

# The Steps To Certification

## Define Policy

The first milestone on the road to Quality Certification is the establishment of a Quality Policy. Establishment does not merely mean drafting; it involves approval and, most importantly, promulgation.

Provide each employee with a copy. Arrange for managers and supervisors to brief their staff on what it means. Place copies in areas where they are all likely to see it (canteen noticeboards, foyers and near to pay-windows are good spots). Encourage everyone to start thinking about how the policy affects *their* jobs.

## Identify Natural Systems

The next step is to define the systems that have grown up within the organisation, those “natural systems” that have been found most effective.

By defining the important processes and the key areas of responsibility, the company will have defined the outline of the system.

## Establish Objectives

For each of the key activities within the system, there are policies and objectives. These are probably undocumented and ill-defined, but they exist.

They are the things the company’s management want to achieve out of the system - the things that drive the outcomes. It may also be necessary to analyse the reason some of the policies are in place, by asking “Why?” until the “desired outcome” is identified.

Examples would be:

☞ A policy that requires all orders to be signed by the Managing Director may be a throwback to when the people doing the purchasing could not be relied upon to stay within budget.

☞ Responsibilities for process planning delegated for supervisor level, because the company wants to place responsibility in the hands of shopfloor personnel.

## Identify Changes

There are two types of changes that will be required:

☞ **From the Standard:** Most activities will be altered as a result of new requirements imposed by the Standard. In many areas, the changes will be minor, but in others they will be significant. There will also be some areas that will be entirely new: common examples are management review, calibration, auditing and document control.

☞ **From Internal Needs:** This is an ideal opportunity to identify activities that no longer meet the company’s goals - either through deterioration of performance, or through a change in company goals - and improve them.

It can also be an opportunity to reengineer the entire management system, reviewing and revising the overall company processes, their objectives and achievement.

Having identified the changes required by the Standard, the company should define policies in response to them.

## Plan System Development

At this stage, the company should decide how it will manage the development and implementation of the system. There are three basic options:

☞ Appoint an individual to take responsibility. This is very efficient, but may result in the system being seen to be that person’s, rather than the company’s,

If we do not change our direction we are likely to end up where we are headed.

and may also impose the largest part of the workload on that person.

☞ Drive the development and implementation through a small selected committee of managers. This is almost as efficient as the first option, and distributes the workload and the ownership much better. It may still, however, result in a focus of specialists that can be seen to be somewhat exclusive.

☞ Assign the responsibility to the normal management team. This is least efficient, in that it uses the largest group, but has the greatest distribution of ownership and knowledge.

## Document Quality Manual

The Quality Manual should compile:

☞ The company's desired management system *as it will work*

☞ The company's own policies and objectives for that system

☞ The company's response to the additional requirements imposed by the Standard.

In addition, the Manual should nominate a manager to be directly responsible for implementing the Quality System. This is the Management Representative, as defined by the Standards. It should also nominate the key managers responsible for implementation of its various provisions.

For ease of maintenance, it is best if the Quality Manual is made up of separate policies, each of which is separately controlled. This minimises the requirement to reissue the entire document when changes are made.

## Define & Implement Procedures

Start to discuss the Quality Manual with employees. The effects of this will be twofold:

☞ Firstly, to expose the employees to the objectives on which the Manual is based,

and the means by which it is intended to achieve them,

☞ Secondly, to get their cooperation and contributions into the mechanics of how the objectives will be accomplished.

The systems and operating procedures should **not** be prepared by the Quality Department, but by the department (or departments) directly involved, and in consultation with those who are actually carrying out the task.

It is advisable that a preliminary version of these documents is circulated for comment, to allow for fine tuning. Do not expect to get it right the first time, even if the procedures have been thoroughly reviewed.

As each procedure is prepared and released, it should be immediately implemented. It will still be necessary to train the personnel involved in what is expected of them, and this will take time and patience.

To manage the process of organisational change, it is advisable to implement and train staff in the new procedures as they are written. This ensures that only one new procedure is being implemented at any one time.

## Certification Document Review

At this point, the Certification Agency can be brought in to review the documentation system.

This will involve a desk review of the Quality Manual (which can be arranged immediately on its completion), with comments on whether the requirements of the Standard have been adequately addressed.

On completion of the procedures, the auditors will conduct a review of them, and the extent to which they comply with the Standard. This will normally include an assessment of the

Golf is an ineffectual attempt to put an elusive ball into an obscure hole with implements ill-adapted to the purpose. (W. Wilson)

document control system, but not of the implementation of the remainder of the system.

## **Review & Audit**

After implementation of the entire system, start to audit it. It is a good idea to begin the progressive, on-going internal audits during the implementation process, by reviewing the procedures already implemented. It is wise, however, to leave some months between full implementation and first audit.

The audits should be conducted on a schedule that spreads the workload over the entire year, by scheduling audits on different sections of the operation successively.

## **Certification Audit**

The company is now ready for the final Certification Audit.

This is a process of reviewing the compliance of the full documented system with the

Standard, and seeking evidence that the system is in fact implemented (eg, records, labels, tags, etc).

Where deficiencies are found, discussion with the auditors can identify their response to possible solutions to establish the appropriate corrective action. If possible, this can be carried out during the audit, and the deficiency cancelled out by the end, so that a re-audit may not be needed.

Note: With all Certification contact, there is no obligation on the company to accept the Agency's or auditor's interpretation of the Standard, where that requires action the company feels to be undesirable. In any such event, the auditor should be challenged by asking "Show us in the Standard where it says that is necessary." Furthermore, remember that the Agency is only a supplier. The same provisions apply to relations with the Agency as to any other supplier: select them on their ability to meet the company's needs.

In God we trust - all others require a review.