CLIENT INFORMATION NOTE

Transfer of accredited certification/ registration to Lloyd's Register

Lloyd's Register

Overview

This Client Information Note (CIN) explains the main stages of our process for taking over the approval of a company which already maintains a Management System meeting the requirements of recognised assessment criteria, currently certified by another accredited certification body.

The transfer process is normally undertaken through the office based review of the documentation and information you provide with your transfer request. If, however, the information and documentation is not sufficient for us to grant accredited certification after a review by our appropriate Lloyd's Register (LR) technical function, transfer of approval is required to include one visit to your site before we can recommend approval.

When we have issued your approval certificate, we will carry out surveillance visits to maintain the approval.

Assuming that we do not find any major problems during the transfer review or the (if required) transfer visit and independent technical review by our office, we will issue a certificate. The expiry date of the LR certificate will depend on the certificate being replaced. If your current approval:

- has no expiry date – the LR certificate will be valid for three years from the last full approval or certificate renewal visit date
- has a recorded expiry date – the validity of the LR certificate will be as per your existing certificate, or three years, whichever is the earlier.

Throughout the process, our assessors will be open and helpful, and will follow a practical approach to give you real value in the assessment process.

Before we visit, we will discuss and agree with you the visit dates, start and finish times, the assessment team, how long the visit will last, and which parts of your business we will visit. Visits will be carried out and reported in your national language unless otherwise agreed.

Before the transfer

To offer a quotation, LR will need:

- details of your company and its activities
- a copy of your current certificate including duration of approval and the expiry date
- to know the duration of your current surveillance visits or next certificate renewal visit (if appropriate)
- to determine the duration of our visit to you, appropriate to the stage of the surveillance / certificate renewal cycle applicable under your existing approval. If your previous approval was based on a 'continuous' or 'rolling surveillance' programme, and a visit to examine the system as a whole has not been carried out in the previous three years, we will include additional time to allow a more in depth examination of the system.

Once you have signed a contract with us, we will need details of the results of previous visits undertaken (for

example, copies of the most recent certificate renewal and surveillance reports) so that we can see the status of your existing Management System . We will also contact your previous certification body to verify the status of your current approval

Also, to issue an accredited certificate, we need to verify:

- that your activities fall within our scope of accreditation
- your reasons for seeking a transfer
- that your current certification is covered by an IAF recognised accreditation body
- your existing scope of approval complies with current accreditation requirements
- that you have taken the appropriate actions in relation to any current external complaints received by your company
- the status of any current engagement by your company with regulatory bodies in respect to legal compliance.

After the review of this information it will be determined if an on-site visit will be required before the issue of an LR certificate for your company.

If an on-site visit is not deemed necessary, then the information and documentation supplied will result in the issuing of an accredited certificate.

A "Transfer" visit

Purpose of the visit

If the office based review of the documentation and details you have supplied deems that the information supplied is not sufficient to allow the granting of accredited certification of your company or has identified issues that can only be verified on-site, LR is required to undertake a transfer of approval visit. The activities to be undertaken at this visit will be determined as part of the pre-transfer review and will be communicated to you by the assessor undertaking the visit. We do this visit to verify that your approved management system continues to be maintained, implemented and to deliver continual improvements. We consider the implications of any changes to your system, for example, those initiated as a result of changes in your activities, products or services. We also confirm continued conformance with certification requirements.

Carrying out the visit

The visit starts with an opening meeting. The assessor will explain to your management team how we carry out assessments, and you will be able to introduce your company. The assessor will agree a plan for the visit with you.

The assessor will then:

- review your requested scope of approval against your previous scope and examine your established and maintained system, processes, documentation and records to establish that they address the activities, products and services included in the proposed scope
- review your existing certificate to establish its validity, applicability to your activities, products or services, and the sites involved, as well as its accreditation status
- review the last surveillance report(s) by your existing certification body to determine any outstanding corrective actions. We will assess the relevance of any outstanding findings and discuss the timescale for corrective action
- for OHS and EMS, carry out a site tour to verify that all H&S hazards and environmental aspects within the scope of certification have been identified and dealt with appropriately in your management system
- review system changes and the effectiveness of their implementation.

The visit ends with a closing meeting to present our report and agree the next stage of the assessment process, including any health and safety, security and administrative issues.

Details of the next stages in the certification cycle can be found in our specific client information note for the product.

Reporting

During the visit we fill in visit reports to record assessment findings, progress against the assessment plan, positive comments, and also points of clarification or interpretation. We record assessment findings in an Assessment Findings Log, and identify them as Major Nonconformity or Minor Nonconformity. We define these findings as follows:

Major Nonconformity: The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve:

- the policy, objectives or public commitments of the organisation
- compliance with the applicable regulatory requirements
- conformance to applicable customer requirements
- conformance with the audit criteria deliverables.

Generally, a major nonconformity will be a system failure that:

- is already affecting system effectiveness or deliverables
- puts at risk the capability of the management system
- requires immediate containment
- requires immediate root cause analysis and corrective action.

Our team leader will make arrangements with you for follow up.

Minor Nonconformity: A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

Generally, a minor nonconformity will be a weakness in an internal facing process or procedure; or a finding where any further deterioration of control could reasonably be considered likely to result in the system becoming ineffective. Requires root cause investigation and corrective action.

If raised at a visit that results in a certificate being issued, then the assessor will ask you to indicate the corrective action that you will take. This corrective action plan will form part of the independent review by our office before your certificate is issued. If raised at a surveillance visit, although you need to take corrective action within an appropriate time after the visit, you do not normally need to provide us with details of the action until we next visit you.

In both cases, at the next visit the assessor will review the action you have taken and fill in the corrective action review section in the findings log.

Please keep copies of all our visit reports for three years. In exceptional circumstances, we may ask you to provide copies of previous reports.

If we identify any isolated issues that you should address to avoid us raising a nonconformity at a subsequent visit, we will record them in the relevant part of the report.

Suggestions for improvements that could be made to a compliant management system that would improve the efficiency of the processes undertaken, we will record in either:

- the executive summary, for strategic improvement suggestion, or
- the body of the report, for improvement suggestions that relate to a particular area.

Sampling

It is important to remember that even though a problem may not have been identified in an area of activity, it does not necessarily mean that there are no problems. As assessment work is based on sampling techniques, statistically there is always a possibility that issues will not be identified during an assessment. Please consider this when you audit your own management system.

Confidentiality

We will not pass on any of the information we gather about your organisation (including the contents of reports) to any other person or organisation without your permission (except as required by the accreditation body).

Lloyd's Register

Get in touch

Please visit www.lrqa.com.hk for more information

Care is taken to ensure that all information provided is accurate and up to date. However, Lloyd's Register accepts no responsibility for inaccuracies in, or changes to, information.

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