 18 Suspension and withdrawal of certification; or reduction of scope

All certified and registered organisations must remain compliant with the certification scheme requirements set out in this scheme description document, the declaration signed upon application and our terms and conditions.

When a certified organisation fails to meet certification scheme requirements their certification may be suspended or withdrawn. In some cases, the scope of the certification is reduced to remove elements of the certification that are consistently not complied with.

For integrated management systems a suspension and withdrawal may only affect one of the multiple management systems standards covered. In any case the overall impact on certification will be evaluated, and you will be notified whether the full integrated certification is being suspended or withdrawn or just a specific part.

**Under suspension, your management system certification is temporarily invalid.** See CCP136 Suspension, Withdrawal and other changes to certification status for full details.

It should be noted that withdrawal of certification might also be a voluntary process.

### 18.1 Suspension

In most cases, the suspension would not exceed 6-months. Suspension of certification can only be lifted following a new and successful audit within a specified period to be advised by an authorised person at CIBSE Certification.

### 18.2 Withdrawal

If the reason for suspension cannot be overcome e.g. inaction on NCRs or breach of the scheme rules not being rectified within an agreed timescale, the organisations certification and authority to use the CIBSE Certification Mark will be withdrawn and cancelled.

Where an Organisation wishes to voluntarily withdraw from the Scheme, this must be notified to CIBSE Certification in writing.



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# 19 Complaints

## 19.1 About CIBSE Certification or Appeals

### 19.1.1 Complaints

CIBSE Certification operates a dispute and complaints procedure (CCP 101) that any organisation (i.e. those that are potential, current, suspended or withdrawn from certification) may invoke at any time e.g. should they feel that (this is not an exhaustive list):

- They have received poor service
- They have been refused entry to a scheme unfairly
- They have been excluded from the scheme unfairly
- They feel that they have been unduly selected for audits or that the Certification decision(s) have or have not been applied correctly or fairly
- They have a cause for concern regarding any other matter.
- Complaints against you have been unfairly upheld

### 19.1.2 Appeals

Appeals against decision made by CIBSE Certification may be lodged using the procedure in CCP 102. CIBSE Certification would never act in any discriminatory way towards anyone resulting from the submission, investigation and decision on complaints.

## 19.2 Complaints about Certified Clients

Complaints about any of the Certified Clients of CIBSE Certification are dealt with in a similar manner to those about CIBSE Certification using the same procedures.

Details of complaints and any outcome will only be communicated to Certified Clients if it is appropriate to do so and in any case the identity of the complainant, or any details that could be used to identify the complainant, would not be revealed unless legally required to do so.

Complaints about Certified Clients may lead to special or short notice audits being performed, see section 14.2 above.

# 20 Changes to certification scheme requirements

Over time there are likely to be changes to the certification scheme requirements. Some of these changes may require additional assessment to enable your certification to remain extant.

Whether or not a change will require additional assessment, CIBSE Certification will always give you as much notice as possible of all changes and make information publicly accessible when it is appropriate to do so.

We will also ensure that the requirements for any further assessment for the maintenance or renewal of certification are communicated to you in a timely manner.

# 21 Extraordinary events and circumstances

Where extraordinary events or circumstances affect CIBSE Certification or its clients the following will be implemented.



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The definition of an extraordinary event or circumstance is:

> A circumstance beyond the control of the organization, commonly referred to as "Force Majeure" or "act of God". Examples are war, strike, riot, political instability, geopolitical tension, terrorism, crime, pandemic, flooding, earthquake, malicious computer hacking, other natural or man-made disasters.

When such circumstances arise CIBSE Certification will assess the risks associated with continuing certification, especially those risks associated with performing on site audits.

The outcome of the risk assessment will lead to the formation of a policy and a plan of action. These may be specific to your company or to all of our clients depending upon the nature of the event or circumstance. These will, as necessary, take into account:

- Any Government or regulatory advice
- Advice issued by UKAS (The United Kingdom Accreditation Service)
- Results of any risk assessments
- Client supplied information:
  - Information voluntarily provided
  - Information in the public domain
  - Information requested by CIBSE Certification (form CCF 412)

Policies and plans specific to each extraordinary event or circumstance will be communicated to our certified clients and those awaiting certification, as appropriate.

These policies and plans will communicate at least the information:

- The maximum time any alternative short-term assessment method can be used before suspension or withdrawal of certification
- The criteria for reinstating normal oversight (i.e. audits and assessments), including the method and timing of any reinstatement activities and assessments
- Any amendments to oversight plans on a case-by-case basis in accordance with our procedures
- Re-establishment of surveillance/recertification activities when access to affected location(s) is re-established

In all cases, to help protect your certification, CIBSE Certification will ensure that any deviation from UKAS Accreditation requirements and our procedures is justified and documented, and agreement reached with UKAS on plans to address temporary deviations from normal certification requirements.

All instructions included in the policies and procedures will form part of the ongoing certification agreement and, as such, are required to be complied with in full to:

- To allow audits to continue either on-site or remotely
- Maintain certification where this is possible
- To minimise disruption where ongoing certification is not possible

Where CIBSE Certification cannot make contact with a client, then our normal procedures will be invoked for suspension and withdrawal of certification.



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# Annex 1 Energy Management Systems Specific Information

## 1.1 Determining the complexity of your – Energy Management Systems

As part of determining the complexity of your energy management system we will need the following information specific to the scope and boundary that you will be entering on your application form:

- The number of EnMS effective personnel
- The annual energy consumption (in Terajoules)
- The number of energy types
- The number of significant energy uses

### 1.1.1 Determining the number of "EnMS effective personnel'

These should include those that contribute to the requirements of the EnMS within the scope and boundaries for establishing, implementing or maintaining energy performance improvements and may include those from outside of the organisation e.g. contractors. This therefore should only cover those whose actions can have an effect on energy use.

Please consider those form the following groups when determining EnMS effective personnel.

- Top management
- Energy management team
- Person(s) responsible for procurement related to energy performance
- Person(s) responsible for major changes affecting energy performance
- Person(s) responsible for developing and maintaining energy data and analysis
- Person(s) responsible for developing, implementing or maintaining energy performance, including objectives, targets and action plans
- Person(s) responsible for planning, operating and maintaining processes related to significant energy uses including any seasonal operations
- Person(s) responsible for design which affects energy performance.

#### 1.1.1.1 The annual energy consumption (in Terajoules)

This is simply the annual consumption of energy in any consecutive period of 12 months.

#### 1.1.1.2 The number of energy types

Please tell us how many types of energy there are in use within the scope and boundary of your energy management system.

#### 1.1.1.3 The number of significant energy uses

Clause 3.5.6 of ISO 50001 defines significant energy use as "use accounting for substantial energy consumption and/or offering considerable potential for energy performance improvement". It is for you to define these energy uses.

## 1.2 Calculation of audit time

For ISO 50001 quotations are based upon the following factors within the scope and boundaries for which you apply for certification:



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- The energy types in use
- The number of significant energy uses
- Actual energy consumption
- The number of EnMS effective personnel – see below

These factors are used to calculate the audit duration (which includes the on-site time at your location(s), audit planning, document review, and audit reporting time).

We use the guidelines in ISO 50003 to determine audit duration. This allows the audit duration may be adjusted if the organisation has integrated the EnMS with another certified management system e.g. ISO 9001. The maximum adjustment in time that we can make due to another certified management system is a 20 % reduction. Further adjustments, increase or decrease, may be made based on local, regional, or national legal requirements.

The number of EnMS effective personnel is used as the basis for the calculation of the audit days. The process for determining the number of EnMS effective personnel ensures that the persons who actively contribute to meeting the requirements of the EnMS are included

The complexity of your energy usages, your operations and activities undertaken are used in the audit duration calculation, which is performed in accordance with ISO 50003.

If your organisation has applied for certification covering more than one site, we will take into account any differences in operations or products between sites and their geographical separation (including any differences in legislation) to help ensure an adequate level of audit sampling can be achieved.

#### 1.2.1.1 Initial audit time

Any element of the audit performed offsite i.e. away from the company e.g. installation site, service site activities, will not reduce the total on-site audit duration to less than 80% of the time calculated above. Time for audit planning and/or report writing will be additional to the audit time calculated.

Once the total initial audit time is calculated the time is allocated to the Sage 1 audit and Stage 2 time. This will be indicated on our quotation.

#### 1.2.1.2 Surveillance audit duration

Surveillance audit duration is calculated similar manner to initial audit time but the total annual audit time is nominally 1/3 of the initial audit time e.g. if the initial audit duration is 6 auditor days the annual surveillance audit duration would be 2 days.

Surveillance audit time may be split across the year i.e. 2 audits of one day approximately 6 months apart, or may be conducted in a single audit of 2 day's duration. Surveillance audit time may be adjusted based on the performance of the management system.

#### 1.2.1.3 Recertification audit duration

Recertification audit duration is calculated similar manner to initial audit time but the total annual audit time is nominally 2/3 of the initial audit time e.g. if the initial audit duration is 6 auditor days the recertification audit duration would be 4 days.

The recertification audit duration will be recalculated and confirmed during the last surveillance audit before the recertification to take into account any changes in the number


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of personnel, changes in activities included in the scope of certification and any other factor that could affect the recertification audit duration.



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# Annex 2 Quality, Environmental, Health & Safety and Compliance Management Systems Specific Information

## 2.1 Determining the duration of Quality, Environmental, Health & Safety and Compliance Management System Audits

There are internationally agreed protocols for the determination of audit duration. These protocols are set down in the following documents:

- International Accreditation Forum (IAF) Mandatory Document 5 (MD5) for Duration of QMS, EMS and Health & Safety Audits
- PD ISO/IEC TS 17023:2013 Conformity assessment - Guidelines for determining the duration of management system certification audits

We are required to use these protocols to help ensure conformity with accreditation requirements.

Our application form asks for information that is used to determine audit time and it is important that you provide that information to help reduce the chances of delays in the quotation process and also to help ensure Stage 1 audits are effective i.e. we can confirm the information on the application is correct.

### 2.1.1 Factors affecting audit duration

The factors used to determine audit time include:

- The physical size of the client organization (i.e. large or small)
- The complexity of the management system
- Technological and regulatory context
- Activities included in the scope of the management system
- Maturity and effectiveness of the management system
- Risks associated with products, processes and activities of the client
- Culture
- Integrated management systems
- Composition of the audit team
- Joint audits with other certification bodies and remote auditing

### 2.1.2 Calculation of audit time

#### 2.1.2.1 Initial audit time

The methodology used to calculate audit duration is based on the effective number of personnel at the time of the planned audit. The number of personnel is used to look-up the audit duration from the tables in IAF MD 5.

That number of audit days is then adjusted for the significant factors applying to the client to be audited and attributing to each factor an additive or subtractive weighting to modify the base number of days.

In any case we are not permitted to reduce the audit duration by more than 30% of the time indicated in the tables in IAF MD 5.



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Any element of the audit performed offsite i.e. away from the company e.g. installation site, service site activities, will not reduce the total on-site audit duration to less than 80% of the time calculated above. Time for audit planning and/or report writing will be additional to the audit time calculated.

Once the total initial audit time is calculated the time is allocated to the Sage 1 audit and Stage 2 time. This will be indicated on our quotation.

#### 2.1.2.2 Surveillance audit duration

Surveillance audit duration is calculated similar manner to initial audit time but the total annual audit time is nominally 1/3 of the initial audit time e.g. if the initial audit duration is 6 auditor days the annual surveillance audit duration would usually be 2 days.

Surveillance audit time may be split across the year i.e. 2 audits of one day approximately 6 months apart, or may be conducted in a single audit of 2 day's duration. Surveillance audit time may be adjusted based on the performance of the management system.

#### 2.1.2.3 Recertification audit duration

Recertification audit duration is calculated similar manner to initial audit time but the total annual audit time is nominally 2/3 of the initial audit time e.g. if the initial audit duration is 6 auditor days the recertification audit duration would be about 4 days.

The recertification audit duration will be recalculated and confirmed during the last surveillance audit before the recertification to take into account any changes in the number of personnel, changes in activities included in the scope of certification and any other factor that could affect the recertification audit duration.



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## Annex 3 Definitions

**Auditor Day:** An auditor day is defined in IAF MD 5 as "…an auditor day is normally 8 hours and may or may not include travel time or lunch depending upon local legislation."

**Effective Number of Personnel:** The effective number of personnel consists of all full time personnel involved within the scope of certification including those working on each shift. Non-permanent (seasonal, temporary, sub-contractors and contracted personnel) and part time personnel who will be present at the time of the audit shall be included in this number



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## Annex 4 Management systems certification quotations

### 4.1 Quotation preparation and issue

Using the information on the forms CCF 501n and CCF 500n a quotation is generated using the quotation template CCF 503.

CIBSE Certification will issue a quotation with details of the initial audit fees (see CCF 502 Fee Sheet) plus travel, accommodation, and subsistence expenses (if applicable).

Depending upon the credit check outcome, or other known risks audit time may be invoiced in advance and travel and subsistence being invoiced after each audit has concluded.

Quotations include:

- The proposed scope and boundaries of certification
- The certification fees
- The audit programme for the three year certification cycle i.e. the initially expected number and duration of audits i.e. surveillance and recertification audits
- Audits to be undertaken at additional site(s), where applicable.

The day rates used are those from the Fee Sheet.

Once the quotation is completed it is transmitted to the client e.g. my mail, email for consideration.

### 4.2 Quotation acceptance

If you are happy with the quotation, please sign the declaration (ensure the person signing the quotation is authorised to do so) and return it to CIBSE Certification.

Please also send a purchase order or other document against which we can invoice you.

At this point a certification agreement now exists between CIBSE Certification and the Client.

## Annex 5 Transfer of certification from other Certification Bodies

This process is based on, and is designed to, IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems (IAF MD 2) that is available free from the IAF website.

CIBSE Certification can offer the transfer of certification from other certification bodies. This is done on the basis that the other certification body holds a similar level of accreditation to CIBSE Certification.

### 5.1 Level of accreditation

Only certifications issued by an accredited certification body can be accepted for transfer (i.e. of an IAF MLA signatory e.g. UKAS)

Certifications from bodies not covered above will be treated as new clients.



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## 5.2 Pre-Transfer Review

A competent person from CIBSE Certification carries out a review of the application from the prospective client. This review will include a check to determine whether their current certification qualifies for this route to certification.

To affect this review the following are required to be reviewed and fully documented:

- Documentation (this should normally include a visit to the prospective client)
    - Reasons for not conducting a visit shall be fully justified and documented
    - A visit is always conducted if no contact can be made with the issuing certification body
- Confirmation that the client's certified activities fall within the accredited scope of CIBSE Certification
- The reasons for seeking a transfer
- Ensuring the site or sites wishing to transfer certification hold an accredited certification that is valid in terms of authenticity, duration and scope of activities covered by the management system certification
    - If practical, the validity of certification and the status of outstanding nonconformities should be verified with the issuing certification body unless it has ceased trading
    - Where it has not been possible to communicate with the issuing certification body, CIBSE certification body will record the reasons
- The last certification or recertification audit reports, subsequent surveillance reports and any outstanding nonconformities that may arise from them will be reviewed
- Any other available, relevant documentation/information regarding the certification process i.e. handwritten notes, checklists.
- If the last certification, recertification or subsequent surveillance audit reports are not made available or if the surveillance audit is overdue then the organisation shall be treated as a new client
- Complaints received and action taken
- The stage in the current certification cycle (see 5.3 below)
- Any current engagement by the organisation with regulatory bodies in respect of legal compliance, if applicable

## 5.3 Certification

Normally, only valid accredited certification can be transferred.

If your certification as issued by a certification body which has ceased trading or whose accreditation has expired, been suspended or withdrawn, then CIBSE Certification may consider a certification for transfer at its discretion, but only after the re-transfer review process above.

Certification which is known to have been suspended or under threat of suspension will not be accepted for transfer under any circumstances and CIBSE Certification will terminate any ongoing transfers if such a situation becomes known to it at any time during the transfer process.

If the CIBSE Certification cannot verify the status of the certification with the issuing certification body, the client will be required to confirm that the certificate is not suspended or under threat of suspension.



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Outstanding nonconformities should be closed out, if practical, with the issuing certification body, before the transfer process begins. If that is not practicable any outstanding nonconformities will be closed by CIBSE Certification during the transfer process.

If no further actual or potential problems are identified by the pre-transfer review a certificate will normally be issued using the processes described in the main section of this document.

A programme of ongoing surveillance audits will be issued to you based on the previous certification regime and any specific CIBSE Certification requirements.

In cases of doubt regarding the suitability of the client for certification transfer they will be required to make a full application as a new client.



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## Annex 6 Multi-site certification

This process is based on, and is designed to, IAF Mandatory Document for the Certification of Multiple Sites Based on Sampling (IAF MD 1) that is available free of charge from the IAF website.

CIBSE Certification can offer certification of EnMS systems to organisations that have multiple sites that are controlled, in terms of their EnMS, from a central location and that use the same EnMS and have similar processes and energy is used in a similar manner. An example of this might be a head office and several remote manufacturing plants that are all under the control of the same EnMS that is managed and controlled from a single central location.

The multiple sites need not always be the same legal entity in all cases e.g. those operating with franchises, networks of sales offices, manufacturing sites with similar processes or significant energy uses, service companies with multi-sites offering a similar service, companies with multiple branches.

### 6.1 Application for multi-site certification

Please use our normal application form and describe the structure of the EnMS, the locations covered and the energy uses at each.

We will contact you to clarify anything that is not clear to use before we provide you with a quotation.

Please make sure that you list the following:

- The main central location from which the EnMS is operated
- All other sites to be considered in the multi-site certification
- Any temporary sites - those set up to perform specific tasks for a finite period of time and which will not become a permanent site (e.g. a construction site)
    - If a temporary site forms a significant element of your energy use and/or energy consumption, please make sure they are included if within the scope and boundary of the EnMS

### 6.2 Eligibility for multi-site certification

The processes related to significant energy uses and energy consumption at the sites to be certified shall be substantially the same or be organised into similar subsets that are operated using similar methods or processes.

Where some of the sites have similar, but fewer, processes than others, they may be eligible for inclusion under multi-site certification however sites that include the most energy intensive processes will be subject to more frequent audits.

We are happy to accept your energy review and energy performance data on the basis of the whole or for each location within the multi-site and will be documented as such under our multi-site sampling plan.

As stated previously the EnMS shall be under a centrally controlled and administered energy planning process and be subject to a central management review – at least one management review shall have taken place prior to the CIBSE Certification audit taking place. All of the sites to be included in the multi-site certification (including the central



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administration location) shall have been audited by the centrally managed internal audit programme prior to CIBSE Certification starting its audit.

It shall be demonstrated that the central location of the organisation has established an EnMS and that the whole organization under the scope and boundary of the EnMS audit meets the requirements of the EnMS.

The central location shall demonstrate its ability to collect and analyse data from all sites included within the scope and boundaries. In order to for the organisation to be eligible for sampling, the following requirements shall be met and applied to the central location.

- Management system requirements:
  - System documentation and system changes authorized by the central office
  - Management review, compiled from all sites
  - Evaluation of corrective actions
  - Internal audit planning and evaluation of the results
  - Demonstrate its authority to collect information on legal and other requirements and initiate organisational change if necessary
  - Results of internal audits from sites
- Energy performance requirements:
  - Consistent energy planning process;
  - Consistent criteria for determining and adjusting baseline, relevant variables and energy performance indicators (EnPIs)
  - Consistent criteria for establishing objectives and targets and site action plans
  - Centralised processes for evaluating applicability and effectiveness of action plans and EnPIs
  - Energy performance data centrally aggregated to show organisation wide energy performance, as appropriate

## 6.3 Audit site selection

An audit programme will be developed based on the information you provide. Depending on that information we may decide to audit all of the locations or a subset (sample) of the locations depending the results of our contract review process.

The proposed audit programme will be used to generate a quotation which is subject to your acceptance.

The sample of locations for audit will be selected based on the factors set out below to ensure a representative range of different locations is selected.

At least 25 % of the sample will be selected at random and the remainder will be selected so that the differences among the locations selected over the period of validity of the certification are as large as possible.

To that end the selection of locations includes a review of the energy types, energy consumption and the following factors:

- Results of internal audits and management reviews or previous certification audits
- Significant variations in the size of the locations
- Variations in shift patterns and work process or procedures
- Complexity of the management system
- Processes conducted at different locations



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- Modifications since the last certification audit
- Maturity of the management system and knowledge of the organization
- Complexity of energy types, energy uses and energy consumption
- Differences in culture, language and legal and other requirements
- Geographical dispersion

A selection will be made at the contract review process but this may be varied once the audit of the central location has been performed. We will keep you updated regarding the sites to be included in the audit sample.

## 6.4 Audits

Once the quotation is accepted the audits are performed according to the multi-site programme contained in the accepted quotation.

## 6.5 Certification documents

Certification will be issued covering the multiple sites provided that each site included in the scope and boundary of certification and that was audited as part of the audit programme has dealt with all nonconformities identified satisfactorily.

CIBSE Certification will provide certification documents to you indicating each site covered by the certification.

## 6.6 Withdrawal of Certification

The certification documents shall be withdrawn in their entirety, if the central location or any one or more of the other locations fails to continue to fulfil the necessary requirements for maintenance of certification.

Should any change, such as the closure of any of the locations covered by the certification, you must inform CIBSE Certification as required, see section 15 above. Failure to fulfil this requirement is considered to be a misuse of the certification and would be subject to the requirements of section 18 above.

## 6.7 Additional locations

Additional locations can be added to an existing certification as the result of surveillance or recertification activities or enhancement of the scope. You would need to complete a further application to instigate that process.

End /-



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