



ISO 14001:2004 Guidance Document

Introduction

ISO 14001:2004 emphasizes the continuous improvement of an environmental management system (EMS). The standard specifies requirements for an environmental management system to enable an organization to develop and implement a policy and objectives which take into account legal requirements and information about significant environmental aspects. The certification process ensures the conformance of your EMS against the international standard, as well as any organizational specific requirements that have been identified.

Reading the expectations contained in this document will help an organization better understand their role in the certification process. Additional guidance that should be utilized can be found in Annex A of the 14001:2004 standard.

Scope and Exclusions

The scope of the registration is important for setting boundaries for the registration activities and defining the processes included. NQA can help guide appropriate verbiage for the scope to ensure clarity both during the audits and for the future registration.

Quotation Process

NQA's quotations are prepared based on information that your organization provides and by using the IAF Guidance to ISO/IEC Guide 66 annex 1 and ISO/IEC 17021. These documents consider the number of employees and the complexity of the business when determining the appropriate amount of audit time. When you return the signed quotation the scheduling process begins.

Scheduling

A Client Support Representative (CSR) will contact you to arrange a mutually agreed upon schedule. The CSR will serve as your main point of contact and will set up the Stage One, Stage Two and Surveillance activities.

Audit Process

The NQA audit program includes a two stage registration audit process followed by surveillance audits, and ultimately a recertification audit. NQA audits include on-site assessments of documents, data, records, activity and personnel. Process audit trails are followed by interviews of personnel responsible for the tasks and reviewing associated activity and records of occurrence. The audit trail will follow interactions between processes as well as the details of the process itself. Following are the stages of the audit process.

*For *Transfer of Certificate of Registration*, see last page.



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Pre-assessment (Optional)

The pre-assessment audit is an optional activity, outside of the registration process, that NQA highly encourages any organization to undertake to evaluate the readiness to undergo the two stage registration process. NQA offers this as a value-added option that would optimally occur prior to the stage 1 and 2 audits. This activity can be tailored to meet your specific objectives. Unlike the Stage 1 and Stage 2 activities you have full discretion as to which areas the pre-assessment should focus on and for the length of the pre-assessment. This activity allows your organization to become familiar with the audit process and helps prepare your employees for the registration assessment.

The auditor conducting the pre-assessment will typically return to the organization for the assessment. Similar to a 'true' audit, the end result of the pre-assessment will be a documented report identifying findings observed during the audit and a closing meeting to discuss the issues. The pre-assessment activity allows you to correct any issues prior to beginning the registration process.

Assessment (Required)

New requirements for certification bodies have changed the registration process. Registration is now conducted in two distinct visits- Stage One and Stage Two- each of which has defined requirements that are outlined below.

Registration Audit - Stage 1

The stage 1 audit, conducted at your facility, is primarily performed for planning and determining the readiness of an organization to undergo a stage 2 registration audit. It also facilitates communicating any NQA needs and expectations to the organization. Activities performed at a stage 1 audit include:

- Conducting a documentation review - This review determines if the organization's EMS documentation adequately covers all the requirements of the ISO standard
- A review of the aspects and impacts and their significance and an evaluation of the facility(s) site specific conditions
- A review of your organizations non-conformance, preventive and corrective action system
- An overview of applicable regulations
- Interviewing your organization's personnel to assess their general readiness to undertake a stage 2 audit
- Confirming the applicability of the scope of the organization's EMS
- Obtaining evidence that internal audits and management reviews are being planned and performed
- Providing focus for the planning of the stage 2 audit



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At the closing meeting, the auditor will provide a report identifying any nonconformities and opportunities for improvements. A review of this will enable you and your auditor to ensure that there is sufficient time to resolve all areas of concern prior to performing the stage 2 audit.

If during the stage 1 audit any nonconformities are identified, the auditor will request a corrective action response (see Corrective Action Response).

Registration Audit - Stage 2

The objective of the Stage 2 on-site audit is to assess your organizations' adherence to your own policies, objectives, and procedures and to ascertain conformance to the requirements of the ISO 14001 standard. To accomplish this, the audit will address the implementation of all the elements of the standard. Review of documentation and records to support the implementation is an expected part of the assessment process. If non-conformances or opportunities for improvement are identified they will be documented in a report which will be presented to the organization during the closing meeting. The report will include the auditor's recommendation regarding registration.

Audit Findings

Any deviation from procedures or requirements of the standard will be identified as an audit finding, which will be documented in the audit report. The auditor will draw your attention to non-conformities as they arise so there will be no "surprises" at the closing meeting. Findings are categorized into three categories defined as follows:

- **A major non-conformity** relates to the absence or total breakdown of a required process or a number of minor non-conformities listed against similar areas. A major non-conformity at the Registration Audit - Stage 2 would defer recommendation for registration until that major has been closed.
- **A minor non-conformity** is an observed lapse in your systems ability to meet the requirements of the standard or your internal systems, while the overall process remains in tact.
- **An observation or opportunity for improvement** relates to a matter about which the Auditor is concerned but which cannot be clearly stated as a non-conformity. Observations also indicate trends which may result in a future non-conformity.

Corrective Action Response

NQA requires corrective action responses from all Registration Audits. Once certification is achieved, dependant upon the extent and nature of the findings, your organization may be required to submit a corrective action plan, detailing your intent to correct the non conformity. The auditor may also recommend that your organization submit objective evidence to support the



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closure of the finding. In certain circumstances such as a major non conformity an on site activity to verify closure may be required.

It is recommended that all non-conformities are addressed within your internal corrective action system. Typically, opportunities for improvement would be addressed as preventive actions by your organization.

Certificate Issuance

Following a successful review of the audit team's report and associated corrective action submittal, NQA will authorize issuance of a certificate that is valid for a period of three years. The organization can expect to receive its certificate within 1-2 weeks of review and acceptance of corrective actions.

Surveillance Audits

NQA will conduct Surveillance Audits on an annual or semi-annual basis. The purpose of the Surveillance Audit is to ensure that the EMS continues to conform to both the organizations' and the ISO 14001 requirements. Certain processes will be reviewed at each surveillance including:

- A review of action taken on nonconformities identified during the previous audit
- Internal audits and management review
- Customer and interested parties communications
- Effectiveness of the management system in achieving defined objectives
- The progress of planned continual improvement activities
- Continuing operational control
- A review of any changes made by the organization which may have impact on the registration
- Use of accreditation and certification body logos provided to the organization upon registration
- objectives, targets and programs
- evaluation of compliance

Re-assessment Audits

The accreditation body requires that a recertification audit be carried out every three years. The purpose of the recertification audit is to confirm the continued conformity and effectiveness of the management system as a whole, and its continued relevance and applicability for the scope of



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certification. Additional time may be added to your normal surveillance audit to accomplish this activity.

Recertification audits review the performance of the EMS over the registration period, and include a review of previous surveillance audit records. The recertification audit includes the following:

- A review of the continued effectiveness of the management system in its entirety
- The continued applicability to the scope of registration
- The continued relevancy of the organization's policy and objectives
- The continued effective interaction between the processes of the management system
- A review of internal audits, management reviews, document changes during this certification period

Transfer of Certification

If a certified organization wishes to transfer their certificate from another certification body to NQA, they will be required to submit a copy of the organization's existing certificate issued by a certification body accredited by a signatory to the IAF MLA. Additionally, the organization will be required to send in the following documents/information:

- Previous audit reports including outstanding non-conformances & associated corrective actions dating back to either the Initial Registration Assessment or the last re-assessment
- Outstanding compliance issues & action taken
- Outstanding complaints regarding the existing certification & action taken
- Reasons for seeking transfer

Any findings from this review will be documented and handled in a similar manner to the Registration Assessment. Following the successful completion of the review, the organization will be awarded an NQA ISO 14001 certificate with an expiry date corresponding to the previous certificate. Audits will generally be conducted in the pre-existing schedule moving forward.

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