



KALOS

CERTIFICATIONS

22601 N. 17th Ave, Suite 120
Phoenix AZ, 85027

Phone: (480) 486-8007

Email: info@kaloscertifications.com

Website: www.kaloscertifications.com

Kalos Procedure-01
Operations Manual: Part B

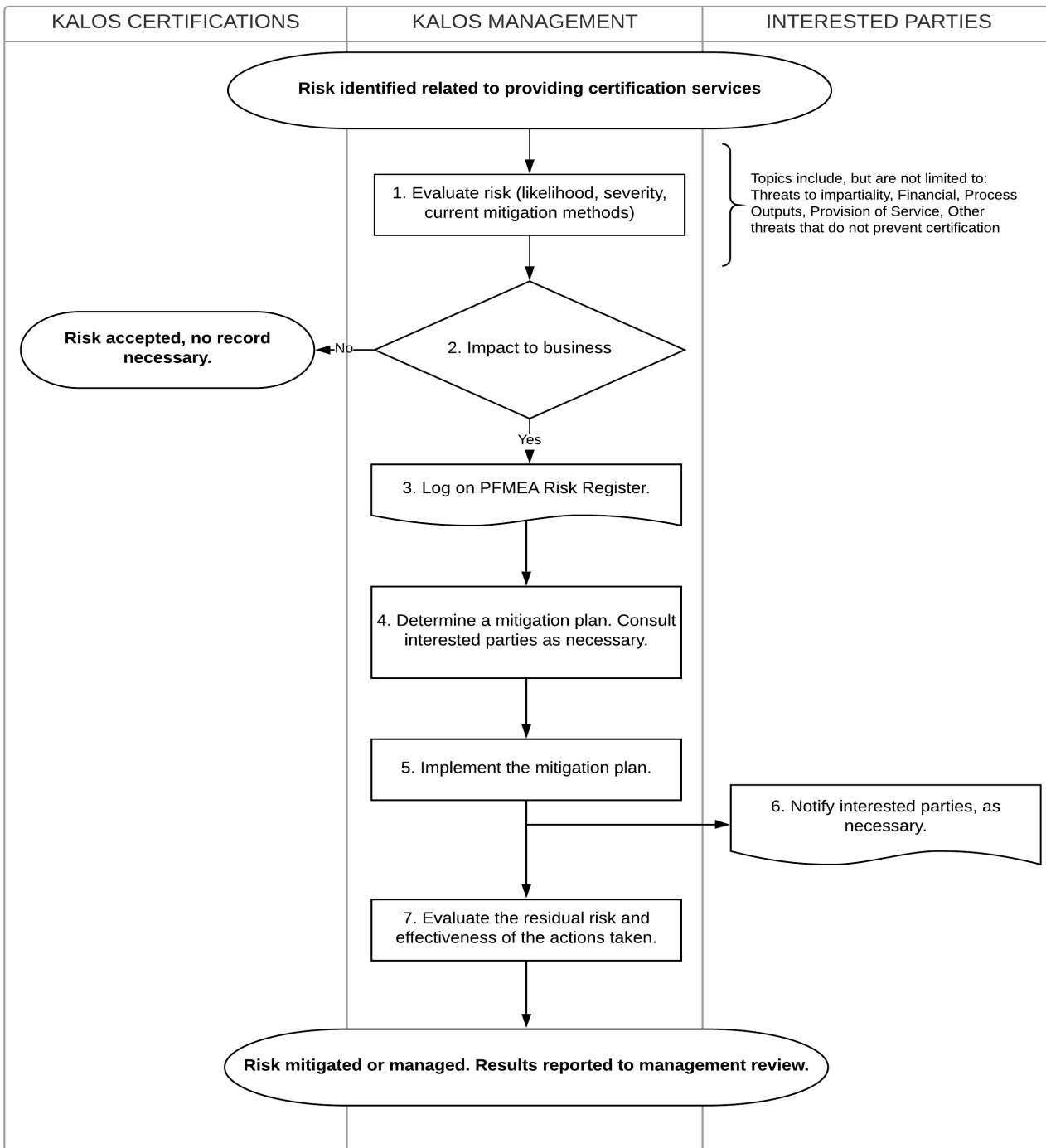
Table of Contents

1. Risk Management	3
2. Management of Competencies.....	4
3. Control of documents	7
4. Control of Records	9
5. Internal Auditing	10
6. Internal Corrective Actions & Improvements	11
7. Management Review	11





1. Risk Management

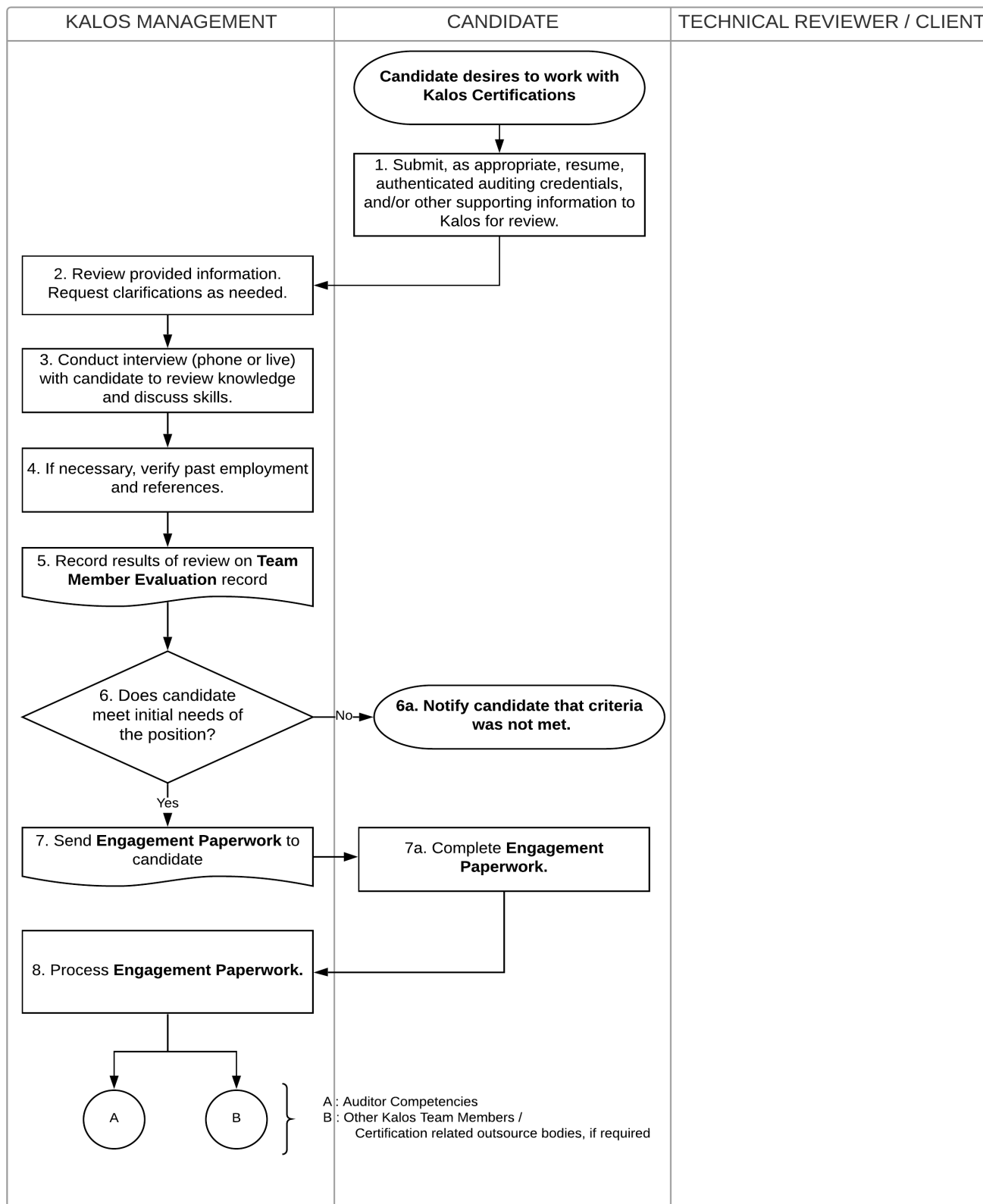


- 1.1 Kalos’ management maintains an PFMEA style risk register (FM-01-06 Risk Management) to retain information about operational risks related to providing certification services. This documents the risk, related process/activity, mitigation actions, and risk priority number.
- 1.2 Risks are added and evaluated as they are identified and the risk register is reviewed, at a minimum, for effectiveness during Management Review (**FM-01-09 Management Review Meeting Minutes**).
- 1.3 When a relationship poses an unacceptable threat to impartiality or risk, then certification shall not be provided.

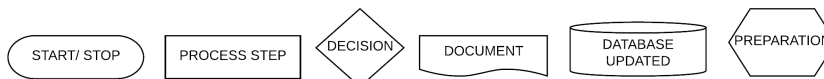


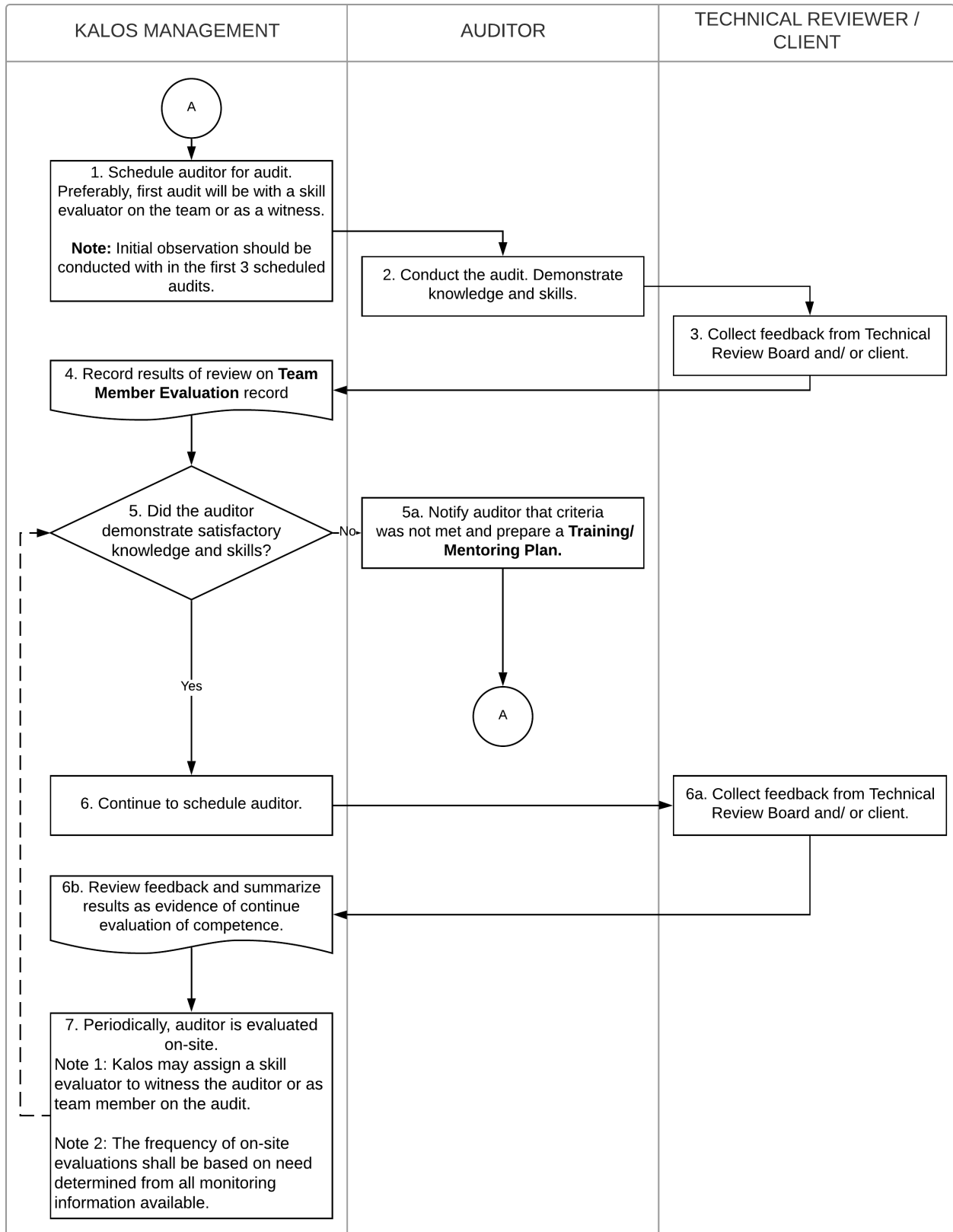


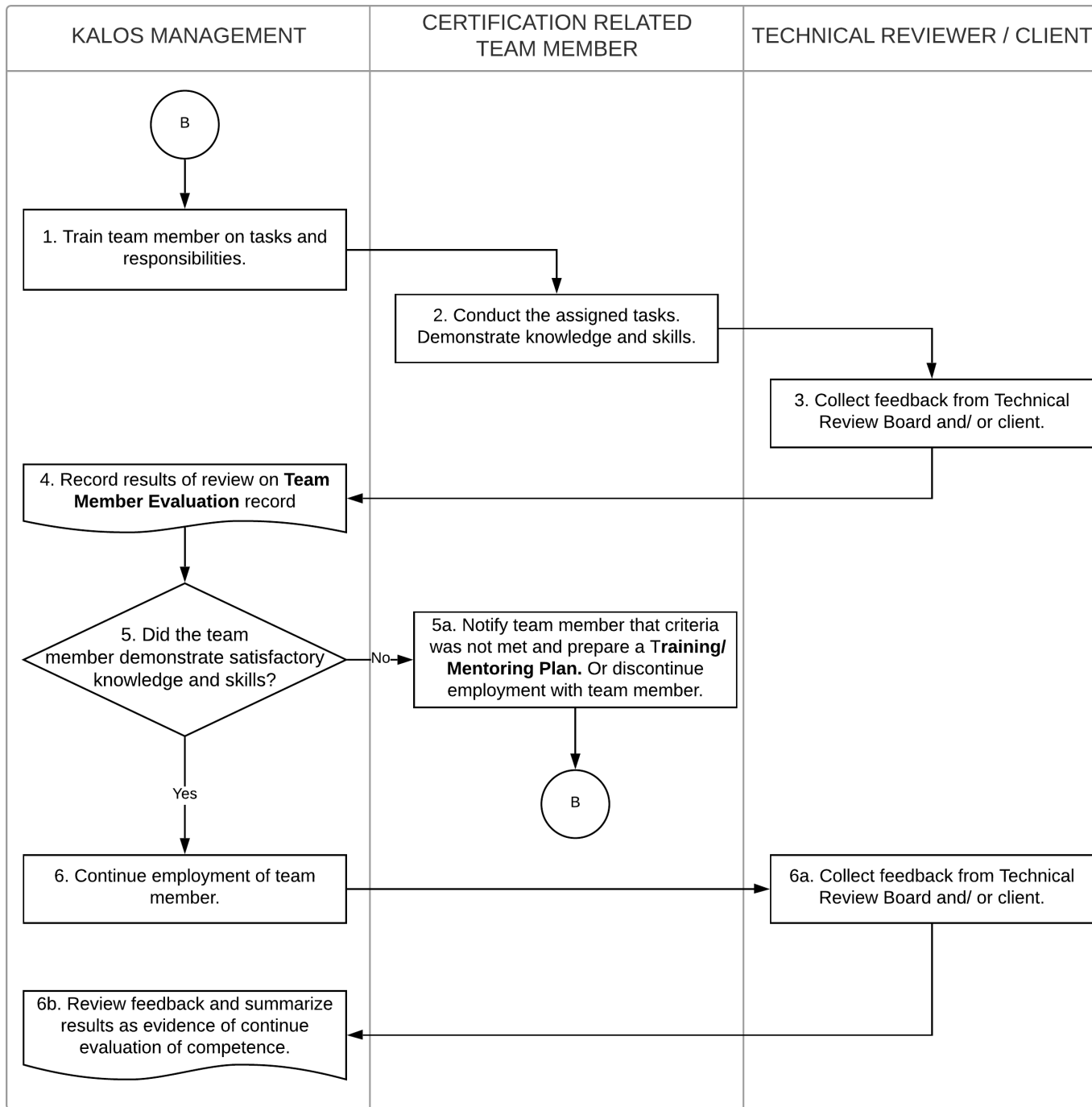
2. Management of Competencies



LEGEND:



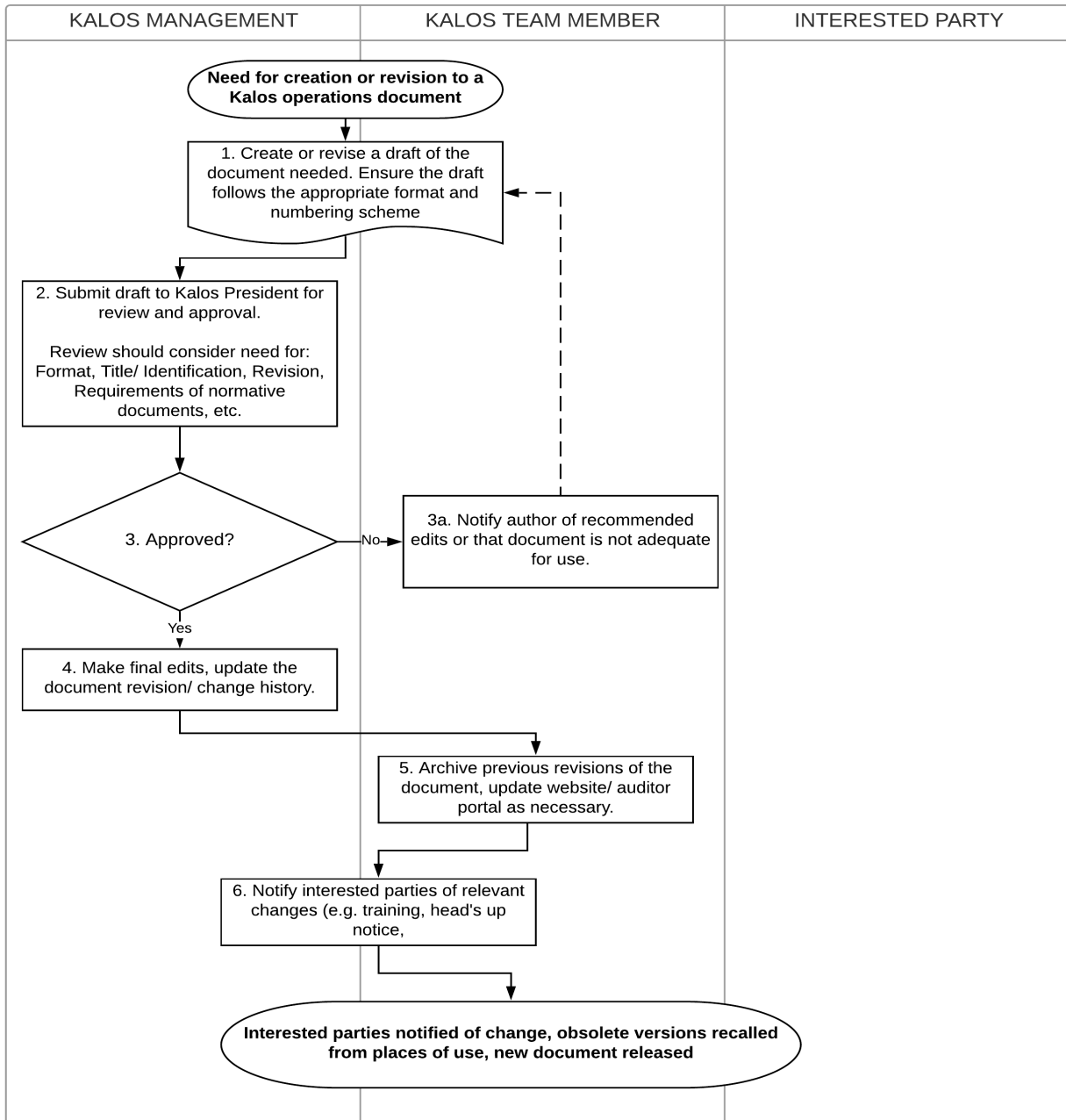




- 2.1 Criteria for competence are documented on the FM-01-03 Competency Matrix.
- 2.2 At least annually, auditors and office team member feedback are summarized in to a performance review.
- 2.3 *As appropriate, Kalos shares auditor performance information with the responsible auditor authentication body (AAB) when there are issues with competency or witness assessments.*
- 2.4 *Kalos uses AQMS auditors listed in OASIS who are both competent and authenticated in accordance with requirements for AS9100 audits.*



3. Control of documents



- 3.1 Where feasible, process maps with swim lanes are used to communicate process inputs, activities, and expected outputs. In addition to legends included at the bottom of the page, Figure 2 shows a guide for reading the process maps.
- 3.2 Documents considered “logs” are working documents and may have their content updated continually. If the structure of the log needs to change, the document approval flow will be followed.
- 3.3 Documents of external origin needed for operations at Kalos are identified and their distribution is controlled.
- 3.4 ***The ICOP resolutions logs and associated documents are obtained, reviewed and changes implemented. Heads Up notices may be used to communicate the changes to certified clients.***
- 3.5 Master copies of documents are maintained electronically.





Figure 1: Document Levels

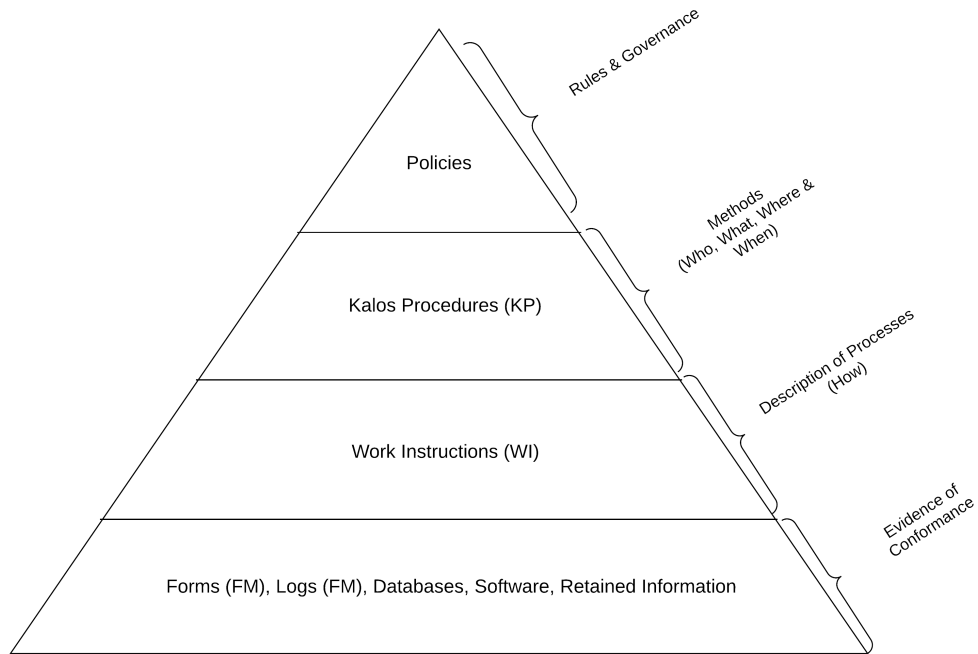


Figure 2: Guide for reading process maps

FUNCTIONAL ROLE	FUNCTIONAL ROLE	FUNCTIONAL ROLE	FUNCTIONAL ROLE
PROCESS INFORMATION ENTERED HERE			
LEGEND			

LEGEND:

--	--	--	--	--	--

4. Control of Records₁

- 4.1 Kalos uses an ISO 27001 certified cloud server provider with HIPPA compliance. Our records are backed up daily.
- 4.2 In the event physical records are retained, locked filing cabinets are used.
- 4.3 In the event of a crash or accidental deletion of a record, Kalos President is able to retrieve up to 30 days of history.
- 4.4 Kalos President administratively assigns access to records and ability to delete records based on functional role in the organization. This access is periodically audited and revised, as needed.
- 4.5 Records are retained in accordance with the following table unless otherwise stated in regulatory or contractual obligations.

Record Type	Retention ₂	Disposal Method
Client Record	6 years after end of contract	Delete or Shred
Financial Record	7 years	Delete or Shred
Operations Record	6 years	Delete or Shred
Personnel Record	6 years after end of contract	Delete or Shred

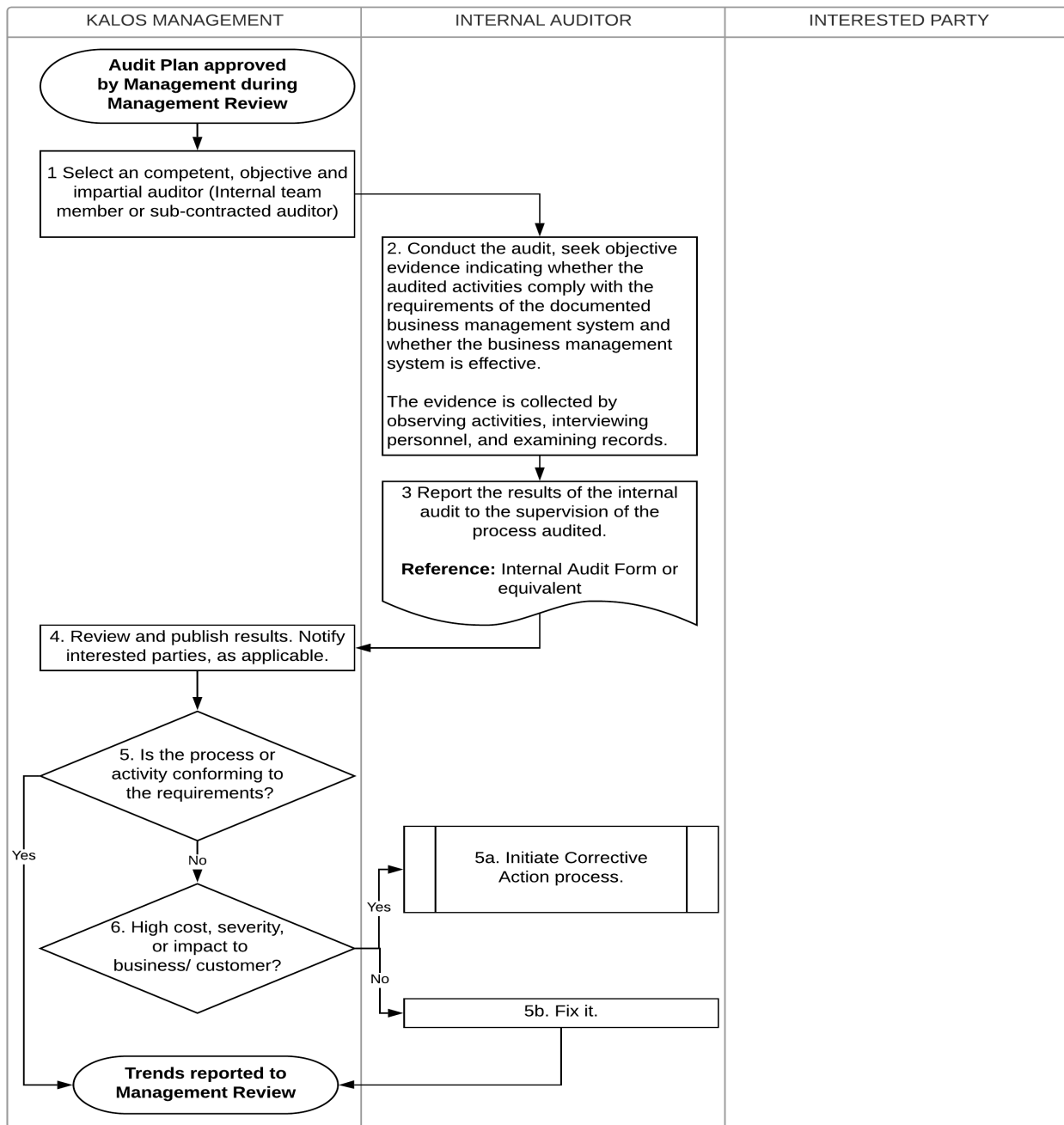
NOTE 1: Control of Documents and Records may also be referred to as Control of Documented Information

NOTE 2: Retention indicated is a minimum. Electronic records may be saved longer by virtue of process.





5. Internal Auditing



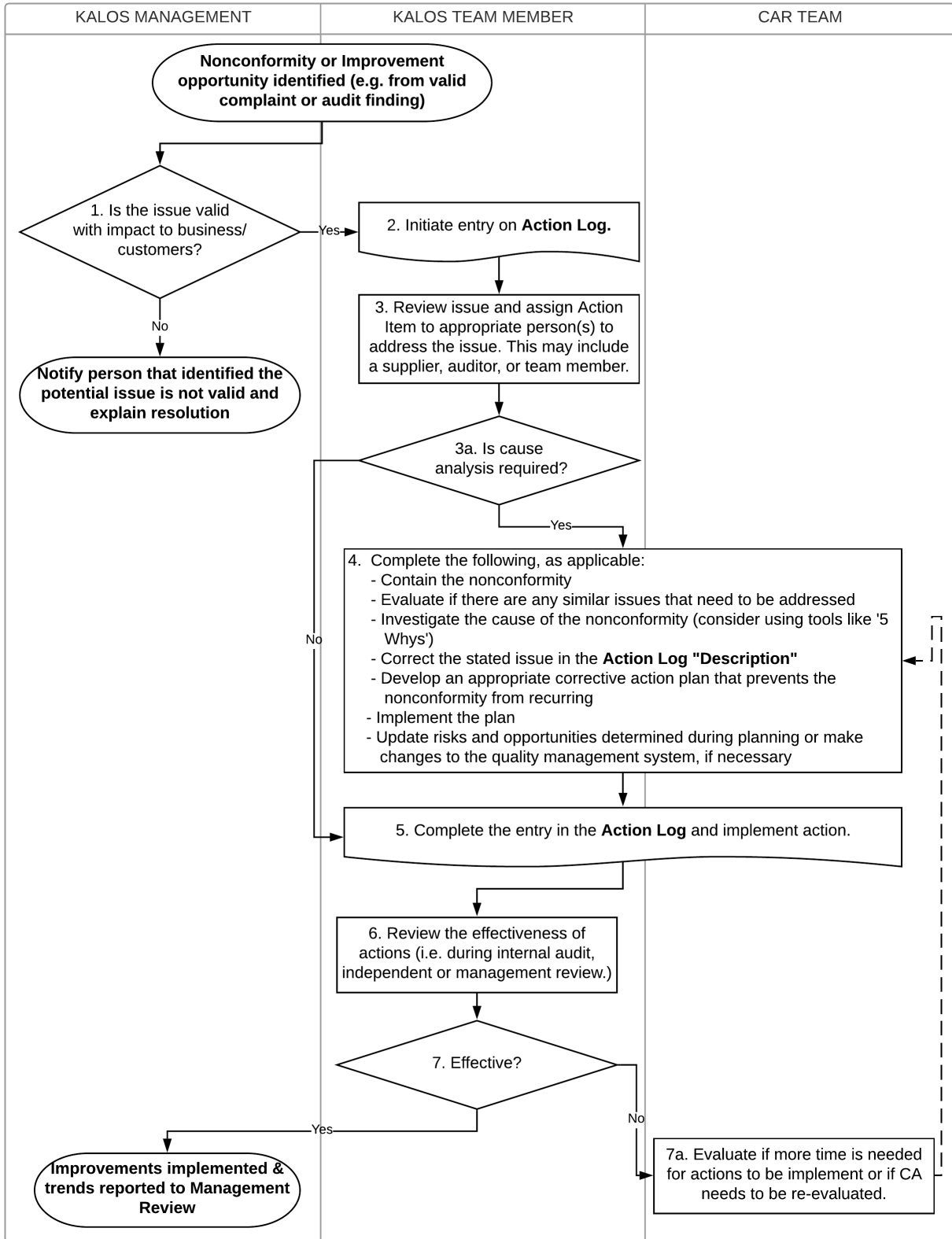
5.1 Kalos ensures that:

- if Kalos chooses an internal auditor outside the contracted auditor pool, formal engagement paperwork is not required.
- internal audits are conducted by competent personnel knowledgeable in certification and auditing;
- auditors do not audit their own work;
- personnel responsible for the area audited are informed of the outcome of the audit;
- any actions resulting from internal audits are taken in a timely and appropriate manner;
- any opportunities for improvement are identified.



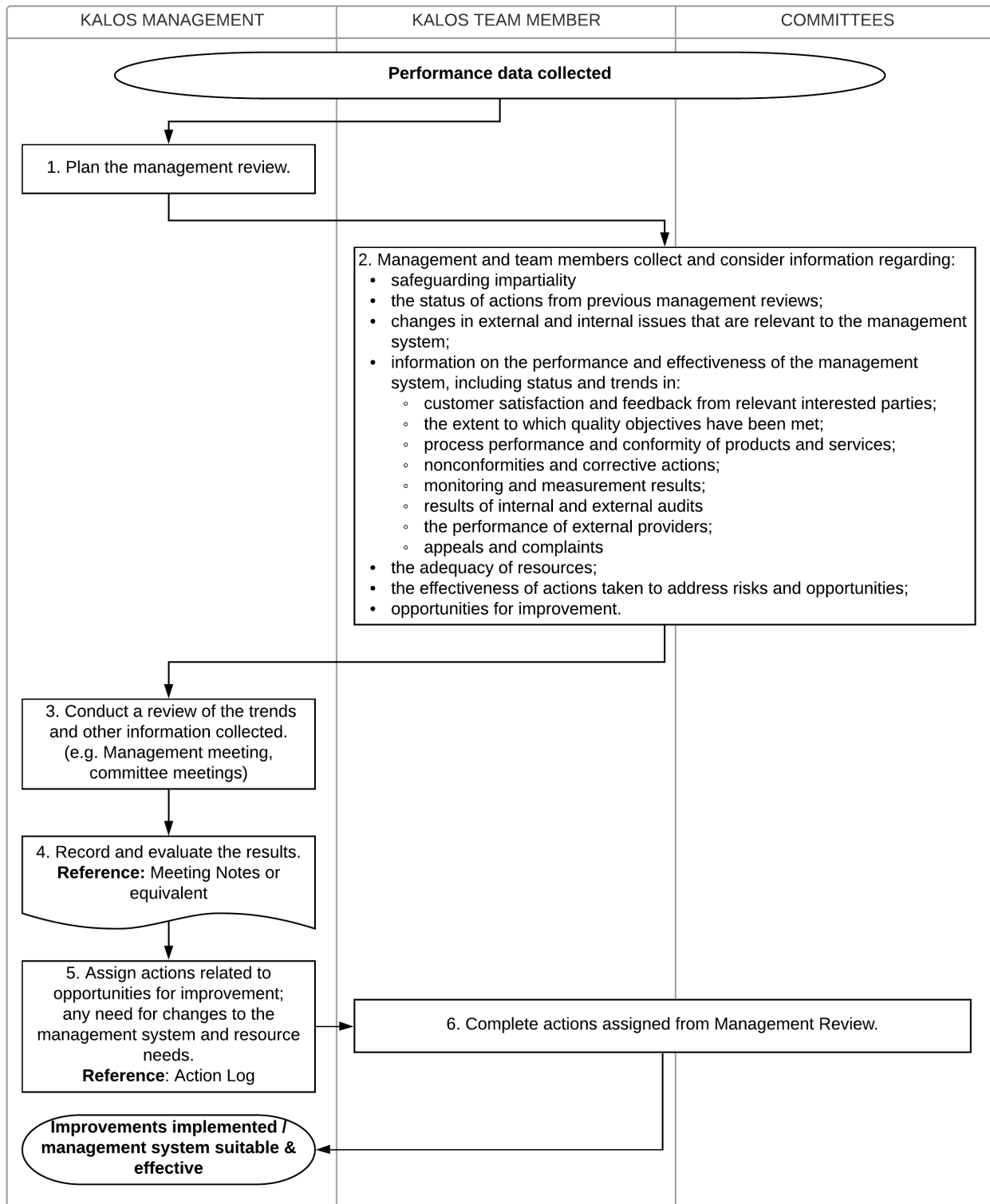


6. Internal Corrective Actions & Improvements

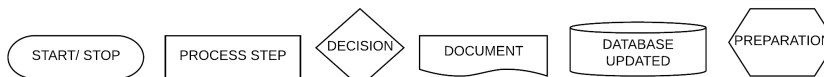




7. Management Review



LEGEND:



Revision History	Approved By	Date
DRAFT	Michaela Scarla	12/22/2018
RELEASE	Michaela Scarla	1/19/2019
<p><i>Revised per ANAB Document Review comments listed in FA-5000 and CL-5313.</i></p> <p>Section 1.2 –</p> <ul style="list-style-type: none"> Maintaining this scope of service prohibits the following: Providing management consultancy to our certified clients. <p>Section 3.2-</p> <ul style="list-style-type: none"> Added “Kalos provides awareness training and requires all certification personnel to disclose conflicts of interest and act impartially.” Added “Where a client has received management systems consultancy from a body that has a relationship with Kalos Certifications, then Kalos shall not certify the management system for a minimum of two years following the end of the consultancy.” Revised to “Kalos Schedulers are aware of the threats to impartiality and assign auditors, other accompanying persons, and technical reviewers appropriately.” Revised to “Kalos FM-01-04 Auditor Engagement Agreement, FM-01-15 Board Member Engagement Agreement, and FM-01-16 Observer Agreement includes impartiality and conflict of interest clauses.” <p>Section 4.2 –</p> <p>Their key responsibility is to review the audit package, ensure reports comply to applicable requirements including Kalos Procedures, ISO 17021-1, Mandatory Documents, ANAB accreditation rules. Based on the review TRB makes a certification recommendation.</p> <p>Kalos President assigns competent team members that employed or under contract with Kalos (auditor or board member) to the Technical Review Board.</p> <p>Rules for Assignment:</p> <ul style="list-style-type: none"> Must have lead auditing experience. Must understand standard and certification requirements and have demonstrated competence to evaluate the outcomes of audit processes. Must be knowledgeable of Kalos Procedures, ISO 17021-1, Mandatory Documents, ANAB accreditation rules. Must not make decisions for client where the Technical Reviewer was a participant of the audit or provided management consultancy with in the past two years. <p>Section 9-</p> <ul style="list-style-type: none"> Process Map A revised to include step 7 “Periodically, auditor is evaluated on-site. Note 1: Kalos may assign a skill evaluator to witness the auditor or as team member on the audit. Note 2: The frequency of on-site evaluations shall be based on need determined from all monitoring information available.” Process Map B revise functional role from “Office Team Member” to “Certification Related Team Member”. <p>Section 12-</p> <ul style="list-style-type: none"> Operations records retention period increased to 5 years to align with accreditation cycle. Added Personnel Record; 3 years after end of contract; Delete or Shred 	Michaela Scarla	3/2/2019
<p>Spilt Operations Manual in to Part A (Client facing) and Part B (Internal facing).</p> <p><i>Revised per internal audit findings listed in Action Log.</i></p> <p>Section 1 – Risk Management</p> <ul style="list-style-type: none"> Added “Other threats that do not prevent certification” to the process map notes. <p>Section 2 – Management of Competency</p> <ul style="list-style-type: none"> Clarified “A” and “B” on first process map. <p>Section 5 – Internal Audit</p> <ul style="list-style-type: none"> Added “If Kalos chooses an internal auditor outside the contracted auditor pool, formal engagement paperwork is not required.” <p>Section 6 – Improvement & CA</p> <ul style="list-style-type: none"> Update flowchart “Nonconformity or Improvement opportunity identified (e.g. from valid complaint or audit finding)” Update flowchart “3. Review issue and assign Action Item to appropriate person(s) to address the issue. This may include a supplier, auditor, or team member.” (removed “client”) <p>Section 7 – Management Review</p> <ul style="list-style-type: none"> Removed “annually” 	Michaela Scarla	5/3/2019
<p><i>Revised per 2019 ANAB Audit and 2020 Internal Audit</i></p> <p>Section 2 – Updated process map (Action Log KA-2020-51)</p> <p>Section 4 – Added “ NOTE 2: Retention indicated is a minimum. Electronic records may be saved longer be virtue of process.” (Action Log # KA-2019-33)</p>	Michaela Scarla	3/10/2020
<p><i>Revised per AS9104 and AS9101 requirements.</i></p> <ul style="list-style-type: none"> Added bold, italics for AS9101/ AS9104 gaps Minor corrections to spelling, grammar, numbering of process maps. 	Michaela Scarla	9/14/2020
<p><i>Revised per ANAB Document Review and Board Review</i></p>	Michaela Scarla	11/10/2020
<p><i>Revised per ANAB Office Audit OFI’s:</i></p> <ul style="list-style-type: none"> Section 2 Process Map A Step 1 added “Note: Initial observation should be conducted with in the first 3 scheduled audits.” 	Michaela Scarla	3/30/2021

