



170 North Country Road | Suite 4 | Port Jefferson, NY 11777

# QUALITY MANUAL

# Table of Contents

<b>QUALITY MANUAL COVER</b> .....	1
<b>DOCUMENT CONTROL</b> .....	3
<b><u>I. INTRODUCTION</u></b> .....	4
<b><u>II. DEFINITIONS</u></b> .....	5
<b><u>III. SCOPE OF CERTIFICATION BODY</u></b> .....	6
<b><u>IV. CONFIDENTIALITY AND CONFLICT OF INTEREST</u></b> .....	7
<b><u>V. ORGANIZATION RESPONSIBILITIES AND AUTHORITY</u></b> .....	8
<b><u>VI. OPERATIONS</u></b> .....	15
<b><u>VII. QUALITY POLICY</u></b> .....	18
<b><u>VIII. QUALITY OBJECTIVES</u></b> .....	18
<b><u>IX. QUALITY SYSTEM</u></b> .....	18
<b>X. APPENDIX</b> .....	34

The content of this Quality Manual applies to and is proprietary to CIRQ. However this manual is available for inspection by customers and other interested parties, on request.

## Document control

This is a Controlled Document maintained on the CIRQ Intranet site

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### Change Record

Revision #	Revision Date	Written/Revised by	Description of Change
0	04-09-2010	C. Kneidl	Initial release
1.1	08-31-10	C. Kneidl	Revised to align with various procedures that have been written
1.2	04-28-11	C. Kneidl, J. Ward, J. Maloney	Complete review during self-audit in April 2011 to incorporate all recent changes such as: Application changed to RFQ, etc.
1.3	9-29-11	J. Maloney	-Corrected Internal Audit Document Numbers -Added "CIRQ shall not delegate the authority for granting, maintaining, extending, suspending or withdrawing certification to an outside person or authority "to Organization Responsibilities and Authority section -Defined Management Committee
1.4	11-18-11	J. Maloney	-pg 14 update steps in application process -pg 23 update feedback form procedure
1.5	12-19-11	J. Maloney	Update CIRQ Seals
1.6	3-21-12	J. Maloney	Remove requirement for document information to be on the header (footer only)
1.7	3-30-12	J. Maloney	Add CASRO President to read and write privileges on the CIRQ Intranet
1.8	2-27-14	J. Maloney	-Increased the # of supporting procedures to 8 -Change Operations Director to Managing Director -Update Organization chart -Update according to changes in procedures
1.9	7-8-14	J. Maloney	Replaced Guide 65 with ISO/IEC 17065:2012
2.0	12-22-14	J. Maloney	Update 20252 references to include 20252:2012, <ul style="list-style-type: none"> <li>• Section 1: Introduction</li> <li>• Update Managing Director's role</li> <li>• Update Operations Administrator's</li> </ul> Update of Global Prospective

# CASRO Institute for Research Quality (CIRQ) QUALITY SYSTEM MANUAL

## I. Introduction

CASRO is dedicated to helping the survey research industry (both member and non-member companies) grow and improve their businesses. With over 300 member companies in the U.S. and abroad, CASRO has represented the “voice and values” of survey research and survey research businesses in the U.S. since 1975. Members are required to adhere to the CASRO Code of Standards and Ethics for Survey Research, an internationally-cited set of standards. Adherence to these standards:

- Enhances the image of survey research,
- Protects the rights and privacy of the public, and
- Protects the confidentiality of clients and the work done on their behalf.

The importance of the CASRO Code extends beyond CASRO members. It is a major reference document for international research businesses and for the global research community. Further, CASRO advocates our industry's self-regulation, champions legitimate research companies, and marginalizes disreputable research operations that threaten to tarnish the industry's reputation and alienate respondents.

CASRO's extensive services to members (and non-members) provide information and guidance on research and research business issues and trends. It has also achieved unique status among all North American research associations as an active representative on numerous global initiatives and as the U.S. liaison with several leading international associations. In this latter role, CASRO provided singular leadership as the official U.S. delegate to the Technical Committee (TC) of the International Standards Organization (ISO) in the development of two ISO quality standards for the global research industry. These standards are:

- ISO 20252 for conducting market, opinion and social research, released in 2006
- ISO 26362 for access panels, released in early 2009

CASRO's involvement in the development of these global standards has helped ensure that its members' and the U.S. research industry's research and business processes are recognized and supported internationally. CASRO endorses these new standards as a means to provide a firm foundation of quality for managing any research project and recommends them as a key component of a three-part quality program:

- Pillar 1: The CASRO Code of Standards and Ethics for Survey Research
- Pillar 2: The on-going development and enhancement of best practices guidelines in the sciences and methodologies of market and opinion research
- Pillar 3: ISO research standards that provide the infrastructure needed for quality processes related to research project management

CASRO believes that certification to the above mentioned ISO standards will provide tangible benefits to research companies, to the clients of research companies, and to the general public.

Because in 2010 there were no accredited certification bodies for ISO 20252 or ISO 26362 in North America, (nor were there any North American standards organization (like ANSI) interested in becoming an accreditation body specifically to address the research standards), CASRO formed a wholly owned, non-profit subsidiary called the CASRO Institute for Research Quality (CIRQ) to provide auditing and certification services to research firms (members and non-members) headquartered in North America or subsequently, in the global arena, desiring to be certified to ISO 20252:2012 and/or ISO 26362.

CIRQ will share offices and functions with CASRO, located at 170 North Country Road, Suite 4, Port Jefferson, New York 11777, USA.

CASRO is uniquely positioned to establish this certification body and provide a credible and authoritative ISO 20252/26362 certification program for several reasons:

- (1) It is the only US-designated representative to the ISO research standards development committee, and therefore has superior knowledge of the content, interpretation, and application of these standards to the US research industry;
- (2) Through its international members, its image of integrity, and its involvement in global research associations, CASRO has earned a respected position in the global research community;
- (3) It has long been committed to self-regulation and the establishment of verifiable credentials that support continued self regulation; and
- 4) We believe CASRO to be the leading and most respected voice for U.S. research businesses and the executive leaders of those businesses.

**Note:**

1. Throughout this manual the use of the term “shall” denotes mandatory requirements. The use of the term “should” indicates provisions which would normally be regarded as mandatory with any variations in only exceptional circumstances. The use of the term “may” indicates a possible way (i.e. an example) in which compliance with a requirement might be met.

References:

- ISO 20252:2012 Standard
- ISO 26362 Standard
- CIRQ Operating Agreement
- IRS Group Exemption for CIRQ
- CASRO Code of Standards & Ethics for Survey Research

## **II. Definitions**

*(ISO/IEC 17065:2012 Clause 3)*

For the purposes of this document, the terms and definitions given in ISO 20252:2012, ISO 26362 and the following shall apply:

1. Area of Concern - Departure from a particular system requirement, or failure to consistently implement a requirement, that is not likely to lead to a collapse of the management system. Areas of Concern should typically be resolved within 4 months. If not addressed these could lead to a system deficiency resulting in a non-conformance. Areas of Concern will normally be reviewed at the next surveillance audit.
2. Checklists – controlled documents used to ensure all required steps for a particular activity have been completed; completed checklists become records that shall be maintained.
3. Company - A research company seeking or holding certification to ISO 20252:2012 and/or 26362. Certified companies are the customers or clients of CIRQ. The words “customer” and “client” may be used interchangeably to represent a certified company.
4. Compliance - The assurance that specified requirements of a standard are met.

5. Corrective Action –Action taken to prevent a recurrence of a non-conformance. This requires an analysis to be undertaken to find out the cause of the non-conformance.
6. Documents – controlled documents used to provide consistent information at various times throughout the auditing and certification process.
7. Forms – controlled documents that support the quality and consistent completion of a required step within a procedure; completed forms become records that shall be maintained.
8. Guidelines – controlled documents used to provide direction or guidelines for a particular activity; these do not become records in and of themselves.
9. Non-conformance - A total absence of the criteria for compliance with the nominated standard; or a situation that raises significant doubt as to the effectiveness of the management system to achieve its intended outputs. NCs must be resolved and closed within 2-4 months and may require a follow-up audit prior to the next surveillance audit.
10. Observation –. A positive or negative statement of fact that relates to the operations observed during the course of the audit.
11. Opportunity for Improvement –. An opportunity that, if considered by the client, may provide a potential improvement to the management system
12. Product: The use of this word includes tangible products, as well as processes or services delivered to clients.
13. Projects - A definable piece of work carried out for a client (or group of clients) including all work carried out ad hoc, or a “wave” of tracking or continuous work.
14. Templates – controlled documents that provide a large majority of the text in a required communication between CIRQ and a client or applicant; these templates are customized to the individual company or situation and become retained records when completed.

**Workbooks** – controlled documents set-up as Excel workbooks to ensure the quality and consistent completion of a series of required steps within various procedures; completed workbooks become records that shall be maintained.

### **III. Scope of Certification Body**

CIRQ has been established to provide auditing and certification services to CASRO members, as well as to other survey research service providers. The scope of certifications in 2010 focused on companies headquartered in North America (members and non-members) and any remote locations which contributed significantly to the delivery of the products and services they offer. As anticipated, CIRQ acquired just a small number of clients in 2010. The focus will be on North American companies (members and non-members of CASRO) and targeted geographic expansion as a secondary focus. CIRQ will offer its services to non-North American companies who proactively contact CIRQ as long as CIRQ resources can continue to support the primary focus on North American companies. CIRQ will not provide consulting services to research service providers about how to achieve/maintain certification, nor will they provide any other products or services which would compromise the confidentiality, objectivity, or impartiality of its certification process and decisions.

CIRQ certification services will not be restricted to, nor are these services conditional upon, the number of certifications issued.

The scope of this Quality Manual, and the Quality System (QS) it describes, is to address the policies and procedures needed to meet the requirements of:

1. *Global Specification Protocol for Organizations Certifying to an ISO Standard related to Market, Opinion and Social Research. (document written by ICF – International*

*Certification Forum – committee formed out of TC 225 to manage audit and certification specifications)*

2. *ISO/IEC 17065:2012 Standard for Conformity assessment Requirements for bodies certifying products, processes, and services.*
3. *ISO/IEC 17021:2011 Conformity assessment Requirements for bodies providing audit and certification of management systems.*

This Quality System addresses the way in which business is conducted by CIRQ in providing auditing and certification services to CASRO members and non-members, relative to ISO 20252:2012 and/or ISO 26362. The policies and procedures of CIRQ are administered consistently, rigorously, and in a non-discriminatory way at all times.

References:

- Specification ICF
- ISO/IEC 17065:2012
- ISO/IEC 17021:2011
- CIRQ Intranet

#### **IV. Confidentiality and Conflict of Interest**

*(ISO/IEC 17065:2012 - Clause 4.5)*

##### **Confidentiality**

Protecting confidential CIRQ and customer information is critical to the integrity and reputation of CIRQ as a credible and authoritative certification body for ISO 20252:2012 and ISO 26362 standards and to maintaining CIRQ's legal and corporate establishment. It should be noted that since CIRQ is a wholly owned, non-profit subsidiary of CASRO, a U.S. trade association, much of its administrative and financial operations are public record for individuals who may want to better understand the non-profit status. All information and documentation obtained from or provided by companies during the auditing and certification process, shall be treated as confidential and may not be disclosed to any third party without the company's written consent. Information about an Organization which is already known to be available in the public arena may be disclosed without this written consent.

Unless authorized by the applicant in writing, details of applications for certification are also treated as confidential until the conclusion of the certification process. Upon certification, companies achieving certification and their scope of certification will be posted on the CIRQ website. Where a Company is unsuccessful in its application for certification, this information is not made available by CIRQ.

Where the law requires information about an applicant or certified company to be disclosed to a third party, CIRQ shall inform the customer of the information provided, as permitted by the law, or, where the law requires such information, without such consent.

All CIRQ staff (employees, independent contractors, advisory committee members, or consultants) shall maintain the confidentiality of the information referenced above. Confidentiality of such information is addressed in the agreements signed by independent contractors and consultants, plus it is addressed in the CIRQ Organization Handbook. Within CIRQ, confidential information should be discussed only with those who, according to their position description, have a role to play.

## **Conflict of Interest**

CIRQ staff and contractors are prohibited from engaging in any conduct, activity, practice, or act which conflicts with, or appears to conflict with, the interests of CIRQ, including any conduct which is directly or indirectly unethical, dishonest, disloyal, disruptive, competitive or damaging to CIRQ's interests. CIRQ personnel shall not accept any money or other gifts or favors of more than nominal value from such an enterprise, particularly in situations where certification judgment may be influenced.

Personnel are expected to regulate their business conduct and business knowledge so as to avoid loss (either monetary or informational) to CIRQ that might arise from their influence on CIRQ decisions or their knowledge of CIRQ business and plans. Personnel are expected to:

- Foster professional conduct that reflects positively on CIRQ, its stakeholders, and the market, opinion and social research industry.
- Protect the organization from financial loss.

There must be no unreported business relationship with any enterprise that supplies, benefits from, or competes with CIRQ.

CIRQ personnel must declare any interest in or connection with an applicant company, certified company, or other company involved in or subject to the certification process, before taking on any assigned work, or before the situation arises. Such interests or connections apply to past, present and future involvement with the company and may include (but is not limited to):

- having worked with, or consulted with, the company in the past two years; or having reasonable future prospect of such work;
- having any immediate family member working with, or consulting with, the company in the past two years; or having reasonable future prospect of such work;
- owning shares, or have any immediate family member owning shares, in the company or parent company;
- having, or immediate family member having, any other commercial or voluntary arrangement or directorship with the company;
- having a relationship with either an applicant or a certified company; or
- being in direct competition with an applicant or certified company.

Declarations should normally be in writing, but the situation may arise where a verbal declaration is necessary, such as in a meeting. Such declarations and the outcomes shall be documented and retained at CIRQ offices. Any person in doubt about whether a potential conflict of interest exists shall immediately place the facts before the Managing Director for his/her determination. And should the Managing Director be in doubt about whether a personal potential conflict of interest exists, he/she shall immediately place the facts before the Advisory Committee for their determination.

References:

- CIRQ Organization Handbook
- Agreements signed by Consultants and Independent Contractors

## **V. Organization Responsibilities and Authority**

*(ISO/IEC 17065:2012- Clauses 4.1, 6.1.2.2)*

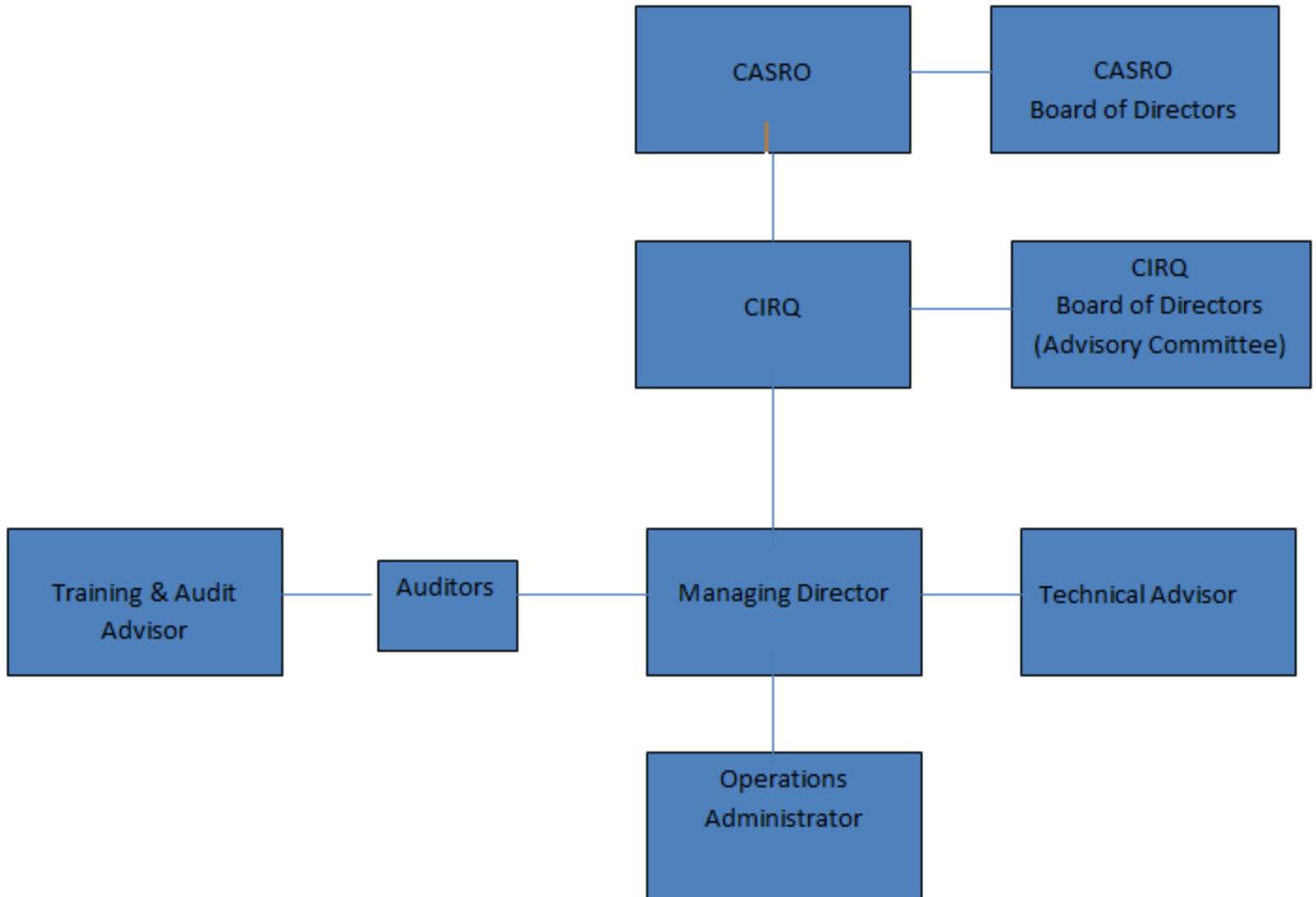
CIRQ is set up as a wholly owned, non-profit subsidiary of CASRO in order to facilitate impartiality and foster confidence in the auditing it conducts and the decisions it makes regarding certification to ISO 20252:2012 and ISO 26362. Documentation of CIRQ's legal status and liability insurance are maintained at CIRQ offices. The CASRO organization has provided funding for the launch of CIRQ and separate financial records are maintained for both organizations. Financial records are securely maintained at the offices shared by CASRO and CIRQ.

The organizational chart on the next page reflects the general structure of CIRQ. This management structure has been established to represent the development and launch phase of CIRQ, a 12 to 18-month period in which CIRQ will gradually increase and expand its staff and services within the marketplace.



# CIRQ

## Organizational Chart 2014



The CIRQ Management Committee consists of a Managing Director, and CASRO President.

CIRQ management (Managing Director and CASRO President) are committed to the development, implementation and continual improvement of its QS. This commitment is demonstrated by:

- Ensuring that a Quality System is established, implemented, and maintained in accordance with ISO/IEC 17065:2012, ISO/IEC 17021:2011 and Specification ICF; and that the policies and procedures of CIRQ are impartially administered;
- Establishing the CIRQ Quality Policy and Quality Objectives (see page 17);
- Conducting periodic internal audits and Management Reviews to monitor the performance and effectiveness of the QS;
- Providing the necessary resources to perform the activities described in their Quality System; and
- Communicating the importance of CIRQ's role in the survey research industry to CIRQ staff and customers;

CIRQ management ensures that QS responsibilities and authorities are defined and communicated within the organization, and among its Auditors and subcontractors. The following rules apply:

- A Managing Director who is a current CASRO full time employee.
- A Training and Audit Advisor, who serves on a part-time basis, as an Independent Contractor
- A Technical Advisor, who serves on a part-time basis, as an Independent Contractor
- An Operations Administrator who is a current CASRO full time employee.
- An Advisory Committee *ISO/IEC 17065:2012 Clause 5.1*) made up of volunteers who serve on a part-time basis and in an honorary capacity, consisting of:
  - Managing Director of CIRQ
  - President of CASRO
  - CASRO Board member
  - CASRO member, but non-Board member
  - CASRO's General Counsel
  - The individual responsible for the quality system in a CIRQ customer company certified to ISO 20252:2012
  - The individual responsible for the quality system in a different CIRQ customer company certified to ISO 26362
  - A representative from another national association, if any, that establish collaborative relationships with CIRQ
- CIRQ trained Auditors including Independent Contractors

The President of CASRO shall have interim financial responsibility for CIRQ. The Managing Director will report to the President of CASRO. The Training and Audit Advisor, the Technical Advisor, the Operations Administrator and the Auditors will report to the Managing Director. As the base of customers grows additional positions may be created.

CIRQ shall not delegate the authority for granting, maintaining, extending, suspending or withdrawing certification to an outside person or authority.

People hired for new positions, with the exception of the current CASRO employee and Board members, will sign agreements outlining their responsibilities with regard to confidentiality, conflict of interest, and non-solicitation. CASRO employees and Board members will work in accordance with the existing CIRQ Organization Handbook, kept on site at the CASRO/CIRQ offices. During orientation training, CIRQ management and Auditors are trained on their specific QS responsibilities outlined

below. Responsibilities of CIRQ staff will be carried out in accordance with CIRQ's policies and procedures.

### **Managing Director**

This role has overall responsibility for operational matters as detailed in the C1 through C11 Procedure document (Level 2). Additional responsibilities include:

- Maintain the general operational matters of the CIRQ Quality System in such a way to create confidence in and credibility with its auditing and certification services on a global basis
- Hire all CIRQ staff, including Auditors, and ensure auditors complete training
- Oversee activities of auditors and conduct annual review of their performance
- Review and approve all audit materials including making final determination on certification matters or refer to CIRQ Advisory Committee for input
- Regularly review customer satisfaction results and take action as needed
- Serve as liaison with external parties on matters relating to the quality system
- Create and support promotion of ISO 20252:2012/26362 certification to CASRO members and non-members and other entities as opportunities arise
- Develop and support new client audit and certification activities
- Develop and manage relationships with global entities interested in or supporting certification for their regions
- Deliver periodic reports to CIRQ's Advisory Committee on the performance of the Quality System's effectiveness and as a basis for determining improvement of the Quality System
- Develop and report financial projections with CASRO President
- Represent CASRO and CIRQ at industry events
- Develop new CIRQ offerings

Qualifications, Competencies and Knowledge requirements:

- Competent in the interpretation of ISO 20252:2012 and ISO 26362
- Knowledge of and understanding of the CIRQ operational procedures and those CASRO procedures which may impact on CIRQ management activities
- Market, opinion and social research industry knowledge and/or experience
- General computer skills
- Report writing skills
- Communication and consultation skills

### **Training and Audit Advisor**

- Support promotion of ISO 20252:2012/26362 certification to CASRO members and non-members
- Create and deliver training programs for interested companies.
- Represent CIRQ and speak at industry events.
- Council auditors on practices as needed.
- Sign a confidentiality, non-compete, and non-solicitation agreement

Qualifications, Competencies and Knowledge requirements:

- Competent in the interpretation of ISO 20252:2012 and ISO 26362
- Competent in the auditing procedures and documentation process as established by CIRQ
- Market, opinion and social research industry knowledge and/or experience
- General computer skills
- Report writing skills
- Communication and consultation skills

## **Technical Advisor**

This role has overall responsibility for technical matters as detailed in the C1 through C11 Procedure document (Level 2). Additional responsibilities include:

- Technology and technical oversight and direction regarding the operations of CIRQ
- Oversight and guidance regarding the technology, as well as the technical aspects, related to ISO 20252:2012/26362 certification
- Support promotion of ISO 20252:2012/26362 certification to CASRO members and non-members
- Deliver periodic reports to CIRQ's Advisory Committee on issues related to technology and the performance of the Quality System's effectiveness in relation to technology and technical matters
- Sign a confidentiality, non-compete, and non-solicitation agreement

Qualifications, Competencies and Knowledge requirements:

- Competent in the interpretation of ISO 20252:2012 and ISO 26362
- Market, opinion and social research industry knowledge and/or experience
- Strong information technology and technical knowledge and experience pertinent to those technologies and approaches used, and projected to be used in the market, opinion and social research industry. Recent research experience in this area is preferred.
- Report writing skills
- Communication and consultation skills

## **Operations Administrator**

- Day-to-day financial responsibilities (invoicing, etc.)
- Develop cost quotations according to CIRQ procedures
- Track audit work flow including auditor responsibilities Serve as the Administrator for the CIRQ Intranet site
- Assist in the refining of the CIRQ procedures (C1-C11 and supporting procedures)
- Revise old forms and developed new ones to better address CIRQ's needs
- Support internal audit program
- Manage the Complaint, Appeal and Dispute procedure
- Update of CIRQ Quality manual as needed/required to maintain self-certification status
- Represent CIRQ at industry events as needed
- Field phone and email inquiries
- Participate in marketing creation and associated efforts
- Update website

Qualifications, Competencies and Knowledge requirements:

- Competent in the interpretation of ISO 20252:2012 and ISO 26362
- Competent in the auditing procedures and documentation process as established by CIRQ
- Market, opinion and social research industry knowledge and/or experience
- General computer skills
- Report writing skills

Communication and consultation skills

### **Advisory Committee:**

To ensure impartiality and independence of CIRQ from CASRO, an Advisory Committee (AC) will be appointed by the CASRO Board. This committee comprises individuals with appropriate experience and expertise drawn from a cross section of disciplines. This committee should represent all parties concerned in the development of policies and principles regarding the functioning of CIRQ. There may be a need to supplement this committee from time to time due to resignations, workload etc. Prospective members may be identified by the Managing Director of CIRQ, the President of CASRO, or other Advisory Committee members. Members of the AC or technical experts with appropriate expertise shall evaluate the nominee's competence, before a recommendation is made.

Responsibilities include:

- Ensure the independence and impartiality of CIRQ
- Play an advisory role regarding policies and strategies of CIRQ
- Approve appointment of, and continue liaison with, CIRQ's management team
- As requested by -Managing Director, assist with complaint/appeal resolution
- Ensure adherence to the policies and procedures in the CIRQ Organization Handbook, which incorporates relevant sections of the CASRO Board of Directors Book, including the Code of Conduct and the Code of Standards and Ethics for Survey Research.

### **Auditors:**

A pool of Auditors has been established for CIRQ from which certification auditing teams (or individuals) are appointed. The Auditors appointed shall be independent and free of any conflict of interest in performing their function. This role has overall responsibility for audit management functions as detailed in the C1 through C11 Procedures document (Level 2). Additional responsibilities include:

- As part of the Auditor pool and following assignment of audit functions to the Auditors, Auditors shall keep the Managing Director informed of all activities related to the audit, including changes that may occur throughout the process. Communications shall be undertaken in a timely manner.
- Use of the audit and other support tools provided by CIRQ
- Limit all reporting to the Managing Director, to ensure the interests of all parties are preserved
- Sign a confidentiality, non-compete, and non-solicitation agreement, when first hired as an auditor
- Confirm that they have no conflict of interest related to the assigned client prior to each audit

Qualifications, Competencies and Knowledge requirements:

- Competent in the interpretation of ISO 20252:2012 and ISO26362
- Trained auditor according to the training standards prescribed by CIRQ
- Market, opinion and social research industry knowledge and experience
- General computer skills
- Report writing skills
- Communication and consultation skills

### **CIRQ Personnel**

Names, qualifications, and experience of CIRQ Management and Auditors can be established by referencing files established and maintained on the CIRQ Intranet site (see CIRQ Records/Personnel Records folder).

**Relationship to CASRO**

CIRQ is a wholly owned, non-profit subsidiary of CASRO and shall operate independent of CASRO other than the fact that facilities and several staff members will be shared. CASRO is providing funding to CIRQ as needed during the launch period. These funds will be repaid to CASRO as CIRQ begins to generate its own revenue and profit.

References:

- Procedures document C1 – C11
- CIRQ Auditor Training Manual Version Feb. 2013
- CIRQ Operating Agreement
- IRS Group Exemption for CIRQ

**VI. Operations**

*(ISO/IEC 17065:2012- Clause 7)*

This CIRQ Quality Manual lays out the certification scheme, according to the ICF Specification, that shall be applied to companies seeking certification. These companies shall meet the requirements of ISO 20252:2012 and/or ISO 26363 as appropriate to the survey research products/services offered by the company. These companies will also comply with the appropriate code of standards for the industry associations in which they hold membership, and comply with appropriate laws based on their geographic location.

This manual includes details regarding the auditing (assessment) process that include procedures for selecting and training auditors, as well as procedures for sampling research projects performed by and representing the customer’s product, and the actual auditing (testing and inspecting) of the customer’s product (via the sampled projects).

Following is a high level outline describing the process of certification beginning with the initial request from a prospective client, to the issue of the Certificate of Compliance, and through the 3 year cycle of Surveillance Audits and the Re-Certification Audit.

STEP	APPLICANT COMPANY (PROSPECTIVE CLIENT)	CIRQ
<b>1. APPLICATION PROCESS</b>		
Applicant contacts CIRQ for information regarding certification <ul style="list-style-type: none"> <li>• Request for Quotation Form</li> <li>• Authorization to Proceed Form</li> <li>• Client Checklist</li> </ul>	Complete RFQ Form to receive an Estimated Cost Quotation. Return Authorization to Proceed along with Application Fee to CIRQ	Returned forms are logged by CIRQ. They are reviewed and confirmed as complete/eligible to proceed. Audit scope, objective and criteria are defined and confirmed with the applicant.
<b>2. SELF ASSESSMENT</b>		
Self-Assessment Form and invoice for Pre-Assessment are sent electronically to the Applicant once the application is approved.	Applicant completes the Self-Assessment Form. Queries can be directed to CIRQ via email or phone.  The Self-Assessment and the company’s Quality Manual are returned to CIRQ electronically with other attachments as requested	CIRQ receives and logs the completed Self-Assessment and attachments.  Self-Assessment and Quality Manual are checked for completeness prior to being assigned to an auditor for the Pre-Assessment.

STEP	APPLICANT COMPANY (PROSPECTIVE CLIENT)	CIRQ
	<p>within the document.</p> <p>Payment for the Pre-Assessment must also be sent at this time to enable the process to continue.</p>	
<b>3. PRE ASSESSMENT PROCESS</b>		
<p>The Self-Assessment and Quality Manual are now reviewed against the ISO Standard and Scope of Certification on Application to determine completeness and Applicant's preparedness for certification.</p> <p>A Pre-Assessment Report is provided to the Applicant on completion of this process.</p>	<p>The Applicant may be required to provide additional information or clarifications during this process when requested by a CIRQ representative.</p>	<p>The assigned Auditor undertakes a desk top review [Pre-Assessment] of the information provided in the Self-Assessment and Quality Manual against the requirements of the ISO 20252:2012 and/or 26362 standards and against the Scope of Certification on the Application.</p> <p>Recommendation is made to proceed to the on-site audit <b>or</b> a request may be made to address issues arising in the Pre-Assessment first.</p>
<b>4. PLANNING THE AUDIT</b>		
<p>This is the stage when CIRQ and the Client communicate to plan and arrange the onsite audit.</p> <p>Outputs include:</p> <ul style="list-style-type: none"> <li>• Audit Schedule</li> <li>• Certification Agreement</li> <li>• 50% partial payment for the expected initial certification audit costs</li> </ul>	<p>The scope of the audit may need to be clarified to determine the ISO clauses covered at each location and the various sites/locations to be audited.</p> <p>The Applicant will be contacted by CIRQ at this stage.</p> <p>The Applicant will be required to sign off (email acceptable) on the Audit Schedule, the Certification Agreement, and pay 50% of the initial Certification Audit costs prior to proceeding with the on-site audit.</p>	<p>CIRQ contacts the Applicant and develops the Audit Schedule in consultation with the Applicant.</p> <p>Logistics and multi-location details will need to be confirmed.</p> <p>CIRQ confirms that the Audit Schedule, Certification Agreement, and 50% payment are received prior to proceeding with the audit.</p> <p>A Technical Advisor [for Information Technology matters] may need to be involved in part of the audit, or involved prior to the onsite audit to confirm technical aspects depending upon the scope of the audit and the Applicant's reliance upon data management systems. This will be discussed and agreed prior to the start of the on-site audit.</p>
<b>5. EXECUTION OF THE AUDIT</b>		
<p>This is the on-site audit process.</p> <p>Client headquarters will always be the first location audited followed by other locations as per the Audit Schedule.</p>	<p>The Quality Representative will need to organize auditor access to documents and personnel in order to ensure the audit process is seamless.</p> <p>The Lead Auditor will confirm who</p>	<p>Auditors will confirm in writing, prior to commencing work, on each audit that no conflict of interest exists with the particular client.</p> <p>Auditors will seek objective evidence to</p>

	should receive the Audit Report, which will be sent electronically, within 2 weeks of the actual on-site audit.	establish compliance to the ISO clauses according to the scope of audit.
<b>6. AUDIT REPORT</b>		
As a result of the audit an Audit Report is prepared by the Auditor/s and submitted to CIRQ.  The Final Audit Report is approved by CIRQ management prior to being sent to the Client.	It may be necessary, from time to time, for the Lead Auditor to contact the Client's Quality Representative in order to clarify matters while preparing the final audit report.	All members of the audit team have input into the final report. The Lead Auditor shall provide the final report to CIRQ for review and approval. The Lead Auditor and CIRQ management will consult to ensure approval of the Final Report. CIRQ management will make the decision regarding certification.
<b>7. CERTIFICATION</b>		
The Audit Report and final invoice is sent to the client. The final invoice will include: <ul style="list-style-type: none"> <li>• Final cost of audit</li> <li>• Certification Fee</li> <li>• Annual Management Fee</li> </ul>	The Audit Report will be received within 2 weeks following the last day of on-site auditing.  If details regarding the Client company's structure, services offered or their Quality Representative change, please inform CIRQ to ensure the ongoing audit scheduling can be maintained.	Certificate of Compliance is issued when the payment of the final invoice is received.  Client name and scope of certification is added to the Certification Register on the CIRQ website
<b>8. CLIENT FEEDBACK</b>		
Feedback is requested from the Client after each audit	Appropriate Client personnel will be asked to participate in a short survey with the Managing Director of the CIRQ organization.	A member of CIRQ management will contact the Client to collect their feedback regarding their recent audit experience, in order to improve CIRQ services.
<b>9. 1<sup>ST</sup> SURVEILLANCE AUDIT</b>		
Planning for 1 <sup>st</sup> Surveillance Audit begins approximately 9 months following the Certification Audit	The Client's Quality Representative will work with CIRQ to begin this planning process.	CIRQ will contact the Client to initiate this process.
<b>10. 2<sup>ND</sup> SURVEILLANCE AUDIT</b>		
Planning for 2nd Surveillance Audit begins approximately 9 months following the 1 <sup>st</sup> Surveillance Audit	The Client's Quality Representative will work with CIRQ to begin this planning process.	CIRQ will contact the Client to initiate this process.
<b>11. RE-CERTIFICATION AUDIT</b>		
Planning for the Re-Certification Audit begins approximately 9 months following the 2nd Surveillance Audit	The Client's Quality Representative will work with CIRQ to begin this planning process.	CIRQ will contact the Client to initiate this process.

The various processes that are part of this certification scheme are defined briefly in this Quality Manual, and in more detail within the Level 2 procedures.

## **References:**

- Level 2 documentation for Core procedures maintained on the CIRQ Intranet site
- Level 3 documentation containing forms, workbooks, checklists, and templates pertaining to Core procedures 1 through 11, maintained on the CIRQ Intranet site
- Auditor Training Manual Version Feb. 2013

## **VII. Quality Policy**

The quality policy of CASRO's Institute for Research Quality (CIRQ) is.....

*CIRQ is committed to providing timely, thorough and impartial assessment of their customers' quality management systems in order to make a determination regarding certification to ISO 20252:2012 and/or ISO 26362.*

This quality policy is shared with all CIRQ staff and posted on CIRQ's website. The management of CIRQ ensures that the quality policy is communicated and understood within the organization through appropriate training, personal reinforcement, and implementation of quality objectives.

This quality policy and the Quality System are reviewed regularly to ensure that they:

- are appropriate and suitable for the organization;
- include a commitment to comply with requirements and to continually improve the effectiveness of the quality system; and
- provide a framework for establishing and reviewing quality objectives.

## **VIII. Quality Objectives**

CIRQ's objectives are to:

- Provide a valuable service to members and non-members that will help them strengthen the quality of the survey research services they provide;
- Be the foremost respected certification body in North America for certification of research service providers to the ISO 20252:2012 and ISO 26362 standards; and
- Establish strong links with other certification bodies and relevant organizations with coverage outside of North America.

## **IX. Quality System**

*(ISO/IEC 17065:2012 Clause 8.1)*

CIRQ has established, documented and maintains a Quality System (QS). The system is regularly reviewed to identify ways in which its effectiveness can be improved in accordance with the requirements of ISO/IEC 17065:2012. Documentation for this system exists at several levels that start with a very broad and general perspective at Level 1 and become more detailed and specific at subsequent levels. These levels are described below:

**Level 1 Documents** consist primarily of the Quality Policy, the Quality Objectives and this Quality Manual, along with several other documents that are controlled and only change on a very infrequent basis such as the Schedule of Fees. The Quality Manual contains the Quality Policy and the Quality Objectives and also references other policies and the processes constituting the Quality System, which have been established to conform to the requirements of ISO/IEC 17065:2012.

The Quality Manual also contains references to QS procedures (Level 2 Documents), which further detail the processes defined later in this document.

**Level 2 Documents** include detailed procedures required by ISO/IEC 17065:2012. They define steps taken to ensure the quality of services offered by CIRQ, show who is responsible for implementing the procedure, and indicate timelines for key steps of various procedures. Related forms, checklists, templates, etc., reference materials, and required records are referenced in the procedures.

**Level 3 Documents** are the standard Forms, Checklists, Templates, and Workbooks, required when implementing particular tasks of a procedure where the absence of such documents may adversely affect quality.

**Level 4 Documents** are the Records created as a result of the Quality System to provide objective evidence of compliance to requirements and of the effective operation of the QS. Level 4 documents include all records required by ISO/IEC 17065:2012

**Advisory Notes:** Advisory Notes are issued on an as required basis to clients, auditors and other CIRQ staff. The intention of the Advisory Note is to standardize understanding and approach by clients, CIRQ auditors, and other CIRQ staff; and to notify the same audiences when changes to Guide 65 require changes to the CIRQ Quality System, or when there are changes to the ISO 20252:2012 or ISO 26362 standards

CIRQ has identified 11 Core and 8 Support processes needed for its QS to provide consistent auditing and certification services to its customers. These Core & Support processes address the requirements of *Cluses 7.11, 7.12, 8.3, 8.6, and 4.1.3, 6.1, 7.2, 7.2, 7.4, 7.4.6, 7.6, 7.9, 7.10, 7.13, of ISO/IEC 17065:2012* and are defined below.

**References:**

- S6 Documentation Procedure
- CIRQ Intranet Site

## **A. Core Process Definitions**

The Managing Director has overall responsibility for the Core procedures supported the Operations Administrator and the auditors on specific steps.

### **C1. Application for Certification**

*(ISO/IEC 17065:2012 - Clause 7.2)*

Companies seeking to be certified to ISO 20252:2012 and/or ISO 26362 shall have implemented a Quality System including documentation meeting the requirements of the appropriate standard; and shall be able to demonstrate approximately 3 months compliance against the standard immediately preceding the date of the Pre-Assessment, in order to show the sustainability of their system. The company then contacts CIRQ to make arrangements for required audits and certification. CIRQ shall require companies interested in becoming certified to electronically submit an RFQ and Authorization to Proceed, as well as the application fee to begin the process.

CIRQ shall then review the RFQ and Authorization to Proceed to confirm the requested scope of certification and shall define the objective and criteria for the audit, obtaining Client agreement on same. CIRQ's Managing Director has primary responsibility for this process.

**Required Records:**

- Completed RFQ (FC1001)
- Authorization to Proceed (FC1003)
- Standard Certification Agreement TC4001

**References:**

- Detailed procedures for the Application process in the Core 1-11 Procedure document (Level 2)
- Audit & Certification Fees DC1001
- Audit Journey DC1002

**C2. Self-Assessment**

In order to assist in determining if the company is ready for ISO certification and has the required documentation in place with sufficient evidence to support it, the applicant company will be asked to complete a self-assessment which aligns with all requirements of the specific standard to which they wish to be certified. This Self-Assessment once completed and returned to CIRQ, along with the applicant's Quality Manual, will help determine the Audit Schedule and will be used by the Auditor to complete the Pre-Assessment.

When the Self-Assessment is returned along with the Quality Manual, the auditor (assessor) for the Pre-Assessment is assigned by the Managing Director, and the completed Self-Assessment and Quality Manual are sent to the Auditor, along with any other required documents that were submitted with the Self-Assessment.

When the Self-Assessment form is sent to the applicant, the applicant company will also be sent the invoice for the Pre-Assessment which shall be paid prior to beginning the Pre-Assessment.

**Required Records:**

- Completed Self-Assessment (FC2001, 2002, or 2003)
- Applicant's Quality Manual

**References:**

- Detailed procedures for the Self-Assessment in the Core 1-11 Procedure document (Level 2)

**C3. Pre-Assessment**

The Pre-Assessment will begin when payment for this stage is received. The objective is again to help determine that the applicant's Quality System appears to meet a large majority of the requirements of ISO 20252:2012 and/or ISO 26362, and that their system has been in place for approximately 3 months prior to the on-site Certification Audit. The Pre-Assessment process takes place off-site and involves a review of the Self-Assessment and the company's Quality Manual. A Pre-Assessment report is prepared by the auditor. This report involves the calculation of a score and CIRQ requires a company to score 90% in each section of the Pre-Assessment in order to move on to the Certification Audit. Any discrepancies contributing to less than a 90% score are pointed out in the Pre-Assessment Report.

This report is sent to CIRQ management for review and approval, and then sent to the applicant company within 2 weeks following CIRQ's receipt of the Self-Assessment. Any discrepancies pointed out in the Pre-Assessment Report need to be addressed and corrected prior to the on-site audit.

**Required Records:**

- Pre-Assessment Report (WBC3001, 3002, 3003)
- Certification Log (FC2004)

**References:**

- Detailed procedures for the Pre-Assessment in the Core 1-11 Procedure document (Level 2)
- Auditing Manual, version February 2013
- ISO 20252:2012 Standard
- ISO 26362 Standard

**C4. Planning for Audits**

*(ISO/IEC 17065:2012 - Clause 7.4.1)*

Preparation for the Certification Audit begins when the Pre-Assessment is complete and any discrepancies identified at this time have been corrected by the Client.

At this stage, the Managing Director assigns the auditor(s), and confers with the audit team about audit logistics and locations. The Operations Administrator confirms that there is no conflict of interest on the part of the auditors. In most cases the Lead Auditor should be the same person as the one who conducted the Pre-Assessment. And where practical, CIRQ will strive to retain the same Lead Auditor for a 3-year cycle of audits. This Lead Auditor may be changed at the Re-Certification Audit to provide a fresh perspective on the customer's Quality System.

The Audit Schedule is prepared and sent to the client for their signature, along with the Certification Agreement and an invoice for 50% of the Certification Audit fee. When these two signed documents are received back from the Client and payment of the 50% of audit fees are received, CIRQ can proceed with the on-site audit.

**Required Records:**

- Audit Schedule (FC4001)

**References:**

- Detailed procedures for Audit Planning in the Core 1-11 Procedure document (Level 2)
- Auditing Manual, version February 2013
- On-site Audit Tool Workbook (WBC4001, 4002, 4003)
- Applicant's RFQ (FC1001)
- Completed Self-Assessment (FC2001, 2002, 3003)
- Pre-Assessment Report (WBC3001, 3002, 3003)

**C5. Execution of Audits (Certification, Surveillance, and Re-Certification)**

*(ISO/IEC 17065:2012 - Clauses 7.4, 7.9, 7.13)*

The Certification Audit shall take place at the Company's headquarters location and, based on the Audit Schedule, at a sampling of other non-headquarter locations beginning with the most significantly sized

ones. Processes and activities carried out by the Company, within the scope of ISO 20252:2012 and/or ISO 26362, and that most significantly affect the quality of the company's product or service shall be included in the Certification Audit. Where processes and activities relate to projects, a sufficient number of projects, or sampled sections of projects, shall be audited to enable a decision to be made relating to compliance or non compliance to the audit criteria.

The records reviewed in the audit should also cover both current and closed projects. Companies shall have approximately 3 months of project records including completed projects in order to undergo a Certification Audit. There shall be adequate documentation to demonstrate the sustainability of the company's quality system.

The first Surveillance Audit, after certification, shall be carried out within a period not greater than twelve (12) months after the date of certification and thereafter at intervals of not more than twelve (12) months. Each Surveillance Audit shall cover:

- a sample (ideally 50%, but not less than 30%) of the activities and processes carried out by the Company, which are within the scope of ISO 20252:2012 and/or 26362
- a review of procedures connected with any Area of Concern or Non-Conformance noted in the previous audit
- any changes made to the Company's processes and procedures since the last audit
- any additional requirements that now need to be met based on revisions to the standard

Over a period of not more than three (3) years, the Surveillance Audits shall cover **all** activities and processes carried out by the Company which are within the scope of ISO 20252:2012 and/or 26362, as well as **all** locations of the Company.

After a period of not more than three (3) years from the date of certification, a Re-Certification Audit shall be carried out and shall cover **a majority of all** activities and processes carried out by the Company which are within the scope of ISO 20252:2012 and/or 26362, and which significantly affect the quality of the product or service offered by the company; plus a review of the findings of all Surveillance Audits carried out since certification, or the last re-certification. Over the course of this three (3) year cycle all of the Company's locations (other than the headquarters location) shall be audited at least once. The headquarters location shall be part of every audit over the 3-year cycle.

An Audit Report will be prepared following each audit, as described in the C6 process described below.

#### **Required Records:**

- Completed On-Site Audit Workbook (WBC4001, 4002, 4003)
- Certification Log (FC2004)

#### **References:**

- On-site Audit Tool Workbook (WBC4001, 4002, 4003)
- Pre-Assessment Report (WBC3001, 3002, 3003)
- Auditing Manual version February 2013
- ISO 20252:2012 Standard
- ISO 26362 Standard

### **C6. Preparation of Audit Reports**

*(ISO/IEC 17065:2012 - Clause 7.4.6)*

Upon completion of each audit, the assigned Auditor (or the Lead Auditor) shall prepare a report to indicate conformance (or non-conformance) with all requirements of the appropriate ISO standard. This report will identify any Non-Conformance or Area of Concern that must be addressed within a specified time limit, and whether additional auditing will be required before certification can be granted or renewed. It may also include opportunities for improvement and observations about the company's

quality system. This report will be sent first to CIRQ and following CIRQ's review and approval, it will be sent to the customer along with notification regarding certification status.

**Required Records:**

- Audit Report (WBC6001)
- Open Non-Conformance Log (WBC6001)
- Closed Non-Conformance Log (WBC6001)
- Certification Log (FC2004)

**References:**

- On-site Audit Tool Workbook (WBC4001, 4002, 4003)
- Audit Report Workbook (WBC6001)
- Auditing Manual version February 2013

**C7. Certification**

*(ISO/IEC 17065:2012 - Clauses 7.6, 7.11)*

a). Granting, Maintaining, Extending, Renewing and Reducing Certification

When the assigned Auditor (or Lead Auditor) is satisfied that the Company's QS documentation and implementation meets the requirements of the appropriate ISO Standard, a recommendation shall be made to issue a Certificate of Compliance. On approval by the Managing Director of CIRQ, a certificate will be issued and the CIRQ

Certification Register on CIRQ's website will be updated with the Company's name and Scope of Certification details. The issue of a Certificate of Compliance in no way suggests or implies that any certified activity, process, product or service of the Company is approved by CIRQ or CASRO. The Company must establish and maintain procedures for notifying their clients of any goods or services provided or produced outside the certification scope registered with CIRQ.

Certification to the specified ISO standard is valid for three years subject to ongoing Surveillance Audits, which usually occur at twelve-month intervals. CIRQ will advise certified companies of any change in their Audit schedule. A Re-Certification Audit of the Company's Quality System will be undertaken prior to the expiration of certification. A successful Re-Certification Audit will result in renewal of the Company's Certificate of Compliance for a further three years. However, where the Re-Certification Audit cannot be conducted prior to expiration of Company's Certificate, CIRQ will grant a reasonable extension until the Re-Certification Audit can be scheduled and new certificates issued. The certified company has the right to reduce or expand its scope of certification, at any time. Any requests to do so must be made in writing to CIRQ.

b). Suspension or Withdrawal of Certification

CIRQ reserves the right to suspend or withdraw the Certificate of Compliance at any time. The Certificate may be suspended should the Company:

- a. fail to complete corrective actions within the agreed time;
- b. misuse the Certification mark;
- c. fail to comply with the financial requirements of the Agreement entered into with CIRQ; or
- d. bring CIRQ into disrepute in any way.

CIRQ will assist the Company in taking appropriate remedial steps following suspension of the Certificate of Compliance, but should Company fail to do so within a reasonable time frame the Certificate of Compliance will be withdrawn.

Where withdrawal of Certification occurs, CIRQ will update its Register and website to make note of the withdrawal, request the return of the Certificate, and request that the Company discontinue the use of the Certification mark in any way. Certificates and marks of compliance remain the property of CIRQ.

**Required Records:**

- On-Going Assessment Log (FC7001)
- Certification Register on CIRQ Internet site
- Certificate of Compliance (TC7001, TC7002, TC7003)
- Letter explaining Certification, Denial of Certification, Suspension of Certification, or Withdrawal of Certification

**References:**

- Certificate of Compliance Template (TC7001, TC7002, TC7003)
- Certification mark and CIRQ logo
- S1 Terms of Use for CIRQ certification mark

**C8. Soliciting Customer Feedback**

During 2010, the Managing Director will contact each customer within 2 weeks of their Certification Audit to solicit their feedback. This conversation shall follow a prescribed outline of discussion points, shall be documented, and a record of the conversation shall be maintained in the customer's file. At the end of 2010 this process was reviewed and determined to be appropriate based on the volume of clients.

The process was reviewed and changed to the following:

The Customer Feedback Form is emailed to the client 2 weeks after the audit report has been delivered.

Follow up calls will be made where deemed necessary.

**Required Records:**

- Completed Customer Feedback Form (FC80010)

**C9. First Surveillance Audit**

This audit shall take place 12 months following the Initial Certification Audit. Planning for it will begin approximately 9 months in advance of the 12 month mark. More detail about the process related to this audit can be found in the C1-C11 procedures of Level 2 of the CIRQ Quality System.

**Required Records:**

- See steps C1-C8 above

**References:**

- See steps C1-C8 above
- Results of Initial Certification Audit

**C10. Second Surveillance Audit**

This audit shall take place 12 months following the First Surveillance Audit. Planning for it will begin approximately 9 months in advance of the 12 month mark. More detail about the process related to this audit can be found in the C1-C11 procedures of Level 2 of the CIRQ Quality System.

**Required Records:**

- See steps C1-C8 above

**References:**

- See steps C1-C8 above
- Results of Initial Certification Audit
- Results of 1<sup>st</sup> Surveillance Audit

**C11. Re-Certification Audit**

This audit shall take place 12 months following the Second Surveillance Audit. Planning for it will begin approximately 9 months in advance of the 12 month mark. More detail about the process related to this audit can be found in the C1-C11 procedures of Level 2 of the CIRQ Quality System.

**Required Records:**

- See steps C1-C8 above

**References:**

- See steps C1-C8 above
- Results of Initial Certification Audit
- Results of 1<sup>st</sup> Surveillance Audit
- Results of 2nd Surveillance Audit

**B. Level 1: Support Process Definitions**

**S1. Terms of Use for CIRQ Certification Mark**

*(ISO/IEC 17065:2012 - Clause 4.1.3)*

The CASRO Institute for Research Quality, INC. ("CIRQ") has established these Terms of Use to allow for the use of the CIRQ Certification Mark in a professional and legal manner by CIRQ-certified companies in their written and electronic literature and advertising. These Terms define the limitations of use by ISO 20252:2012 and/or ISO 26362 (the "Standards") certified companies of the CIRQ Certification Mark; and will be administered by the CIRQ Director(s) and Advisory Committee. These terms cover the use of the CIRQ Certification Mark only. The CIRQ logo is a separate and distinct graphic and is restricted to CIRQ use only.

1. Only companies who have achieved a successful audit to one or both of the Standards and have received a Certificate of Compliance from CIRQ are permitted to use the CIRQ Certification Mark.
2. The CIRQ Certification Mark will be delivered to the certified company electronically in both a gif format for website use and a jpeg format for print use. Other formats will be made available as needed. Guidelines for size and color usage will be delivered with the certification mark.
3. Certification approval and use of the Certification Mark is limited to the scope of audit determined by CIRQ and detailed on the Certificate of Compliance. Companies who have achieved certification will use the Certification Mark only in such a way so as not to create confusion between matters referred to in the scope of certification and other matters.
4. Divisions, parents, subsidiaries, sister companies and other affiliated companies are **not** permitted to use the CIRQ Certification Mark unless they have individually received certification by CIRQ to one or both of the Standards.
5. Companies that have achieved certification but are **not** Council of American Survey Research Organizations ("CASRO") members may only use the CIRQ Certification Mark and are not entitled to use the separate and distinct CASRO logo in their materials.

6. The use of CIRQ's name and/or the Certification Mark and/or the use of the CASRO name and/or logo are not an endorsement of the survey research firms that use any such name, certification mark, or logo. The CIRQ name and Certification Mark and the CASRO name and logo may not be used in any way suggesting product approval. The Certification Mark applies only to certification of the company's project management system according to the scope.
7. The use of the CIRQ Certification Mark following initial certification is subject to annual review based on the successful result of subsequent annual surveillance audits or the re-certification audit.
8. CIRQ reserves the right to suspend or withdraw a company's certification under one or both of the Standards and its use of the CIRQ Certification Mark based on failure to comply with the relevant Standard/s as determined by the outcome of a CIRQ audit, violation of conformance to the standard, or misuse of the Certification Mark.
9. These Terms of Use are subject to review and revision, the continued use of the Certification Mark after any such revision will be subject to such revised Terms of Use.
10. The CIRQ name and Certification Mark are trademarks of CIRQ. We reserve the right to require that you remove them from your site and discontinue use of them should it be determined there is a breach of any conditions laid out in these Terms.
11. CIRQ recommends the following language for use in promotional materials in relation to a company's CIRQ certification: [Insert company name] is committed to industry quality and maintains certification to [insert applicable standard(s)] (ISO 20252:2012 the International Standard for Market, Opinion and Survey Research and/or ISO 26362 the International Standard for Access Panels in Market, Opinion and Survey Research). This certification covers [insert scope of certification].

**References:**

- CIRQ logo(for internal CIRQ use only):



- CIRQ Certification Mark (for use by certified companies according to the Terms outlined above):



## **S2. Handling Appeals, Complaints, and Disputes**

*(ISO/IEC 17065:2012 - Clause 7.13)*

### **a). From Applicants or Certified Companies regarding CIRQ**

In the event a Customer or Applicant lodges an appeal regarding any application or certification-related decision, or complaint about the staff of CIRQ or its activities related to the auditing and certification process, or a dispute arises, the Managing Director along with two members of the Advisory Committee he/she selects (other than the President of CASRO and CASRO's General Counsel), will form a Review Panel, hereinafter referred to as the Panel. No member of the Panel shall have a direct interest in the subject of the appeal, complaint or dispute in any form. The Managing Director serves as the chairperson of this Panel and documents the fact that all members of the Panel, including him/herself, are free from any financial, commercial or any other pressures that might influence the results of the process. The Managing Director will make the company lodging the appeal, complaint, or dispute aware of this fact.

This Panel will review the appeal to determine its validity, or review the complaint or dispute to substantiate its content. If valid or substantiated, the Panel will proceed with the review process, and make the company lodging the appeal, complaint or dispute aware of the timeline for the review process. CIRQ strongly prefers that appeals, complaints or disputes be submitted in writing, to the Managing Director of CIRQ, by registered mail or equivalent within reasonable timeframes following the occurrence of the event which caused the appeal, complaint or dispute. Upon receipt, the Managing Director will acknowledge receipt to the sender and convene the Panel as soon as is reasonably possible.

If requested by members of the Panel to provide information in relation to an appeal, complaint or dispute, the staff involved in the event or audit of a company, or a decision related to an application shall do so. The provision of information will be without prejudice toward all others.

Panel members shall have an obligation of confidentiality concerning anything that might come to their knowledge during their function on this Panel, with regard to the certified company or applicant. They have the right to consult experts and to take all measures and make all provisions, including the convening of one or more sessions, deemed necessary for a sound judgment.

All communications regarding the appeal, complaint or dispute must be documented in writing and kept in the appropriate Appeal/Complaint/Dispute file on the CIRQ Intranet site. Members of the Panel shall judge in all fairness. The members are, however, bound by all applicable policies and procedures as documented in CIRQ's Quality Manual. The Panel decides on the appeal, complaint or dispute by a majority of votes and the Managing Director informs the parties concerned, in writing, of the judgment including the rationale for the decision, and any subsequent corrective actions required. The judgments of the Panel are considered binding. The Managing Director shall follow up to ensure that recommended actions have been taken and are effective according to the Corrective Action procedures, document the outcome in the appropriate Appeal/Complaint/Dispute file, inform the other Panel members, and update the appropriate register.

b). From companies or from individuals about a certified company

Individuals participating in a research project conducted by a certified company or another company that becomes aware of a certain practice employed by a certified company may contact CIRQ to file a complaint about the certified company. In these instances, a number of steps will occur:

1. the individual or company will be requested to contact CASRO, so that CASRO can review the situation against the CASRO Code of Standards and Ethics for Survey Research and take appropriate action;
2. the complaint will be passed on to the certified company and they will be asked to take appropriate action to address the complaint; and
3. a record of the complaint will be saved in the Client Master file on the CIRQ Intranet site and entered into the Complaint/Appeal/Dispute Log.

Depending on the severity of the complaint as it relates to the requirements of the ISO standard(s) to which the company is certified, it may be followed-up on at the next audit (for less severe complaints) or a random audit may be scheduled to follow up on it prior to the next scheduled audit (more severe complaints).

**Required Records:**

- Appeal/Complaint/Dispute Forms (FS2001) submitted to CIRQ
- Appeals/Complaints//Disputes Log (FS2002)

**References:**

S2 Procedure for Handling Appeals/Complaints/Disputes (Level 2)

**S3. Internal Audits and Corrective Actions**

*(ISO/IEC 17065:2012– Clause 8.6)*

CIRQ will periodically conduct internal audits of its Quality System in order to ensure that:

- a. all policies and procedures are being implemented as described in this manual and in the more detailed Level 2 Procedures ;
- b. the QS remains suitable, adequate, and effective; and
- c. opportunities for improvement are identified and acted upon.

During 2010 and 2011 the frequency, volume and style of audits will be determined by the number of

customers CIRQ acquires for its auditing and certification services. When the level of customer activity reaches a substantive level, more specific procedures will be identified to address the frequency, style and quantity of internal audits to be conducted.

Internal auditors may be employees of CIRQ or may be consultants used by CIRQ. In either case, they shall be thoroughly familiar with CIRQ's Quality System and Guide 65 on which it is based

Prior to each audit, the audit scope shall be defined and auditors assigned so that (where possible) they will not audit their own work and will not have direct responsibilities for the activities to be audited. When audits take place, they shall consider the results of previous audits, the importance of the activities to be audited to the Quality System, as well as the maturity and stability of the QS. When and if Non-Conformances are discovered or customer complaints occur, the audit frequency should be increased, as appropriate.

A Master Audit Schedule, Audit Checklists, Audit Reports, including any non-conformances, the results of corrective actions, and a Non-Conformance Log shall be maintained on the CIRQ Intranet site once a full scale audit procedure is in place.

### **Required Records**

- Written notes of self-audits in early years
- When full procedure is activated:
  - Internal Master Audit Schedule (FS3001)
  - Internal Audit Checklist (FS3002)
  - Internal Audit Report (FS3002)
  - Internal Non-Conformance Log (FS3002)

### **References:**

- S3 Level 2 procedures on the CIRQ Intranet site
- Auditing Manual version February 2010

## **S4. Management Reviews**

*(ISO/IEC 17065:2012– Clause 8.5)*

CIRQ's Managing Director shall periodically review the continuing suitability, adequacy and effectiveness of the QS with the Advisory Committee. These management reviews shall include:

- An assessment of improvement opportunities for CIRQ based on:
  - internal audits
  - process performance
  - status of preventive/corrective actions
  - customer feedback
- Discussion and agreement regarding any change to the Quality System, including the quality policy and quality objectives
- Update on the Info. Technology support for CIRQ
- Recent and upcoming audit activity with customers
- Status of certifications (granted, denied, suspended, or withdrawn)
- Status and trends related to appeals, complaints, and disputes
- Review of CIRQ's finances

Outputs from Management Reviews shall include decisions and actions related to:

- a) Corrective actions needed,

- b) Improvement to the QS and its processes,
- c) Improvement in service, related to meeting customer requirements, and
- d) Resource needs.

The Managing Director shall ensure that agreed upon corrective actions are implemented, and report the outcomes back to the Advisory Committee within an agreed upon timeframe. Management Reviews shall be held once each year, at a minimum, but twice each year in the first two years of CIRQ operations. In addition, the Managing Director or the Advisory Committee may review quality issues periodically and may decide to hold additional Management Reviews as needed.

Results of all Management Reviews are recorded by the Operations/Administrative Manager and retained on the CIRQ Intranet.

**Required Records:**

- Agenda & Meeting Minutes from Mgmt. Reviews

**References:**

- S4 Level 2 procedures on the CIRQ Intranet site
- Mgmt. Review Agenda Guidelines (GLS4001)

**S5. Handling, Control, Retention and Security of Records**

*(ISO/IEC 17065:2012 - Clause 8.4)*

This procedure covers the document retention, control and security procedures, in compliance with Guide 65, Section 4.9, records and 4.10: Confidentiality, and includes:

- CIRQ Intranet System security and controls
- Record maintenance system
- Record retention
- Confidentiality of information obtained during certification
- Record destruction
- Third party disclosure

CIRQ shall maintain the following types of records, which will be continuously updated on the secure, password protected CIRQ Intranet.

1. Updated information regarding the annual moderation of CIRQ and CIRQ processes
2. The CIRQ Quality Manual (referred to as Level 1 documentation)
3. CIRQ Procedures for operating a certification body (referred to as Level 2 documentation)
4. Forms, checklists, templates and other support documentation that become required records (referred to as Level 3 documentation)
5. Actual records required by ISO/IEC 17065:2012 including records relating to CIRQ rules and procedures for granting, maintaining, suspending, or revoking certification
6. CIRQ personnel documentation
7. Records relating to the certification management processes and outcomes of ISO 20252:2012 /26362 certified companies

**References:**

The S5 procedure in Level 2 on the CIRQ Intranet site.

## **S6. Documentation**

*(ISO/IEC 17065:2012- Clause 8.2)*

The following information will be documented and maintained by CIRQ, updated at least annually by the Operations Administrator and made available upon request:

- Information regarding the fact that CIRQ is a self-declared certification body established to certify survey research providers to the ISO 20252:2012 and/or ISO 26362 standards and explain why this self-declaration is necessary. This information will also indicate that CIRQ's Quality System was initially audited by an independent consultant, and that it will be audited in the same fashion at least once every 24 months.
- A statement briefly describing its product certification system which will include the rules and procedures for granting, extending, maintaining, suspending or withdrawing certification.
- An overview of the steps involved in the auditing and certification process.
- A directory of certified companies and their scope of certification (Certification Register).
- CIRQ Audit & Certification Fees.
- CIRQ finances.
- Rights and duties of applicants and certified companies regarding the use of the certification mark and the acceptable ways a Company shall refer to the certification granted.
- Information regarding the handling of complaints, appeals, and disputes.

To support auditing and certification services, CIRQ has established, documented and maintains a Quality System (QS). Documentation for this system exists at several levels that start with a very broad and general perspective at Level 1 and become more detailed and specific at subsequent levels. A Document Register will be maintained to track versions and will be stored on the CIRQ Intranet in CIRQ Records.

These document levels are described below:

**Level 1 Documents** consist primarily of the Quality Policy, the Quality Objectives and this Quality Manual, along with several other documents that are controlled and only change on a very infrequent basis such as the Audit & Certification Fees. The Quality Manual contains the Quality Policy and the Quality Objectives and also references other policies and the processes constituting the Quality System, which have been established to conform to the requirements of ISO/IEC 17065:2012.

The Quality Manual also contains references to QS procedures (Level 2 Documents), which further detail the processes defined later in this document. The Quality Manual and other Level 1 documents are controlled and maintained on the CIRQ Intranet site in the CIRQ Headquarters folder (Level 1) within the Document Vault.

**Level 2 Documents** include detailed procedures required by ISO/IEC 17065:2012. They define steps taken to ensure the quality of services offered by CIRQ, show who is responsible for implementing the procedure, and indicate timelines for key steps of various procedures. Each Core and Support procedure is controlled and identified with a unique number corresponding to the process it describes (i.e. C2 for the Core #2 procedure, C3 for the Core #3 procedure, etc.). Related forms, checklists, templates, etc., reference materials, and required records are documented in the procedures. . All of these Level 2 documents are controlled and maintained on the CIRQ Intranet site in the Document Vault within the Level 2 Procedures folder.

**Level 3 Documents** are the Standard Forms, Checklists, Templates, and Workbooks, required when implementing particular tasks of a procedure, where the absence of such documents may adversely affect quality. A document number and name are printed in the footer of each page to identify the controlled Level 3 documents. The document numbering system is as follows: the first letter represents whether the item is a Form, Template, Checklist, etc., the next letter and the first number identify the procedure that the document relates to (i.e. C1, S1, etc.) and the final 3 numbers indicate whether it is

the first, second, third document, etc. related to that procedure. Revision status is indicated by adding a 1.1, 1.2, 1.3, etc. to the end of the document's original number. All of these Level 3 documents are stored and maintained on the CIRQ Intranet site in the Document Vault within the Level 3 folder.

**Level 4 Documents** are the Records created as a result of the CIRQ Quality System to provide objective evidence of compliance to requirements and of the effective operation of the QS. Level 4 documents include all records required by ISO/IEC 17065:2012. All Level 4 records are stored and maintained on the CIRQ Intranet site in the Filing Cabinet. If the records are client specific they are maintained in the master client folder and if they are specific to CIRQ operations, and not to a specific client, they are stored in the CIRQ Records folder.

**Advisory Notes:** Advisory Notes are issued on an as required basis to clients, auditors and other CIRQ staff. The intention of the Advisory Note is to standardize understanding and approach by clients, CIRQ auditors, and other CIRQ staff; and to notify the same audiences when changes to Guide 65 require changes to the CIRQ Quality System, or when there are changes to the ISO 20252:2012 or ISO 26362 standards. Internal Advisory Notes will be published on the News page of the CIRQ Intranet site for two weeks, and then maintained in the Filing Cabinet of this site within the CIRQ Records folder. CIRQ personnel who need to be aware of these Advisory Notes will receive an email notifying them that a new one exists. Client Advisory Notes will be emailed to the appropriate client(s) and also maintained in the Client master folder in the Filing Cabinet on the CIRQ Intranet site.

To further control and maintain CIRQ documentation the following rules shall apply:

- Each applicant shall be assigned a unique identifying number upon receipt of their completed Request for Quotation and will retain this number throughout the 3 year cycle and beyond. The numbering format shall start with a four digit sequential number beginning with 1000, followed by the date the Request for Quotation is received in a 6 digit format (xxxxxx). EXAMPLE: If the first Request for Quotation is received on March 5, 2010, that company would be numbered as '1000030510'.
- Certificates of Compliance will be numbered with the first 4 digits of the unique client number described above.
- Electronic records specific to a particular company shall be labeled starting with the company name, followed by the company number followed by the document name, followed by the date the record was created. An EXAMPLE follows:
  - XYZ Research '1000030510\_ Audit Report\_05.08.10
- Only the CIRQ Managing Director and Operations Administrator shall have rights to make revisions to any controlled document and shall notify all appropriate CIRQ personnel when a revision occurs.
- Access to the CIRQ Intranet site will be controlled to CIRQ personnel as follows
  - The CASRO President, Managing Director and Operations Administrator shall have read and write privileges
  - The Training and Audit Advisor, The Technical Advisor, and the Auditors will have read only rights and will be able to save records to their personal folder on this site
  - Advisory Committee members will have "read only" access to the Level 1 folder in the Vault.

**References:**

- CIRQ Intranet

**S7. Human Resource**

*(ISO/IEC 17065:2012 -Clause 6.1)*

The policies and procedures contained in the CIRQ Organization Handbook apply to employees of CIRQ. In addition there are Level 2 procedures in S7 that shall apply to CIRQ staff as listed below:

Hiring procedures including Confidentiality & Conflict of Interest Orientation  
Training of staff (new and existing) regarding the QS  
Performance Evaluations  
Sub-contracting

**Required Records:**

- Training Records on CIRQ Intranet
- Independent Contractor/Consultant Agreement Template TS7001
- Certification Director Agreement TS7002
- Technical Director Agreement TS7003
- New Auditor Training Assessment Report FS7001
- Auditor Assessment FS7003
- Agreements

**References:**

- S7 procedure in Level 2 on the CIRQ Intranet site
- Independent Contractor/Consultant Agreement Template TS7001
- Certification Director Agreement TS7002
- Technical Director Agreement TS7003
- New Auditor Training Assessment Report FS7001
- Auditor Assessment Form FS7003

**X. APPENDIX**

A. References

*(ISO/IEC 17065:2012 -Clauses 2)*

- ISO 20252:2012
- ISO 26362
- ISO 19011: 2002, Guidelines for quality and/or environmental management systems auditing
- CASRO's Code of Standards & Ethics for Survey Research
- CASRO's Employee Handbook
- CASRO's Code of Conduct
- CIRQ Organization Handbook
- Federal legislation in the U.S.
  - HIPPA
  - GLB
  - COPPA
- U.S. Safe Harbor requirements