



Standards Council of Canada  
Conseil canadien des normes

**MANAGEMENT SYSTEMS BULLETIN NO. 8**  
**OCTOBER 2005**

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*IN THIS ISSUE*

<b>1.0 New/Revised Program Policies/Criteria.....</b>	Page 1
<b>2.0 Items for Implementation/Information....</b>	Page 4
<b>3.0 Meetings ....</b>	Page 6
<b>4.0 Sector Updates....</b>	Page 8
<b>5.0 Program Statistics.....</b>	Page 13
<b>6.0 Administrative items ....</b>	Page 14

**1.0 NEW/REVISED PROGRAM CRITERIA/POLICIES**

**1.1. CAN-P-1518, clause 3.1.9 Withdrawn (Use of certified auditors for EMS certification/registration activities)**

The Standards Council of Canada (SCC) Environmental Management Systems Accreditation Program's (EMSAP) requirement document entitled CAN-P-1518: *Conditions and Procedures for Accreditation of Organizations Registering Environmental Management Systems*, clause 3.1.9 was withdrawn 2005-06-23. This requirement has been in use since SCC initiated the program in 1996. The criteria was as follows:

“The registrar shall ensure that its assessment team and audit team leader, either in-house or subcontracted, meet the requirements of and are certified auditors in accordance with ISO 14012, by accredited or recognized national or/and international auditor certification organizations.”

In May 2005, the SCC made a decision to remove this requirement. All accredited EMS certification/registration bodies (CRBs) are to note that this program requirement no longer applies. During accreditation audit activities, the SCC requires CRBs to demonstrate the effective implementation of their processes for competence of auditors and other EMS assessment personnel. EMSAP criteria will be updated shortly to remove the requirement.

**1.2. SCC Natural Disaster Policy**

Natural disasters, such as hurricanes, floods and earthquakes, have a devastating effect on many people and organizations in the affected areas. Travel into the areas affected by these events may be restricted for some time. Following the occurrence of a natural disaster, SCC anticipates that accredited CRBs with clients in the affected area may not be able to conduct scheduled oversight activities. In the event of a natural disaster and when scheduled oversight cannot take place, CRBs shall:

- have a documented policy or plan in place on how they will address those affected clients and communicate this plan to them;
- amend client oversight plans, on a case by case basis, and in accordance with CRB procedures,
- ensure any deviation with accreditation requirements and CRB procedures is justified and documented;
- re-engage surveillance/recertification activities, according to CRB oversight plans, when access to the area is re-established.

CRBs should contact the SCC should they require further information regarding the policy.

### **1.3 Definition of Non-conformities and Effect on Certification Decision**

At the September IAF Technical Committee meeting an issue was put forward for consideration related to the definition of non-conformities and the effect on the certification decision. It was noted that there are significant variations in the CRB interpretation of what constitutes a non-conformity and how non-conformities are recorded by CRBs during the conduct of registration audits. It was found that some CRBs will only cite non-conformities when there is an “absence of, or failure to implement and maintain, one or more quality management system requirements, or a situation which would, on the basis of available objective evidence, raise significant doubt as to the quality of what the organization is supplying” (IAF GD 2 G 1.3.1). Members noted that non-conformity is defined in ISO 9000:2000 as “non-fulfillment of a requirement”. As such, when a requirement is not being fulfilled, some CRBs have been citing this as an observation or opportunity for improvement instead of a non-conformity.

The IAF Technical Committee agreed that non-conformities should be cited by CRB’s when a requirement is not fulfilled and that CRBs should have a process in place for dealing with all identified non-conformities. In addition, the IAF TC clarified that the definition of non-conformity found in IAF GD 2 clause G 1.3.1 relates only to those specific non-conformities that affect the certification decision.

### **1.4 Cross Frontier Accreditation**

In September 2004, the SCC issued a policy on the implementation of the IAF Guidance on Cross Frontier Accreditation (IAF GD 3:2003). At the same time, CRBs were requested to complete a survey to identify Critical locations for the purposes of scheduling oversight activities in accordance with IAF GD 3:2003. Note the definition of critical locations is found under clause 2.2.1 of IAF GD 3. CRB locations should be identified as critical if any of the defined processes are performed at that location.

The SCC policy for the implementation of the IAF Guidance on Cross Frontier is available on the publications section of the SCC website or by contacting [ms@scc.ca](mailto:ms@scc.ca).

#### *Cross Frontier: New Procedures*

Following the issuance of the SCC policy on Cross Frontier accreditation, several processes were developed to support SCC oversight activities of those organizations affected by the policy and the critical location survey form was updated. In June 2005, a policy and procedure was released to support the SCC review of other Accreditation Body oversight results in lieu of performing required audit activities. A procedure for the conduct of joint audit activities is currently being piloted and expected to be finalized shortly.

At the beginning of each fiscal year (April 1 – March 31), the SCC will post the CRB audit programme under each CRBs area on Sitescape. The audit programme is developed by the SCC and based on information submitted by the CRB in the Critical Location form and Corporate Profile. The audit programme will identify all of the required oversight that the SCC plans to perform to satisfy continued or reaccreditation.

When the CRB receives notification that the audit programme has been posted, the CRB should review the audit programme and notify the SCC if they have any concerns with the identified oversight activities. If the CRB wants a joint audit conducted or the SCC to consider another AB oversight results in lieu of performing an identified oversight activity, they are required to formally request modification to the audit programme in accordance with the defined process and using the designated form.

When requesting modification to the audit program, the CRB is required to provide several items of information including: identification of requested modification (joint audit/acceptance of other AB oversight results), the coordinates of the other AB contact, type of activity etc.

When the SCC has approved the modification to the audit program, the CRB will be notified and a revised audit programme will be posted to Sitescape. Oversight activities, including joint audits and SCC consideration of another AB oversight results will then be initiated in accordance with procedure.

CRB's are reminded that the SCC will only consider other AB oversight results if they are accompanied by a completed form "Request for SCC consideration of other AB Oversight Results in Lieu of performing required oversight" and submitted within the timelines identified in the procedure.

CRBs are required to update the Critical Location Survey form within thirty (30) days under the following circumstances:

- When the CRB issues an SCC accredited registration certificate in a country not identified in the current SCC Scope of Accreditation; or
- Whenever it has no remaining SCC accredited certificates in a country previously listed; or,
- Whenever there is a new office or other change affecting a critical location.

Copies of the new procedures and supporting forms are available on Sitescape or by contacting [ms@scc.ca](mailto:ms@scc.ca). SCC auditors will continue to verify CRB identification of critical locations during annual oversight activity.

## **1.5 IAF GD 2 (IAF Guidance on the application of ISO/IEC Guide 62)**

At the September 2005 IAF meetings, members approved new guidance on surveillance of temporary sites, advanced surveillance and reassessment procedures and computer assisted audit techniques. IAF GD 2 will be updated to include this guidance and is expected to be published by December, 2005. SCC accredited certification/registration bodies will be required to implement the new guidance 12 months after issuance.

## 2.0 ITEMS FOR IMPLEMENTATION/INFORMATION

### 2.1 SCC Mark of Accreditation / IAF MLA Mark

In October 2005, the SCC will unveil a new mark of accreditation for use by accredited CRBs and their registered clients. Each accredited CRB will be provided with an electronic copy of the new mark for use on accredited registration certificates, letterhead, websites and other items. Prior to using the new mark, CRBs will be required to sign a new trademark licensing agreement and have their clients sign a sub-licensing agreement.

At the same time, CRBs will be issued with an electronic copy of the IAF MLA mark and an agreement to support its use. Note that in accordance with Resolution 19 from the October 2005 IAF Plenary, the IAF MLA mark is only applicable to accredited registration certificates issued to ISO 9001:2000 and ISO 14001:2004 (e.g. the mark cannot be applied to registrations issued under the CMDCAS, TL 9000, AS 9000, QS 9000 and TE 9000 programs).

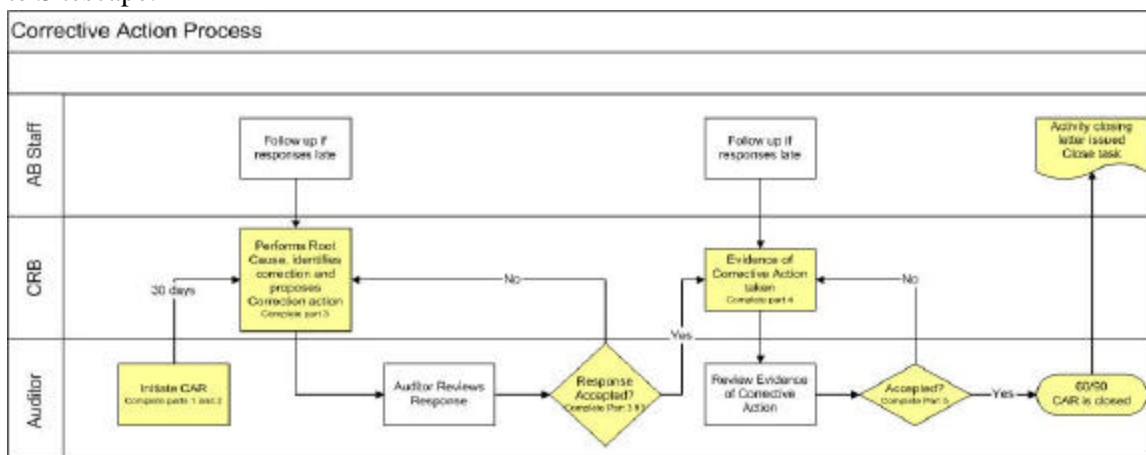
After 2006-12-01, CRBs and their clients licensed to use the mark will no longer be permitted to print documentation bearing the old SCC mark. However, CRBs and their registered clients can use old stock until it is depleted. A more detailed policy on the use of the two marks will accompany their release.

### 2.2 Sitescape

On 2005-09-01, the SCC implemented a web based audit documentation system using Sitescape. Sitescape also hosts the Canadian Conformity Assessment Conference (CCAC) site and SCC procedures and policies are accessible through the CCAC area. During the month of August, an operation manual was sent to SCC accredited and applicant CRBs, and each CRB was provided with orientation and training on the Sitescape system. CRBs should now all be using Sitescape to manage documentation related to audit activities. Please note that duplicate information should not be sent by e-mail. Questions regarding Sitescape operations or requests for additional training should be sent to ms@scc.ca.

### 2.3 CAR resolution process

In May 2005, the SCC introduced a new CAR resolution process. SCC auditors received training on the process and a presentation was given to CRBs at the June 2005 IAAR and CMDCAS Forum meetings. To clarify the process, the SCC has prepared a flowchart depicting the Corrective Action Process. Note the yellow boxes indicate when the document should be posted to Sitescape.



When a CAR or review of a CRB response is posted to Sitescape, the CRB will receive automatic notification via e-mail. When replying to a CAR, CRBs should download the word document, revise as applicable, embed any supporting attachments using the “insert/object” function found in word, and repost using the “reply” function which is found on the right hand side of the screen. The SCC and auditor will receive automatic notification that the item has been posted by the CRB.

## **2.4 ISO Survey of Certifications – 2004**

The latest ISO Survey, The ISO Survey of Certifications – 2004, which includes data up to 2004-12-31, has been finalized and is available by contacting [sales@iso.org](mailto:sales@iso.org) at a price of CHF 48. An abridged version of the survey is posted on ISO Online, [www.iso.org](http://www.iso.org), and the corresponding press release which provides a rapid overview of the survey is available at the following link: <http://www.iso.org/iso/en/commcentre/pressreleases/2005/Ref967.html>

## **2.5 ISO 17021**

Following an appeal by the American National Standards Institute (ANSI), the ISO Technical Management Board in June 2005 decided that “requiring ISO 9001 conformity through normative reference is not appropriate, but that a recommendation to use ISO 9001 in support of a management system can be made in ISO/IEC 17021”.

Following this decision, the SCC, as the Canadian member to CASCO Working Group 21, announced that the ISO/IEC DIS 2 - 17021 consultation has been launched among CASCO members for a two-month period from 2005-09-08 to 2005-11-08. SCC is requesting that stakeholders, including CRBs and Management Systems auditors, provide the following information:

- A) Should the SCC, on behalf of its stakeholders, vote yes or no regarding ISO/IEC DIS 2 - 17021 proceeding to a FDIS level? If no, please provide your rationale for such a suggested vote.
- B) Comments regarding ISO/IEC DIS 2 - 17021 using the ISO comment template (note: comments will only be accepted using this template).

Copies of ISO/IEC DIS 2 – 17021 and the commenting template are available by contacting Mr. Stefan Janhager at [sjanhager@scc.ca](mailto:sjanhager@scc.ca). Feedback is requested to be provided to Mr. Janhager no later than the 2005-10-28. SCC will review and provide the Canadian position to the CASCO secretariat by 2005-11-08.

## **2.6 Applicability of Cross Frontier Accreditation**

At the September IAF Plenary meeting, members agreed that the principles of the IAF Cross Frontier Accreditation Policy will be applicable to all fields of accredited certification offered under IAF membership.

## **2.7 ISO 9001 Auditing Resources**

Several modules have been developed by ISO/TC 176 Subcommittee 2 to assist users in implementing the ISO 9000:2000 series. These modules include:

- Frequently Asked Questions (FAQs)
- Guidance on 'Outsourced Processes'
- Guidance on ISO 9001:2000 clause 1.2 "Application"
- Guidance on the Documentation Requirements of ISO 9001:2000
- Guide to the Terminology used in ISO 9000:2000 family of Standards
- Guidance on the Concept and Use of the Process Approach for management systems

The modules are available free of charge at [www.iso.org](http://www.iso.org).

In addition, the Auditing Practices Group (APG) has established an on-line resource of papers and presentations on auditing QMS'. The ideas, examples and explanations found on the website reflect the process-based approach for auditing the requirements of ISO 9001:2000. CRB's should review this website and ensure their auditors are aware of this resource. The APG website and papers can be found at the following URL:

<http://isotc.iso.org/livelink/livelink/fetch/2000/2122/138402/138403/3541460/customview.html?func=ll&objId=3541460&objAction=browse&sort=name>

## **2.8 ISO 19011**

The work of the IAF Task Force developing guidance on the application of ISO 19011 is continuing. ISO/CASCO W/G 21 is also beginning to develop a second part to ISO 17021 which will include requirements related to third party certification auditing such as the management of audits and audit team competence. Part 2 of ISO 17021 will consider the work of the IAF Task Force developing guidance on the application of ISO 19011 as well as the Accreditation Audit Practices Group.

## **3.0 MEETINGS**

The following provides an overview of meetings of interest to Registration bodies and auditors related to the Management Systems program.

### **3.1 IAF Meetings**

The 19<sup>th</sup> IAF General Assembly was held September 17/19, 2005. The IAF Technical Committee met September 14/15, 2005. Both meetings were held in Auckland, New Zealand.

#### **IAF Membership**

INN (National Institute for Standardization in Chile) and OLAS (Luxembourg Office of Accreditation) were admitted into IAF, bringing membership to 44 Accreditation Body members. Two new observer members were also admitted (SFSO – World Food Safety Organization and EASC – the Euro-Asian Council for Standardization, Metrology and Certification). IPC (the International Personnel Certification Association) was admitted as an Association member.

OAA (Argentina) was admitted into the IAF MLA for EMS and Product. PCA (Poland) has been accepted for membership in the QMS, EMS and Product MLA's. The total number of IAF MLA signatories for QMS is 38 (36 Accreditation bodies, 2 Regional Groups) and for EMS is 31 (29 Accreditation bodies and 2 regional groups).

## Election of Directors

The following new directors were elected:

- Mr. Guenther Beer (BDI) representing the Industry and User Association members for a three year term. Mr. Beer replaces Mr. Dale Mischynski who has resigned.
- Mr. Pierre Sallé (IAAR) representing Certification/Registration/Inspection body members for a three year term. Mr. Sallé replaces Mr. Sandy Sutherland whose term concluded at the 19th General Assembly.

## IAF Technical Committee

The following provides an overview of decisions made by the IAF TC at their meeting:

- A task force has been established to maintain a log of key TC decisions;
- A new working group has been formed on PEFC which will address the exchange of information between Accreditation Bodies and industry involved with forest management and chain of custody issues;
- The working group on auditing regulatory compliance has been suspended.

## IAF Technical Committee Current Projects

The IAF Technical Committee is working on the following projects of interest to CRB's:

- IAF Guidance on the application of ISO/IEC 17011 *Conformity assessment – General Requirements for accreditation bodies accrediting conformity assessment bodies*;
- IAF Guidance on the application of ISO/IEC 17021 *Conformity assessment -- Requirements for bodies providing audit and certification of management systems*;
- Advanced surveillance and reassessment procedures and computer assisted audit techniques for inclusion in IAF GD 6;
- IAF Guidance on the application of ISO 19011 for certification and accreditation;
- Development of a decision tree for determination of CRB critical locations.

**Upcoming Meetings:** The IAF Executive Committee and Technical Committee will meet in Rome, Italy 2006-03-14/15. The 20<sup>th</sup> IAF General Assembly will be hosted by EMA in Cancun, Mexico 2006-11-06 to 14. JAS-ANZ and NATA (Australia) have been accepted as the hosts for the 2007 IAF and ILAC meetings.

## 3.2 CASCO

The International Organization for Standardization (ISO) Committee on Conformity Assessment (ISO/CASCO), one of the four (4) policy development committees of ISO, produces ISO/IEC Standards and Guides which provide information and general requirements on conformity assessment procedures for use by conformity assessment stakeholders (e.g., laboratories, inspection bodies, accreditation bodies, management systems registration bodies and product certification bodies).

The following provides an overview of projects of interest that CASCO is currently addressing:

<b><i>Common elements of conformity assessment</i></b>	<b>ISO PAS 17005</b> Will be released for a 2nd CASCO member vote by June 2005.	Conformity assessment - Use of management systems in conformity assessment - Principles and requirements
<b><i>Writing specifications for use in conformity assessment</i></b>	<b>ISO/IEC 17007</b> New Work Item Proposal for revision of ISO/IEC Guide 7 released for ballot to CASCO members on 2005-05-03.	Conformity assessment - Guidelines for drafting standards and specified requirements suitable for use

		for conformity assessment
<i>System certification</i>	<b>ISO/IEC 17021</b> [CASCO WG 21] Revision of Guide 62:1996 and ISO/IEC Guide 66:1999, with the new standard being applicable for audit and certification of all types of management system DIS vote approved on ISO side but not IEC side. Will be released for 5-month DIS2 ballot by June 2005	Conformity assessment - Requirements for bodies providing audit and certification of management systems
<i>Sector specific Greenhouse Gases</i>	<b>ISO 14065</b> [Joint CASCO-ISO/TC 207 WG 6] CD released for consultation on 2005-05-17.	Greenhouse gases - Requirements for validation and verification bodies for use in accreditation and other forms of recognition

The SCC also maintains a list of approved CASCO documents of interest to CRB's. This list is available by contacting Ms. Anneke Olvera at [aolvera@scc.ca](mailto:aolvera@scc.ca).

The Twenty-first (21<sup>st</sup>) Annual Meeting of ISO/CASCO will be held in Geneva (Switzerland) on 2005-11-18/19. The Canadian delegation will consist of Mr. Bill Cunningham (CGSB), Ms. Elva Nilsen (SCC) & Mr. Allan Wilson (SCC).

#### 4.0 SECTOR UPDATES

##### 4.1 **QS9000 AND TE Supplement**

The QS 9000 and TE 9000 programs continue to wind down, and registrations to QS 9000 are decreasing in anticipation of the 2006 cessation of the program.

##### **QS 9000 Interpretation**

On 2005-03-01, the IASG released revised requirements for CRB Resources and Accreditation Body witness audit frequency as follows:

1. An IATF qualified ISO/TS 16949:2002 CRB which is also an accredited QS 9000 CB is permitted to utilize a single resource, a TS 2 qualified individual that has, or did have, QS 9000 credentials, as the qualified individual to provide QS 9000 expertise and QS 9000 veto powers with regard to continuing QS 9000 certification.
2. The number of annual QS 9000 witness audits to be performed by the AB of the QS 9000 qualified CRB has been modified as follows:

Minimum Number of Annual:	QS 9000 Certificates in Force at Beginning of Calendar Year			
	1-30	31-100	101-250	251+
Office Assessments	1	1	1	1
Witness Assessments in 2005	1	1	2	3
Witness Assessments in 2006	0	1	2	2



## 4.2 CMDCAS

### HC CMDCAS RB Forum

The 6th CMDCAS HC RB Forum was held in person 2005-06-22/23 in Ottawa, ON Canada. The Agenda and minutes for the 6th HC CMDCAS RB Forum can be received by contacting Ms. Sophia Khan at Health Canada (Sophia\_Khan@hc-sc.gc.ca).

CRBs should note that participation in the HC CMDCAS RB Forum is mandatory and supports CRB maintenance of competency to operate in the CMDCAS program.

### New Form: F202

Since the last meeting, Health Canada has announced implementation of a new form “Submission of a new or modified quality management system certificate” (Form F202). The form is available at the following URL: [http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/f202\\_rev0\\_e.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/f202_rev0_e.html) (english) or [http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/f202\\_rev0\\_f.html](http://www.hc-sc.gc.ca/hpfb-dgpsa/tpd-dpt/f202_rev0_f.html) (french).

CRBs are requested to remind clients registered under the CMDCAS program to complete and submit form F202 to Health Canada after a new certificate has been issued.

### ISO 13485:2003 Transition Status

The following provides an update on the status of the ISO 13485:2003 transition to date:

Item	
Total Applicant and Qualified CMDCAS RB's	15
Number of Registration Bodies approved for ISO 13485:2003	15
Number of Registration Bodies who have completed ISO 13485:2003 witness audit	14
Number of ISO 13485:2003 witness audits to be performed	01

The SCC has updated the CMDCAS area of the website to include information related to the ISO 13485:2003 transition and a list of bodies that are approved to issue ISO 13485:2003 registration certificates. This information can be found at the following URL: [http://www.scc.ca/en/programs/iso\\_reg/iso\\_13485-2003.shtml](http://www.scc.ca/en/programs/iso_reg/iso_13485-2003.shtml).

CRBs are reminded that the Health Canada deadline for completion of upgrades to ISO 13485:2003 is March 15, 2006. CRBs should ensure their clients are aware that if they have not successfully transitioned to the new standard by that date, their medical device licenses are at risk for cancellation.

### GD 210

At the last CMDCAS Forum, a revised version of GD 210 was presented. Currently, Health Canada is updating its CMDCAS training program to reflect revisions and the second draft of GD 210 is in process. CRBs qualified under the CMDCAS program have been requested to provide comments. The next draft is anticipated to be presented to CRBs in 2006.

### Next Meeting

The next CMDCAS Forum scheduled to take place in December 2005 has been postponed. CRBs will be notified of the date of the next CMDCAS Forum anticipated to take place in person in June 2006.

### 4.3 Aerospace

The Americas Aerospace Quality Group (AAQG) Registrar Management Committee (RMC) met 2005-09-13/14 in Sao Jose Dos Campos, Brazil. The International Aerospace Quality Group met 2005-10-02 to 07 in Montreal, Canada. At these meetings, several items of note were discussed as follows:

#### **Registration/Certification Certificates issued under the AAQG/IAQG Program**

At the IAQG meeting, it was decided that certificates issued under the program should contain the following wording: "The Certification has been performed in accordance with the IAQG ICOP Scheme Requirements for AS9104". Note the wording may change in the future.

#### **AS 91XY and AS 91XX**

The RMC is currently working on revisions to AIR 5493 (Auditor training and qualification requirements) and RMC 102 (Surveillance and oversight requirements). Once completed and approved in the America's sector, these documents will be put forward for approval at the IAQG level as AS 91XY and AS 91XX. Upon approval, a globally harmonized trilogy of requirements for the registration and accreditation process, surveillance and oversight process, and auditor qualification and training process will be in place.

#### **OASIS Database**

##### *Transfer Process*

In May 2005, the SAE OASIS Program Manager issued guidance on how a CRB should manage their data when a supplier chooses to transfer their certification from one CRB to another before the expiration of the certification. The guidance is as follows:

##### Original Issuing CRB:

1. At the point in time when the certification initially published is no longer valid for the supplier, it must be removed from OASIS. In many cases, this may be the surveillance target date. To accomplish this, all OASIS assessment entries (Initial, Recertification, Surveillance) for the applicable certification number should be changed to a "Withdrawn" status, using the Assessment-Modify application.
2. The certification fee for OASIS is a non-refundable fee. CRB's are still responsible for the associated OASIS entry fee that was invoiced for this certification entry.

##### New CRB:

1. The new CRB must enter the supplier data as a recertification and should note in the comment section the action taking place. The fee for this entry will be \$375.00 regardless of how much time is remaining on the original certification. For example, if a supplier chooses to select a new CRB to continue their existing certification with only one year left until the certificate expiration a \$375.00 fee will be charged. At the end of the year when it is time for the supplier to be recertified a new recertification fee will be accessed.

##### *Fees*

The fee for inputting initial registrations in the OASIS database is \$500.00USD. Upon recertification or transfer of a registration, the fee for inputting information in OASIS decreases to \$375.00USD. At this time, no change to the current fee structure is anticipated.

##### *Uploading of certificates*

Effective 2005-07-01, CRBs are required to upload an electronic copy of a certification/registration certificate to the OASIS database when Initial or Recertification

assessment information is entered, or when a change or addition is made to a supplier site record. Electronic copies of certificates should be in a .jpg or .pdf format and the English language.

**Next Meetings:** The next meetings of the RMC will be held 2006-01-30 2006-02-01 in Orlando, Florida and 2006-03-07 to 09 in Phoenix, Arizona. The next IAQG meeting will be held in San Diego, California 2006-04-03 to 07.

#### **4.4 Sustainable Forest Management Program**

Current forestry statistics regarding the Canadian SFM market can be found on the Certification Canada website (<http://www.CertificationCanada.org>) by clicking on the icon entitled "Certification Status and Intentions" or by going directly to <http://www.CertificationCanada.org/status.htm>.

#### **SFMP Transition**

SCC's qualified registration bodies have had their document reviews and required witness audits completed. As well, one applicant body is being assessed to the new CAN/CSA Z809 requirements. To date, SCC has qualified 4 registration bodies (QMI, KPMG PRI, PWC, ITS) to the SFMP. SCC is expecting additional qualifications to be processed by winter 2006.

#### **Ontario Ministry of Natural Resources (OMNR)**

Currently, SCC has a MOU with OMNR and is working on a joint program regarding SCC's EMS SFMP and OMNR's independent forestry audit program for license holders on Ontario Crown Land. Work is still being undertaken between SCC, OMNR, CSA, QMI, KPMG PRI and PWC to make this framework operational.

#### **PEFC**

The PEFC Canada Governing Board was accepted as a signatory member to the PEFC MRA in March 2005. The Canadian Governing Board is meeting on a regular basis and SCC's accredited registration bodies have a seat at the board elected by CCAC. As well, PEFC Canada's Governing Board has adopted the PEFC Chain of Custody document for Canada. This document shall be applied by accredited ISO/IEC Guide 65 product certification organizations. Further communications regarding this document will be provided shortly.

Canadian Standards Association and SCC are considering if SCC will become the signatory to the PEFC MRA on behalf of the PEFC Canada Governing Board. The main reason to support such a decision is that SCC oversees the national standards system and the accredited certification bodies who are required to implement the PEFC Mark etc. SCC will keep you posted regarding the outcome of this work.

Further information about the Mutual Recognition Arrangement and the SFM certification scheme at large can be found at <http://www.pefc.org/internet/html/>.

#### **4.3 Environmental Management Systems Hog Program**

In October, 2004 the Standards Council of Canada launched its new Environmental Management Systems Hog Operator Program (EMSHOP).

The Environmental Management Systems (EMS) Hog Operator Program uses the existing SCC EMS Accreditation Program as its foundation. Under the initiative, the SCC will qualify accredited EMS Registration Bodies (RBs) to register hog operators' EMS to the newly published Canadian Standard - CAN/CSA Z771 Environmental management systems for hog operations requirements. CAN/CSA Z771 was published by the Canadian Standards Association (CSA), and developed through consensus by a committee of affected stakeholders, including

representatives from the pork industry, federal and provincial governments, environmental groups and consumers. The standard, which provides a voluntary national framework for responsible environmental management of hog operations, was approved by the SCC as a National Standard of Canada in March 2004.

SCC has communicated this program to all SCC accredited registration bodies, the Canadian Pork Council, and the Governmental Bodies (Federal and Provincial). Currently, SCC has been contacted by several registration bodies interested in delivering the program. SCC has qualified one certification body to date. The potential certification market in Canada is about 15,000 producers and it is recognized that the standard can be applied in other countries. SCC will keep you posted on the development of this new program.

#### **4.4 Climate Change**

SCC continues to monitor the ISO TC 207 Working Group 5 and ISO TC 207 and CASCO regarding international standards:

- ISO/FDIS 14064-1: *Specifications with guidance at the organization level for qualification and reporting of greenhouse gas emissions and removals;*
- ISO/FDIS 14064-2: *Specifications with guidance at the project level for qualification, monitoring and reporting of greenhouse gas emission reductions or removal enhancement; and,*
- ISO/FDIS 14064-3: *Specifications with guidance for the validation and verification of greenhouse gas assertions.*

ISO's expected publication date for the above documents is March 2006.

The international standard for 3<sup>rd</sup> party conformity assessment bodies is:

- ISO CD 14065: *Greenhouse gases -- Requirements for greenhouse gas validation and verification bodies for use in accreditation or other forms of recognition.*

This international standard is expected to be completed by November 2006. However, the technical committee is trying to enhance the finalization of this document.

Given that the Kyoto protocol has been accepted by the UNFCCC members', the Canadian Government is preparing for its implementation. SCC is currently meeting with different stakeholders to seek opportunities to provide support to the Canadian Government initiative. Currently, it is expected that the government will use the national standards systems framework to support its mandate. SCC will keep you posted regarding the outcome of these discussions.

#### **4.7 ISO 22000**

ISO 22000, published on the 1 September 2005, is a new International Standard designed to ensure safe food supply chains worldwide. ISO 22000:2005 is the first in a family of standards that will include the following documents:

- ISO/TS 22004, *Food safety management systems – Guidance on the application of ISO 22000:2005;*
- ISO/TS 22003, *Food safety management systems – Requirements for bodies providing audit and certification of food safety management systems;*

- ISO 22005, *Traceability in the feed and food chain – General principles and guidance for system design and development.*

ISO/TC 34 - ISO/CASCO JWG 11 is currently undertaking the development work of ISO 22003. SCC will be seeking input from its accredited certification/registration bodies as this work proceeds. The Canadian contact persons for this international standards work is Dr. Albert Chambers, email: [afchambers@monachus.com](mailto:afchambers@monachus.com) and Stefan Janhager, SPO, SCC email: [sjanhager@scc.ca](mailto:sjanhager@scc.ca).

SCC is currently exploring the opportunity to set up an accreditation program for the implementation of the above standards. Please contact Stefan Janhager to express interest in this program.

## 5.0 PROGRAM STATISTICS

### 5.1 **Current Status FY 2005-2006**

<i>Number of clients</i>	<i>QMS</i>	<i>EMS</i>
Total Accredited RB's	21	8
Applications in process	2	1
Voluntary Withdrawals	0	1
Withdrawals	1	0
Total CMDCAS Qualified	15	N/A
CMDCAS applicants	0	N/A
CMDCAS Sector Withdrawal	1	N/A
Total TE 9000 Qualified	2	N/A
Total QS 9000 Qualified	3	N/A
Total TL 9000 Qualified	2	N/A
Total AS 9000 Qualified	0	N/A
Total SFMP Qualified	N/A	4
SFMP Applicants	N/A	1
EMSHOP Qualified	N/A	1
EMSHOP Applicants	N/A	0

### 3.1 **Total number of audits anticipated to be performed for 2005-2006**

	<b>On-site Audit activities</b>		<b>Witness Audit Activities</b>	
	<b>Head Office</b>	<b>Critical Locations</b>	<b>Linked to Head Office</b>	<b>Linked to Critical Location</b>
	27	28	53	3
<b>Total audit activities</b>	55		56	

### *Breakdown of audit methodology*

	Onsite total	Witness Audits
<b>SCC only</b>	34	46
<b>Joint with other AB</b>	6	2
<b>Review/Accept other AB report</b>	15	8
<b>Total audits</b>	55	56

## **6.0 ADMINISTRATIVE ITEMS**

### **6.1 Staffing in Conformity Assessment**

In August 2005, the Management Systems Program said goodbye to Melanie Einwechter and welcomed Ms. Claire O'Brien as our new Administrative Officer. Ms. O'Brien brings several years of administrative experience to the management systems division, and will provide additional resources to better serve our clients. Ms. O'Brien can be reached at the following coordinates: [cobrien@scc.ca](mailto:cobrien@scc.ca) or 613-238-3222 (x. 313).

### **6.2 MS Bulletins on the Web**

As a reminder, the MS Bulletin can now be accessed via the SCC website. A full library of English and French MS Bulletins has been uploaded at the following location: [http://www.scc.ca/en/programs/iso\\_reg/publications.shtml](http://www.scc.ca/en/programs/iso_reg/publications.shtml).

We appreciate all suggestions, feedback and questions. Kindly forward any comments, questions and/or suggestions to [ms@scc.ca](mailto:ms@scc.ca).