

**MODEL QUALITY MANAGEMENT SYSTEM**

GUIDANCE FOR THE DEVELOPMENT OF A QUALITY MANAGEMENT SYSTEM BY AN APPLICANT SEEKING ACCREDITATION UNDER THE WEIGHTS AND MEASURES ACT 1987

**Disclaimer**

This document is a guide created by Trading Standards, on behalf of the Ministry of Business, Innovation and Employment, and does not reflect government policy. Readers / users of this document are advised to seek independent advice appropriate to their specific circumstances before undertaking any action in reliance on the contents of this document. The contents of this document must not be construed as legal advice. Only the Courts can determine the interpretation of legislation. The Ministry does not accept any responsibility or liability whatsoever whether in contract, tort, equity or otherwise for any action taken as a result of reading, or reliance placed on the Ministry because of having read, any part, or all, of the information in this document, or for any error, inadequacy, deficiency, flaw or omission from this document.

***Instructions for use***

This document has been created by Trading Standards (TS) to provide guidance for an organisation seeking accreditation under the Weights and Measures Act 1987 (the Act) to help create a Quality Management System (QMS) that complies with the weights and measures legislation. While it includes all requirements set out in the legislation, it is not prescriptive and, as each organisation will be different, it will require amendment to reflect the specific processes and procedures the organisation follows. For example, the organisational chart in Section 3 provides a template, which is very basic and, depending on the size of the organisation, may need to be substantially altered.

Each requirement of the legislation in the model is shown in a box at the beginning of the section. The contents are taken directly from Schedule 7 of the Weights and Measures Regulations 1999 (the Regulations). Below the box is an example wording for the section, which should be amended to reference your organisation and reflect the way your organisation operates.

Where certain requirements in the legislation prescribe the format of the content, this will be highlighted by a note. In addition, notes have been included at various points to clarify particular parts of the QMS and TS requirements.

A QMS that is submitted to TS ***must*** be in an electronic format or it will not be accepted.

A QMS must, as a minimum, have the following additional documentation included:

* Corrective action form
* Internal audit form
* Quality Management System review form
* Quality Management System updates and amendments register
* Test procedure, per category
* Test sheet, per category
* Certification work check form
* Certificate of Accuracy in label form
* Certificate of Accuracy not in label form (if applicable)
* Mark of Verification label / seal
* Notice of Non-Compliance form.

The forms and documents used to support and maintain the QMS must be referenced in the relevant sections.

**NOTE:** See the [Uniform Test Procedures](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/resources-and-training/uniform-test-procedures/) and [Technical Policies](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/technical-policies/) pages on our website for more information when developing test procedures and test sheets.

It is the responsibility of the applicant / accredited organisation and the nominated / approved Management Representative to manage and maintain the QMS to ensure it meets relevant requirements.

**Other resources**

* Legislation:
  + [Weights and Measures Act 1987](http://www.legislation.govt.nz/act/public/1987/0015/latest/versions.aspx)
  + [Weights and Measures Regulations 1999](http://www.legislation.govt.nz/regulation/public/1999/0373/latest/DLM301528.html)
* Trading Standards website:
  + For accredited persons
  + [Technical policies](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/technical-policies/)
  + [Approval certificate register](https://trademeasurement.tradingstandards.govt.nz/for-business/equipment-used-for-weighing-and-measuring/search-the-approval-certificate-register/)
  + [Uniform test procedures](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/resources-and-training/uniform-test-procedures/)
  + [Online training modules](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/resources-and-training/online-training-modules/)

Cover page

A cover page must be included and should contain, but is not limited to, the following information:

* Name of document
* Name of organisation
* Version number
* Issue date
* Responsible person(s) (if applicable)
* Company logo (if applicable).

Example:

**Quality Management System  
  
ABC Limited  
  
Version number: V.2 – 2021/11/01**

Responsible person: John Smith

****

Table of contents

A table of contents must be included, which will assist the reader to navigate through the document. The below example follows the direction of the legislation. This section should be adapted to suit your organisation and the format of your Quality Management System.

**Example:**Table of contents

Section

1 Interpretation

2 Quality policy

3 Responsibility and authority

4 Management representation

5 Resources and personnel

6 Review of quality management system

7 Quality assurance systems

8 Corrective action

9 Internal quality audits

10 Training

11 Certification work

12 Working standards and test equipment

13 Inspection and testing status

14 Protection of equipment

***SECTION 1***

***Interpretation***

**NOTE:** The below definitions are the minimum that should be included and, depending on the accreditation categories being applied for and / or the scope of work being undertaken, it may be that this section requires expansion. Where additional terms are included, please use the definitions provided in the Act and the Regulations in the first instance or alternatively those that appear on the Trading Standards website Glossary page:

<https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/glossary/>

**Example:**

1.0 Interpretation

**Act** means the Weights and Measures Act 1987 and all amendments.

**Certification work** means—

(a) The examination and testing of measuring equipment,

(b) The stamping of measuring equipment, and

(c) The issuing of certificates of accuracy.

**Client Manager** means the Trading Standards Officer who is the single point of contact for the applicant / accredited organisation.

**COA** means a certificate of accuracy issued to complying weighing or measuring equipment.

**Management representative** means the person nominated in accordance with Schedule 7, Clause 4 of the Regulations.

**MOV** means a mark of verification issued to complying weighing or measuring equipment.

**Non-compliance**, in relation to any weighing or measuring equipment, means the failure of that equipment to comply with the requirements of the Act or Regulations; and “non-complying” has a corresponding meaning.

**Operations**, in relation to an accredited person, means the operations of that accredited person as they relate to the exercise or performance, by that accredited person, of the powers, duties, and functions of an accredited person under the Act or Regulations.

**Quality Management System** means a system of operation for exercising or performing the powers, functions and duties of an Accredited Person.

**Regulations** means the Weights and Measures Regulations 1999 and all amendments.

**Verification** means applying the Mark of Verification (MOV) as specified in the Weights and Measures Act 1987.

**Weighing or measuring equipment** means weights, measures, and weighing or measuring instruments.

***SECTION 2***

***QUALITY POLICY***

***In this Section the applicant is required:***

***To define a policy statement which indicates what is the company’s mission, with regard to quality assurance and how it is applied in their business activities.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 2: Quality Policy**   1. Every accredited person must define, in a written document, the policy of that accredited person in relation to quality as it relates to the operations of that accredited person. 2. Without limiting sub clause (1), every written policy on quality must define -    1. The accredited person's commitment to quality; and    2. The objectives of the accredited person as they relate to the attainment of quality. 3. Every accredited person must ensure that the accredited person's policy on quality is understood, implemented, and maintained at all levels of that accredited person's operations. |

**Example:**

2.0 Quality policy

**Contents**

**Purpose 2.1**

**Policy statement 2.2**

**Status declaration 2.3**

**2.1 Purpose**

To define a policy statement, which indicates what the organisation’s mission is, with regard to quality assurance and how it is applied in their business activities.

**2.2 Policy statement**

It is the policy of \*ENTER ORGANISATION NAME\* to provide a quality service that meets the continuing needs and expectations of our customers. To attain this objective, it is necessary that all activities that can influence the quality of our service are carried out in a systematic and appropriate way.

In this policy statement “quality” means:

All of the work produced and all the documentation generated from the accreditation scheme will conform to the requirements and procedures set out in this Quality Management System.

\*ENTER ORGANISATION NAME\*will ensure that persons who can influence the quality of services provided to our customers be familiar with; understand and strictly adhere to this Quality Management System.

\*ENTER ORGANISATION NAME\* accreditation category(ies) is/are:

- \*ENTER EACH ACCREDITATION CATEGORY – SUB-CATEGORY\*,

- \*ENTER EACH ACCREDITATION CATEGORY – SUB-CATEGORY\*.

\*ENTER ORGANISATION NAME\*will ensure continuous quality improvement by:

* Undertaking relevant training programmes
* Familiarisation with this Quality Management System and associated documentation
* Support and commitment from management
* Providing a good working environment
* Completing internal quality audits
* Reviewing the Quality Management System
* Checking certification work.

\*ENTER ORGANISATION NAME\* management is committed to lead and support the development, implementation and maintenance of this Quality Management System to benefit all our staff and customers.

Managing Director name:

Signed: Date:

**2.3 Status declaration**

**NOTE:** The status declaration in the Quality Management System must follow the below format, as prescribed in the Weights and Measures Regulations 1999.

\*ENTER ORGANISATION NAME\* will at all times operate a Quality Management System that complies with the requirements set out in Schedule 7 of the Regulations; and is not:

(for a natural person)

(i) a bankrupt who has not obtained a final order of discharge, or whose order of discharge has been suspended for a term not yet expired, or is subject to a condition not yet fulfilled; or

(ii) a person to whom an order made under section 299 of the Insolvency Act 2006 applies; or

(iii) a person who is subject to a property order made under section 30 or section 31 of the Protection of Personal and Property Rights Act 1988; or

(iv) [*Revoked*]

(v) a person who is disqualified under section 383 of the Companies Act 1993 from being a director of a company; or

(vi) a person in respect of whom a composition or arrangement with that person's creditors is in force

(for a legal person)

1. insolvent; or
2. being wound up; or
3. in liquidation; or
4. in receivership; or
5. subject to statutory management under the Corporations (Investigation and Management) Act 1989

Trading Standard (TS) will be informed of any convictions under Regulation 17 (2) (c) of the Regulations.

Details of every conviction (if any) under the Act or the Regulations of the applicant and, where the applicant is not a natural person, of every natural person whom the applicant proposes will exercise or perform the powers, duties, and function of an accredited person on behalf of the applicant, including-

1. the offence of which the person was convicted:
2. the date and place of the convictions and;
3. the penalty imposed.

Managing Director name:

Signed: Date:

***SECTION 3***

***RESPONSIBILITIES AND AUTHORITY***

***In this Section the applicant is required:***

***To outline the responsibilities and authority of all persons involved with accreditation work.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 3: Responsibility and Authority**  Every accredited person must define, in a written document, -  a) The responsibilities and authority of each person who is employed or engaged by that accredited person to carry out any duties in relation to the operations of that accredited person; and  b) The relationship between each such person and every other person so employed or engaged by that accredited person. |

**Example:**

3.0 Responsibility and authority

**Contents**

**Purpose 3.1**

**Accredited Persons 3.2**

**Duties 3.3**

**Declining 3.4**

**Procedures 3.5**

**Management Representative 3.6**

**Organisation chart 3.7**

**3.1 Purpose**

To outline the responsibilities and authority of all persons involved with accreditation work and the relationship between each such person and every other relevant person so employed or engaged by \*ENTER ORGANISATION NAME\*.

* 1. **Accredited Persons**

Accredited Persons are under a duty to, and responsible for:

* Stamping or affixing a 'Mark of Verification'
* Issuing a 'Certificate of Accuracy'
* Declining to stamp with a 'Mark of Verification'
* Declining to issue a 'Certificate of Accuracy'.
  1. **Duties**

Accredited Persons must take the following steps before applying a Mark of Verification \*ENTER REFERENCE TO SPECIFIC FORM\* or issuing a Certificate of Accuracy \*ENTER REFERENCE TO SPECIFIC FORM\*:

* Examine the instrument and find that it:
  + Complies with the requirements detailed in the Certificate of Approval
  + Complies with the requirements of the Regulations
  + Complies with any applicable requirements provided by the Trading Standards [Technical Policies](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/technical-policies/)
  + Is complete
  + Is suitable to withstand the wear and tear of its intended use
  + Will not facilitate fraud, and
* Test the instrument in accordance with an accredited organisation’s test procedures and record all errors to determine if they are within the required Maximum Permissible Errors (MPE).

**NOTE:** If a weighing or measuring instrument is marked with a Mark of Verification or issued with a Certificate of Accuracy when the weighing or measuring instrument does not meet the above criteria, this may constitute an offence against the Accredited Person under Section 32(fa) of the Weights and Measures Act 1987.

* 1. **Declining**

Accredited Persons should decline to stamp with a Mark of Verification or decline to issue a Certificate of Accuracy when the instrument is found not to be complying with the above requirements.

When an Accredited Person declines to stamp with a Mark of Verification or declines to issue a Certificate of Accuracy, there is a legal obligation to issue a Notice of Non-Compliance \*ENTER REFERENCE TO SPECIFIC FORM\*.

Accredited Persons must take the following steps when issuing a Notice of Non-Compliance:

* Identify the non-compliance(s)
* Provide the person in charge of the equipment with a hard copy of the Notice of Non-Compliance immediately or, when the person in charge is not available, attach the Notice of Non-Compliance to the instrument
* Advise the person in charge of the equipment that continued use of the instrument may be in breach of the Act or Regulations, and
* Within seven working days from the date the Notice of Non-Compliance was issued, a copy of the Notice of Non-Compliance and associated test sheet is to be received by the Trading Standards Client Manager.
  1. **Procedures**

**NOTE:** This section, as well as outlining various procedures, also needs to reference where the technical and certification procedures are kept within the Quality Management System e.g., “see Appendix A” or “see Technical Procedures Manual”

An Accredited Person is the only person allowed to carry out accreditation duties and will strictly follow the certification work procedures laid down in this Quality Management System. The standard of workmanship expected of an Accredited Person is that which affirms and upholds the company’s Quality Policy.

An Accredited Person is accountable to the Management Representative on all matters relating to the accreditation function of the organisation.

The testing and technical procedures are set out in \*ENTER RELEVANT REFERENCE HERE\*.

* 1. **Management Representative**

The Management Representative is responsible for ensuring that the Quality Management System and associated documentation are maintained and kept current.

Please refer to Section 4 ‘Management Representation’ for the responsibilities and authority of a Management Representative.

* 1. **Organisational chart**

**NOTE:** There is no requirement to include individuals’ names in the organisational chart. The chart simply needs to illustrate all accrediation related positions and the heirarchy / how they relate to each other.

***SECTION 4***

***MANAGEMENT REPRESENTATION***

***In this Section the applicant is required:***

***To outline the responsibility and authority of the Management Representative, in relation to the accreditation function.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**  **Section 4: Management Representation**   1. Every accredited person must nominate a member of that accredited person's staff to be that accredited person's management representative. 2. The management representative's responsibilities must include responsibility for ensuring that the requirements of the Act and these regulations, as they relate to the operations of the accredited person, are complied with |

**Example:**

4.0 Management representation

**Contents**

**Purpose 4.1**

**Appointment and knowledge statement 4.2**

**Responsibilities and authority 4.3**

* 1. **Purpose**

To outline the responsibility and authority of the Management Representative, in relation to the accreditation function.

* 1. **Appointment and knowledge statement**

\*ENTER NAME OF MANAGING DIRECTOR\* of \*ENTER ORGANISATION NAME\* endorses the appointment of \*ENTER MANAGEMENT REPRESENTATIVE NAME\*, \*ENTER POSITION TITLE\*, as Management Representative.

\*ENTER MANAGEMENT REPRESENTATIVE NAME\* as Management Representative will be fully responsible for maintaining the accreditation function of \*ENTER ORGANISATION NAME\* , as it applies to the categories of accreditation as listed in our Letter of Accreditation.

\*ENTER MANAGEMENT REPRESENTATIVE NAME\* has the competencies required to carry out the Management Representative role, full understanding of the categories \*ENTER ORGANISATION NAME\* is accredited for and full knowledge of the relevant parts of the Act and Regulations.

\*ENTER MANAGEMENT REPRESENTATIVE NAME\* has my full backing and commitment to ensure that this company meets its regulatory obligations as stated in the Weights and Measures Act and Regulations; and will conform to the requirements of Trading Standards.

Managing Director name:

Signed: Date:

* 1. **Responsibilities and authority**

The responsibilities of the Management Representative include, but are not limited to:

* Complete and submit application forms when required
* Monitor the expiry date of the Letter of Accreditation
* To immediately notify their Trading Standards Client Manager whenever an accredited individual is to be voluntarily removed from the Letter of Accreditation, i.e. their employment ceases or role changes
* Ensure applicants are suitably trained and existing accredited individuals maintain competencies
* Develop, maintain and monitor the [Surveillance Plan](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/maintaining-your-accreditation/surveillance-plan/), once approved by Trading Standards Client Manager
* Facilitate and plan the observations of the accredited individuals with the Trading Standards Client Manager
* Ensure that [Working Standards](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/maintaining-your-accreditation/working-standards/) are maintained and have current verification reports issued by Trading Standards
* Have a full understanding of the Quality Management System
* Ensure the Quality Management System is complete and current
* Ensure that the accredited individuals follow procedures, as set out in the Quality Management System
* Ensure that checks of certification work are completed
* Ensure corrective actions are resolved
* Ensure that internal audits are completed
* Ensure that an annual review of the Quality Management System is completed
* Have knowledge of, and introduce where necessary, all Technical Policies issued by Trading Standards
* Maintain a strong understanding of their duties and responsibilities as an Accredited Person
* In a timely manner, respond to and action any requests made by Trading Standards

***SECTION 5***

***RESOURCES AND PERSONNEL***

***In this Section the applicant is required:***

***To identify and record all the working standards and resources used for certification work.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**  **Section 5: Resources and Personnel**  Every accredited person must define, in a written document, -  a) The resources that will be used in the accredited person's operations; and  b) The procedures to be followed to ensure that those operations are carried out by competent personnel. |

**Example:**

5.0 Resources and personnel

**Contents**

**Purpose 5.1**

**Working standards 5.2**

**Accredited Persons 5.3**

**Reference documents 5.4**

**Resources for certification work 5.5**

**Competency 5.6**

* 1. **Purpose**

To identify and record all the working standards and resources used for certification work.

* 1. **Working standards**

The location(s) of where the working standards are kept needs to be listed and identified as does the type of standard (measure or mass or both where applicable).

List of working standards (mass and / or volume measures)

(or \*ENTER RELEVANT REFERENCE HERE\*.)

|  |  |  |
| --- | --- | --- |
| Mass/Measures | Identification | Location |
| 20kg (M1) | 1 to 20 incl. | Head office, 123 Anystreet, Anytown |
|  |  |  |
|  |  |  |
| 20 litres | ABC | Petone office, 123 Anystreet, Petone |
|  |  |  |
|  |  |  |

List of weighing or measuring equipment

(or \*ENTER RELEVANT REFERENCE HERE\*.)

|  |  |  |
| --- | --- | --- |
| Make | Model | Serial Number |
| Sartorius | xyz | 123 |
|  |  |  |

* 1. **Accredited Persons**

**NOTE:** There are two options here: 1. Reference the current Letter of Accreditation, or 2. Set out a table with the details below. If option 1 is selected, a current version of the Letter of Accreditation must be held by the organisation at all times and include reference to where the hard / digital copy is stored. If option 2 is selected, the table must be updated whenever changes are made to the individual(s) accredited under the organisation and a copy of the updated Quality Management System submitted to TS for approval.

Refer to Letter of Accreditation [INSERT LOCATION]

OR;

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **AP identifier** | **Branch / Location** | **Category** | **Sub-category** |
| Peter Pan | 7.1 | Christchurch | Weighing instruments Class III | Maximum capacity ≤ 300 kg |
| Percy Jackson | 7.2 | Auckland | Measuring instruments Class 0.5 | Measuring systems for milk |

* 1. **Reference Documents**

Weights and Measures Act and Regulations

* [Weights and Measures Act 1987](http://www.legislation.govt.nz/act/public/1987/0015/latest/versions.aspx)
* [Weights and Measures Regulations 1999](http://www.legislation.govt.nz/regulation/public/1999/0373/latest/DLM301528.html)

[Approval Certificates](https://tradingstandardsnz.filebound.co.nz/public/search)

Training manuals/documents

Trading Standards website

* [For accredited persons](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/)
* [Technical policies](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/technical-policies/)
* [Approval certificate register](https://trademeasurement.tradingstandards.govt.nz/for-business/equipment-used-for-weighing-and-measuring/search-the-approval-certificate-register/)
* [Uniform test procedures](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/resources-and-training/uniform-test-procedures/)
* [Online training modules](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/resources-and-training/online-training-modules/)
  1. **Resources for certification work**

Certification labels/forms

Verification Reports for Working Standards

Seals

Sealing wire

Relevant tools

Test sheets

Test / technical procedures

Prescribed safety equipment.

* 1. **Competency**

Only Accredited Person(s) will carry out certification work. To do this the systems and procedures documented in this Quality Management System and associated documents will be strictly adhered to. Accredited person(s) work will be randomly checked/audited by the Management Representative or a nominated trained individual to determine compliance with this document and all regulatory requirements.

*Refer to Section 7 ‘Quality Assurance Systems’ for checks on certification work.*

***SECTION 6***

***REVIEW OF QUALITY MANAGEMENT SYSTEM***

***In this Section the applicant is required:***

***To outline the procedures that enables the Quality Management System to be reviewed at regular intervals in order to evaluate its continuing effectiveness and suitability.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**  **Section 6: Review of Quality Management System**   1. Every accredited person must ensure that the quality management system of that accredited person is reviewed, at regular intervals, in order to ensure its continuing suitability and effectiveness. 2. Every accredited person must ensure that adequate records are maintained of every review carried out in accordance with subclause (1) in relation to that accredited person's quality management system. |

**Example:**

6.0 Review of Quality Management System

**Contents**

**Purpose 6.1**

**Procedures 6.2**

**Findings 6.3**

* 1. **Purpose**

The Quality Management System and associated documentation shall be reviewed at regular intervals, not exceeding 12 months, or more often if required, to determine their continuing suitability and effectiveness.

Review of the Quality Management System is a necessary aspect of its successful implementation and development.

**6.2** **Procedures**

As per Section 4 of the Quality Management System, it is the responsibility of the Management Representative to ensure the reviews are completed.

The review can be carried out either by the Management Representative or a person(s) nominated by the Management Representative.

The review of the Quality Management System will be carried out using \*ENTER REFERENCE TO SPECIFIC FORM\*. The review will determine the suitability and effectiveness of Quality Management System by addressing all the elements of Schedule 7, which this Quality Management System must comply with.

This process of review will consider, but not limited to, the following:

* Testing procedures
* Feedback from customer and technicians
* Customer complaints
* Corrective Action Requests
* Internal audits
* Other relevant documentation

Any changes to the Quality Management System and associated documentation will be made by and / or approved by the Management Representative, then sent to the Trading Standards Client Manager for approval, prior to them being used by an Accredited Person.

* 1. **Findings**

Areas identified that need attention will be recorded on \*ENTER REFERENCE TO SPECIFIC FORM\*.

Details of any corrective actions required, and the review records will be kept on file for a minimum of 5 years.

Findings from the review and any actions that may arise will be completed within agreed timelines and signed off by the Management Representative.

***SECTION 7***

***QUALITY ASSURANCE SYSTEMS***

***In this Section the applicant is required:***

***To outline the procedures on how to implement an effective Quality Assurance system in relation to certification work and the checking of certification work, and how to implement effective document control procedures.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 7: Quality Assurance Systems**  1 Every accredited person must establish and maintain an effective quality assurance system in relation to -  a) Certification work; and  b) The checking of certification work.  2 Every such quality assurance system must include the maintenance of a written document outlining -  a) The procedures to be followed in carrying out certification work; and  b) The standard of workmanship to be attained; and  c) The records to be kept by personnel carrying out certification work.  3 The procedures referred to in sub clause (2) (a) of this clause -  a) Must be approved by the management representative before they are implemented by the accredited person; and  b) Must be reviewed from time to time by the management representative in order to ensure their continuing suitability and effectiveness.   1. Every accredited person shall establish document control procedures sufficient to ensure that personnel carrying out certification work do so in accordance with the written document referred to in sub clause (2) of this clause that is for the time being in force in relation to that accredited person's operations. |

**Example:**

7.0 Quality assurance systems

**Contents**

**Purpose 7.1**

**Procedures 7.2**

**Document control 7.3**

**Changes to the Quality Management System 7.4**

* 1. **Purpose**

To outline the procedures for an effective quality assurance system in relation to certification work, the checking of certification work, and effective document control procedures.

**NOTE**: Where an organisation only has a single accredited individual undertaking work, the Quality Management System must provide for someone other than the accredited individual to undertake checks on certification work. This person must have sufficient knowledge to understand if the requirements of the certification work have been met.

**7.2 Procedures**

1. A high standard of workmanship will be attained and maintained by all accredited individuals, following the test procedures for certification work, as documented in the \*ENTER REFERENCE TO SPECIFIC DOCUMENT\*, and recording the test results on the relevant test sheet \*ENTER REFERENCE TO SPECIFIC FORM\*.
2. Only accredited individuals are allowed to carry out certification work and only for the categories that they have been accredited for
3. Checks of certification work documents and personnel carrying out certification work will be carried out by the Management Representative and / or person(s) nominated by the Management Representative at intervals not exceeding 12 months or more often, if required. Checks of certification work carried out by the Management Representative will be carried out by a competent person.
4. The checking of certification work is recorded in the \*ENTER REFERENCE TO SPECIFIC FORM\*
5. Any changes to the Quality Management System and associated documentation will be approved by the Management Representative, then sent to the Trading Standards Client Manager for approval, prior to them being used by an Accredited Persons (r*efer to Section 6 of this manual*).

**7.3 Document control**

1. Amendments made to the Quality Management System and associated documentation (there should be a master list of all documents contained or referenced within the Quality Management System and this will need to be maintained) is recorded in the \*ENTER REFERENCE TO SPECIFIC FORM\*
2. Control of certification work records is documented in Section 11 of this Quality Management System
3. All records will be kept for a minimum of 5 years
4. Management Representative has the overall responsibility for the control of all associated quality records (*Refer to Section 4 of this manual).*

**7.4 Changes to the Quality Management System**

When changes are made to the Quality Management System and / or associated documentation the changes shall be implemented and overseen by the Management Representative and then must be approved by the Trading Standards Client Manager before being shared with the relevant persons.

The details of the changes and related instructions must be shared with the relevant persons. This must be done as soon as possible after the changes have been approved by the Trading Standards Client Manager.

\*ENTER REFERENCE TO SPECIFIC FORM\* shall accompany the changed documents. This form shall clearly show:

1. Section and / or sub-section to be changed
2. Action(s) to be taken e.g., remove, amend, replace or add
3. Version number
4. Issue date
5. Reason for / nature of change, if relevant
6. Total number of pages changed.

Upon receipt of changed documents, the Quality Management System holder shall immediately:

1. Review the proposed changes
2. If accepted, update the Quality Management System issued
3. Remove / delete any invalid and / or obsolete page(s)
4. Sign the \*ENTER REFERENCE TO SPECIFIC FORM\* in the appropriate place
5. Return one copy of \*ENTER REFERENCE TO SPECIFIC FORM\*to the Management Representative for filing
6. Send a signed copy of the amended section(s) of the Quality Management System and associated documentation to the Trading Standards Client Manager.

**NOTE:** Amended documents are to be supplied to the Trading Standards Client Manager in an editable format with changes highlighted; either highlighting the new text and strikethrough the old text, or track changes and comments may be used. Approved changes must be published in a format that cannot be edited.

***SECTION 8***

***CORRECTIVE ACTION***

***In this Section the applicant is required:***

***To outline the procedures on how to investigate and eliminate the cause of any non-compliance of any weighing or measuring equipment, where that non-compliance occurs during the currency of a Certificate of Accuracy issued in respect of that equipment.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 8: Corrective Action**  1 Every accredited person must establish and maintain procedures -   * 1. For investigating the cause of the non-compliance of any measuring equipment, where that non-compliance occurs during the currency of any certificate of accuracy issued, in respect of that equipment, by or on behalf of that accredited person; and   2. For formulating and implementing any corrective action necessary to prevent the recurrence of any such non-compliance; and   3. For the application of controls to ensure -   4. That such corrective action is taken; and   5. That such corrective action is effective; and   6. For implementing and documenting any changes to certification work procedures, where those changes result from such corrective action; and   7. For analysing the operations of the accredited person (including certification work procedures, quality assurance records, and service reports), and customer complaints, in order to detect and eliminate potential causes of such non-compliance.   2 Every accredited person shall ensure that the procedures referred to in sub clause (1) of this clause are defined in a written document. |

**Example:**

8.0 Corrective action

**Contents**

**Purpose 8.1**

**General 8.2**

**Procedures 8.3**

**Root cause analysis 8.4**

**Monitoring of corrective actions 8.5**

**Preventative action 8.6**

* 1. **Purpose**

To outline the procedures on when a corrective action should be raised in relation to non-compliance and / or how to investigate and eliminate the cause of a non-compliance of any measuring equipment, where that non-compliance occurs during the currency of the Certificate of Accuracy issued for that equipment.

**NOTE**: Non-compliances raised by Trading Standards are excluded from this procedure, as the Client Manager will oversee the process and the actions that are to be taken by the Management Representative.

* 1. **General**

There is a requirement to establish and maintain procedures for investigating the cause of non-compliance, determine the root cause and to minimise the risk of the non-compliance re-occurring.

Corrective actions may arise because of, but not limited to, the following:

1. Customer complaint
2. Certification work completed by an Accredited Person
3. A Notice of Non-compliance issued by an Accredited Person
4. Surveillance activities by Trading Standards
5. Checks on certification work by the Management Representative
6. A Quality Management System review
7. An internal audit
8. On recognition of a quality problem.
   1. **Procedures**

All corrective actions will be given urgent priority. All details are to be entered on the Corrective Action \*ENTER REFERENCE TO SPECIFIC FORM\*.

All corrective actions raised will have the following details recorded:

* The date issued
* The initiator
* Corrective Action report number
* Non-conformance details
* The agreed action
* The agreed timeline for completion
* The date the corrective action is completed
* All records will be kept for 5 years.

Any changes to certification work procedures or the Quality Management System resulting from a corrective action investigation will be documented and implemented.

The Management Representative will be informed of any non-compliance and responsible for seeing that it is investigated, and the appropriate action is taken to prevent it from re-occurring.

If the non-compliance affects the accuracy of a customer's equipment, \*ENTER ORGANISATION NAME\* will:

* Notify the customer in writing to cease using the equipment
* Take the necessary action to investigate the non-compliance
* Seek direction from customer before undertaking any further testing on the affected instrument.
  1. **Root cause analysis**

When a problem requiring corrective action becomes evident, the following actions must be considered to determine the root cause of the problem:

1. Discuss with relevant parties such as Accredited Persons, Trading Standards Client Manager, equipment owner
2. Review testing procedures
3. Review documents and certificates
4. Review the suitability of equipment
5. Check the accuracy of equipment
6. Check Trading Standards verification report certificates
7. Determine the appropriateness of staff training.

**8.5 Monitoring of corrective actions**

After a corrective action has been implemented, the Management Representative will monitor the results to ensure that the actions taken have been effective in overcoming the original problem and in preventing it from reoccurring.

**8.6 Preventative action**

Preventive action is a pro-active process to identify improvement opportunities.

The Quality Management System and associated documentation will be reviewed at intervals not exceeding 12 months, or more often, if required, by the Management Representative (*Refer to Section 6 of this manual*).

The purpose of these reviews will be to:

* Identify any potential source of non-compliance
* Identify any opportunities for improvement.

.

***SECTION 9***

***INTERNAL QUALITY AUDITS***

***In this Section the applicant is required:***

***To evaluate the continued application and effectiveness of the Quality Assurance System, and to determine if the documented procedures of the Quality Management System are carried out by the Accredited Person.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 9: Internal Quality Audits**  1) Every accredited person must establish and maintain procedures for the carrying out of internal quality audits -  a) To determine whether or not the operations of the accredited person are being carried out in accordance with the requirements laid down by that accredited person; and  b) To determine whether or not the quality assurance system established by that accredited person is effective.  2) Every accredited person must ensure that the procedures referred to in subclause (1) of this clause are defined in a written document.  3) Where an internal quality audit is carried out in respect of any of the operations of any accredited person, that accredited person must ensure -  a) That the findings of that audit are recorded in writing and brought to the attention of the personnel responsible for those operations; and  b) That timely corrective action is taken to remedy any deficiencies revealed by the audit. |

**Example:**

9.0 Internal quality audits

**Contents**

**Purpose 9.1**

**Procedure 9.2**

**Non-compliance 9.3**

* 1. **Purpose**

To evaluate the continued application and effectiveness of the Quality Management System, and to determine if documented procedures are carried out correctly by Accredited Persons.

* 1. **Procedure**

Internal audits will be carried out in conjunction with checks on certification work:

* At intervals not exceeding 12 months or more often if required
* When a corrective action is raised
* When advised of a non-compliance.

The audit will be:

* Planned and organised by the Management Representative
* Carried out by an auditor; either a nominated competent person or the Management Representative.

The auditor will:

* Use the Internal Audit Check Sheet \*ENTER REFERENCE TO SPECIFIC FORM\*
* Record all findings in writing
* Send a copy to the Management Representative.

The objective of the audit will be to ensure that:

* The operations of \*ENTER ORGANISATION NAME\*and its accredited individuals comply with the requirements of the Quality Management System and associated documentation.
* The Quality Management System is effective and fit for its intended purpose.

The internal audit check sheet is to be filed and kept for a period of a minimum of 5 years.

* 1. **Non-compliance**

When an internal audit identifies a non-compliance, a corrective action\*ENTER REFERENCE TO SPECIFIC FORM\* will be raised *(Refer to Section 8 of this manual).*

***SECTION 10***

***TRAINING***

***In this Section the applicant is required:***

***To outline procedures on how and who will provide the training required for Accredited Persons who carry out certification work, and how the ongoing required standard of workmanship will be maintained.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 10: Training**  1) Every accredited person must ensure that personnel undertaking certification work have appropriate training and experience.   1. Every accredited person must ensure that written records of any training given by that accredited person are made and maintained. |

**Example:**

10.0 Training

**Contents**

**Purpose 10.1**

**Procedure 10.2**

**Knowledge required to carrying out certification work 10.3**

**Experience of Accredited Persons 10.4**

* 1. **Purpose**

To outline procedures on how and who will provide the required training to personnel to carry out certification work, and how ongoing required standard of workmanship will be maintained by \*ENTER ORGANISATION NAME\*.

* 1. **Procedure**

The Management Representative is the person responsible for ensuring that personnel have the appropriate training and experience before undertaking certification work.

Personnel undergoing training will always be supervised and are the responsibility of the Management Representative or a nominated person.

Training will be complete when the Management Representative or nominated person is satisfied that the personnel is conversant with all the documented procedures and has the knowledge and skills to meet the required standard. Applicants are required to complete the relevant Trading Standards online training modules.

**10.3** **Knowledge required for carrying out certification work**

* Completion of the Trading Standards Online Training Modules
* Ability to test equipment to requirements of the Weights and Measures Act 1987, Weights and Measures Regulations 1987 and Trading Standards Uniform Test Procedures and Technical Policies
* Ability to maintain accurate records
* Ability to understand and apply legislation
* Good communication and analytical skills
* Ability to prepare certificates and reports when required.

The Management Representative is responsible for the maintenance of all training records.

The training records will be recorded on \*ENTER REFERENCE TO SPECIFIC FORM\*and will include the date, the type of training that was undertaken and when the competency was confirmed.

Copies of training records will be held by the Management Representative for a minimum of 5 years.

**10.4** **Experience of Accredited Persons**

Please refer to \*ENTER QUALITY MANAGEMENT SYSTEM SECTION OR EXTERNAL DOCUMENT REFERENCE\* for the work experience of all Accredited Persons.

***SECTION 11***

***CERTIFICATION WORK***

***In this Section the applicant is required:***

***To outline procedures on how certification work will be strictly adhered to and how adequate records will be kept and maintained in relation to that certification work.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 11: Certification work**   1. Every accredited person must ensure that the procedures established by that accredited person for the carrying out of certification work are followed by that accredited person's personnel.   2) Every accredited person must ensure that adequate records are made and maintained in relation to certification work carried out by that accredited person's personnel.  3) Without limiting the generality of sub clause (2) of this clause, -  a) The records referred to in that sub clause must include, in relation to each stage of the examination and testing process undertaken in respect of any measuring equipment, the results of the examination and testing at each such stage; and  b) Where any measuring equipment is examined and tested over a period of more than one day, the results of the examination and testing undertaken on each separate day in that period must be recorded on that day; and  c) The records referred to in that sub clause must be legible and be readily identifiable with the measuring equipment to which they relate; and  d) All records relating to certification work carried out in relation to any particular measuring equipment must be retained by an accredited person for a period of not less than five years. |

**Example:**

11.0 Certification work

**Contents**

**Purpose 11.1**

**Procedures 11.2**

* 1. **Purpose**

To outline procedures on how certification work will be strictly adhered to, and that adequate record will be kept and maintained in relation to certification work.

* 1. **Procedures**

The testing procedures for the categories accredited are located in \*INSERT LOCATION HERE\*.

The documented test procedures will be strictly adhered to by all Accredited Persons.

All certification work will be performed:

* Using currently verified and undamaged working standards
* Using the correct documented test procedure for the equipment being examined, and
* By an individual accredited to test that category or class of instrument.

If certification work cannot be completed in one day; the certification work will be re-commenced on the next day, and a new test sheet will be generated and completed.

The following documents will be used:

* Certificate of Accuracy in label in label form (Form 7, Regulation 22(1)(e)) \*ENTER REFERENCE TO SPECIFIC FORM\*
* Certificate of Accuracy not in label form (Form 9, Regulation 22(3)(b)) \*ENTER REFERENCE TO SPECIFIC FORM\*
* Notice of non-compliance (Form 5, Regulation 89) \*ENTER REFERENCE TO SPECIFIC FORM\*
* Certification test records. \*ENTER REFERENCE TO SPECIFIC FORM\*
* Relevant working standards verification report(s).

Procedures for issuing a Certificate of Accuracy and a Notice of Non-Compliance are in Section 3 of this Quality Management System.

Testing records for certification work will meet all the requirements listed in Technical Policy [TS-002 Information required on an accredited person test sheet](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/technical-policies/ts002-information-required-on-an-accredited-persons-test-sheet/). The record will be legible and readily identifiable with the measuring equipment to which they relate. The records will include the results of the examination and testing at each stage.

All certification work records will be retained on file for a minimum of 5 years.

***SECTION 12***

***WORKING STANDARDS AND TEST EQUIPMENT***

***In this Section the applicant is required:***

***To outline the procedures on how the accuracy of Working Standards and test equipment used by an Accredited Person for certification work will be monitored and maintained.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**    **Section 12: Working Standards and Test Equipment**  1) Every accredited person -  a) Must establish and maintain procedures for ensuring that the standards of measurement and other equipment used in certification work carried out by that accredited person's personnel are sufficiently accurate to enable that work to be carried out satisfactorily; and  b) Must ensure that records are maintained of the verification of such standards of measurement and such equipment, and of the results of that verification.  2) Every accredited person must ensure that the procedures referred to in sub clause (1) (a) of this clause are defined in a written document. |

**Example:**

12.0 Working standards and test equipment.

**Contents**

**Purpose 12.1**

**Procedures and control 12.2**

**12.1 Purpose**

To outline procedures on how the controls and accuracy of standards and test equipment used by an AP for certification work will be monitored and maintained.

**12.2** **Procedures and control**

The Management Representative is responsible for monitoring and ensuring that all working standards used by Accredited Persons remain accurate and currently verified.

*Refer to the* [*Working Standards*](https://trademeasurement.tradingstandards.govt.nz/for-accredited-persons/maintaining-your-accreditation/working-standards/) *page on the Trading Standards website*.

**NOTE:** When a standard is submitted for verification to a Trading Standards laboratory, it must be marked with its nominal value, a legible identification number / code, be clean, free from defect and, in the case of volumetric measures, free from fuel and contaminants. Where it does not meet our requirements, the laboratory may decline to verify the standard.

* All working standards must be verified annually or sooner, if required
* Accredited Persons will store and transport standards in their care in such a manner to avoid damage
* Only currently verified standards will be used for certification work
* Verification reports will be kept for a minimum of 5 years
* Designated areas for storage of working standards may be identified
* Damaged or expired standards or test equipment will be quarantined and clearly marked as non-compliant
* Where any damage that may affect the metrological characteristics of the working standard is observed by an Accredited Person, this must be reported to the Management Representative and the Corrective Action procedures in Section 8 are implemented.

**NOTE:** All working standards must be listed in the Quality Management Systems of an accredited organisation. If any working standards are added, removed, altered and / or replaced, the Quality Management Systems must be updated to reflect the change(s) made and submitted to Trading Standards for approval as soon as practicable.

***SECTION 13***

***INSPECTION AND TEST STATUS***

***In this Section the applicant is required:***

***To outline procedures that will identify the status of any equipment through the testing and examination process whilst under the control of an AP.***

|  |
| --- |
| Ref: Weights & Measures Regulations 1999, Schedule 7    Section 13: Inspection and Testing Status  1) Every accredited person must ensure that while measuring equipment is under the control of the personnel of that accredited person, adequate procedures are adopted (whether by means of markings, stamps, tags, labels, physical location, or other suitable means) to identify the stage that the equipment has reached in the examination and testing process, in order to ensure that the equipment is stamped or, as the case may be, a certificate of accuracy is issued in respect of the equipment, only on the basis of examination and testing actually carried out on that equipment.  2) Every accredited person must ensure that where measuring equipment is released from the control of the personnel of that accredited person, a record is kept of the identity of the person authorising that release.   1. Every accredited person must ensure that non-complying measuring equipment under the control of the personnel of the accredited person is clearly identified as such and, so far as practicable, is kept separate from other measuring equipment. |

**Example:**

13.0 Inspection and testing status.

**Contents**

**Purpose 13.1**

**Receiving of equipment for testing in the workshop 13.2**

**Storage 13.3**

**Identification of equipment for testing 13.4**

**Testing equipment 13.5**

**Releasing of equipment 13.6**

**NOTE:** The below is only an example and it may be appropriate that more detailed information appears in this section. What is set out below is the minimum information required.

* 1. **Purpose**

To outline procedures that will identify equipment through the testing and examination process whilst under the control of an Accredited Person.

**13.2 Receiving of equipment for testing in the workshop**

All incoming equipment for verification and/or certification will be processed as follows:

* If found to be complying, it will be stamped, or a certificate of accuracy issued as applicable, or
* If found to be non-complying, it must be clearly marked as such and kept separate as far as practicable from other measuring equipment.

**13.3** **Storage**

The receiving and storage of equipment for certification shall be such that no deterioration or damage will occur.

All methods of handling the equipment are such that damage to, or deterioration of the product will be prevented by:

* Storing equipment in the designated test area
* All tests carried out in the workshop will strictly follow the documented procedures as set out in this Quality Management System and associated documentation
* All equipment received for certification is further protected by being stored in secure premises
* Equipment will only be collected by the submitter or their representative.

**13.4 Identification of equipment for testing**

All equipment received for testing will be identified by:

* Recording details on \*ENTER REFERENCE TO SPECIFIC FORM\* test form which will identify the stage the equipment has reached in the certification process. The test sheet will remain with equipment submitted for testing, until the completion of the test record
* Tags and labels will be used to identify the status of equipment under test.

**13.5 Testing equipment**

* Complying equipment will be identified by stamping with a mark of verification and issuing with a certificate of accuracy \*ENTER REFERENCE TO SPECIFIC FORM\*
* Non-complying equipment will be identified by issuing a notice of non-compliance. \*ENTER REFERENCE TO SPECIFIC FORM\* in accordance with section 3.5
* Non-complying equipment will be kept separate from complying equipment.
* In the field, where practicable, non-complying equipment will be removed from site / location (owner’s permission required).

**13.6 Releasing of equipment**

The identification of the Accredited Person who performed the certification work or issued the notice of non-compliance and released the equipment from their control will be recorded on the test record.

**SECTION 14**

**PROTECTION OF EQUIPMENT**

***In this Section the applicant is required:***

***To outline the procedures that will adequately protect measuring equipment (whilst under the control of an accredited person) during delivery and installation.***

|  |
| --- |
| **Ref: Weights & Measures Regulations 1999, Schedule 7**  **Section 14: Protection of Equipment**  Every accredited person must ensure that all measuring equipment under that accredited person's control is adequately protected against loss or damage. |

**Example:**

14.0 Protection of equipment

**Contents**

**Purpose 14.1**

**Protection in workshop 14.2**

**Transportation of measuring equipment 14.3**

**14.1 Purpose**

To outline the procedures that will adequately protect measuring equipment (whilst under the control of an Accredited Person) during delivery and installation.

**14.2 Protection in workshop**

Measuring equipment will be kept in designated area, which will minimise loss and / or damage.

**14.3 Transportation of measuring equipment**

Measuring equipment will be transported in a manner which will minimise loss / damage and will be appropriately packed and labelled to maintain the integrity of the equipment.

# Procedures / check sheets guidelines:

Appendices 1 and 2 below are two examples of the forms that are to be created as part of the QMS. Other forms will be required to accompany the QMS, which are, but not limited to, the following:

* QMS review check sheet
* Internal audit check sheet
* Corrective action form
* Certification work check sheet
* Test procedure(s)
* Test sheet(s)
* Mark of Verification (crimp pliers / seals / labels)
* Certificate of Accuracy (in label form)
* Certificate of Accuracy (not in label form)
* Notice of Non-compliance.

**Appendix 1: Quality Management System Review Check Sheet**

**Quality Management System Review**

|  |  |
| --- | --- |
| Date of Quality Management System review: |  |
| Quality Management System Review held at: |  |
| Conducted by:  (Include the names and responsibilities of individuals involved) |  |
| Reason for the Quality Management System review: |  |
| Documents reviewed and assessed: | ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ……………………………………………………………… |
| Topic(s) discussed:  Details of the agreed work required:  Completion timeline; date(s) and by whom:  Further comments and observations:  Action signed off by: | ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  ………………………………………………………………  Name:  Designation:  Date: |

**Appendix 2: Internal Audit Check Sheet**

**Internal Audit Checklist**

Auditor (name): Date of Audit:

Position: Location:

Previous Audit Check Date:

Categories of Accreditation:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Reason for audit: | | | | |
| If the reason for the audit is a CAR then: |  |  | Date CAR sent to MR: |  |
| Date CAR sent to TS: |  |
| Has previous CAR(s) been signed off? | Yes | Reason / justification if **NOT**: | |
| No |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section** | **Element Checks** | **Yes** | **No** | **Comments** |
| **Cover page** | * Does the front cover state the owner and current version of the QMS? |  |  |  |
| **Table of contents** | * Does the Table of contents page reflect the content of the QMS? |  |  |  |
| **1** | * Is the Interpretation section up to date and relevant? |  |  |  |
| **2** | * Is the Quality Policy understood, implemented, and maintained? |  |  |  |
| **3** | * Are all staff aware of their responsibility and authority? |  |  |  |
| **4** | * Does the Management Representative understand their responsibilities? |  |  |  |
| **5** | * Are all Accredited Person’s aware of their accreditation categories? * Do all working standards have a current verification report? * Are verification reports legible and complete? * Are all forms, certificates and test reports the current version? * Are the Act & Regulations accessible and current? * Are all reference documents current and correctly filed? |  |  |  |
| **6** | * Has the QMS review been carried out? * Have the QMS review records been maintained? * Are all amendments updated correctly and timely in the QMS? |  |  |  |
| **7** | * Have checks on certification work been carried out? * Do test procedures need reviewing or modifying? |  |  |  |
| **8** | * Has a notice of non-compliance been issued for non-complying equipment? * Was the non-compliance procedure followed? * Has there been an investigation on the non-compliance carried out, if required? * Are all related procedures effective? * Have all corrective actions been issued and signed off? |  |  |  |
| **9** | * Has the Internal Audit been carried out, if required? * Have any Corrective Action’s been received? * Have they been completed and signed off? |  |  |  |
| **10** | * Has training been provided to the staff? * Have the training records been updated? * Do any APs require further training? |  |  |  |
| **11** | * Are all test procedures effective? * Is all certification work recorded correctly on the correct forms and worksheets? * Are all forms and worksheets related to certification work the current version? * Are all certification work records filed correctly? * Is the Certificate of Accuracy being issued correctly? * Have all APs been working within the scope of their accreditation categories? |  |  |  |
| **12** | * Is the procedure for the custody and care of accredited persons working standards and equipment followed? |  |  |  |
| **13** | * Is every customer’s equipment identified with the test status? * Has all non-complying equipment been separated from other equipment and identified as to its status? |  |  |  |
| **14** | * Has the procedure for ensuring that the equipment is protected against any damage during delivery been followed? * Is equipment re-checked for accuracy after installation? |  |  |  |
| **Appendices** | * Are all documents the current / approved version? |  |  |  |