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| SMS / RMS Name and Contact Name: | Enter name of SMS or RMS and the name of the SMS or RMS scheme lead |

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| Risk assessment Outcome | High / Med / Low | Oversight Assessment Activities to be completed | Office Assessment |
| Date of risk Assessment | Day/Month/Year | Risk Assessment performed by (SMS) | Enter SMS Name |

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| Assessment Start Date: | Day/Month/Year |
| Assessment End Date: | Day/Month/Year |
| OASIS Number | Enter OASIS Number |
| Lead OP Assessor Name | First Name, Last Name  Assessment Team Role, Organization's Name |
| Other OP Assessor Names and Roles: | First Name, Last Name  Assessment Team Role, Organization's Name |
| General Conclusions, Remarks, and Recommendations: | Give a brief overview of how the assessment went |
| Opportunities for Improvements: | As applicable, identify number of OFIs; list all OFIs. |
| Non Conformance Summary: | As applicable, List NCR References and Grade |
| Submitted by: | First Name, Last Name |
| Date Submitted: | Day/Month/Year |

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| Pre-Assessment Questions (That’s questions that you can answer prior the assessment starting) |

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| **Item** | **1.1** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| (SMS Only - Has the SMS established RMS(s)? If yes, how does SMS manage RMS(s)? | | | | | | | 9104-001 Para 6.1.1  9104-001 Para 6.3.3 |
| **The SMS should have a process on how they manage RMS(s)**  **When one or more RMS are determined to be needed, there shall be:**  **a. a definition of the structure and interface established between the SMS and RMS;**  **b. an approval of any RMS operating within the SMS in accordance with applicable requirements; and**  **c. an acceptance of the voluntary suspension or withdrawal of a RMS.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **1.2** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does the SMS or RMS ensure that it is in compliance with IAQG published policies and Operating Management System (OMS) written rules and procedures that pertain to the ICOP scheme? | | | | | | | 9104-001 Para 6.1.2  9104-001 Para 6.3.2  9104-001 Para 6.3.3  9104-001 Para 6.4.3  9104-001 Para 6.4.4 |
| **The SMS or RMS should have a set of processes that map to ICOP scheme requirements and governance and controls that ensure compliance.**  **The SMS shall develop and implement processes to:**  **a. ensure conformity to the requirements of this standard in their sector;**  **b. report the status and activities of the SMS to the IAQG OPMT in accordance with IAQG OPMT requirements; and**  **c. determine if one or more RMS is needed as part of the SMS, including defining the geographic area of each RMS utilized.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **1.3** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| Has the IAQG OPMT appointed three IAQG member company representatives with voting rights and alternatives?  Note; Not applicable for RMS(s) | | | | | | | 9104-001 Para 6.1.2  9104-001 Para 6.2  9104-001 Para 6.3.2  9104-001 Para 6.4.3  9104-001 Para 6.4.4 |
| **The IAQG OPMT should have appointed IAQG member company representatives with voting rights and their alternatives. This should be documented within a recent IAQG meeting slides.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| Assessment Questions (That’s questions that you can only answer when you are carrying out the assessment) |

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| **Item** | **2.1** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does the SMS or RMS ensure that it is in compliance with local and national laws and anti-trust regulations?  Since the last assessment has there been any issues or concerns around non-compliance? | | | | | | | 9104-001 Para 5.1.1 |
| **The process for the management of compliance could be listed in a procedure or policy.**  **If there have been any issues or concerns around non-compliance follow start to finish. This should be managed and controlled.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.2** | **Office Assessment** | **Y** | **Activity Review** |  |  | **Reference(s)** |
| How does the SMS or RMS manage reported conduct that may adversely affect the integrity of the scheme?  Since the last assessment has the SMS or RMS received any reports that could adversely effect the integrity of the scheme? | | | | | | | 9104-001 Para 5.1.2 |
| **The process for the management of reported conduct that may adversely effect could be listed in a procedure or policy.**  **If applicable. Follow the report from start to finish. The report should be managed and controlled.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.3** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does SMS or RMS manage complaints generated from the ICOP scheme? | | | | | | | 9104-001 Para 5.2.3 |
| **If applicable. Review any complaints from start to finish. The complaint should be managed and controlled.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.4** | **Office Assessment** | **Y** | **Activity Review** |  |  | **Reference(s)** |
| Since the last assessment has the SMS or RMS received any auditor misconduct issues?  And  If applicable, has the SMS or RMS shared relevant documented information detailing the misconduct with the AAB responsible for the subject auditor’s AQMS authentication? | | | | | | | 9104-001 Para 5.1.3 |
| **If applicable, review the misconduct issue start to finish. The misconduct issue should be managed and controlled.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.5** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does SMS or RMS manage the ICOP scheme oversight process and associated activities, including the management and performance of oversight? | | | | | | | 9104-001 Para 5.2.1  9104-001 Para 5.2.2 |
| **You should review a suitable sample of office and witness assessments.**  **You should confirm that all applicable artefacts have been produced within required timescales.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.6** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does the SMS or RMS manage and retain documented information to the applicable ICOP scheme requirements? | | | | | | | 9104-001 Para 5.3.1  9104-001 Para 5.3.3  9104-001 Para 6.4.5 |
| **The SMS or RMS should manage and retain documented information to the applicable ICOP scheme requirements and the minimum retention period of 10 years.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.7** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does SMS or RMS make sure that access to documented information is available to the IAQG OPMT, SMS or RMS? | | | | | | | 9104-001 Para 5.3.2 |
| **All required ICOP scheme documented information is available to the IAQG OPMT, SMS or RMS.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.8** | **Office Assessment** | **Y** | **Activity Review** |  |  | **Reference(s)** |
| Have all voting and alternative members of the SMS or RMS completed an IAQG confidentiality agreement and conflict of interest declaration? | | | | | | | 9104-001 Para 6.2.2 |
| **Sample check members for evidence of agreements.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.9** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| Do all the voting and alterative members meet the ICOP scheme requirements? | | | | | | | 9104-001 Para 6.2.3  9104-001 Para 6.2.4 |
| **Check that no IAQG OPMT, SMS, or RMS members that have an employment relationship (direct or contractual) with an ICOP scheme**  **Each SMS and RMS (if applicable) shall be composed of the following:**  **a. representatives from the IAQG sector member companies or RMS, as voting members; and**  **b. other non-voting stakeholders that may include representatives from ABs, CBs, AABs, TPABs, interested parties (e.g., regulatory, customer, governmental agencies), and other invited organizations or persons, as necessary, to support the operations of the SMS.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.10** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How many times does SMS or RMS have meeting(s) each year? | | | | | | | 9104-001 Para 6.2.5 |
| **Look for evidence of the meeting.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.11** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| Does the SMS or RMS have processes in place to approve, suspend or withdraw auditors, training courses, AB(s), AAB(s) or TPAB(s)? | | | | | | | 9104-001 Para 6.3.4  9104-001 Para 6.4.3  9104-001 Para 6.4.4 |
| **The SMS or RMS should have processes in place to:**   * **Approve, suspend or withdraw AB(s), AAB(s) or TPAB(s)** * **Recommend the suspension or withdraw of CB(s),AQMS auditors, TP(s) or training courses and certified organization(s) for an AQMS standard** * **Review and recognize AB accreditation decisions.** * **Operate an effective oversight program** * **Manage appeals and complaints** * **Conduct reviews of the SMS or RMS activities for improvement and risk management** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.12** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does RMS / SMS report and review the status and activities to the SMS / IAQG OPMT?  Does this report summarize the complaints and / or appeals? | | | | | | | 9104-001 Para 6.3.5  9104-001 Para 6.3.6 |
| **Review recent report. Does the report reflect current RMS status?**  **The SMS or RMS should respectively produce an annual report to IAQG-OPMT that summarizes and reviews complaints and appeals**  An RMS shall report the status and activities of the RMS to the SMS | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

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| **Item** | **2.13** | **Office Assessment** | **Y** | **Activity Review** | **Y** |  | **Reference(s)** |
| How does SMS or RMS use the OASIS database as the repository for associated data / information & feedback? | | | | | | | 9104-001 Para 12.1  9104-001 Para 12.2 |
| **OASIS should contain all associated data / information.**  **Sample check OASIS feedback.** | | | | | | |
| **Assessment Evidence** | | | | | | | |
| Enter the answer here | | | | | | | |
| ( ) C ( ) NC ( ) NA ( ) NE -- ( ) Observation | | | | | | | |
| Assessment Result: (describe the NCR, OFI and / or Observation) | | | | | | | |

**Instructions for Completing Check Sheet:**

This check sheet shall be used for 9104-001 SMS or RMS office assessment and activity reviews. It may also be used for SMS or RMS special office assessments (e.g., follow-up).

It complements the oversight data input directly into OASIS and is to be entered as an attachment.

**Status Assessment Results:**

Document assessment results within the table as follows:

* **Conforming (C)** - The process records/evidence demonstrate effective implementation; process assessed and found acceptable.
* **Nonconforming (NC)** - The process records/evidence were assessed, and a nonconformity was identified.
* **Not Applicable (NA)** - The question is not applicable; record objective evidence in the “Assessment Evidence/Comments” column.

**Assessment Evidence / Comments:**

Include appropriate detail in the “Assessment Evidence/Comments” column to support the assessment results (e.g., information associated to the process assessed and records reviewed, NCR number, OFI).

Additional questions may be added, as deemed appropriate.

**Nonconformity Reports (Form D):**

NCRs (Form Ds) issued during the oversight by the OP Assessor are directly written in OASIS and shall be followed through OASIS.

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| **Document Revision History** | |
| **Revision Date** | **Description of change** |
| 18th April 2023 | New document issued |
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