INTERNATIONAL TECHNICAL ALLIANCE	**CERTIFICATION REGULATIONS**	
Rev. 18 of 29.09.2023		R 01

REGULATION OF CERTIFICATION

Processing and verification	Approval and issuance
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1 Introduction

This Regulation is to be understood as an integral part of the certification contract and it is divided into different sections. The acceptance of the offer/ contract by the organization means the full acceptance of this document.

The first section regulates the contractual relationship between ITA and client organizations as well as aspects common to all certification services. Sections from two to section nine regulate the individual scheme certification services. Finally, section ten regulates the use of the I.T.A. mark.

- Section 1 – General, relationship between I.T.A. and client organizations
- Section 2 – Quality Management Systems (QMS) Certification
- Section 3 – Environmental Management Systems (EMS) Certification
- Section 4 – Health and safety management Systems (HSMS) Certification
- Section 5 – Food Safety Management Systems Certification (FSMS) & Food Safety Systems Certification (FSSC22000)
- Section 6 – Information Security Management Systems Certification (ISMS)
- Section 7 – Anti Bribery Management Systems Certification (ABMS)
- Section 8 – Service Management System Standard (ITX/SMS) Certification
- Section 9 – Energy Management System (EnMS) Certification
- Section 10 – Use of the I.T.A. Mark

2 Terms and definitions

For terminology, the definitions given in the UNI CEI EN ISO / IEC 17000 UNI EN ISO 9000 standards generally apply.

QMS: Quality Management System;
EMS: Environmental Management Systems
HSMS: Health and Safety Management Systems
FSMS: Food Safety Management Systems
ISMS: Information Security Management Systems
ITX: Service Management Systems
ABMS: Anti Bribery Management Systems
EnMS: Energy Management System
RT: Technical Director;
ALD: Top Management;
AT: Audit team;
LA: Lead Auditor;
SA: Support Auditor;
TA: Technical Advisor.
CT: Technical Committee;
CDC: Control Committee;
(NC) Major non-compliance: The absence of significant elements of the MS in the face of the reference legislation (absolute lack of application);
(nc) Minor non-compliance: The partial absence of an element of the MS in the face of the reference legislation (lack of application and/or documentation) which, on the basis of objective evidence available, does not affect the conformity of the product/ service offered by the organization;
Observation: What does not fall within the definitions of non-compliance, and which constitutes a possible improvement in the effectiveness of the MS.

3 Section 1 – General, relationship between I.T.A. and client organizations

3.1 Generality

a) This Regulation is to be understood as an integral part of the certification contract, and illustrates the procedures applied by I.T.A. for the certification of Management Systems and the procedures that organizations must follow to request, obtain and maintain such certification.

b) I.T.A. may also issue specific regulations in addition to the requirements of this Regulation for particular management system schemes or for particular sectors/areas.

c) This Regulation (in its latest revision) and the Specific Regulations (in their latest revisions) can be downloaded from the www.itanet.eu website. Organizations are required to download the latest revision in force from the site.

The management systems regulated by this Regulation are:
UNI EN ISO 9001;
UNI EN ISO 14001;
UNI ISO 45001;
ISO IEC 27001;
ISO IEC 27xxx – flexible scope;
ISO 22000;
FSSC 22000;
ISO IEC 20000-1
ISO 37001
ISO 50001
ISO 50003
ISO 22003-1
ISO 20006

d) The certification concerns the compliance of the Management System with the applicable standards. The compliance of the products or services provided with other standards, rules or other regulatory documents applicable to them may be the subject of other certifications. It is the responsibility of the organization to comply with the laws and mandatory rules applicable to the products and services offered.

e) I.T.A. however verifies the existence and effective implementation of an adequate company's control system for the identification and management of the legal provisions relating to the products and services provided by the candidate for certification and the ability to ensure that they are applied.

f) Access to certification is open, without discrimination, to all organizations and it is in no way conditioned by their membership or not in any association or group, unless they are subject to legal measures that prevent the placing on the market of the products or services offered.

g) For the certification activity I.T.A. applies the current tariff:

I.T.A. does not perform the following services:
- certify management systems of other CBs.
- Offer or provide consultancy services related to management systems
- Conduct internal audits of certified by I.T.A. organizations

3.1.1 Customer's obligations

By signing the certification contract clients' organizations fully accept this certification regulation.
The customer also accepts:

1. To comply with I.T.A. requirements when referring to the status of their certification in media such as the Internet, brochures or advertising material or other documents;
2. Not to make, or consent, statements that could mislead other interested parties about the certification;
3. Not to use, nor permit misleading use, of the certificate;
4. To stop using all advertising materials that refer to certification in the event of certificate withdrawal;
5. To rectify all advertising materials if the scope of certification has been reduced;
6. Not to allow references to the certification of its management system to be used in such a way as to imply that ITA certifies products
7. Not to imply that certification applies to activities and sites that are outside the scope of the certification;
8. Not to use the certification, in such a way as to discredit the certification body and/or certification system and undermine public trust
9. To informs ITA, without delay, about aspects that may affect the ability of the management system to continue to meet the requirements of the standard used for certification. By way of example but not limited to: Legal, commercial and organizational aspects; contact addresses and sites; field of application; significant changes to the management system.
10. To accept, with regard to the ITA activity related to Accreditation maintenance, if required, the presence of observers of the Accreditation Body during the execution of any type of audit, under possibility of interruption of the certification process in case of certification audit, or withdrawal of the certificate in case of other type of audit.

3.2 Confidentiality

a) I.T.A. guarantees the confidentiality of all acts and/or information concerning the organizations that request the certification process. The information obtained by personnel operating, at any capacity and level, on behalf of I.T.A. are subject to confidentiality, for which they sign a specific commitment.
b) I.T.A. undertakes to observe and apply the provisions on data protection of Legislative Decree 196/2003 and subsequent amendments and GDPR Regulation 2016/679.
c) The user's personal data are used by INTERNATIONA TECHNICAL ALLIANCE S.r.l., which is the data controller for processing, in compliance with the principles of protection of personal data established by the GDPR 2016/679 Regulation and the national legislation in force.
d) Additional information relating to the organizations is not disclosed to third parties without the prior written consent of the organization itself (or the persons concerned). If such communications are required by law, the organization will be informed by I.T.A., in compliance with legal constraints. All functions involved in the certification process, including the Technical Committees and the Control Committee, are bound to the same degree of confidentiality on any information acquired. The obligations defined in this point are applicable regardless of the completion of the certification process as well as in the event of withdrawal and/or termination of the contract and/or any other different epilogue of the contractual relationship.

e) Information about organizations from sources other than the organizations themselves (e.g. complainants) will always be treated as confidential.
f) I.T.A., in compliance with the rules on data protection, may communicate to interested third parties, the validity status of the Certificates issued.

3.3 Prices and terms of payment

a) The prices relating to the certification activity are established by I.T.A. according to our price policy whereby the services are provided at prices sufficient to ensure a profit sufficient to guarantee the independence of I.T.A.
b) To each organization interested in certification, I.T.A. S.r.l. prepares and submits a specific and complete offer of all the information relating to the activity and prices on the basis of the "Price policy" in force.
c) The obtaining, maintenance and recertification or extension of the certification are subject to the payment of the amounts in the manner provided for in the contract accepted by the Organization and in any subsequent amendments communicated to the Organization and accepted by it. Failure to pay the amounts due involves the non-performance of the activity by I.T.A. and a warning of payment which, if disregarded, may be followed by suspension measures and also withdrawal of certification as required by these Regulations.

3.4 Certification Process

What is described in this paragraph is valid for all certification schemes regulated in this document. Any main aspects of each scheme will be dealt with in the specific sections.

3.4.1 Information questionnaire

a) In order to receive the offer for certification, the applicant organization must submit the duly signed questionnaire forms.
b) The request for quotation must contain at least the following information:
- references of the company (including the contact person within it);
- management system reference standard;
- description of the activities (processes and related significant aspects, products, services provided, ...) carried out directly by the company or contracted to third parties;
- list of the main laws/directives/standards relating to the products/processes/services provided;
- possession of the mandatory certifications relating to the products / processes / services provided;
- organization and number of employees involved in the activities covered by the certification request;
- location of any production sites and construction sites;
- type of certification required;
- any external consulting service received relating to the management system;
- any outsourced activities;
- other management system-specific information and data.

c) In the quotation request, the applicant organization must also define the purpose of certification, i.e., the activities covered by the scope of the management system to be certified.
d) This information must be received/signed by authorized personnel of the organization.

3.4.2 Pre-audit

a) The Organization, if it deems it useful, may request I.T.A., to carry out a preliminary pre-audit visit. The request must be made at the time of completing the certification request or by another written request.
b) The preliminary visit aims to:
- identify the size, structure and activity of the organization;
- identify the level of preparation of the organization to support the certification process through the assessment of the completeness of the documentation and the progress of the implementation of the management system
- with respect to the reference legislation.
- The preliminary visit/pre-audit is optional and can only be requested once.
- The number of days necessary for its execution is established according to the type and size of the organization.

c) The date and plan of the preliminary visit are defined by I.T.A. in agreement with the Organization.
d) At the end of the preliminary visit, the Audit Team issues a report which findings will not be considered within the certification process.
e) The duration of the pre-audits is equal to the audit time of Stage 1 audit for certification.
f) The Audit team that carried out the pre-audit activity will not be able to carry out any subsequent certification activity.

3.4.3 Certification offer – issue and acceptance

a) Upon receipt of the duly completed quotation request (questionnaires) by the requesting organization, I.T.A. proceeds with the review activity, consisting in understanding whether there are the skills and abilities to perform the certification activity, possibly contacting the organization and preparing the relative offer and certification program.
b) The quotation relating to the certification activities is taken from the price lists of the institution in force at the time of the offer.
c) This quotation is defined on the basis of:
- the number of man-days required for the assessment of the management system of the applicant organization
- to the company's size
- the complexity of production processes and/or individual products
- the type of certification required.

d) Evaluation times include:
- examination of the documentation of the management system of the applicant organization;
- on site audits (inspection visit);
- the timing of report issue.

e) The economic quotation shall include the following items, where applicable:
- Stage 1: verification of documentation and system setup;
- Stage 2: system evaluation;
- annual surveillance audits;
- verification of recertification;
- any additional checks (in the cases provided for in this Regulation);

- administrative expenses;
- cost of issue a certificate of conformity (and related accreditations);
- cost of issue any duplicates/changes to the certificate;
- travel expenses, hotel accommodation expenses and expenses for food.

f) The determination of the audit durations and the consequent justifications regarding any increases and reductions, as governed by the IAF MD 05 document (and other IAF, ISO or Scheme specific documents), are available to the customer, who can request the details of the same to I.T.A. which will send the customer the detailed information about factors applied for an increase or decrease.

g) The offer always contains information about its validity period.

h) The offer is sent to the applicant for acceptance.

i) Part of the offer are: "ITA General Terms and Conditions for Certification" – applicable for all Sshemes, and “FSSC 22000 certification terms and conditions” – applicable only for FSSC 22000 certifications.

j) In case of negative outcome of the review of the application, I.T.A. will clarify to the organization with appropriate communication the reasons that led to the non-acceptance.

k) The offer is deemed accepted if it is returned by the organization duly signed in its parts.

l) The organization at the time of acceptance of the contract declares to have read and accepted the information on the processing of data on the website www.itanet.eu .

3.4.4 Audit planning

a) Upon receipt of the contractually required documents, I.T.A. provides for the planning of audit activities.

b) I.T.A. develops a three-year audit program for a full certification cycle to clearly identify the audit activities required to demonstrate that the organization's management system meets the requirements for certification.

c) The three-year audit programme includes an initial two-stage audit, surveillance audits in the first and second years and a recertification audit in the third year, before the certification expires.

d) I.T.A. appoints the Audit Team (based on the requirements defined during the review) and appoints a Lead Auditor to start the certification process.

e) With regard to the names of the audit team, the applicant may object as per the terms of the document with which the audited organization is informed about the audit team selected for the audit. The Audit Team will be modified accordingly in case of well-founded and legitimate objections.

3.4.5 Execution of the Certification Audit

The certification audit for all schemes, except for several cases for which reference is made to the specific regulations, is divided into two distinct phases:
STAGE 1 – Document Analysis and Evaluation of the system setup
STAGE 2 – Audit of the level of compliance of the management system

3.4.5.1 Stage 1 Audit

a) Stage 1 audits are usually carried out either fully onsite, or partly *in the office (i.e. at the* I.T.A. headquarters or at the Lead Auditor's headquarters) and partly on site, i.e. at the organization's headquarters, depending on any Scheme specific possibilities.

b) In exceptional and justified cases, Stage 1 can only be carried out in the *office* (where applicable).

c) The evaluation time, to be dedicated to the audits conducted at the organization, to complete Stage 1 is determined, in compliance with the assignment received and by the IAF provisions and/ or other applicable regulations.

d) There is usually a time interval between Stage 1 and Stage 2. However, this interval cannot be less than one day after the last day of stage 1 and that cannot exceed 6 months, a minimum of 5 days from the last day of stage 1 is recommended. The decision to perform Stage 1 and Stage 2 consecutively must be subject to risk analysis and approved by a global reviewer and authorized by the technical management. Specific scheme requirements may establish different criteria for the realization of Stage 1 (for example, for the ISO 14001 environmental certification, all Stage 1 is carried out at the organization).

e) The results of the Stage 1 Audit are communicated to the organization, without any classification, so that they are managed by the same, in particular the issues identified that in Stage 2 could be classified as nonconformities.

f) If the results of the Stage 1 audits highlight significant problems, the LA informs the applicant that Stage 2 of the assessment cannot take place until they have been taken over and resolved by the applicant.

g) In order to correctly carry out the Stage 1 audit, the organization must submit to I.T.A. for review:

1. Management System Manual/ Another relevant document developed
   - Purpose and scope of the system
   - Identification of non-applicability of requirements and their reasons
   - Identification of possible product/process/service exclusions
   - Illustration of production processes and their interactions
   - Brief description of how, responsibilities, and resources for compliance with applicable regulatory requirements, including by referring to documented procedures or other system documentation
   - Methods and responsibilities in the management of complaints
2. List of internal procedures and documents relevant to quality
3. Copy of the Certificate of registration with the Chamber of Commerce or equivalent document, as evidence of the existence of the organization and the activity carried out
4. Organization chart of the Organization Management System
6. Last Management Review
7. Internal audit planning
8. List of the main laws and/or regulations applicable to the product/service provided
9. Quality Plans/ Internal Control Plans/ or similar equivalent documents implemented

h) The outcome of the verification is communicated to the applicant through the Stage 1 Report.

3.4.5.2 Stage 2 Audit – System Assessment

Following the positive outcome of Stage 1, I.T.A. plans the Stage 2 audit in order to verify the effective and efficient application of what is described by the applicant in the documentation of the company management system and what is required by the audit references.
The Audit Team, which includes qualified personnel for audit activities and competent in the technical area, carries out the audit, under the guidance of the Lead Auditor, on the management system, visiting the offices and/or the production site(s) of the organization, and if necessary those of external contractors of activities (outsourcing), in accordance with the audit plan previously transmitted.
The Audit Team can be composed only of the Lead Auditor.
The purpose of the Stage 2 audit is to assess the implementation, including effectiveness, of the organization's management system. The Stage 2 audit covers the following:
a) information and evidence on compliance with all requirements of the standard or other regulatory document applicable to the management system;
b) monitoring, measuring, reporting and review of performance, with reference to the objectives and key targets of performance (consistent with the expectations of the applicable management system standard or other regulatory document);
c) the management system of the organization and the services with reference to compliance with legal requirements;
d) keeping the organization's processes under control;
e) internal audits and management review;
f) the responsibility of the management for the policies of the organization;
g) the links between regulatory requirements, policy, objectives and performance targets (consistent with the expectations of the applicable management system standard or other regulatory document), all applicable legal requirements, responsibilities, competence of personnel, activities, procedures, performance data and findings and conclusions of internal audits.
i) The Audit Team should analyze all audit information and evidence collected during Stage 1 and Stage 2 audits in order to review the audit findings and establish audit conclusions.
j) The audit begins with a meeting at which the LA introduces the audit team members, explains to the representatives of the organization the assessment procedure, specifies the confidentiality aspects, provides the necessary clarifications about the audit plan and other aspects of the audit, describes the procedure followed by I.T.A. for the management of non-conformities and their treatment, any corrective/preventive actions and any interruption of the audit (particularly serious deficiencies or lack of implementation).
k) The audit is conducted against the requirements of the reference standards and any criteria and/or sectoral guidelines, through checklists that allow to assess the level of compliance of the applicant with the aforementioned requirements.
l) If an organization operates on multiple sites, explicit reference is made to the provisions of IAF MD 01 and/or another scheme specific documents implemented (i.e., for FSSC 22000 certifications), and/or other documents developed by ITA.
m) I.T.A. reserves the right to carry out audits at any suppliers who were entrusted with relevant processes falling within the scope of certification.
n) If it is not possible to plan this activity within the initial audit, the same must be carried out during the three-year certification period.
o) The organization must make available the documents defining and implementing the system, cooperate during all verification activities ensuring access to all required information, designate its own

Representative responsible to the audit team and seek consent in the presence of any consultants as observers.

p) At the end of its work, the Audit Team meets to process the collected data and establish conclusions. During the closing meeting of the audit, in the presence of the Management of the organization, the LA informs the organization about the outcome of the audit, provides clarifications regarding the results of the evaluation informing the organization that the evidence collected in the audit is based on a sample of the information/documents, introducing an element of uncertainty and formalizes and delivers to the organization the related report including the information and evidence (including positive ones), both from Stage 1 and Stage 2 and any non-conformities, distinguishing between observations, minor non-conformities and major non-conformities that require special attention and that must be managed in a particular way as required by a specific procedure.

q) In the closing meeting, the organization has the opportunity to formulate any reservations, observations or suggestions relating to the work of the Audit Team and the service performed; these reservations, observations or suggestions can be formulated even after the conclusion of the audit and sent directly to the Technical Management, within 5 working days from the conclusion of the audit, as per implemented by ITA (and available on the website) procedure for complaints.

r) The competent function of I.T.A., verifies the report issued by the audit team and, if it does not make changes, confirms it to the organization; otherwise, any changes to content are appropriately reported and motivated.

s) Certification cannot be granted until any Major Non-Conformities (and/or Critical nonconformities for FSSC 22000 certifications) have been adequately addressed and I.T.A. has ascertained with a favorable outcome, through a specific additional audit and/or examination of documentary evidence (see next paragraph), the correction/ closure of the same and the implementation and effectiveness of the related corrective/ preventive actions; a similar procedure is followed in the case of other surveys, whose number and extension, in the opinion of I.T.A. is such as to affect the correct functioning of the system and the conformity of the product made to the specified requirements. The additional audits are carried out by the TA and their results are verified by the competent function of I.T.A..

t) In the case of minor non-conformities, certification cannot be granted until the organization has notified I.T.A. of the proposals and the planning of immediate corrections and corrective/ preventive actions, and these proposals and the related planning have been approved by the LA, and verified by the competent function of I.T.A..

u) If activities falling within the scope of the management system/certification purpose are outsourced/outsourcing, the CAB must also audit the legal entities and/or physical persons involved in the scope of the management system/certification purpose.

3.4.5.3 Non-Conformities and Corrective Actions

a) The findings notified to the organization are classified according to the significance of the deficiencies identified:

FOR ALL SCHEMES:

(NC) Major nonconformity: The absence of significant elements of the MS in the face of the reference legislation (absolute lack of application);

(nc) Minor nonconformity: The partial absence of an element of the MS in the face of the reference legislation (lack of application and/or documentation) which, on the basis of objective evidence available, does not affect the conformity of the product/service offered by the organization;

Observation: What does not fall within the definitions of non-compliance, and which constitutes a possible improvement in the effectiveness of the MS.

FOR FSSC 22000 SCHEME (in addition to the above):
(cNC) Critical nonconformity: is issued when there is a significant failure in the management system, a situation with direct adverse food safety impact and no appropriate action is being observed or when food safety legality and/or certification integrity is at stake.

b) The organization is responsible for defining and notifying I.T.A. the treatments of non-conformities and the corrective actions it intends to undertake and the related planning for approval, and to implement them within the terms established according to the class of the specific non-conformity, and reported in the final report of the verification, in compliance with the criteria set out in the following table:

	Definition and notification	Implementation and closure	Implementation review
NC MAJOR	2 Weeks	3 Months	*Additional audit or documentary evidence within 6 months*
If I.T.A. is unable to verify the implementation of corrections and corrective actions related to NCMs detected within 6 months after the last day of Stage 2, it will be necessary to conduct another Stage 2 before recommending the certificate issue.			
Nc minors	30 days	3 Months	*Follow-up audit*
cNC CRITICAL	2 weeks	Between 6 weeks to 6 months after the audit at which it was raised	*Follow-up audit*
Remarks	*Not expected*	*Not expected*	*Follow-up audit*

3.4.5.4 Certificate issue

a) Following the positive outcome of the audit visit, the competent function (technical reviewer) of I.T.A. recommends the certification proposal which is then submitted to the CDBM for the authorization of the certificate of conformity issuance.
b) In the event of a negative resolution, I.T.A. notifies the organization of the decisions taken and any actions to be taken.
c) The certificate is issued with a date of issue coinciding with that of the relative resolution of the CDBM. The certificate shall be drawn up in accordance with the templates laid down; in the case of certification included in the accreditation, the certificate provides for the addition of the mark of the accreditation body.
d) The certificate shall explicitly state:

- the date of first issue,
- the current issue date
- the expiration date, through the validity period visualized on the certificate.
- Its validity is subject to the positive results of the maintenance audits and the payment of the annual audits for certification maintenance as required by the contract

e) In the case of Multisite certifications, a single certificate will be issued with the Company Name and the address of the Organization of the headquarters of the parent organization, with the list of organizations belonging to the multisite attached. All certificates will have a single date of issue and expiry.
f) Any changes must be promptly communicated to I.T.A.
g) Failure to communicate any changes will be subject to a Withdrawal of the Multisite Certificates.

3.4.5.5 List of Certificatied organizations

a) Data on certificates issued can be found in the published data for each certified client available on the website of ACCREDIA. The data relating to the certificates issued and the relative status are provided to the ACCREDITATION BODY, ACCREDIA, in relation to the status and type of accreditation as well as to third parties who request it or are entitled to it.
b) Any interested party looking to receive an up-to-date information regarding a certified organization and its certification is encouraged to directly contact ITA as shown on the certificate issued.

3.4.6 Maintenance of Certification

a) The validity of the certificate, within the three-year cycle, is subject to the positive outcome of the annual maintenance audits carried out by I.T.A.. Audits shall be carried out at the organization's site in accordance with the three-year audit programme in order to ensure that all functions and elements of the certified organization's system are assessed at least once during the period of validity of the certification. The verification is subject to the payment of the activities.
b) The dates of the audits, announced by I.T.A. in advance, are calculated with reference to the date of the last day of execution of the stage 2 audit (therefore without considering any subsequent follow-up) or of the recertification audit, in the case of subsequent certification cycles. The first verification is carried out 12 months from the date of decision of the certification and no later, while the subsequent ones are carried out annually, within each calendar year as per ISO 17021-1 requirements stating that each calendar year shall be an audit (with possible exception for the recertification audits).
c) Only in case of situations of exceptional gravity or force majeure (for which see IAF ID3 document) can derogations be allowed, to be requested in writing to I.T.A. in order to postpone the verification of first surveillance after the date of decision of the certification. The tolerances applied do not change the frequency of subsequent audits, which must comply with the original audit programme.
d) In surveillance audits, it is verified that the management system remains effectively implemented even in the presence of any changes. All processes and work shifts are audited during the three-year cycle. At least the following points shall be verified in each audit:

1. Changes to system documentation
2. Areas where changes have taken place
3. Areas and processes identified in the previous audit
4. Use of the certification logo and certificate
5. The management of complaints relating to activities and aspects that fall within the scope of certification
6. The improvement achieved and the progress of the activities planned to achieve the objectives set,
7. The closure of the findings/deficiencies identified in internal audits;
8. Internal audits and management review of the system

e) The closure of the Non-Conformities identified in the previous audit by I.T.A. S.r.l..

f) The documentation relating to the surveillance checks is drawn up by the Lead Auditor as for the Stage2 audit and similarly any findings (non-conformities and/or observations) must be managed by the organization. In case of serious and systematic deficiencies, the Lead Auditor may request the suspension of the certificate or an additional audit.

g) Similarly, the body in charge of I.T.A. can approve the recommendation of the Lead Auditor for the maintenance of certification or request further information or arrange additional verification activities by communicating it to the certified organization.

h) In the case of "major" non-conformities, which have not been closed within the established time, I.T.A. evaluates the adoption of the suspension of the certificate.

i) In the case of Multisite with sampling, preliminarily determined the size of the sample to be audited, I.T.A. communicates to the lead organization the organizations belonging to the Multisite that will be audited.

j) In the case of multisite without sampling, the proportion of the total time spent on each site will be determined, taking into account the relevance of certain processes per site.

3.4.7 Additional audits

a) I.T.A. reserves the right, motivated in writing to the organization, to perform additional audits, in addition to those of the audit program, in these cases:

- to verify the closure of major/ critical (where applicable) non-conformities (follow-up);
- In case of improper use of the trademark or certificate issued by I.T.A.;
- in the event of reports of serious, very serious or fatal accidents, or of legal measures, or of serious irregularities related to the certified system;
- Following specific requests from accreditation bodies.

b) Audits can also be scheduled at short notice or without notice in these cases:

- for the withdrawal of the suspension of the certificate;
- In case of significant changes to the certified management system;
- In case of complaints related to the organization;
- In case of request by accreditation bodies.

c) The costs are charged to the customer in the event that the audit give a negative result.

3.4.8 Remote Audit

a) In case of special needs, ITA will be able to plan the execution of audits at companies remotely, where such option is available as per the different scheme specific requirements.

b) Audits in "remote" mode can take place using Information Communication Technologies (ICT) methods.

c) For these types of audits, interactive communication between the ITA audit team and representatives of the organization is envisaged, such as meetings via the internet, teleconference, telephone or other electronic means. The operational aspects will be defined between ITA and the Customer during the verification planning phase, taking into account the ITC equipment available at each individual customer.

d) The request to perform the audit remotely must be formulated by the customer or possibly proposed by ITA itself taking into account the customer's needs. The request must list the reasons for the request.

e) ITA, having ascertained the reasons formulated on the RAUD COM form and reviewed therein, will communicate to the customer through the PRG04 model, the acceptance of the request as well as the minimum requirements for carrying out the remote audit.

3.4.8.1 RAUD methodologies

For all certification schemes that provide for a direct verification of on-site implementation processes:

a. In cases of initial verification, and in other cases where a direct verification of the on-site implementation processes is necessary (e.g. factory inspection for the ISO 45001 scheme, verification of on-site environmental operational activities for ISO 14001, etc.), it is still possible to conduct part of the verification remotely and postpone the remaining part of on-site verification by 6 months compared to the verification carried out in ICT mode. By carrying out the remote verification, however, it will be possible to immediately take a decision on the certificate (eg: renewal, issue of certification), although the verification was partial.

b. Monitoring and recertification: without prejudice to the provisions for the regulated RT 05 ITALIA 2 (see 2.3.1), given the knowledge and previous evaluation of the company, it will always be possible to carry out the audit completely remotely with a focus on management processes and a documentary sampling of the activities, referring to the next audit, the on-site verification of the implementation processes.

It will be possible to perform the entire audit remotely in the following cases:

1. The customer is in the low-risk industrial sector in relation to certified standards.
2. The audit is SA and there is no process control of industrial / production sites.
3. All planned key processes and tasks could be effectively controlled using ICT methods for video conferencing, access to client video monitoring, desktop monitor sharing.
4. Some standards (such as ISO 20000-1) and some activities (such as consulting, services, office activities) offer the possibility of complete remote control when all necessary ICT methods are available.

f) All of the above possibilities may only be used if adequately justified in the review of the remote audit application.

g) Some schemes do not permit remote audits. Please ask ITA in case you would like to know if your audit may be held in remote way.

3.4.8.2 Audit Durations

a) The audit durations applied will be those referred to in the calculation on the basis of the provisions of document MD 05 (and other scheme specific and ITA internally developed guidelines) without prejudice to any adjustments necessary for the execution of the remote audit as required by point 4.2.5 of MD 04. The remote audit must last not less than 1/2 of the expected time.

b) This reduction is due to:

c) 1/4 of off-site activity carried out by the auditor before performing the remote audit based on the management system documentation sent by the customer.

d) 1/4 of the remaining audit time shall be carried out on-site at the organization upon completion of the audit as provided for in point 2.1.1.

e) Some schemes have different rules for reductions, which in all cases are described in the quotation you received.

f) The client must send the required documents to the Audit Team within two days. Failure to meet this deadline will result in the suspension of the audit itself and the planning of a new date.

3.4.8.3 audit in the IAF sector 28 ISO 9001 scheme, RT-05 – Country of applicability ITALY

For audits in the IAF 28 ISO 9001 scheme, where the ACCREDIA RT-05 rev. 02 Regulation also applies:
a) In the case of initial audits, it is possible to conduct part of the verification remotely and postpone the remaining part of the on-site verification by 6 months compared to the verification carried out remotely. By carrying out the remote verification, however, it will be possible to make a decision on (issue of certification) right away, although the verification was partial. In such cases, urgency will have to be demonstrated to process market demands that warrant a remote audit, taking care to report exhaustive records during the review of the application.
b) With regard to surveillance and renewal audits, it is possible to proceed with a remote verification by verifying the implementation processes through the use of significant documentary evidence (at least n. 2 for simple purposes and n. 4 for complex purposes) that can ensure the functionality and effectiveness of the QMS.
In all the above cases, documentary evidence of closed and/or ongoing orders must necessarily be sampled remotely.
Any registration relating to construction sites must be included in the AUD 28 checklist already in use in traditional audits.

3.4.9 Multisite Certifications

A Multisite is defined as an organization that has a headquarters and several operational units and/or temporary sites that perform activities similar to those carried out at the headquarters.
These seats may have separate legal personalities, in such cases there must be a well-defined contractual relationship with the parent company / head office.
In order to consider the organization as operating in Multisite, all the following requirements must be met. If only one of them is missing, the certification practice as Multisite cannot be managed:

- The services (products) provided by all sites must be of a similar type and must be provided (products) following the same methodologies and procedures;
- The MS must be managed by the head office and must be subject to controls by the latter. All sites are subject to an internal audit program;
- Demonstration of management of all sites by the central organization by collecting and analyzing all data from sites.
-

3.4.9.1 Multi-site certification request

In the case of Multisite certifications, the organization must fill in the appropriate form attached to the COM-MS Data Collection Questionnaire.

3.4.9.2 Multi-Site Certification Audit

a) In the case of Multisite certifications, the Stage 1 audit is conducted at the registered or operational headquarters of the requesting organization having the function of headquarters or parent company. During this phase, all representatives of the organizations belonging to the Multisite that request certification must participate. During Stage 1 all the requirements of applicability of the Multisite provided for in the previous paragraphs will be checked. In the event that the requirements of point 3.4.8 are found not to exist. It will proceed as standard certification.
b) The Stage 2 audit is conducted at the organizations that are part of the Multisite.
c) Two verification criteria can be applied.

- **Multisite without sampling**

a) A Multisite is without sampling when the participating organizations carry out different activities. In such cases, all employees of the company will be taken into account when calculating the audit time.
b) FSMS does permit multisite certification, only for some food chain subcategories. Where multisite sampling as an option, no sampling is possible for organizations having 20 or less locations, meaning that each year all sites are to be audited.
c) FSSC 22000 (for currently accredited by ITA food chain subcategories) does not permit multisite certification.

- **Multisite with sampling**

a) A Multisite is sampled when the participating organizations perform equal activities. In such cases, the audit times will be calculated taking into account the IAF MD5 and IAF MD1 documents for each site subject to verification, as if they were independent companies but possibly applying a reduction factor even higher than 30%.
b) A specific report is issued for each audited organization.

3.4.10 Recertification

The certificate is renewed at the end of three years, in accordance with what is contractually agreed, for a further certification cycle, following the favorable outcome of the renewal verification conducted at the organization.

3.4.10.1 Conditions

a) Between six and three months before the three-year deadline, I.T.A. issues a renewal offer confirming and remodulating the technical and economic conditions valid for the next cycle, taking into account any changes in the organization that occurred in the previous cycle, communicated by the organization itself.
b) In the event that substantial changes are detected in the management system, the organization, I.T.A. can carry out the renewal audit in two phases, as a certification audit. This is formalised in the renewal offer.
c) If the organization does not provide in time the information for its organization, no offer may be provided in time and if the recertification audit is delayed for this reason, the organization shall be aware of potential gap in the certification.

3.4.10.2 Recertification audit

a) In the recertification audit, conducted and documented as in the Stage 2 audit, I.T.A. conducts the verification of the conformity and effectiveness of the system by examining the whole system and all the activities, as in the initial certification verification, but in a single phase, unless significant changes require the use of two distinct phases.
b) In particular, the evolution of the management system is audited, including through the review of previous reports of surveillance audits, the management of complaints and non-conformities and the adequacy of documentation.
c) Any situations of non-compliance/nonconformity must be managed in the times and in the manner indicated for the initial certification.

3.4.10.3 Audit planning

a) The recertification verification must take place within ninety days before the expiry of the certificate, in order to have the time necessary to manage and close any non-conformities and for the review and resolution of the technical reviewer. If, on the other hand, renewal activities are completed after the expiration date of the certificate being renewed, the issued certificate will retain the original certification date, together with the expiration date of the previous certification cycle and the renewal date, so as to clearly highlight the period in which the organization was not covered by certification. Late renewal will not extend the validity period of the newly issued certificate and the expiration date will be based on the previous certification cycle.

b) The following are situations in which renewal activities can be managed after the certificate expiration date:

- Renewal process undertaken but incomplete on the expiration date of the certificate (e.g. audit not completed, failure to manage any non-conformities detected within the expiry date of the certificate, etc.) but in any case, completed no later than six months from the expiry date of the previous certification cycle;
- Renewal process not started within the expiration date of the certificate to be renewed, but undertaken no later than six months from the expiration date of the previous certification cycle.

c) What is specified in the previous paragraph has no value for organizations subject to Technical Regulations issued by the Accreditation Body.

d) In the case of Multisite certifications with sampling, priority will be given to organizations that have never been audited during the certification period.

3.4.10.4 Postponement of Recertification Audit

In particularly serious cases falling within the cases provided for by IAF ID03, and certification activities (e.g. surveillance and recertification) can be postponed for 6 months, without there being a loss of validity of the certificates issued, unless a different regime has been established for specific schemes. Certificates, expired or expiring in this emergency period, can therefore be extended by a maximum of 6 months. In such cases, the client must contact ITA and agree on the operational modalities regarding the postponement of the audit.

3.4.10.5 Resolution for recertification

Following the results of the recertification audit communicated by the Lead Auditor, I.T.A. decides on the recertification of the Organization also evaluating the reports received from interested parties to the organization during the expiring cycle of the certification.

3.4.11 Changes to the scope and changes to the certificate

a) The organization can request changes by extending the scope of the certificate by following, the process described for the initial request

b) I.T.A. grants what is requested by the organization following a new verification carried out with a favorable outcome. The extent of this verification, established in accordance with the applicable procedures, rules, guides and regulations, depends on the significance of the required variations and may result in a full repetition of the certification process.

c) Following the granting of the extension, the certificate of conformity is reissued. However, the new issue does not entail a change in the maturity date.

d) The scope may also be subject to reduction both in case of request by the organization and because ordered by I.T.A. following the outcome of the verification visits.
e) Following the reduction, the certificate of conformity is reissued. As in the case of extension, the reissue does not change the expiration date of the certificate.

3.4.12 Variations to the certificate

a) The organization may also submit a request for a change in the certificate, such as but not limited to a change in the company name, address of the company headquarters, etc. Such requests must follow the process described for the initial request.
b) In case of a change to the registration site address only, the certificate may be issued without an audit. But if there is a change of the operational site address, most of the schemes require an onsite audit assessment at the new location where the operational activities are held.

3.4.13 Transfer

a) In the case of requests for transfer of certification received from organizations already certified by other bodies accredited by accreditation bodies that adhere to the EA/IAF mutual recognition agreement, I.T.A. applies the requirements defined by the Mandatory Document IAF MD 02.
For the purposes of the transfer, I.T.A. carries out a *pre-transfer review* in order to ascertain:

I. That the activities subject to certification fall within their scope of accreditation
II. The reasons why the transfer is requested
III. The validity of the accredited certificate in terms of authenticity, duration and activities covered by the certification. If possible, the validity of the certification and the status of open non-conformities must be verified with the body that issued the certificate unless it fails. In case of impossibility of contact with the other institution, ITA must justify the reasons relating to the decision on the transfer request
IV. Assessment of the last certification or recertification/or stage 2 (if the transfer is requested within the first certification cycle) report and subsequent surveillance reports and any resulting open non-conformities. That assessment shall also include any other audit records. In the event of unavailability of the last certification or recertification report and subsequent audit reports, or if the surveillance program has not been complied with, the request will be treated as new certification.
V. The existence of any complaints received and the actions taken
VI. The correct performance of the activities related to the certification cycle. If the transfer coincides with the planning period of a surveillance visit, ITA can accept the audit program developed by the previous body; if, on the other hand, it coincides with the renewal audit schedule or if the organization is treated as a new customer, ITA will have to redefine a new audit program covering the three-year certification period
VII. The absence of disputes with the control bodies.

b) In addition to the documentary review, I.T.A., if the *pre-transfer review* is deficient, can carry out a *transfer - visit in the* field at the customer's premises, in order to evaluate any critical points still unresolved.
c) The *transfer-audit* must in any case be conducted in the event that it is not possible to contact the issuer of the certificate being transferred.
d) Following the positive outcome of the *pre-transfer review activities* and the possible *transfer visit*, the certificate is issued through the normal resolution phases. The date of issue is that of the

resolution of the technical reviewer. The three-year expiry of the transferred certificate remains unaffected.

e) In the event that the transfer of the certificate is requested near and before the expiry of the same, the issuance of the new certificate will be subject to the outcome of the recertification audit, as governed by these Regulations, but in all cases, an adoption certificate will be issued by ITA.

3.4.14 Suspensions and withdrawals

3.4.14.1 Suspension

a) I.T.A. reserves the right to suspend the validity of the certification at any time during the duration of the contract and the certificate by notification by registered letter with acknowledgment of receipt, or equivalent, upon the occurrence of even one of the following conditions:

I. Major/ critical non-conformities during an audit, where the audit team proposes immediate suspension of certification.
II. Persistence of a non-compliance already reported previously and ascertained following further verification.
III. Failure by the organization to implement the required corrective actions within the established time.
IV. Existence of serious deficiencies inherent in the management system of the organization on the basis of complaints, legal actions and other objective evidence, even if not deriving from inspections.
V. Refusal by the organization to carry out the annual surveillance audits within the deadlines or refusal to carry out the extraordinary audits that ITA deems necessary for the evaluation of complaints, legal actions and other objective evidence of deficiencies that have emerged even outside the inspections.
VI. Incorrect or deceptive use of the certification issued.
VII. Conduct by the customer that damages the commercial and corporate reputation of I.T.A.
VIII. Failure to notify I.T.A. by the organization of the existence of ongoing legal proceedings.
IX. Express request from the organization.
X. Non-payment of fees due to I.T.A. as provided for in the certification contract.
XI. In case of non-conformities increased resulting from additional audits carried out following accidents or legislative infringements specifically for the SCR (OH&S) scheme

a) The duration of the suspension may not exceed six months (total over three years) and does not change the period of validity of the contract and certificate.

b) Following notification of the suspension order, the certificate will be temporarily removed from the online register of certificates and likewise the certified organization cannot be used together with the logos by the organization.

c) I.T.A.si reserve the right to communicate the suspension measure to the accreditation bodies and / or other third parties who request it.

d) The certification can be reactivated following the restoration of the conditions of compliance with the requirements. In order to verify the correct restoration of compliance conditions, I.T.A. may provide for the planning of an additional audit.

e) The suspension period shall not change the dates of the periodic annual certification audits to be conducted within the time limits provided for in the three-year audit programme.

3.4.14.2 Withdrawal

a) I.T.A. reserves the right to withdraw the certificate if even one of the following conditions is met:

I. at the end of the period of suspension, the circumstances giving rise to it have not been;
II. maintenance checks reveal serious and repetitive deficiencies of a systematic nature;
III. the verifications and the complete process of renewal of the certification have not been successfully completed within the period of validity of the certificate;
IV. Failure to communicate changes related to Multisite systems
V. Failure to adapt to any new requirements put in place by I.T.A. to which the organization does not intend to adapt;
VI. the organization refuses or obstructs the participation in audits of observers of the Accreditation Body.
VII. Ascertained criminally relevant behaviors falling within the activity subject to certification.
VIII. If the outcome of additional audits carried out following 10 serious accidents or legislative breaches is seriously breached and H&S requirements have been not met.

b) The withdrawal measure shall be notified to the organization by registered letter or equivalent.
c) Upon receipt of the withdrawal measure, the organization is required to return the certificate (or its destruction in case of explicit request by I.T.A.) as well as to cease the use of the I.T.A. logo in any form as well as the use of any logo of the accreditation body.

3.5 Recess

a) The certification can be canceled by I.T.A. in the event of contractual withdrawal from one of the two parties. In case of withdrawal by I.T.A. the provisions specified in point 3.4.13.2 of this regulation apply, in the event that the request for withdrawal is made by the Organization, the same will be accepted by I.T.A. only if received by registered letter with return receipt
b) Following the notice of withdrawal, the Organization is required to:
- return the original of the certificate of conformity;
- not to use any copies and reproductions of the Certificate;
- cease use of the logo and references to certification.
- pay a penalty equal to 60% of the remaining amount of the accepted offer.
c) I.T.A. will immediately delete the Organization from the List of certified companies.

3.6 Complaints appeals and restraints

3.6.1 Complaints

a) Complaints can be submitted against the work of I.T.A. as well as against the organizations certified by I.T.A. by email indicating the following data:

- Data of the person proposing the Complaint;
- subject of the complaint;
- brief description of the complaint;
- indication of subjects involved in various ways;
- any subsequent requests;
- any motions for resolutions.

b) Complaints that do not contain the aforementioned information will not be processed.

c) I.T.A. will confirm to the complainant about the receipt of the complaint as well as on the progress of the processing, on the resolutions adopted and on the conclusions of the processing process, as well as the maximum time for the resolution of the same, which will not exceed 90 days.
d) I.T.A. ensures that decisions arising from the complaint are taken, reviewed and approved by persons not previously involved in the subject matter of the complaint.

3.6.2 Appeals

a) The organization may appeal decisions related to the certification activity.
b) Upon receipt of the Report, the interested party can appeal regarding the content of the same, specifying the reasons by registered letter with acknowledgment of receipt within 15 days of receipt of the report.
c) I.T.A. confirmed the receipt examines the appeal in the following 15 days from the date of receipt.
d) In the appeal, the Organization must express the reasons covered by the appeal by producing any useful documentation.
e) I.T.A. will appoint a Committee (whose members are in any case identified within the staff of the I.T.A.) responsible for the management of the appeal. If deemed necessary, an independent expert may be involved. To guarantee the impartiality and independence of the Committee, the subjects involved in the management and analysis of the appeal must not have participated in any way in the certification process or in any other form and / or manner in the activities covered by the appeal.
f) The Committee may hear the opinion of the Organization, the DT, the Experts and other figures for any reason involved in the activities contested by the applicant. I.T.A. completed the preliminary and decision-making phase, officially communicates to the proposer, by registered mail with acknowledgment of receipt, the decision taken by the Committee.
g) The Appeal is closed in case of silence by the applicant within the following 7 days of receipt of the result.
h) All costs relating to the appeal shall remain the responsibility of the Organization, except in cases of recognized validity.

3.6.3 Litigation

3.6.3.1 Arbitration

a) Notwithstanding the provisions of law, any dispute that may arise between the I.T.A. and the Organization in relation to the validity, interpretation and execution of the certification will be resolved by ritual arbitration according to the Rules of the Arbitration Chamber where the ITA has its operational headquarters and according to the rules of law regarding the merits of the dispute. The Arbitral Tribunal shall consist of a single arbitrator appointed in accordance with this Procedure.
b) In the event of a dispute, the plaintiff will file the request for arbitration also containing the request for appointment of arbitration by the Arbitration Chamber, transmitting to the defendant by registered letter with return receipt a copy of this request. The respondent must file the response statement within 45 (forty-five) days of receipt of the request for arbitration by the Secretary General, transmitting to the plaintiff by registered letter with return receipt a copy of said memorandum. For any other pleadings, the filing period shall not be less than 45 (forty-five) days from the filing of the previous statement or from the previous hearing.
c) The award must be issued within 180 (one hundred and eighty) days from the date of formal acceptance of the appointment by the arbitrator unless extensions may be granted in writing by both

parties and without prejudice to the arbitrator's right to extend the term of office, up to a further 180 (one hundred and eighty) days, in the event that this is necessary for investigative needs. The suspension of working days of judicial time limits will be applicable to the terms of the arbitration procedure.

d) The award will be final, conclusive and binding for the parties, who will expressly waive any appeal, so they undertake to respect its content by adapting to the operative part of said award immediately, and in any case no later than the essential term of 10 (ten) days from the date on which the award will be communicated to them. Otherwise, the defaulting party must pay the other, as a penalty, a sum equal to € 100.00 (one hundred euros / 00) for each day of delay

3.6.3.2 Disputes and jurisdiction

a) Notwithstanding the legal regulations concerning the jurisdiction of the civil court, and in any case as an alternative to the arbitration referred to *above,* any dispute should arise between I.T.A. and the Organization I will have as my sole competent court the one where the I.T.A. has its operational headquarters.

3.7 Liability

I.T.A. is not responsible for any loss or damage, incurred by anyone, and due to an act of omission or error whatsoever, or in any way caused during the course of the assessment, or other services related to the certification activity, except in the case of proven negligence on the part of I.T.A.

4 Section 2 – Quality Management Systems (QMS) Certification

4.1 Premise

This section regulates some specific aspects related to the certification of quality management systems according to the UNI EN ISO 9001 standard.
For the certification process, please refer explicitly to Section 1.

4.2 EA 28 (Construction) Certifications

The certifications in the EA 28 sector, for companies operating in the Italian territory, provide for the application of the Accredia RT 05 Technical Regulation.
In compliance with the provisions of RT 05, visits to the Organization always provide for verification on site, subject to the exceptions explicitly provided for by the same Regulation.
The certificates issued in the EA 28 sector, in accordance with what is defined in the Technical Regulation RT 05 will have appropriate wording for the content of which please refer to the current revision of RT 05.
In case of discrepancies between the provisions of this regulation and the Accredia RT 05 Technical Regulations, the provisions of the latter will prevail.

4.3 EA 38 (Healthcare) Certifications

Deleted paragraph

5 Section 3 – Environmental Management Systems (EMS) Certification

5.1 Premise

This section regulates some specific aspects related to the certification of environmental management systems according to the UNI EN ISO 14001 standard.

5.2 Reference standard – Requirements for certification

In addition to the provisions of Section 1, in order to obtain certification, an Environmental Management System must meet the requirements of the ISO 14001 standard and, for certifications in Italy, the additional ones provided by the Accredia Accreditation Body in the Accredia RT 09 Technical Regulations, to which explicit reference is made.

5.3 Certification

In addition to Section 1, the applicant organisation shall produce a list of all environmental permits in its possession and necessary for the performance of the activity being certified, as well as:

a. Environmental aspects/impacts
b. Environmental accidents/emergencies occurring at the site(s) and other events that could potentially have adverse effects on the environment;
c. any complaints relating to the environmental impacts produced by it;
d. any comments or reports received from national or local authorities proposed for environmental control; together with the related corrective actions taken during the periodic audits.

5.4 Maintenance

In addition to Section 1, the Organization shall maintain records of:

a. Environmental aspects/impacts
b. Environmental accidents/emergencies occurring at the site(s) and other events that could potentially have adverse effects on the environment;
c. any complaints relating to the environmental impacts produced by it;
d. any comments or reports received from national or local authorities proposed for environmental control; together with the related corrective actions taken during the periodic audits.

6 Section 4 – Certification of workplace safety management systems (SCR/ OH&S)

6.1 Premise

This section defines the supplementary rules for the certification of Management Systems for Health and Safety in the Workplace with respect to what is already defined in Section 1 – Generality, relationship between I.T.A. and client organizations.

In addition to the provisions of Section 1, in order to obtain certification for a Management System for Health and Safety in the Workplace, the organization must meet the requirements of BS OHSAS 18001 and UNI ISO 45001 and the additional requirements provided for by the document issued by the International Accreditation IAF MD 22 "Application of ISO / IEC 17021-1 for the Certification of Occupational Health and Safety Management Systems (OH & SMS)" and the document IAF MD 5:2019 Determination of Audit Time of Quality, Environmental, and Occupational Health & Safety Management Systems.

6.2 Certification

The applicant organization to obtain OHSAS 18001 or UNI ISO 45001 certification must:

1. Meet the requirements of legislative requirements on health and safety at work;
2. meet the requirements set out in the reference standard;
3. meet the requirements of this Regulation;
4. meet the requirements of the certification contract;

The certification that will be issued relates only to the activities identified in the relevant certification purpose.

The assessment and certification of the Safety Management System carried out by I.T.A. is in no way alternative or supplementary to that of the Competent Authorities.

6.3 Requirements of MD 22

The calculation of man-days for the purpose of issuing the offer shall be made in accordance with Annex C to Appendix B to document MD 22, taking into account:

1. the EA sector in which the client organization operates and the resulting complexity category (High; Medium and Low)
2. the actual number of staff
3. Adjustment factors of the audit time as provided for in Appendix B of MD 22

In compliance with the regulations for accreditation, the partial evaluation of a site [production unit], understood as the evaluation of some of its processes or the processes of some areas, is not allowed even the Certification of a part of a process.

Remote verification is not admissible for operational control and risk management, it can possibly be agreed limited to documentary verification / recordings and execution of interviews.

Where an organisation requests access to certification of its Workplace Health and Safety Management System, all processes and areas of the organisation must be assessed, for all sites for which such recognition is required.

Before the evaluation activity begins, all the processes of the Organization must have been identified, analyzed and included in the continuous improvement cycle of the Management System for Health and Safety in the workplace.

Where an organization has several production sites [production units], all of them must have integrated into their Management System the Management System for Health and Safety at Work, whose development, application and certification must be part of a program defined by the Top Management of the Organization. This program, with the appropriate technical justifications relating to the excluded sites, must be submitted to ITA for prior approval already in the Stage 1 phase. The reasons that can normally lead the Top Management not to include a site in the development, application and

certification program are related to the following events, expected within the first cycle of validity of the certificate:

1. possible sale of the site,
2. significant transformation of the site purpose,
3. significant transformations of the technical and organizational structure of the site.

In the case of certification of the management system for safety and health in the workplace, the following elements will be considered:

1. the activities of the organization carried out directly or contracted out to third parties and, in particular, to processes or categories of services.
2. the site(s) subject to certification.

No exclusion of the requirements of the standard is considered admissible.
The partial evaluation of a site [production unit] is not allowed, understood as an evaluation of some of its processes or the processes of some areas, the Certification of a part of a process is not allowed either, i.e. all processes and all areas of the organization must be evaluated, for all sites for which the organization requests to have access to the certification of its Safety and Health Management System in the workplaces. Before the assessment activity begins, all the processes of the Organization must have been identified, analyzed and included in the continuous improvement cycle of the Safety and Health Management System in the workplace.
In case of doubtful reasons, or interpretations, regarding the exclusion of one or more sites, ITA reserves the right to seek the opinion of the ACCREDIA Sectoral Accreditation Committee. The opinion expressed by this Committee shall be binding.

6.3.1 SCR specific tasks

The stage 1 visit is always performed at the organization's website and at separate times from the stage 2 visit.
The Interview with the Competent Doctor and the key figures of the SCR system (DL; RLS; RSPP), can be carried out both in stage 1 and in stage 2 at the discretion of the Audit Team
During the visit of stage 2 the following mandatory non-derogable activities are foreseen:

1. In the presence of several work shifts, at least two must be sampled, in the case of a night shift this must always be sampled.
2. Interviews with workers

   During the closing meeting, in addition to the top figures of the company, RSPP, the competent doctor and the RLS must also be invited to the same.

If the organization has legislative non-compliance, it must be able to demonstrate that it has activated an implementation plan to achieve full compliance by a date declared by the organization.
Exceptionally, ITA may still grant certification, if the organisation:

1. is able to achieve the required compliance with full implementation of the above implementation plan by the deadline,
2. has addressed all H&S hazards and risks to workers and other visual personnel and that there are no activities, processes or situations that can or will lead to a serious injury and/or health problem, and
3. during the transitional period it has put in place the necessary actions to ensure that H&S risk is reduced and controlled.

6.3.2 Audit Management for Multi-Site Organizations

It may happen that the organization manages activities that, although falling under the control of a single SGSSL, in several geographically distinct sites. In this situation ITA can issue a single certificate, but reserves the decision whether to verify each individual site or whether to sample and verify only some,

according to the procedures set out in the EA and IAF guidelines of reference (IAF MD 1 IAF MD 22) without prejudice to the assessment of the risks associated with activities / processes only in each site included in the scope of certification.
Where there are multiple sites that do not cover the same SCR activities, processes and risks, sampling is not appropriate.
Even if a site performs similar processes or manufactures similar products to other sites, ITA takes into account the differences between the operations of each site (technology, equipment, quantity of hazardous materials used and stored, working environment, premises, etc.).
If the organization manages the activity, even under the control of a single SGSSL, in several geographically distinct sites, and should require the issuance of more certificates than there are sites under the control of the SGSSL, the numbering of the certificate (eg NN/ 0000 SS / 1111) will follow a further subnumbering for each geographically distinct and verified site (eg NN/ 0000 SS/1111-1)
The document is not applicable for the certification of consortia of purpose and temporary business associations (ATI).
Where the organisation has multiple sites performing different activities, and in the case of multi-site organisations with high complexity and/or risk category, sampling will not be applied.
Although, in the case of sites with similar processes with the same levels of risk, in this case ITA may apply sampling taking into account the differences between the operations of each site (Technology, equipment, quantity of hazardous materials used and stored, working environment, premises, etc.).
In the case of sampling, the site sample to be checked shall be representative of all levels and types of processes, activities and occupational health risks and managed by the management system. Before the certification audit, the Organization must have carried out a complete cycle of internal audits, including all the sites included in the certification perimeter, giving evidence of the compliance of the Management System with the reference standard.
Audit planning and verification team constitution are carried out in such a way as to ensure that the procedures governing multi-site certifications are applied.

6.3.3 Surveillance activities

The Certification of Conformity issued is valid for three years and is subject to surveillance activities by ITA through maintenance audits. Maintenance audit dates shall be agreed/planned jointly with the Certified Organization with a maximum permissible tolerance of one month before or after the actual cadence.
In case of need for a greater deviation, it must be justified by a written request to ITA.
ITA reserves the right to judge the validity and legitimacy of the request by the certified Organization and in case of positive evaluation will accept the request.
Any tolerances applied must not affect the periodicity of subsequent audits that must be carried out according to the original schedule and as required by UNI CEI EN ISO 17021-1
During the surveillance audits, the TA appointed by ITA verifies that the OSH is maintained in full compliance with the reference standard, verifies any changes that may have occurred in the structure of the SGSS. Surveillance visits to an SGSSL must take place at least once a year.
During the surveillance/maintenance audit, the following must always be assessed:

- Internal audits
- Management review
- Changes to system documentation;
- Changes to the corporate structure or replacements of members of the company board that impact on the management of the Occupational Health and Safety Management System;
- Management of changes to process plants or to the layout of work environments

- The areas where changes have occurred;
- the management of Non-Conformities (including both accidents and accidents);
- Communications received from interested parties, as required by the reference standard;
- Use of logo and certificate;
- Effectiveness of the Organization's OSH and the ability to achieve the objectives for Health and Safety at Work;
- An interview with the Management, which has responsibility for the management of the system;
- Interview with the Doctor responsible for the RSPP and the RLS
- The proper functioning of the Procedure governing the management of communications with interested parties and communications received from interested parties;
- Updating of the Risk Assessment and the correct functioning of the procedures relating to the periodic assessment of risks relating to health and safety at work and the preparation of the related measures and objectives and the involvement of human resources;
- Changes to working hours, for example with the inclusion of night shifts;
- Critical legislative adjustments for the type of production processes;
- The improvement achieved and the progress of the activities planned to achieve the objectives for the strengthening of the Safety Management System, for obtaining improvements in performance (safety), related to the various processes, as required by the Occupational Health and Safety Policy of the organization;
- The closure of anomalies deriving from internal auditing activities;
- The closure of the Non-Conformities detected during the last Audit of the Certification Body and the management of those detected internally, evaluating the effectiveness of the solutions adopted, both for the treatment of these Non-Conformities and for any Corrective Actions implemented;
- The actions taken following the reporting of dangerous situations that have emerged in the period since the last Audit of the Certification Body;
- The analysis of the validity and effectiveness of the procedure adopted following accidents and injuries;
- The analysis of the implementation and effectiveness of the action of involvement of human resources, all, both internal and external, that are affected by the risks associated with the performance of business processes.
- Effective management of possible emergencies, including related training and simulation activities
- The communications of the interested parties, any sanctions and / or disputes with the Control Bodies in charge and any minutes issued by them.

The Organization shall maintain records, together with related corrective actions taken, relating to:

- accidents/emergencies occurring at the site(s) and other events that could potentially have had adverse effects on the health and safety of workers;
- any comments or reports received from the national or local authorities responsible for monitoring workplaces;

In case of indexes or non-compliance with legal requirements that imply the involvement of the competent authorities, the organization is obliged to immediately inform ITA.

6.3.1 Special audits

The ITA reserves the right to carry out special audits at client organizations in the event that it becomes aware, directly or indirectly, of the occurrence of serious incidents or obvious legislative infringements that could compromise the SGSSL management system.
In the event that the outcome of the special audits does not reveal major NCs, the cost of the same will be borne by ITA.

7 Section 5 – Food Safety Management Systems Certification (FSMS)

7.1 Premise

This section defines the supplementary rules for the Food Safety Management Systems Certification (FSMS) with respect to what is already defined in Section 1 – Generality, relationship between I.T.A. and customer organizations.
In addition to the provisions of Section 1, in order to obtain certification for a Food Safety Management System (FSMS), the organization must meet the requirements of ISO 22000 (and/or FSSC 22000) and additional requirements where required by the Accreditation Body.

7.2 Reference standards

The regulations applicable as a reference to the FSMS scheme in addition to those already indicated in this regulation are:

- ISO/TS 22003-1:2022 "Food safety – Requirements for bodies providing audit and certification of food safety management systems;";
- ISO/TS 22002-1 – "Prerequisite programmes on food safety – Part 1: Food manufacturing";
- FSSC 22000 version 6 – Scheme and its annex documents, BoS, interpretation articles

7.3 Certification

For certification purposes, the Organization must provide I.T.A. with the following information:

- The scope required for certification;
- the general characteristics of the Organization;
- the number of permanent and temporary sites covered by the certification, including the name and addresses of the physical location(s) and related activities;
- the number of HACCP plans developed covering the scope being certified;
- any certifications already obtained;

The minimum duration of the FSM audits, is subject to the requirements set out in Annex B of ISO 22003-1:2022 (for FSMS certifications) and on The Foundation 22000 FSSC 22000 version 6 Scheme documentation.

The objectives of **stage 1** are
To provide a focus for planning the stage 2 audit by gaining an understanding of the organization's FSMS and the organization's state of preparedness for stage 2 by reviewing the extent to which:
a) the organization has identified PRP that are appropriate to the business (e.g. regulatory, statutory, customer and certification scheme requirements),
b) the FSMS includes adequate processes and methods for the identification and assessment of the organization's food safety hazards, and subsequent selection and categorization of control measures (combinations),
c) relevant food safety legislation is implemented,
d) the FSMS is designed to achieve the organization's food safety policy,
e) the FSMS implementation programme justifies proceeding to the audit (stage 2),
f) the validation of control measures, verification of activities and improvement programmes conform to the requirements of the FSMS standard,
g) the FSMS documents and arrangements are in place to communicate internally and with relevant suppliers, customers and interested parties, and
h) there is any additional documentation which needs to be reviewed and/or information which needs to be obtained in advance.

Where an organization has implemented an externally developed combination of control measures, the stage 1 shall review the documentation included in the FSMS to determine if the combination of control measures — is suitable for the organization, — was developed in compliance with the requirements of ISO 22000, and — is kept up to date. The availability of relevant authorizations shall be checked when collecting the information regarding the compliance to regulatory aspects.
Stage 2 audit objectives are: to evaluate the implementation, including effectiveness, of the client's MS. It shall include the auditing of at least the following:
a) information and evidence about conformity to all requirements of the applicable MS standard or other normative documents;
b) performance monitoring, measuring, reporting and reviewing against key performance objectives and targets (consistent with the expectations in the applicable management system standard or other normative document);
c) the client's MS ability and its performance regarding meeting of applicable statutory, regulatory and contractual requirements;
d) operational control of the client's processes;
e) internal auditing and management review;
f) management responsibility for the client's policies.

The availability of relevant authorizations must be verified during regulatory compliance auditing.
The interval between **stage 1** and **stage 2** should not exceed 6 months. Stage **1** should be repeated if a longer interval is required.

7.3.1 Multisite sampling

Sampling in a multisite organization is only possible for:

- Organizations operating with franchises;
- Producer groups (only for categories A and B);
- A manufacturing company with one or more production sites and a network of sales offices;
- Service organizations with multiple sites offering a similar service;
- Organizations with multiple branches.

Multi-site sampling is permitted for categories A and B. As for multi-site sampling for categories F and G - only for re-heating-type facilities. For category E – only for facilities with limited preparation or cooking. For organizations with 20 sites or fewer, all sites shall be audited at each audit.

7.4 Annual surveillance audit for certification maintenance and recertification

For the execution of surveillance and recertification audits, sampling will be carried out in accordance with ISO 22003-1:2022 and FSSC 22000 version 6 requirements.
The minimum duration of annual surveillance and recertification audits is strictly identified on ISO 22003-1:2022 and FSSC 22000 version 6 requirements and it is always identified on the quotation for certification service, together with any justification for increase or decrease of the audit durations calculated by ITA.

8 Section 6 – Certification of Information Security Management Systems (SSI)

8.1 Premise

This section defines the supplementary rules for the Certification of IT Security Management Systems (SSI) with respect to what is already defined in Section 1 – Generality, relationship between I.T.A. and customer organizations.

In addition to the provisions of Section 1 in order to obtain the Computer Security Management Systems (SSI) Certification, the organization must meet the requirements of ISO/IEC 27001 and additional requirements where required by the Accreditation Body.

8.2 Certification

For certification purposes, the organization must make available to I.T.A.:

- Purpose of the SSI
- SSI Policy
- Description of information security risk assessment processes
- Statement of Applicability (SOA)

All these documents must be managed in a controlled form.

9 Section 7 – Anti Bribery Management Systems Certification (ABMS)

This section defines the supplementary rules for the Anti Bribery Management Systems (ABMS) Certification with respect to what is already defined in Section 1 – Generality, relationship between I.T.A. and customer organizations.

In addition to the provisions of Section 1, in order to obtain the certification of an Anti Bribery Management System (ABMS), the organization must meet the requirements of ISO 37001 and additional requirements where required by the Accreditation Body.

9.1 Certification

For certification purposes, the Organization must provide I.T.A. with the following information:

- If the Organization has been involved in the last 5 years in judicial investigations relating to corruption phenomena;
- If the Organization has been involved in at least one judicial proceeding for corruption in the last year;
- If the organization is listed on the stock exchange;
- If the organization receives more than 30% of the turnover, public grants, funds or funding
- If the organization receives from Public Bodies and Companies or International Institutions compensation or remuneration, including those derived from the execution of public contracts, exceeding 30% of turnover;
- If the organization is a public administration subject by law or other mandatory provisions, to the application of measures to prevent and control the risks of corruption
- If the organization is located or has sites in countries that have a grade less than or equal to 30 according to the Corruption Perceptions Index;
- If the organization, even with few employees, reaches a high volume of turnover;

It is not possible to exclude the application of the standard to some sites or processes within the same country. The certification is issued to a legal entity in its entirety, and to all its departments / branches, processes and activities actually carried out.

However, it is possible to limit the application to specific countries. If, for example, an organization, which intends to certify itself for the activities carried out in Italy, which has 10 sites in Italy and 20 abroad, must apply the certification to all 10 sites in Italy, but could exclude the application to foreign sites. In the latter case, it may still be necessary to evaluate aspects of the parent company, if located abroad, although not included
in the purpose of the certificate.

9.1.1 Obligations of the organization

The certified or certified organization must promptly inform ITA when it is involved in some critical situation such as to compromise the guarantee of the certification of the system (eg scandal, crisis or involvement in some judicial proceeding for corrupt phenomena or similar).

Likewise, the organization must promptly notify ITA of any event relating to corruption that may have involved one or more of its Human Resources, and the consequent actions taken to contain the effects of such event, the analysis of the root causes, the related corrective actions.

In the event that ITA becomes aware, directly from the organization or from other sources, that the same organization is involved with profiles of responsibility in some scandal or in some judicial proceeding for corrupt phenomena, it will conduct the due and timely evaluation, in case of negative outcome please refer to the provisions of § 3.4.13 of these Regulations.

9.2 Maintenance

For the execution of surveillance and renewal audits, sampling will be carried out in accordance with the provisions of ISO 37001: 2016.

10 Section 8 – Service Management System Standard (ITX) Certification

This section defines the supplementary rules for the Service Management system standard (ITX) certification with respect to what is already defined in Section 1 – Generality, relationship between I.T.A. and customer organizations.
In addition to the provisions of Section 1, in order to obtain certification for an ITX Management System, the organization must meet the requirements of ISO 20000 and additional requirements where required by the Accreditation Body.

10.1 Reference standards

The regulations applicable as a reference to the ITX scheme in addition to those already indicated in this regulation are:

- ISO/IEC 20000-1 "Information technology -- Service management -- Part 1: Service management system requirements";
- ISO/IEC 20000-2 "Information Technology - Service Management – Part 2: Guidance on the application of Service management systems"
- ISO/IEC 20000-3 "Information Technology - Service Management – Part 3: Guidance on scope definition and applicability of ISO/IEC 20000-1"
- ISO/IEC 20000-6, "Requirements for bodies providing audit and certification of service management systems"

10.2 Certification

The definition of the scope will have to take into account the provisions of document ISO/IEC TR 20000-3, which sets out the criteria.
The purpose of certification must explicitly include the reference to the ICT services provided or to the catalog of services.
In the presence of contracts with critical suppliers (so-called "underpinning contracts"), ITA will verify the methods of control and monitoring through the examination of Quality Plans or other registrations.
In the event that the "service provider" organization adopts policies of "outsourcing" of services included in the scope, ITA will consider responsible for compliance purposes only the organization itself and not the outsource; The latter will respond only from the provisions of the contract with the certifying organization.
The organization shall, when applying for certification, disclose whether it intends to use the ability to deny the audit team access to documents that contain information considered confidential or sensitive (e.g. information relating to personnel, customers, suppliers, intellectual property, national security); in such a case, ITA will assess and document whether the information to which it has access is sufficient for the assessment of the ITX system; otherwise, the certification process can begin.

10.2.1 Stage 1 audits

During the execution of Stage 1, the following mandatory documents required by ISO/IEC 20000-1 must be made available to the audit team, including:

- policy and objectives for the management of ICT services
- a documented plan for the management of ICT services
- a documented service catalog
- Documented SLAs
- Processes, procedures and other documents necessary to ensure the effective functioning of service delivery processes

- A document listing the legal authorizations to carry out the activities subject to certification, as well as the mandatory requirements relating to ICT products / services, duly signed by the legal representative of the Organization for assumption of legislative responsibility.

Furthermore, at this stage it must be ascertained that a correct definition of the SLAs / OLA is foreseen so that there are no other requirements in the contracts that refer to legal aspects.

11 Section 9 – Energy Management System (EMS) Certification

This section defines the supplementary rules for the Energy Management System (EMS) Certification[1] with respect to what is already defined in Section 1 – Generality, relationship between I.T.A. and customer organizations.

In addition to the provisions of Section 1, in order to obtain certification of an EMS Management System, the organization must meet the requirements of ISO 50001 and additional requirements where required by the Accreditation Body.

11.1 Reference standards

The regulations applicable as a reference to the SGE scheme in addition to those already indicated in this regulation are:

- UNI CEI EN ISO 50001 Energy management systems Requirements and guidelines for use
- UNI ISO 50003 Energy Management Systems Requirements for bodies providing audit and certification of energy management systems

11.2 Certification

In addition to what has already been regulated in the previous sections regarding the certification process. In order to issue the EMS certification, the audit must:

- collect the necessary information regarding the scope of the Energy Management System (any exclusions must be formalized within the Energy Management Manual), and in particular:
- the extension of the involvement of contractors and suppliers (e.g.
- technologies) in the implementation of energy policies;
- the extension of the EMS to the involvement of outsourced operators and/or contractors;
- monitoring, measuring, reporting and performance review, with reference to the objectives and key targets of performance (consistent with the expectations of the applicable management system standard or other regulatory document);
- compliance with applicable legal requirements and the effectiveness of the energy management system in ensuring compliance with these requirements;
- the keeping under control of the customer's processes that have or can generate energy impacts;
- the responsibility of the management for the defined energy policy;
- the links between regulatory requirements, policy, objectives and performance targets (consistent with the expectations of the applicable management system standard or other regulatory document), all applicable legal requirements, responsibilities, staff competence, activities, procedures, performance data and the findings and conclusions of internal audits;
- the correct application and knowledge of the EMS by the Organization.

[1] The acronym identifying SGE Energy Management System at international level may be replaced with the abbreviation EnMS

12 Section 10 – Use of the I.T.A. Mark

12.1 Introduction

a) This Section refers to set up by ITA requirements on the use of the certification marks issued by ITA.

b) Each client will be provided with mark/s that can be used only after successful completion of the certification by ITA (in case of initial certification, after positive Stage 2 audit outcome; in case of a transition audit – after positive pre-transfer review and issued a transfer certificate).

c) ITA developed Guidelines on the use of the certification mark of International Technical Alliance (ITA) and the combined mark of ITA, ACCREDIA (Italian accreditation body) and the FOUNDATION FSSC 22000 logo. These will be provided together with the mark/logo, on a CD, together with the first issued by ITA certificate to audited organization.

d) Certified organization is obliged to meet the requirements described there, including for the following:

- Dimensions
- Colours
- Black and white versions of logo
- Single logo use requirements
- Combined logo use requirements
- Rules where the mark can be used and rules where the mark cannot be used

e) Proper use of logo is always subject to inspection during each audit, after the Stage 2 audit and in case of improper use, a nonconformity will be issued.

12.2 Fraudulent use of the Trademark

a) The use of the Trademark is fraudulent when it may mislead the buyer as to the nature, quality or origin of the product or when it is not used in accordance with these Regulations.

b) As soon as the fraudulent use is reported, the Management of I.T.A. takes all measures to protect its damaged interests and those of the consumer. The measures resulting from such actions may be:

- the request for correction and related corrective actions
- Suspension of certification until effective correction
- withdrawal of the certificate

c) This is without prejudice to any legal action to protect against any damage suffered by improper or fraudulent use of the Trademark.