SCS-110 Certification Body Requirements

This normative document specifies the requirements that certification bodies shall observe when operating third party certification of operations against the SCS Certification Standard for Zero Waste Facilities (hereinafter SCS-110).

This document, in respect to the SCS-110 Certification Program:

- contains the sector specific requirements to ISO 17065.
- describes the requirements that shall be met by certification bodies for the application of the SCS-110 Standard by SCS Standards' approved certification bodies.
- provides the basis for the consistent application of the SCS-110 Certification Program by certification bodies.

The term "shall" is used throughout this document to indicate mandatory requirements. The term "should" is used throughout this document to indicate best practices and recommendations.

1.0 Normative References

- SCS Standards Certification and Approval Requirements (SCS CAR).
- ISO 17065:2012 Conformity assessment — Requirements for bodies certifying products, processes and services
- ISO 19011:2018 Guidelines for auditing management systems

2.0 Definitions

The relevant definitions outlined in the SCS-110 Standard and ISO 17065 apply.

3.0 Additional Certification Body Requirements

In addition to meeting the requirements contained in ISO 17065, the approved certification bodies shall meet the following additional requirements.

4. General requirements

4.1.3 Use of license, certificates and marks of conformity

4.1.3.3 The Operator can make a claim related to the percentage of their Certified Facility's diversion activities that is comprised of each method (ex: recycling, composting) in on-product or off-product claims, as stated on their certificate.

4.1.3.4 The Operator can make a claim related to improvement of the Certified Facility's diversion rate from the previous year in on-product or off-product claims (only applicable to facilities undergoing re-certification), as stated on their certificate.

4.1.3.5 The Operator can make a claim related to the fact that products produced at a Certified Facility are made in a facility which achieved waste diversion certified under this standard.

6 Resource requirements

6.1.4 Auditor qualifications

6.1.4.1 Initial qualification requirements for auditor candidates shall, at a minimum, include the following:

a) observe or participate in at least one SCS-110 audits and lead at least one SCS-110 audit whilst being witnessed by an authorized Lead Auditor.
   i. This requirement may be waived for an auditor with auditing experience in similar certification scheme(s) covering traceability, account reconciliation, chain of custody, etc.
b) have a graduate degree in Accounting, Mathematics or similar subject, or two years of professional experience in a relevant field.
c) successfully completed an ISO 19011 course on auditing techniques.

6.1.4.2 Continuous qualification requirements for auditors shall, at a minimum, include the following:

a) conduct at least three audits every year, against a SCS-110 or similar certification scheme(s).
b) successfully undergo a witness audit every three years.

7 Process requirements

7.4 Evaluation

7.4.1.1 The certification body shall request documentation from the Operator prior to the audit.

7.4.1.2 The certification body may request licenses or other evidence as proof of legal diversion for external vendors if independent research cannot substantiate external vendor existence and activity.

7.4.1.3 Once documentation is received and assessed for completion, the certification body shall schedule the audit, considering the following:

a) the audit process shall not begin until a company has provided waste diversion data for a period of no less than 4 months.

b) the audit shall not be concluded until the certification body has reviewed waste diversion data for a period of 12 months.

c) The majority of documentation for the desk audit must be received before the audit can be scheduled.

7.4.1.4 Besides the documentation review, the following activities shall take place during the (on-site or virtual) audit:

a) Review of activities at critical control points,

b) Interviews with staff (to confirm training),

c) Assessment of on-site infrastructure that supports diversion activities (e.g., receptacles),

d) Review of signage at Facility under Assessment to confirm the correct storage of waste materials,

e) Review of estimations,

f) Review of any documents Operator would prefer to show in person, rather than sending on-line, (e.g., invoices), and

g) Closing meeting with preliminary findings.

7.4.1.5 Audits for Facilities under Assessment shall be conducted remotely unless 7.4.1.7 applies.

7.4.1.6 Remote audits shall be conducted using appropriate ICT (Information and Communication Technology).

7.4.1.7 On-site audits shall be conducted in the following situations:

a) More than 25% of total waste cannot be substantiated with third party documentation due to nature of diverting method, such as internal reuse, reclamation, prevented waste from resign or is otherwise unaccounted for.

b) More than 25% of total waste is comingled with waste from other businesses.

c) More than 25% of all waste (total + stored) is stored on site for longer than 12 months at a time.

d) More than 25% of total waste is a combination of a) and b) above.

7.4.1.8 On-site audits shall be conducted on a sample of External Vendors where:

a) More than 25% of total waste is sent to External Vendors that claim 0% residual from their processes, and

b) This residual cannot be reasonably supported through research on comparable methods of diversion.

7.4.1.8.1 If residual is found, the certification body shall take photographic evidence and present it to the Facility under Assessment. In those cases, the Operator is responsible for obtaining an accurate residual rate for its External Vendors.

7.4.8.1.2 The certification body shall conduct on-site audits of the square root of all External Vendors.

7.4.1.9 The certification body shall present all findings to the Operator at the time of the closing meeting and explain the next steps, including deadlines for closure of findings and timelines for reporting.

7.4.10 Management of Findings

7.4.10.1 Non-conformities shall be raised when a Facility under Assessment is found to be out of conformity with the requirements of the SCS-110 Standard.

7.4.10.2 Non-conformities shall be satisfactorily addressed within the agreed-upon timeframe.

a) The certification body shall require evidence of Corrective Action taken in order to close a non-conformity.

b) In addition, the certification body shall require a Corrective Action Plan (CAP) for:

   i. Any major non-conformity issued during the initial audit that is not closed within three months of the date of the closing meeting.

   ii. Any minor non-conformity that is not closed within three months of the date of the closing meeting.

c) The certification body may conduct a follow-up audit to verify implementation of corrective measures.

7.4.10.3 Findings shall be graded as: Conformity, Major non-conformity, Minor non-conformity, Opportunity for Improvement, or Observation:

a) Conformity (C) is demonstrated through evidence that the Facility under Assessment meets an applicable requirement of the standard. Evidence can be written documentation, an observation made during a site visit, or information received during an interview. Evidence must be documented in the findings as thoroughly as is practical.

b) A Major Non-conformity (MNC) is a fundamental failure to meet a requirement. Major non-conformities shall be resolved, closed out, or downgraded to minor non-conformities before a certificate can be awarded. Major non-conformities shall be addressed:

   i. For initial audits, no later than 1 year from the date of the closing meeting, or

   ii. For subsequent audits, at the latest three months from the date of the closing meeting.

   Note that an MNC cannot be downgraded if it was previously downgraded from an MNC to an mNC.

c) A Minor Non-conformity (mNC) is characterized as an unusual lapse in the system and does not pose a threat to overall compliance with the standard. Minor non-conformities shall be closed at the latest by the time of the next audit. If not closed at that time, they shall become Major Non-conformities.

d) An Opportunity for Improvement (OFI) is an observation made about an occurrence which does not impact conformity but could potentially affect compliance in the future. Responses to Opportunities for Improvement is optional.

e) An Observation (OBS) is made to clarify how the Facility under Assessment's system is in conformity with the Standard requirements in areas that may cause confusion.

f) The certification body shall mark any requirement Not Applicable (NA) if it does not apply to the Facility under Assessment.

7.4.10.4 The certification body shall suspend a certified Facility:

- in case of serious violations with applicable standard requirements.
- if corrective measures are not implemented within the indicated timeframe.
- any other reason deemed appropriate by the certification body.

7.7 Certification documentation

7.7.1. g) The certificate shall include a transparent overview of the achievement, including the following required information:

    i. Name and address of the certified facility

    ii. The percent of waste diversion the company has achieved for that year

        - Percentage is calculated by (diverted waste - residuals) + prevented waste) / (total waste + prevented waste)

    iii. Each method of diversion used (e.g., recycling, composting, waste-to-energy) as well as the percentage diverted using each method

    iv. The progress the company has made in waste diversion expressed as points

        - For example, if a company achieved 55% diversion in the previous year and 60% diversion in the audited year, then the certificate would show '+5'

    v. Whether any waste is stored at the Certified Facility (not the percentage or the total weight of stored material)

    vi. Percentage of waste that is not accounted for and/or landfilled in the diversion calculation

    vii. Period of certification (12-month period being verified)

    viii. Expiration of the claim (12-months from the issuance of the certificate)

7.9 Surveillance

7.9.1.1 A Certified Facility shall undergo a surveillance audit annually (every 12 months from the date of initial certification). The surveillance audit's timing may be advanced or delayed by up to 90 days before or after the due date as necessary to coordinate a suitable date.

7.9.1.2 Surveillance audits (years 2 through 4) shall focus on the calculation of the 12-month period being assessed, any new materials or processes and their respective documentation and on-site applications, and review of non-conformity closure from previous audit cycle.

7.9.1.3 A Certified Facility shall undergo a recertification audit every five years. The recertification audit's timing shall allow enough time for potential non-conformities raised at the recertification audit to be corrected, and for the reissuing of the certificate prior to the certificate expiry date to avoid a lapse in certification.

7.11.7 Extension of certificate

The certification body shall have a procedure to evaluate an Operator's request to extend the duration of validity of a certificate for a Certified Facility.