

RISQS Auditors Code of Conduct

Document no.: RISQS-SD-001

Revision	Author	Checked by	Approved by	Date approved	Reason for revision
01	Carl Rulton	Alan Thomas	Richard Sharp	27-02-18	Initial Issue
02	Gillian Scott			27-03-19	Logo change only
03	Gillian Scott	RSBB Assurance Team	Antony Howard	14-08-20	Compliance to NR/L2/SCO/302
04	Gillian Scott	RSBB Assurance Team	Antony Howard	23-09-20	Compliance to NR/L2/SCO/302

RISQS-SD-001 - RISQS Auditor Code of Conduct

05	Paul Haynes	RSSB Assurance Team	Antony Howard	14-06-21	New RISQS logo added, no other changes
06	Paul Haynes	Suzanne O'Keane	Antony Howard	13/09/2021	Issue 06 to reflect that audit operations have moved from service provider to in-house operations



RISQS-SD-001 - RISQS Auditor Code of Conduct

Contents

RISQS Auditors Code of Conduct	1
1. General Arrangements	4
2. Purpose	4
3. Audit Scheduling	5
4. Audit Preparation	5
5. Audit Procedure	5
6. General Conduct	7

1. General Arrangements

- 1.1 The following Code of Conduct will apply to all RISQS Auditors, that work on behalf of the Scheme Management Office and is a minimum expectation of professionalism and behaviour whilst working on RISQS.
- 1.2 All Auditors working on behalf of the Scheme Management Office and for RISQS must act in an open way treating everyone fairly and with respect.
- 1.3 In order to satisfy the expectations of the customer, company knowledge, audit preparation and professional behaviour are all of utmost importance and contribute to providing a service. This supports the aims of the scheme's Supplier membership which provides an organisation with the opportunity to answer the RISQS questionnaire and once verified, the Supplier's live profile is made visible to Buyers and they become searchable for the product codes they have selected. However, where product codes are auditable the Supplier will only appear in searches for these, once qualified via audit.

2. Purpose

- 2.1 If a Supplier has received management systems consultancy from the Auditor, the Auditor shall not assess the supplier for a minimum of two years following the end of the consultancy.
- 2.2 Auditors cannot provide consultancy services directly relating to RISQS audits in the subsequent 2-year period following the undertaking of an audit on an organisation.
- 2.3 Where an Auditor, or organisation, is providing any form of audit support, technical advice or health and safety service to a RISQS auditee, the auditor must declare this to the Scheme Management Office.
- 2.4 RISQS Auditors must not offer or recommend any consultancy, technical or other services during the course of the audit process, or imply that certification would be simpler, easier, faster or less expensive, if a specified consultancy were used.
- 2.5 All Auditors should avoid conflicts of interest and any possibility of a conflict of interest. Should these arise, they should immediately disclose this information to the Scheme Management Office, who will decide on action to be taken.
- 2.6 Confidentiality is of the upmost importance. All Auditors must treat information gathered during an audit as confidential and not disclose any aspect to third parties.
- 2.7 All Auditors will treat records created during the audit process in accordance with the Scheme Management Office's guidelines for confidentiality, security, privacy and comply with any applicable laws and agreements.
- 2.8 Any Auditor, or auditing organisation, that operates on behalf of RISQS must not use RISQS audit contacts as a means for business development.
- 2.9 Any access to RISQS data is restricted purely to undertaking the audit service and must not be used to gather information on Buyers or Suppliers for means of furthering any other business need.

RISQS-SD-001 - RISQS Auditor Code of Conduct

- 2.10 Access to any RISQS information is solely for the delivery of audits and must not be abused in any way.
- 2.11 The Auditor shall confirm that where a Supplier uses external consultancy to support their activities, the Supplier is able to demonstrate their ability to meet the requirements of the standard without the consultant present.

3. Audit Scheduling

- 3.1 Auditors must keep the scheduling calendar updated with their available audit days.
- 3.2 The audit process starts 16 weeks prior to an audit when a Supplier registers with their final shape and length of audit this being set 8 weeks prior to an audit start date, and the final scope of an audit being set 3 weeks from the booked audit start date.
- 3.3 The scheduling system aims to allocate each audit to the nearest Auditor geographically. Auditees are given the opportunity to request preferred dates and these should be agreed wherever possible.
- 3.4 A suitable audit date is arranged by the scheduling team as soon as possible after an audit is requested by the RISQS system.
- 3.5 Audit dates are recorded centrally through the scheduling system, initial contact is made, and details logged in the system and an Auditor is then allocated the job.
- 3.6 The Auditor must contact the Auditee to confirm the audit arrangements. This contact must be made in advance of the audit and a minimum of than 10 working days before the audit start date to confirm details, agree timings and discuss the audit process.
- 3.7 Audits must be completed in line with the dates on the system and before the set target audit date which for re-audits is a minimum of 10 working days before the expiry date of the current audit. All contacts between the Auditor and the Auditee must be logged for future reference.

4. Audit Preparation

- 4.1 Prior to the audit, the Auditor will have reviewed the latest Supplier questionnaire and if available the previous audit report.
- 4.2 The Auditor should gain an understanding of the scope of supply of the Auditee and of any management arrangements or structure affecting the audit i.e. Subsidiary company, Network Rail Licence Holder, etc.
- 4.3 Auditors must endeavour to arrive on time and plan to spend the allocated 8-hour day as required by the audit duration time at the client's premises. Where an audit is to be held remotely the same timeframes shall be adhered to

5. Audit Procedure

RISQS-SD-001 - RISQS Auditor Code of Conduct

- 5.1 Throughout the audit the Auditor is a representative of RISQS and must maintain a professional attitude.
- 5.2 The Auditor must hold an opening meeting and confirm the audit itinerary. The names of all attendees and start-time of the meeting will be noted.
- 5.3 During the opening meeting the Auditor will explain the nature of the audit and confirm the Auditee understands the audit process, its nature and limits, issues to do with confidentiality, financial arrangements, the requirements for adding or subtracting of RICCLcodes and any non-applicable questions or empty processes.
- 5.4 The Auditor will ensure that all topics and questions are answered in line with audit protocols.
- 5.5 In cases where information is to be gathered in multi-locations, or by multi Auditors, these arrangements should be clearly explained to the customer. This should include which areas of the audit will be conducted where, when and by whom. Auditees must be given the opportunity to explain any specific site safety rules or requirements and make requests with regards to any particular requirement for attendance or the need for specific documentation. A detailed audit plan should be produced by the Auditor and circulated prior to the audit starting. The audit plan should be checked and updated at the end of each audit day and findings communicated to the Auditee.
- 5.6 The Auditor will conclude the audit with a meeting to discuss final findings. Any major or minor non-conformances must be discussed.. Major non-conformances which will result in a failed audit must be reported through the mobile platform at the end of the last day of the audit and the close-out process agreed with the Auditee representative in the close-out meeting.
- 5.7 The Auditor will differentiate between two levels of failures due to major non-conformances:
 - 6 or more major non-conformances create an immediate fail. The Auditor must complete the report on the last day of the audit and make contact with the Quality Assurance department to alert of an immediate fail. The report must be submitted at the latest for Quality Assurance by 10am the next working day and followed up with a telephone call to the Quality Assurance for confirmation.
 - Up to 5 major non-conformances initiates a 5-day control process: The Auditor must complete the report on the last day of the audit and make contact with the Quality Assurance department to inform them of the major non-conformances. The report must be submitted at the latest for Quality Assurance by 10am the next working day and followed up with a telephone call to the Quality Assurance for confirmation.
- 5.8 Auditors should agree the method of receiving close out information with the Auditee at the close-out meeting, it is expected that this will be via email only.
- 5.9 The Auditor will follow up this, checking the close-out information provided for the non-conformances and making a final decision on passing, or failing, the audit.
- 5.10 **Note:** The Auditee has up to 5 calendar days after the final day of audit to return the responses, failure to return information on one or more of the non-conformances in this time will fail the audit. The Auditor will review the responses on the subsequent day. On the 6th day the pass/fail of the audit must be submitted to the system no later than 14:30hrs.

RISQS-SD-001 - RISQS Auditor Code of Conduct

- 5.11 Up to 5 major non-conformances will result in a reaudit 12 weeks after the end of the initial audit; only the failed parts need to be checked, the 1-day audit, will be a straight pass or fail. The result will be communicated at the end of the day.
- 5.12 Pass reports must be completed and sent no later than 6 days after the last day of the audit, a Quality Assurance process will be undertaken, and the final report made available via the RISQS system no later than 9 days after the last day of the audit.

6. General Conduct

- 6.1 Auditors should always arrive on time and dress appropriately. Requirements for PPE will be addresses on a case by case basis.