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Abstract: This Regulation defines the general contractual, technical and operational rules applied by International Technical Alliance I.T.A. S.r.l. for the certification, maintenance, suspension, withdrawal and recertification of Management Systems under accredited and non-accredited certification schemes.

The document describes the rights and obligations of both ITA and certified organizations, the certification process, audit methodologies, multisite and integrated certification arrangements, remote audit activities, complaint and appeal handling, and scheme-specific certification requirements.

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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

A. 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 – ISO 9001;

EMS: Environmental Management Systems – ISO 14001;

HSMS: Health and Safety Management Systems – ISO 45001;

FSMS: Food Safety Management Systems - includes ISO 22000 & FSSC 22000;

ISMS: Information Security Management Systems – includes ISO/IEC 27001 & ISO/27xxx flexible scope family of standards;

ITX: Service Management Systems – ISO/IEC 20000-1;

ABMS: Anti Bribery Management Systems – ISO 37001;

EnMS: Energy Management System – ISO 50001;

RT: Technical Director;

GB: Governing Board;

AT: Audit team;

LA: Lead Auditor;

SA: Support Auditor;

TA: Technical Advisor.

CT: Technical Committee (Scheme managers committee);

CDC: Control Committee;

(NC) Non-conformity: non-fulfilment of a requirement. Nonconformities and their supporting audit evidence should be recorded. Nonconformities can be graded depending on the context of the organization and its risks. ITA selected qualitative grading. Generally, there are major and minor NCs for all schemes and in addition to these two, critical NCs for FSSC 22000 audits.

(MNC) Major non-conformity when the finding affects the capability of the MS to achieve its intended results, including absolute absence of legal compliance;

(mNC) Minor non-conformity when the finding does not affect the capability of the MS to achieve the intended results, including partial absence of legal compliance, which , does not affect the conformity of the product/ service offered by the organization;

(cNC) Critical NC – applicable only for FSSC 22000 certifications - when a direct food safety impact without appropriate action by the organization is observed during the audit or when legality and/or certification integrity are at stake

(OBS) Observation: this is not a NC but requires special attention and an action from the audited organization is required, otherwise for sure will lead to raising a NC during the next audit held. Observations are NOT ALLOWED to be documented for FSSC 22000 audits. If there is any doubt, it is to be documented as a NC.

(OFI) Opportunity for improvement – this is a finding to report general compliance with a standard/scheme requirement but having some space for improvement within the general compliance observed. No action by audited organization is required. OFIs are NOT ALLOWED to be documented for FSSC 22000 audits. If there is any doubt, it is to be documented as a NC.

(PNC) Potential non-conformity – this type of audit finding is formulated at Stage 1 audits only (all schemes, for FSSC 22000 = area of concern) when incomplete compliance is found out during Stage 1 audit that requires action to be taken by audited organization prior to Stage 2 audit otherwise it might be upgraded to a non-conformity if not addressed properly.

Note (recording of good practice) – outside the general strengths identified during the audit, this is a positive observation of the auditor for a specific issue/item/field of operation, exceeding the requirements set, which is formulated in order for the audited organization to be praised on the one hand and motivated to continue to exceed the requirements, on the other hand.

B. SECTION 1 – GENERAL, RELATIONSHIP BETWEEN ITA AND CLIENT ORGANIZATIONS

2.1. GENERALITY

- a) This Regulation is to be considered as an integral part of the certification contract, together with relevant Terms and conditions, and illustrates the procedures applied by ITA for the certification of Management Systems (MS) and the procedures that organizations must follow to request, obtain and maintain such certification.
- b) ITA may also issue specific regulations in addition to the requirements of this Regulation for particular MS schemes or for particular sectors/areas.
- c) This document (in its latest revision) can be downloaded from the www.itanet.eu website.-
- d) The certification concerns the compliance of the MS with the applicable standard/s. ITA does not provide services related to assessment of the compliance of the products or services provided with other standards, rules or other regulatory documents applicable to them – these are ~~may be the~~ subject of other types of certifications and these are not covered by MSs certifications. It is the responsibility of the audited organization to comply with the laws and mandatory rules applicable to the products and services offered.

e) ITA 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 activities within the range of offered by ITA services, ITA does not perform the following activities:

- To certify MSs of other CBs;
- To offer or provide consultancy services related to MSs;
- To conduct internal audits of certified by ITA organizations.

2.1.1. CUSTOMER'S OBLIGATIONS

By signing the certification contract clients' organizations fully accepts this certification regulation.

The customer also accepts:

1. To comply with ITA 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 inform 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.

2.2. CONFIDENTIALITY

a) ITA guarantees the confidentiality of all acts and/or information concerning the organizations in regards to the certification process. The information obtained by personnel operating, at any capacity and level, on behalf of ITA, is subject to confidentiality, for which they sign a specific commitment.

b) ITA 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 INTERNATIONAL TECHNICAL ALLIANCE S.r.l. (ITA Srl), 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 ITA, 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) ITA, in compliance with the rules on data protection, may communicate to third-interested parties the validity status of the Certificates issued, i.e. to ACCREDIA database, IAF Search database.

2.3. PRICES AND TERMS OF PAYMENT

- a) The prices relating to the certification activity are established by ITA according to ITA's price policy whereby the services are provided at prices sufficient to ensure a profit sufficient to guarantee the independence of ITA.
- b) To each organization interested in certification, ITA, through its local agency for the respective territory, 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 quotation/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 ITA and a warning of payment which, if disregarded, may be followed by suspension measures and also withdrawal of certification as required by these Regulations.
- d) The contractual conditions, including audit duration, man-days and related fees, may be subject to changes during the certification cycle based on information communicated by the Organization or identified by ITA during the certification activities. Such changes may include, but are not limited to: variations in number of employees, sites, processes or activities, changes to the scope of certification, transition activities due to updates of accreditation rules or certification standards, special audits, transfer audits, extension or reduction of scope, and changes from integrated management systems to stand-alone schemes or vice versa. Any such changes shall be formally communicated to the Organization through updated quotations, contract amendments or change requests.

2.4. CERTIFICATION PROCESS

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

2.4.1. INFORMATION QUESTIONNAIRE

- a) In order to receive the offer for certification, the applicant organization must submit the duly filled in and signed by an authorized company's representative questionnaire forms for the schemes for which a certification will be requested.
- b) The questionnaire forms are prepared based on the requirements of ISO standards and other scheme owners' requirements and all required by the questionnaires information is to be filled in by the applicant's organization, including: information about the company, such as: name, addresses, description of activities, contact person details, details about employees of the organization, any certifications available, any outsourced activities, use of external consulting services, specific regulatory requirements, etc.

2.4.2. PRE-AUDIT

- a) The Organization, if it deems it useful, may request ITA 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;
 - Compliance with the legislation relevant to the scope and territorial coverage.
- c) The preliminary visit/pre-audit is optional and can only be requested once.
- d) The number of days necessary for its execution is established according to the type and size of the organization, but normally it is equal to the Stage 1 audit duration.
- e) The date and plan of the preliminary visit are defined by ITA in agreement with the Organization.
- f) At the end of the preliminary visit, the Audit Team issues a report about which findings will not be considered within the certification process.
- g) The Audit team that carried out the pre-audit activity will not be able to carry out then the first ITA certification activities for that organization.

2.4.3. CERTIFICATION OFFER/CONTRACT – ISSUE AND ACCEPTANCE

- a) Upon receipt of the duly completed quotation request (questionnaires) by the requesting organization, ITA 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 based on the approved by ITA price policy at the time of offer/contract preparation.
- c) This quotation is defined on the basis of the information provided by the applicant organization, including also about:
 - 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) Audits duration include time for:
 - examination of the documentation of the MS of the applicant organization;
 - on site audits (inspection visit);
 - reporting, including all related documents for the respective type of audit held.
- e) The quotation/contract 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 (if these are not included, a clear remark to the quotation is to be available that these expenses are subject to additional payment by the client.

- f) The determination of the audits' duration 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 ITA which will send the customer the detailed information about factors applied for an increase or decrease.
- g) The offer/contract always contains information about its validity period.
- h) The offer/contract is sent to the applicant for acceptance.
- i) Part of the offer/contract are: "ITA General Terms and Conditions for Certification" – applicable for all Schemes, and "FSSC 22000 certification terms and conditions" – applicable only for FSSC 22000 certifications, publicly available on ITA website.
- j) In case of negative outcome of the review of the application, ITA must clarify to the organization with appropriate communication the reasons that led to the impossibility of ITA to provide the service to the applicant's organization.
- k) The offer/contract 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.

2.4.4. AUDIT PLANNING

- a) Upon receipt of the accepted quotation/contract and any other contractually required documents, ITA starts planning the audit activities.
- b) At the application for certification review stage, ITA drafted a three-years audit program for a full certification cycle to clearly identify the audit activities required to demonstrate that the organization's MS meets the requirements for certification.
- c) The three-years audit program 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) ITA 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.

2.4.5. 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

2.4.5.1. STAGE 1 AUDIT

- a) Stage 1 audits are usually carried out either fully onsite, or partly *in the office* (i.e. at the ITA 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 remotely.
- 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. 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.

2.4.5.2. STAGE 2 AUDIT – SYSTEM ASSESSMENT

Following the positive outcome of Stage 1, ITA 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 MS, 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.
- g) 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.
- h) 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 ITA 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).

- i) 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.
- j) 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.
- k) ITA reserves the right to carry out audits at any suppliers who were entrusted with relevant processes falling within the scope of certification.
- l) 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.
- m) 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.
- n) 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.
- o) 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.
- p) The competent function of ITA 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.
- q) Certification cannot be granted until any Major Non-Conformities (and/or Critical nonconformities for FSSC 22000 certifications) have been adequately addressed and ITA 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 ITA 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 ITA audit team, and their results are verified by the competent function of ITA.
- r) In the case of minor non-conformities, certification cannot be granted until the organization has submitted to ITA its CAP (corrective action plan) with its proposals and planning of immediate corrections and corrective actions, and these proposals and the related planning have been approved by the LA and verified by the competent function of ITA.
- s) If activities that are within the scope of the MS/certification purpose are outsourced, ITA must also audit the legal entities and/or physical persons involved in the scope of the MS/certification purpose.

2.4.5.3. NON-CONFORMITIES AND CORRECTIVE ACTIONS

- a) The findings notified to the organization are classified according to the significance of the deficiencies identified, as already explained at the beginning of this Regulation.

b) The organization is responsible to submit to ITA all necessary evidence for the immediate corrections (where applicable, for example, for major NCs and for FSSC 22000 certifications) and its CAP within the terms as follows:

	Definition and notification	Implementation and closure	Implementation review
MNC (Major NC)	2 Weeks /for CAP development/	3 Months	<i>Additional audit or documentary evidence within 6 months/ Document review and closure – where no onsite follow-up audit is required</i>
<i>If ITA is unable to verify the implementation of corrections and corrective actions related to MNCs 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.</i>			
mNC (minor NC)	30 days	3 Months	<i>Follow-up audit</i>
cNC CRITICAL – only FSSC 22000	2 weeks	Between 6 weeks to 6 months after the audit at which it was raised	<i>Follow-up audit</i>
OFI/Observation	<i>Not expected</i>	<i>Not expected</i>	<i>Follow-up audit</i>
Concern _{(only for FSSC 22000 stage 1)/} PNC (Potential NC) /all other schemes, Stage 1 only)	<i>Not expected</i>	<i>Before Stage 2 execution</i>	<i>Follow-up audit</i>

2.4.5.4. CERTIFICATE ISSUE

a) Following the positive outcome of the audit visit, the competent function (technical reviewer) of ITA 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, ITA 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 by ITA; 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. Validity period is normally a 3-years period, starting from the initial certification decision date, with exception when the recertification was

delayed for any reason, when the 3-years period will be shortened, having the same expiry date as within a normal 3-years certification cycle,

- 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 having more than one page will be issued with the audited Organization's Name and the address of the Organization of the headquarters of the parent organization, where all sites subject to the audit and certification will be listed with relevant data, including addresses and, eventually, certification scope applicable for each particular site, where the scope is different from the main operational site, all in one document of more than one page, having one and the same date of issue and validity.
- f) Any changes must be promptly communicated to ITA.
- g) Failure to communicate any changes will be subject to a Withdrawal of the Multisite Certificates.

2.4.5.5. LIST OF CERTIFICATED 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.

2.4.6. MAINTENANCE OF CERTIFICATION

- a) The validity of the certificate, within the three-year cycle, is subject to the positive outcome of the annual Surveillance audits carried out by ITA, at the organization's site in accordance with the three-years 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 annual verification is subject to the payment of the activities, as agreed in signed quotation/contract.
- b) ITA will request the client to confirm its certification data prior to each audit, which confirmation the audited organization may provide either by email, or by filling in new questionnaire forms. In case when a confirmation for data not changed is received by the phone, local officer in charge shall document this statement in the audit assignment document, thus the LA shall verify it at the opening meeting and during the audit itself.
- c) The dates of the audits, announced by ITA in advance (unless an unannounced audit is to be held, i.e., for FSSC 22000 certifications), 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).
- d) 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 ITA 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.
- e) In surveillance audits, it is verified that the MS remains effectively implemented even in the presence of any changes. The processes and areas to be audited at each Surveillance audit may be sampled, but all processes and work shifts are to be 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. Special points of attention (areas and/or processes) identified in the previous audit held;

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;
- f) The closure of the NCs identified in the previous audit by ITA.
- g) The documentation relating to the surveillance checks is drawn up by the Lead Auditor as for the Stage 2 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.
- h) Similarly, relevant ITA function (technical reviewer) 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.
- i) In the case of "major" non-conformities, which have not been closed within the established time, ITA shall take actions to suspend the certification.
- j) In the case of Multisite with sampling, preliminarily determined the size of the sample to be audited, ITA communicates to the organization which of the sites belonging to the Multisite certification will be audited during each audit.
- k) 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.

2.4.7. ADDITIONAL AUDITS

- a) ITA 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 mark or certificate issued by ITA;
 - 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.

2.4.8. 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 the acceptance of the request as well as the minimum requirements for carrying out the remote audit.

2.4.8.1. 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. ITA rules for ICT/remote audits apply, and the client is always required to fill in and submit to ITA an application for remote audit commencement request, which form is subject to review and decision by ITA.
- b. Monitoring and recertification - 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, and desktop monitor sharing.
- 4. Some standards (such as ISO 20000-1) and some activities (such as consulting, services, office activities, development) 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 if you would like to know if your audit may be held in remote way.

2.4.8.2. 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 for QMS, EMS, HSMS (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 IAF MD 04.
- b) All details related to the audit time in remote audit held are to be described in the application review, including in the remote audit request review.
- c) Some schemes have different rules for reductions, which in all cases are described in the quotation you received.
- d) 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.

2.4.9. MULTISITE CERTIFICATIONS

A Multisite is defined as an organization covered by a single MS comprising an identified central function (not necessarily the headquarters of the organization) at which certain processes/activities are planned and controlled, and a number of sites (permanent, temporary or virtual) at which such processes/activities are

fully or partially carried out. The function that is responsible for and centrally controls the MS is called “Central function”.

Virtual site is a virtual location where a client organization performs work or provides a service using an on-line environment allowing persons from different physical locations to execute processes (for example, a design/development organization with all employees performing work located remotely, working in a cloud environment). Where the processes must be executed in a physical environment (e.g. warehousing, physical testing laboratories, installation or repairs to physical products) can't be considered as a virtual site.

These locations may have separate legal personalities, in such cases there must be a well-defined contractual relationship with the central function that has the rights to require that the sites implement corrective actions when needed in any site.

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 cannot be managed as a multisite one:

- There should be a single MS implemented for all sites;
- The central function shall be clearly identified, it shall be part of the organization and shall not be subcontracted to an external organization;
- The central function shall have organizational authority to define, establish and maintain the single MS;
- The organization's single MS shall be subject to a centralized MR;
- All sites shall be subject to the organization's internal audit program;
- The central function shall be responsible for ensuring that data is collected and analyzed from all sites and shall be able to demonstrate its authority and ability to initiate organizational changes as required;
- The services (products) provided by all sites can be fully or partially the same; SEE IAF MD 11, point 4.6, where there is an option for multisite without sampling in case when sites perform very different activities – I think, marked in red text should be deleted

2.4.9.1. MULTI-SITE CERTIFICATION REQUEST

In the case of Multisite certifications, the organization must fill in the appropriate application questionnaire form for multisite certification, implemented by ITA.

2.4.9.2. MULTI-SITE CERTIFICATION AUDIT

a) In the case of Multisite certifications, the Stage 1 audit is conducted at the registered or operational central function of the requesting organization. During Stage 1 all the requirements of applicability of the Multisite provided for in the previous paragraphs will be checked and verified by the audit team. In the event that the requirements of point 3.4.9 are found not to exist, a new application for certification shall be processed so to be agreed about separate single site certifications of the sites not confirmed to be part of multisite certification request, if any.

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) During the initial and recertification audit, all sites are to be audited, including the central function.

c) ТОВА Е ПРАЗНО

d) FSMS does permit multisite certification, only for some food chain subcategories. Where multisite sampling is an option, no sampling is possible for organizations having 20 or less locations, meaning that each year all sites are to be audited.

e) FSSC 22000 Scheme, 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, IAF MD1 and ITA implemented rules for multisite certifications audit duration calculation documents for each site subject to verification, as if they were independent companies but possibly applying a reduction factor not higher than 30%.

b) Central function is always to be audited, at each audit, together with sampled sites.

2.4.10. RECERTIFICATION

The certificate is renewed at the end of three years certification cycle, in accordance with what is contractually agreed, for the next 3-years certification cycle, following positive outcome of the recertification audit conducted at the organization.

2.4.10.1. CONDITIONS

a) In sufficient time (not later than 2 months) before the certificate expiry date, ITA will issue and will provide you with its quotation/contract for the technical and economic conditions valid for the next certification cycle, taking into account any changes in the organization that occurred in the previous cycle, communicated by the organization itself, prior to the offer to be able to be provided.

b) If significant changes are detected in the MS of the certified organization, ITA can carry out the recertification audit in two phases, as a certification audit consisting of Stage 1 and Stage 2 audits. This is to be formalized in the quotation for recertification.

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.

2.4.10.2. RECERTIFICATION AUDIT

a) In the recertification audit, conducted and documented as in the Stage 2 audit where ITA conducts the verification of the conformity and effectiveness of the system by auditing 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 stages audit.

b) In particular, the evolution of the MS is audited, including through the review of previous reports of the surveillance audits held, the management of complaints and non-conformities and the adequacy of documentation maintained.

c) Any situations of non-compliance/nonconformity must be managed in the times and in the manner indicated above and by LA.

2.4.10.3. AUDIT PLANNING

a) The recertification verification must take place preferably within ninety days before the expiry of the certificate but in all cases in sufficient time to manage and close any non-conformities and for the review and resolution of the technical reviewer. If, on the other hand, recertification 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) Situations in which renewal activities can be managed after the certificate expiration date:
 - recertification process is undertaken but not completed 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;
 - recertification 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 or by The Foundation FSSC.
- d) In the case of Multisite certifications with sampling, priority will be given to organizations that have never been audited during the certification period.

2.4.10.4. POSTPONEMENT OF RECERTIFICATION AUDIT

Outside what is already regulated in ISO-IEC 17021-1, in particularly serious cases falling within the cases provided for by IAF ID03, certification activities (e.g. surveillance and recertification) can be postponed for maximum 6 months, without losing the 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 maximum of 6 months. In such cases, the client must contact ITA and agree on the operational modalities regarding the postponement of the audit.

2.4.10.5. RESOLUTION FOR RECERTIFICATION

Following the results of the recertification audit reported by the Lead Auditor, ITA 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 (if any).

2.4.11. CHANGES TO THE SCOPE AND CHANGES TO THE CERTIFICATE

- a) The organization can request changes to its certification, including to extend or reduce the scope of the certificate by informing ITA about required change. If the change is minor, full new application will not be required – amendments are to be summarized by ITA on its application review prior to the regularly planned audit to be held, while, in case of significant changes, ITA will request that new application forms with updated data are to be submitted by the client to ITA and the process for application for certification shall be followed.
- b) ITA may grant what is requested by the organization following a positive outcome of an (extraordinary) audit held. 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 certification audit or at least an audit with Stage 2/RA audit duration.
- c) Following the granting of the certification data change, the certificate of conformity is reissued with confirmed during the audit updated certification data. However, the new certificate issue does not entail a change the normal 3-years certificate validity, nor changes the certificate expiry date.
- d) The scope may also be subject to reduction both in case of request by the organization and because ordered recommendation by ITA 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 expiry date of the certificate.

2.4.12. 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. Depending the changes requested, the certificate may be issued only based on supported evidence about changes issued by an

authorized authority or issued on an official blank and signed by the official company's manager/owner, or an extraordinary audit will be required after the application review to be held by ITA prior to the extraordinary audit held.

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.

2.4.13. TRANSFER

a) In the case of requests for transfer of certification received from organizations already certified by other certification 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 documental *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 CB, ITA must justify its resolution for 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 the last (most recently held) surveillance audit report and any resulting open non-conformities. That assessment shall also include any other audit records available. In the event of unavailability of the last certification or recertification report and last surveillance 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~~ recertification audit schedule or if the organization is treated as a new customer, ITA will have to redefine a new audit program covering the new three-year certification period.
 - VII. The absence of disputes with the control bodies.
- b) In addition to the documentary review if the documental *pre-transfer review* is ~~deficient~~ not sufficient, ITA can carry out an onsite *transfer - visit on site* at the customer's premises, in order to evaluate any critical points still unresolved.
- c) A transfer audit shall in any case be performed whenever ITA is unable to obtain the necessary documentation and sufficient information from the previous certification body
- d) Following the positive outcome of the documental *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 Certification decision board member's reviewer, after a positive resolution from ITA approved 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 before that. ITA shall consider the requirements of IAF MD 2 related to transfer of a valid certificate issued by another CB.

2.4.14. SUSPENSIONS AND WITHDRAWALS

2.4.14.1. *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 fraudulent 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 ITA by the organization of the existence of ongoing legal proceedings.
- IX. Express request from the organization.
- X. Non-payment of fees due to ITA 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~~ decision, 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) ITA reserves 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 (reinstated) following the restoration of the conditions of compliance with the requirements to be verified by an extraordinary audit with the duration of Stage 2/RA audit, for which the customer will be additionally charged.

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, meaning that in one calendar year may be required more audits to be held.

2.4.14.2. *WITHDRAWAL AND CANCELLATION*

a) ITA 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~~ led to the suspension have not been changed;
- II. annual audits reveal serious and repetitive deficiencies of a systematic nature;
- III. the verifications and the complete process of the recertification have not been successfully completed within the period of validity of the certificate;
- IV. Failure to adapt to any new requirements put in place by ITA to which the organization does not intend to adapt;
- V. the organization refuses or obstructs the participation in audits of observers of the Accreditation Body.
- VI. Ascertained criminally relevant behaviors falling within the activity subject to certification.

VII. 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 to demonstrate that it has been destroyed, in case of explicit request by ITA) as well as to cease the use of the ITA logo in any form as well as the use of any logo of the Accreditation body and Scheme owner.

2.5. CONTRACT TERMINATION AND WITHDRAWAL OF CERTIFICATION

- a) Certification may be withdrawn by ITA following termination or withdrawal from the contractual agreement by either party.
- b) Following termination of the contract, the Organization shall:
 - a. return the original certificate of conformity;
 - b. cease the use of any copies or reproductions of the certificate;
 - c. discontinue the use of certification marks, logos and any reference to certification;
 - d. settle any outstanding fees and costs related to activities already performed, planned or contractually agreed.
- c) ITA shall accordingly update the status of the Organization within the register of certified organizations.

2.6. COMPLAINTS APPEALS AND RESTRAINTS

2.6.1. COMPLAINTS

- A. Any interested party may submit complaints related to the activities of ITA or to organizations certified by ITA.
- B. Complaints shall be submitted through the communication channels made available by ITA and shall contain sufficient information to allow proper evaluation and processing.
- C. ITA shall acknowledge receipt of the complaint, evaluate it impartially and communicate the outcome to the complainant within the timeframe established by the applicable internal procedures.
- D. ITA guarantees that complaints are handled, reviewed and approved by personnel not previously involved in the subject matter of the complaint.
- E. Detailed rules regarding complaints handling are defined within procedure P14 "Appeals and Complaints Handling Procedure", available in its latest revision on the official ITA website.

2.6.2. APPEALS

- a) Organizations may appeal against decisions related to certification activities.
- b) Appeals shall be submitted in writing within the timeframe established by ITA procedures and shall include the reasons for the appeal together with any supporting evidence.
- c) ITA shall ensure that appeals are managed impartially by personnel not previously involved in the activities subject to the appeal.
- d) The appellant shall be informed about the progress and outcome of the appeal process.
- e) Detailed rules regarding appeals handling are defined within procedure P14 "Appeals and Complaints Handling Procedure", available in its latest revision on the official ITA website.

2.6.3. LITIGATION

2.6.3.1. ARBITRATION

- a) Notwithstanding any applicable legal provisions, any dispute arising between I.T.A. and the Organization in relation to the validity, interpretation and execution of the certification services shall be settled by arbitration in accordance with the Rules of the Arbitration Chamber having jurisdiction over the area where I.T.A. has its operational headquarters and in accordance with the applicable law governing the merits of the dispute. The Arbitral Tribunal shall consist of a sole arbitrator appointed in accordance with the applicable arbitration rules.
- b) In the event of a dispute, the claimant shall file a request for arbitration, including the request for appointment of the arbitrator by the Arbitration Chamber, and shall send a copy of such request to the respondent by registered mail with return receipt or equivalent traceable communication method. The respondent shall submit its statement of defense within 45 (forty-five) calendar days from receipt of the arbitration request.
- c) The arbitral award shall be issued within 180 (one hundred and eighty) calendar days from the date of formal acceptance of the appointment by the arbitrator, unless an extension is granted in writing by both parties. The arbitrator may further extend such period, up to an additional 180 (one hundred and eighty) calendar days, where necessary for procedural or evidentiary reasons. Any suspension of judicial procedural deadlines provided by law shall also apply to the arbitration proceedings.
- d) The arbitral award shall be final, binding and conclusive upon the parties, who expressly waive any right of appeal to the extent permitted by applicable law. The parties undertake to comply with the award immediately and in any case no later than 10 (ten) calendar days from the date of its communication. In the event of non-compliance, the defaulting party shall pay the other party a penalty of €100.00 (one hundred euros) for each day of delay.

2.6.3.2. DISPUTES AND JURISDICTION

Without prejudice to applicable legal provisions concerning the jurisdiction of civil courts, and alternatively to the arbitration procedure referred to above, any dispute arising between I.T.A. and the Organization shall fall under the exclusive jurisdiction of the competent court of the place where I.T.A. has its operational headquarters.

3.7. LIABILITY

I.T.A. shall not be held liable for any loss, damage, cost or expense suffered by any party and arising from any act, omission or error connected with the performance of assessment activities or other services related to certification activities, except in cases of proven gross negligence or willful misconduct by I.T.A.

C. SECTION 2 – ENVIRONMENTAL MANAGEMENT SYSTEMS (EMS) CERTIFICATION

3.1. PREMISE

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

3.2. 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 if we make reference to this document here, we need to provide access to the client to this document, so the client can read the requirements, to which explicit reference is made.

3.3. CERTIFICATION

In addition to Section 1, the applicant organization 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.

3.4. ANNUAL SURVEILLANCE

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.

D. SECTION 3 – CERTIFICATION OF WORKPLACE SAFETY MANAGEMENT SYSTEMS (SCR/ OH&S)

4.1. 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 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 Determination of Audit Time of Quality, Environmental, and Occupational Health & Safety Management Systems.

4.2. CERTIFICATION

The applicant organization to obtain 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.

4.3. REQUIREMENTS Of MD 22

The audit team shall interview the following personnel:

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

Other personnel that should be considered for interview are:

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

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.

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.

4.3.1. HEALTH AND SAFETY SPECIFIC TASKS

The stage 1 visit is always performed at the organization's site and at separate times from the stage 2 visit.

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, the management legally responsible for occupational health and safety, personnel responsible for monitoring employees' health and the employees' representative(s) with responsibility for occupational health and safety should attend. Justification in case of absence shall be recorded.

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.

4.3.2. AUDIT MANAGEMENT FOR MULTI-SITE ORGANIZATIONS

For multi-site organisations IAF MD1:2018 applies.

4.3.3. 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 ISO/IEC 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 HSMS. Surveillance visits to an HSMS must take place at least once a year.

4.3.4. 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 OH&SMS 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.

4.3.5. Specific obligations related to HSMS certification

The certified Organization shall promptly inform ITA of any serious accident, fatality, major legal proceeding or significant breach related to occupational health and safety, environmental protection or other activities covered by the certified Management System.

Following such notification, ITA reserves the right to perform additional assessments, special audits or further verification activities in order to evaluate the continued conformity and effectiveness of the certified Management System.

Based on the outcome of such evaluations, ITA may take any appropriate certification decision in accordance with its certification procedures and applicable accreditation requirements, including maintenance, suspension, reduction of scope or withdrawal of certification.

E. SECTION 5 – FOOD SAFETY MANAGEMENT SYSTEMS CERTIFICATION (FSMS)

5.1. 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.

5.2. REFERENCE STANDARDS

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

- ISO 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

5.3. 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 studies 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.

5.3.1. MULTISITE SAMPLING

Sampling in a multi-site 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.

5.4. 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.

F. SECTION 6 – CERTIFICATION OF INFORMATION SECURITY MANAGEMENT SYSTEMS (SSI)

6.1. 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.

6.2. CERTIFICATION

For certification purposes, the organization must make available to ITA

- 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.

G. SECTION 7 – ANTI BRIBERY MANAGEMENT SYSTEMS CERTIFICATION (ABMS)

This section defines the supplementary requirements applicable to certification activities for Anti-Bribery Management Systems (ABMS), in addition to the general provisions defined within Section 1 of these Regulations.

Organizations applying for certification shall comply with the requirements of ISO 37001:2025, applicable accreditation requirements, mandatory documents issued by IAF and EA, and any additional requirements established by the relevant Accreditation Body.

7.1. CERTIFICATION

For certification purposes, the Organization shall provide ITA with all information necessary to enable proper audit planning, risk assessment and determination of audit duration.

Such information may include, where applicable:

- countries in which the Organization operates;
- activities, sectors and processes exposed to bribery risks;
- relationships with public authorities, public administrations or state-owned entities;
- involvement in public procurement, grants, concessions or publicly funded projects;
- presence in countries or sectors identified as having elevated corruption risk according to internationally recognized indexes or sources;
- organizational complexity, turnover and operational structure;
- existence of ongoing investigations, sanctions, significant legal proceedings or publicly available information potentially relevant to the effectiveness of the ABMS;
- outsourced processes, intermediaries, business associates and third parties relevant to the ABMS scope.

ITA reserves the right to request additional documented information where necessary for proper evaluation of bribery-related risks associated with certification activities.

Certification shall normally apply to the legal entity as a whole and to all activities, processes and sites included within the defined certification scope.

Where certification activities are limited to specific countries, legal entities, activities or operational sites, the scope and applicable exclusions shall be clearly defined, justified and documented.

Multisite certifications and sampling activities shall be managed in accordance with the applicable IAF Mandatory Documents, accreditation requirements and ITA certification procedures.

7.1.1. OBLIGATIONS OF THE ORGANIZATION

Certified organizations shall promptly inform ITA of any significant event that may affect the conformity, effectiveness or credibility of the certified ABMS.

Such events may include, where applicable:

- significant bribery-related incidents;
- investigations or legal proceedings related to bribery or corruption;

- sanctions imposed by authorities;
- significant compliance failures;
- major organizational changes affecting the ABMS;
- substantiated allegations involving top management or personnel with critical compliance responsibilities.

The Organization shall also inform ITA of the corrective actions, containment measures and root cause analyses implemented in response to such events.

Where ITA becomes aware, either directly from the Organization or from publicly available or reliable external sources, of circumstances potentially affecting the integrity or effectiveness of the certified ABMS, ITA reserves the right to perform additional verification activities, including special audits, and to take appropriate certification decisions in accordance with these Regulations and applicable accreditation requirements.

7.1.2. Multisite organisation

Where multisite certification is permitted, ITA may apply site sampling methodologies in accordance with applicable IAF Mandatory Documents, accreditation requirements and internal certification procedures.

Sampling decisions shall take into account bribery-related risks, operational complexity, geographical distribution, activities performed, interactions with public authorities, use of intermediaries and any other relevant ABMS risk factor.

Sampling shall not be applied where activities, processes, controls or bribery-related risks significantly differ among sites or where prohibited by applicable accreditation requirements.

7.1.3. TRANSITION TO ISO 37001:2025

The transition from ISO 37001:2016 to ISO 37001:2025 shall be managed in accordance with applicable accreditation requirements, IAF MD30, ACCREDIA communications and ITA certification procedures.

Initial certifications and recertification audits according to ISO 37001:2016 may be performed until 30 August 2026, where permitted by applicable transition rules.

From 31 August 2026, all initial certifications and recertifications shall be conducted exclusively against ISO 37001:2025.

All certified organizations holding accredited ISO 37001:2016 certificates shall complete the transition process no later than 28 February 2027. After such date, ISO 37001:2016 certificates shall no longer be considered valid.

Detailed transition conditions, audit arrangements, additional audit duration criteria and client obligations are defined within the official ITA transition communications and applicable certification procedures..

7.2. MAINTENANCE

Surveillance, recertification and transition activities shall be performed in accordance with ISO 37001:2025, applicable accreditation requirements, IAF Mandatory Documents, ACCREDIA transition rules and ITA certification procedures.

Initial certifications and recertification audits according to ISO 37001:2016 may be conducted until 30 August 2026, where permitted by applicable transition requirements. From 31 August 2026, all initial certifications and recertifications shall be conducted exclusively according to ISO 37001:2025. All organizations certified

against ISO 37001:2016 shall complete the transition no later than 28 February 2027, after which ISO 37001:2016 certificates shall cease to be valid.

Detailed transition conditions, audit arrangements, additional audit duration criteria and client obligations are defined within the official ITA transition communications and applicable certification procedures.

During surveillance, recertification and transition audits, ITA may evaluate elements related to ethical culture, anti-bribery awareness, governance effectiveness, reporting mechanisms, whistleblowing processes and the overall maturity of the Organization's compliance culture, taking into account the size, complexity and bribery-related risks associated with the certified activities.

Particular attention may be given to the effectiveness of internal reporting channels, protection against retaliation, top management commitment, management of conflicts of interest and the implementation of risk-based anti-bribery controls.

Where multisite certification and sampling are permitted, sampling methodologies shall be applied taking into account bribery-related risks, operational complexity, geographical distribution, activities performed, interactions with public authorities, use of intermediaries and any other relevant risk factor associated with the certified Organization.

Sampling shall not be applied where activities, processes, controls or bribery-related risks significantly differ among sites or where prohibited by applicable accreditation requirements.

H. 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.

8.1. 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"

8.2. 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.

8.2.1. 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.

I. SECTION 9 - INTEGRATED MANAGEMENT SYSTEMS (IMS)

An Integrated Management System (IMS) is a management system that combines two or more management systems, standards or certification schemes within a single organizational framework, allowing the Organization to manage its processes, risks, objectives and compliance obligations in an integrated and coordinated manner.

Where an Organization implements an Integrated Management System, ITA may plan and perform integrated audits covering multiple certification schemes simultaneously, in accordance with applicable accreditation requirements, IAF Mandatory Documents and ITA certification procedures.

Integrated audits may take into account common processes, shared documentation, integrated internal audits, unified management reviews, common governance structures and integrated risk management activities.

The level of integration implemented by the Organization may influence audit planning, audit duration, audit team competence requirements and sampling activities.

Where the level of integration is limited or insufficiently demonstrated, ITA reserves the right to plan separate or partially integrated audit activities.

Certification decisions remain specific for each certification standard and scope, even where audit activities are performed in an integrated manner. Where an Organization requests the separation of an Integrated Management System certification into one or more stand-alone certification schemes, ITA shall perform a review of the certification arrangement, audit programme, audit duration and contractual conditions.

In such cases, ITA may issue new quotations and/or contractual agreements and redefine the certification cycles, surveillance activities and recertification dates applicable to each certification scheme.

Depending on the scope of the requested changes, one or more certification schemes may be maintained, transferred to stand-alone certification cycles, reduced in scope, suspended, withdrawn or cancelled in accordance with applicable certification requirements and contractual conditions.

J. SECTION 10 – ENERGY MANAGEMENT SYSTEM (EMS) CERTIFICATION

This section defines the supplementary rules for the Energy Management System (EMS) Certification¹ 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.

10.1. REFERENCE STANDARDS

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

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

10.2. 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

K. SECTION 14 – USE OF THE ITA MARK

11.1. 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 FSC 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, or via email as a .jpeg or .png file.
- 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.

11.2. 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.

List of related forms, originated from this procedure:

- 1. NONE

END