



APMG RCB ISO/IEC 20000 Conditions for Registration Scheme

The APM Group Limited

Related Documents

APMG15/015

QP1 Complaints, Concerns and Appeals

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Introduction

1. Purpose and Structure of this Document

APMG manages the APMG ISO/IEC 20000 Certification Scheme (the Scheme). Operation of the Scheme is closely monitored by APMG to ensure consistency in the implementation of the Scheme.

This APMG ISO20000 Conditions for Registration Scheme document is intended to summarise the terms and conditions, and the duties and responsibilities of each party, and clarify how it will be applied in practice.

Certification Bodies can apply to be registered by APMG and consequently may be granted a licence to use an APMG logo which demonstrates this registration.

APMG registration will only be granted to organisations who have demonstrated that they fully meet the requirements of this APMG ISO/IEC 20000 Conditions for Registration Scheme document.

APMG maintains a register of Registered Certification Bodies (RCBs) and also a register of Certified Organisations that have been certified by RCBs as meeting the requirements of the standard. These can be found on the APMG ISO/IEC 20000 website (<http://www.isoiec20000certification.com/>). A register of auditors who have met the APMG ISO/IEC 20000 Auditor criteria is also maintained, but this register is not currently published.

All queries about the operation of the Scheme should be addressed to servicedesk@apmgroup.co.uk or by phone to +44 (0) 1494 452 450.

2. References

APMG's registration process for Certification Bodies is wholly reliant upon them holding valid, current accreditation from a National Accreditation Body which has been recognised by the International Accreditation Forum or the European Accreditation Forum as an IAF MLA or EA MLA signatory.

Should there be a conflict between this document's requirements and the ISO standard's requirements, the requirements of this document shall take precedence.

3. Terms and Definitions

Definitions of general terms can be found in ISO/IEC 9000 and ISO/IEC 17000. For the purposes of this document, the following definitions apply:

3.1 Registration Body

APMG is the Registration Body and scheme owner of the ISO/IEC 20000 registration scheme and maintains a website listing all current certificates for registered certification bodies who are part of the scheme, except those clients who wish their details to remain private.

APMG owns the intellectual property (IP) that forms the basis of the registration scheme, together with the scheme logos.

3.2 Certified Organisations (CO)

An Organisation certified against ISO/IEC 20000 by the Certification Body who wishes to be registered with APMG and displayed on their website

3.3 APMG Decision Maker

An approved APMG representative who reviews the Assessor recommendation and decides whether registration/re-registration should be granted.

3.4 Certification Body(CB)

An organisation which has been accredited by an NAB which is an IAF or EA MLA signatory for ISO/IEC 17021 and/or **ISO/IEC 27006 accreditation certification services** and whose accreditation is current.

3.5 National Accreditation Body (NAB)

An organisation that has been appointed as its country's recognised accreditation body by IAF or EA to offer **accreditation services for ISO/IEC 17021 and/or ISO/IEC 27006**.

3.6 Registration Cycle

The period of time an RCB is registered for, before being re-registered. The duration of a standard APMG registration cycle is 3 years.

3.7 Non-conformities

Non-conformities are findings arising from assessments where the RCB has not fully met the scheme requirements or has not been able to evidence that they have done so. These are raised with the client at the time of the assessment and an agreed timescale is given to address the issue(s), depending on the severity of the issue

3.8 Quality Management System (QMS)

The policies, procedures, processes, documented information and resources regulating the CBs activities.

3.9 Relevant Dates

Registration starts from the date when the application is formally signed by the APMG decision maker.

The priority issue resolution timescale is calculated from the date when the report is issued to the RCB by APMG.

3.10 Requirement

A process, document or item that needs to be demonstrated to APMG during an assessment activity.

3.11 Use of Shall and Should

For the intent and purpose of this document, "Shall" indicates requirements that must be complied with. "Should" indicates requirement which are expected to be complied with, unless specific and justifiable reasons exist for not doing so.

Section 1: Initial Registration

1. Scope

An RCB applicant is eligible to apply if their scope of valid and current accreditation issued by an NAB MLA signatory is:-

ISO/IEC17021:2015 Quality Management Systems to include NACE code EA33 Information Technology - Full Scope

Or

ISO/IEC27001:2013 Information Security Management Systems

2. Registration

Step One - Application

To register as an RCB, the following documents must be completed and submitted:

1. The APMG RCB ISO/IEC20000 registration form
2. Evidence that the RCB is a registered legal entity (please note, the address on this document MUST match the address in the APMG RCB ISO/IEC20000 registration form)
3. The NAB certificate with a current validity date
4. The NAB schedule of accreditation or other document which describes the scope of the NAB accreditation
5. The registration fee
6. Names of a minimum of two Lead Auditors/Auditors who meet the criteria listed on Annex 3 below.
7. A copy of the last NAB initial or reassessment report (NOT Surveillance) to include coverage of ISO/IEC17021:2015 Quality Management Systems to include NACE code EA33 Information Technology - Full Scope or ISO/IEC27001:2013 Information Security Management Systems.
8. A copy of the NAB procedure for processing APMG RCB ISO/IEC 20000 Registration scheme certified organisations applications

The application fee is non-refundable, regardless of whether the application is successful. Please note that submission of the registration form and/or payment of any registration fee does not guarantee registration by APMG. See Annex 4 for fee schedule.

The registration application process will commence until all fees have been paid. The ISO/IEC 20000 Scheme Administrator will liaise with you throughout the registration process, will then contact you.

Registration, if granted, is not retrospective. Any audits carried out before the effective date of registration will not have been conducted under the APMG Scheme and therefore must not be certified as such. Similarly, a surveillance audit carried out on a pre-certified organisation following RCB registration is not sufficient for certification under the Scheme.

Step Two - Review

On receipt of a completed and signed APMG ISO/IEC 20000 Registration Scheme: Registered Certification Body Application Form and all required supporting documentation, APMG will check the following details:

- That the applicant Organisation is legally registered entity, able to apply for RCB status with APMG.

- That the RCB registered legal name and address supplied in the legal documents with the application matches that on the NAB accreditation certificate.
- That the NAB accreditation certificate has been issued by an IAF or EA MLA signatory as shown on www.iaf.nu
- That the NAB accreditation certificate is valid for ISO/IEC17021:2015 Quality Management Systems to include NACE code EA33 Information Technology - Full Scope or ISO/IEC27001:2013 Information Security Management Systems.
- That the nominated Lead Auditor/Auditors meet the relevant eligibility requirements detailed above and in Annex 3.
- That the NAB report confirms ongoing compliance to ISO/IEC17021:2015 and/or ISO/IEC27001:2013.
- The suitability of the CBs procedure for processing its ISO/IEC 20000 certification scheme and clients.

Step Three - Acceptance

APMG will advise the applicant organisation in writing whether their application has been accepted and will proceed to assessment.

On acceptance of the application, APMG will issue the applicant:

- An invoice for the registration fee detailed in the application. These fees must be paid before any assessment is undertaken.
- An RCB Agreement to be signed electronically.
- An electronic copy of the logo will be supplied to RCBs on registration being granted.
- Access to the APMG on-line database will be granted to permit the RCB to register new COs

If the RCB Agreement cannot be signed electronically via EchoSign, these should be printed, signed, and any necessary stamps applied and returned to APMG by email.

If there has been no progress to an application within three months of receipt by APMG, the application may be withdrawn. If the applicant organisation decides to continue at a later date a new application shall be required.

Step Four - Assessment

On acceptance of an application, APMG shall evaluate the organisation's suitability for certification through assessment activity. At initial registration, this is usually through desk top review.

3. Assessment Activities

3.1 Desk Top Review Assessment of RCB Documentation

APMG will assess that the organisation has an adequate procedure as part of its Quality Management System (QMS) to operate the scheme and support the requirements. This assessment will also ensure that the organisation has personnel who are APMG approved, trained and competent in working in accordance with the APMG RCB ISO/IEC 20000 Registration Scheme.

For initial registration assessments, APMG focusses on two elements:

1. Evidence that the organisation has documented processes that they intend to use to deliver services. This is referred to as reviewing evidence of **intention**.
2. Evidence that the documented processes have been implemented. This is referred to as reviewing evidence of **action**.

To grant initial certification, APMG will look for evidence of intention by reviewing the documents submitted by the applicant.

Evidence of action will be reviewed from the NAB initial or reassessment report and as part of the surveillance and re-registration cycle.

3.2 Assessment of Auditors

An RCB shall employ at all times, a minimum of two APMG approved ISO/IEC 20000 Lead Auditors who shall lead the audit team. Team members may be constituted of technical experts or other auditors who are not APMG approved. However, no audits shall be conducted by Lead Auditors who are not APMG approved.

ANNEX 3 describes the criteria for approving APMG ISO/IEC 20000 Lead Auditors and Auditors.

4. Assessment Dynamics

APMG will assign an adequately skilled and suitably independent assessor for all assessment activities

The APMG assessor will evaluate whether the organisation and/or its individuals meet the specific requirements for the scope of application.

Assessments will be based on a sample of the objective evidence available and will follow the applicable structures described in ISO/IEC17021:2015.

For each assessment, the assessor will submit a written report as to the applicant's suitability based on the assessment findings and any issues found. The report will include a recommendation to APMG:

- Suitable – Registration proposed.
- Not Suitable - Not proposed for registration at this time.

Where an issue is found during the assessment, it will be documented and categorised as follows:

- **Mandatory IAR**

Definition These are issues presenting a major threat to the services provided leading to a "Not Suitable" recommendation.

Examples include: major errors, omissions, systematic occurrences of the same issue, or an accumulation of priority 2 issues. These may suggest further issues exist in non-sampled areas and that the assessed activity cannot be delivered as intended.

- Timing: From the assessment report date, a corrective action plan shall be submitted to APMG within one month, and the issue shall be closed within a total of three months.

- **Recommendation**

Definition These are issues presenting a minor threat to the result of the assessed activity. Individually, these issues do not prevent a "Suitable" recommendation, subject to satisfactory correction. However, a pattern of minor priority 2 issues in the assessment will result in a priority 1 issue.

Examples include: minor errors or omissions in specific areas, discreet occurrences of an issue, which do not accumulate to a Priority 1 issue. These do not suggest further issues exist in the non-sampled areas and that the assessed activity does not currently threaten the achievement of the intended results.

Timing: From the assessment report date, a corrective action plan shall be submitted within three months, and the issue shall be closed within a total of six months.

- **Observation**

Definition: These are observations the assessor makes for the RCB to consider.

Examples include: potential future nonconformities, a situation that may result in a deterioration of the services provided if not addressed. Observations are not nonconformities at the time of the assessment.

Timing: There is no requirement for a formal response, but they will be reviewed at the next assessment.

- **Opportunities for Improvement (OFI)**

Definition: These are areas which, in the opinion of the assessor, may add value to the services provided.

Examples include: examples of industry best practice widely in use, standard approaches to resolving specific issues, suggestions based on the assessor's previous experience

Timing: OFIs are not nonconformities and do not require a formal response. OFIs are highlighted in the body of the report and are not included in the findings reports.

Failure to meet the stated timescales shall lead to suspension/withdrawal. In exceptional circumstances, an APMG Manager may authorise an extension to the timelines.

Where a Not Suitable recommendation is made, APMG may apply additional assessment fees to conduct further assessments.

Specific rules surrounding suspension and withdrawal are detailed in Section 2 of this document.

Upon receipt of APMG's report, the organisation shall review the findings reports to action any issues in accordance with the priority level assigned and the relevant timescales.

5. Registration

When all requirements have been demonstrated through successful assessment(s), registration will be recommended, and if appropriate registration will be granted. This includes an APMG certificate, which makes clear the scope and period of registration. All registrations are subject to contractual terms and conditions, and conformance being maintained through surveillance and re registration as listed in Section 2 of this document.

For each assessment undertaken, an authorised APMG decision-maker will consider the Assessor's recommendation and any other relevant information in order to make an informed registration decision. The applicant will be notified of this decision in writing.

The certification date on the issued certificate is the date when the authorised APMG decision-maker makes the certification decision. All certificates remain the property of APMG and must be returned to APMG upon request.

- Approved RCB Organisations will be listed on www.apmg-international.com.
- RCBs Certified organisations will be added to the APMG website as agreed.

6. Complaints and Appeals

Complaints and Appeals by RCBs against registration decisions taken by APMG will be considered in accordance with the APMG process for Complaints and Appeals which is shown on the APMG website.

7. Client Responsibility

In applying for registration, the applicant is responsible for implementing, maintaining and operating in accordance with the requirements of the scheme and standards against which registration is granted. Any changes to the client's status, organisation, structure, location, scope of operation and significant changes to its systems must be notified to APMG in writing immediately. The client also agrees to refer

to registration and certification appropriately, and to use registration and certification marks/logos as specified in the rules for the use of such.

8. Changes

RCBs will be notified of any changes to the Scheme and will be expected to respond to such changes in a reasonable timescale.

9. Use of APMG Logo

The APMG Certification logo is a registered trademark. The RCB is licensed to use the logo, either in colour or black and white, for the following purposes:

- In marketing collateral describing the Scheme and any specific service that they offer
- On certificates issued to organisations certified following a **Scheme** audit

When used in colour, the logo shall be reproduced in the exact colours and font of the issued logo.

An electronic copy of the logo will be supplied to RCBs on registration being granted. In particular the logo must not be altered or used in a misleading way, for example to imply certification of something which is not certified. No other use of the logo is permitted and APMG will take strong action against any perceived abuse of the logo, whether by an RCB or any other organisation.

The RCB may not permit organisations to sub-license use of the logo which they have certified within the Scheme. The certified organisation may only reproduce an image of their certificate for use in their marketing collateral.

Section 2: Surveillance and Reregistration

10. Purpose

Once approved, RCB and all Individuals must maintain compliance with the relevant requirements listed in Annex 1. In order to confirm ongoing compliance, APMG will conduct surveillance and re registration activities.

11. Approval Lifecycle

The duration of a standard APMG approval cycle is 3 years. The initial approval marks year zero of the cycle. Surveillance activities will be performed during the cycle. A reregistration will be required to start a new approval cycle. The following paragraphs detail the activities required.

12. Surveillance and Reregistration

12.1 QMS RCB ISO20000 Procedure Review

During the standard 3-year cycle, APMG will assess that the organisation continues to operate an adequate QMS procedure describing the method used for processing its ISO20000 certification scheme and clients.

All RCBs will be required to undergo prior to the end of the 3-year cycle. The reregistration of the RCB marks the start of a new cycle. This reregistration will include reviews of both evidence of intention and evidence of action.

Every RCB will undergo surveillance activities annually during the 3-year cycle. These activities may be via desk top review, web enabled remote audit or on-site audit.

13. Suspension

13.1 RCB Suspension

In circumstances where an RCB does not meet APMG's reregistration or contractual requirements, their reregistration shall be suspended.

Potential reasons for suspension of certification include:

- Failure to undergo surveillance activities within the required timescale.
- Failure to submit corrective actions within the specified timescales.
- Failure to close priority issues within the specified timescales.
- A recommendation of "Not Suitable" for an RCB currently approved.
- The RCB no longer fulfils the eligibility requirements for the service they are certified to offer.
- The RCB does not employ a minimum of two suitably approved APMG Lead/Auditors for the scheme.
- Failure to return a signed contract.
- Any behaviour which may bring APMG or the scheme into disrepute.
- Breach of APMG or scheme owner IP reuse guidelines.
- Default of payment terms.

During suspension of certification the following shall occur:

- The RCB and its clients shall be removed from the RCB and CO web listings on the APMG-ISO/IEC 20000 Certified Organisation Scheme website
- The RCB shall cease to use any marketing material that contains reference to APMG certification.
- The RCB shall not be permitted to register any new certified clients.

A formal notification of suspension and, where applicable, lifting of suspension will be sent to the RCB. This notification will advise the reason and the date from which the suspension applies, the corrective action required and the timescale in which this must be resolved. The RCB will be suspended for a maximum period of three months from commencement of suspension.

To lift the suspension, the RCB must complete appropriate corrective action as noted in the formal notification. APMG may lift suspension on the condition that special measures are imposed on the RCB. These measures may include payment upfront for CO registrations, RCB surveillance or reregistration activities.

Where suspension has not been lifted within three months, the RCB will be withdrawn from the scheme for the reasons stated in the suspension letter.

14. Withdrawal

14.1 RCB Withdrawal

If certification is voluntarily withdrawn (or involuntarily, following suspension), the RCB will be notified in writing to confirm this and to ensure that the following occur:

- The RCB shall contact all of their clients and advise them of the withdrawal
- The RCB will be required to return or alternatively, destroy, any valid APMG registration certificate.
- The RCB shall withdraw the certified organisations' certificates and re-issue the certificates to them without the APMG or itsSMF logos
- The RCB shall provide evidence to APMG that these activities have been completed
- The RCB will be removed from the list of APMG Approved RCB Organisations.
- Access to the APMG on-line database will be removed.
- The list of certified organisations will be removed from the APMG website.
- The RCB shall cease to use any marketing material that contains reference to certification and related IP.

To regain certification following withdrawal, the RCB will be required to re-apply for registration. A full assessment in accordance with the scheme conditions may be required. Details of the activity required shall depend on the circumstances and should be discussed with APMG.

Section 3: Notes for Guidance – RCB Applicants

Certificates

Each certificate issued shall bear the following information where this is additional to the issuing RCB's usual information:

- Unique reference number
- Date of issue and expiry
- Scope of certification
- Organisation (including division, department or locations as appropriate)
- Scheme logo in accordance with the conditions above

RCBs should note that the date of issue of the certificate may not be before the date of the audit review and certification decision.

Reporting of Certifications

RCBs must provide APMG with the following details of each ISO/IEC 20000 certificate issued or withdrawn under the Scheme within 30 days:

- the organisation audited
- the certification scope
- location(s)
- the date of certificate issue (or withdrawal) and expiry
- unique certificate reference
- Whether the organisation gives or withholds permission for the certification details to be published on the ISO/IEC 20000 certification website
- The name(s) of the APMG ISO/IEC 20000 registered auditor(s) taking part in the audit.
- Any other information that may be useful in maintaining the integrity and relevance of the Scheme

APMG will also have the right to examine documentation relating to an assessment for a period of up to three years. RCBs are therefore required to retain copies of all third-party audit and assessment documentation for three years.

In the event that APMG consider that an RCB has issued a certificate to an organisation which does not meet the requirements of APMG 15/015 or ISO/IEC 20000, then APMG may, after discussing the matter and failing to reach an acceptable agreement, withdraw authority for the RCB to issue the Scheme logo on that certificate.

APMG recommends that, prior to issue of a certificate and as early as practical in the certification process, the proposed scope statement is notified to APMG for validation. The preferred form of the scope statement is

“The IT service management system of <service provider organisational unit> that delivers <service/s> to <customer/s> from <location>”

APMG have published requirements specific to the APMG Scheme in a document titled *Requirements and Guidelines for Scope Statements & Certificates*.

Further advice and guidance is available from APMG on request, and is also contained in PD ISO/IEC TR 20000-3:2009.

Auditor Training and Competence Requirements

Before an RCB application can be approved, applicants are required to demonstrate that they have at least two auditors who have attended an APMG-accredited ISO/IEC 20000 auditor training course or the itSMF equivalent and who have passed the associated examinations or have completed and passed the APMG conversion assessment through attending an alternative accredited (e.g. IRCA and PECB) ISO/IEC 20000 Auditor training course, holding a valid certificate plus the completion of an APMG ISO/IEC 20000 Auditor interview.

It should be noted that no recognition should be given for any training certificate that does not relate to an ISO/IEC 20000 Auditor qualification (e.g. ITIL, ISO/IEC 27001 etc) or for any ISO/IEC 20000 Auditor training certificate issued through internal training within the RCB unless it is recognised by an external accreditation body, such as IRCA and PECB.

Appendix 2 – Proposed APMG/ISO 20000 Auditor Competency Requirements

- No recognition should be given for any training certificate that does not relate to an ISO/IEC 20000 Auditor qualification (e.g. ITIL, ISO/IEC 27001, etc.)
- No recognition should be given to an ISO/IEC 20000 Auditor training certificate issued through internal training within the RCB unless it is recognized by an external accreditation body, such as IRCA and PECB.
- APMG RCBs shall ensure through their initial application review processes that ISO/IEC 20000 Auditors are assigned to audits under the APMG Scheme, that have been qualified through either;
 - A direct route of completing an APMG (or itSMF) ISO/IEC 20000 Auditor training course and hold a valid certificate, or
 - An indirect route of an alternative accredited (e.g. IRCA and PECB) ISO 20000 Auditor training course and valid certificate plus the completion of an APMG / ISO 20000 Auditor examination and award of a valid certificate/conference call interview with a competence evaluation.

RCBs are expected to retain a minimum of two ISO/IEC 20000 Auditors that meet the above criteria under their control at all times.

The Register of RCBs

APMG maintains a Register of RCBs. This will be published at www.isoiec20000certification.com and will provide an optional facility for links to RCB's web sites.

Register of Certificates Issued

APMG will maintain a register of all certificates issued by RCBs. This will be published at www.isoiec20000certification.com and will specify the certificate number, the name of the certified organisation, effective dates, scope and any restrictions. Certificated organisations have the right to withhold their information from public display within the register. If they wish to do this then they must request this via their RCB who should then advise APMG.

Section 4: APMG ISO/IEC 20000 Scheme

Requirements and Guidelines for Scope Statements

The guidance is intended to align with the requirements of ISO/IEC 20000-3:2012 - Information technology — Service management Part 3: Guidance on scope definition and applicability of ISO/IEC 20000-1

1. Preferred Format

The preferred format for a certification scope in the APMG Scheme shall be:

'The IT service management system of <service provider> supporting the provision of <services> to <customers> from <location>'

Instead of a list of services, an alternative format is:

'The IT service management system of <service provider> supporting the provision of services to <customer> from <location> in accordance with the service catalogue.'

If the service catalogue is mentioned in the scope, no individual service names should be given. The service catalogue may also contain the list of customers.

Note:

RCBs are reminded that it is a requirement of ISO/IEC 20000-1:2011 (Clause 4.5.1) that the organisation shall define the scope of the SMS, which includes the following information:

- Name of organisational unit providing the services
- Services to be delivered
- Location(s) the service is delivered from
- The customer and their location(s)
- Technology used to deliver the services

ISO/IEC 20000-3:2012 ('Part 3') also gives guidance on this subject.

2. Scopes for Publication on the APMG Scheme website

It is the service management system (SMS) that is certified, not the services. Some certificates have pre-printed words which state this, so they are not repeated in the text of the scope submitted to APMG.

In these cases, scopes published on the Scheme website will have a preamble inserted reading 'The IT service management system of ...' or similar words and phrases.

The published scope may also contain other information pre-printed elsewhere on the certificate to ensure that the context of the scope is clear. A scope submitted which have been translated into English may be slightly modified by APMG to improve the translation. Such modifications will not alter the context of the submitted scope.

Generally, it will not be necessary for the certificate to be re-issued as a result of minor re-translations. Where a translation cannot be easily modified, the RCB will be contacted to discuss an alternative translation.

Where APMG Technical Assessors identify an issue with a submitted scope, clarification will be sought from the RCB. If possible, the assessors will provide a suggested alternative scope. A maximum of three attempts or three months after first submission per application are permitted to find an agreement

before the Scope will be withdrawn and the RCB charged for a Scope Review at the current rates. The AMPG Technical Assessors understand that problems may be caused by asking for a scope to be charged following certification.

RCBs are therefore encouraged to submit planned scopes to APMG in advance of the certification so that these can be ratified at an early stage in the certification process.

If after submitting a Scope Statement, it is returned with comments from the Assessors and the Scope cannot be resolved to the satisfaction of all parties, the certification body shall inform APMG as soon as possible that the application is not going to be progressed. Minor differences may exist between the scope as published on the website and that on the certificate. These differences will generally be caused by changes to English grammar and syntax, or the addition of the preamble and other information, and will not affect the context of the scope.

3. Common Issues

There are several common issues with submitted scopes. Scopes which do not conform to the following will be returned for clarification, and may not be accepted under the Scheme.

- **Requirement: The Certificate must be in the name of a single legal entity.** If the services supported by a single SMS are provided under different company names, the RCB must ensure that there is no conflict of interest or risk to the integrity of the SMS. In these situations the scope may specify the service provider name as follows: 'The service management system of Company A also trading as Company B and Company C ...' or similar. Alternatively, certificates may be issued in the names of the individual companies provided the certificates have the same serial number with a suffix to differentiate them. For example, the certificate numbers 1234/A and 1234/B.
- **Requirement: When services described in a scope are limited to internal customers only, this must be specified.** Customer names need not be specified in the scope. Locations in the scope can apply to customers and/or service provider locations depending on the relevance.
- **Requirement: Subjective, marketing or redundant phrases are not permitted.** For example, 'provision of high quality services ...', 'mission-critical services ...', 'high availability services ...', and similar phrases are not allowed. Product names may be accepted where they add clarity to the scope definition. Lengthy lists of activities are discouraged, although it is acknowledged they are sometimes necessary. Please note that it is the SMS supporting the provision of **services** that is certified, not 'solutions' or 'systems'. References to business processes supported by the services should be kept to a minimum. Phrases such as 'including all the processes' and similar are redundant and will be removed.
- **Requirement: Do not mention activities like consultancy, application development, project management or similar.** These are generally not services supported by a service management system (SMS) and if they appear in a scope, justification will be requested.
- **Requirement: Do not mention process names, clause names or activities such as 'design', 'improvement', 'development', 'delivery' and similar.** Certification will always cover all activities of the standard and prominence should not be given to some activities over others. Where a genuine service has the same name as a process, then it must be clearly identified as a service.
- **Requirement: Do not refer to SMS documentation in the scope (with the exception of the service catalogue.)** Documents such as SLAs, contracts, etc. are common to every SMS, and phrases such as, 'in accordance with SLA/contract' are meaningless. When the service catalogue is mentioned, **do not** give its version number or date since the scope always refers to the current version.
- **Requirement: Do not mention other frameworks in the scope.** A common example is mention of ITIL® which is meaningless in this context, and is also a registered trademark.

ITIL® is a registered trademark of AXELOS Limited. All rights reserved.

- **Requirement: Do not use vague phrases like ‘such as’, ‘including’, ‘etc.’** These imply that there are other services included in the scope which are NOT being described.
- **Requirement: Agreed changes to a certificate scope must be published in the certificates issued by the RCB.** APMG assessors will provide guidance as to how this is to be achieved, based on the nature of the required changes. In some cases, it may be agreed that the reissue can be held off until the next audit.

Please note that, in general, it can be very difficult to document an accurate scope which directly aligns with scopes from other standards such as ISO 9001 and ISO/IEC 27001. In general, keep the scope short, clear and to the point, and follow the APMG preferred format as far as possible.

4. ISO/IEC 20000 References

a) Requirement from ISO/IEC 20000-1:2011 (Part 1 Clause 4.5.1):

- Name of organisational unit providing the services
- Services to be delivered

b) Consider also:

- Location(s) the service is delivered from
- The customer and their location(s)
- Technology used to deliver the services

ISO/IEC 20000-3:2012 ('Part 3') also gives guidance on this subject.

Aligning Certificate Dates

If you are applying to renew certificates (Re-certification), please note that APMG is aligning the certificate dates with ISO/IEC 17021-1:2015 Clause 9.6.3.2.3 so that the audit may be completed and a decision made prior to the previous certificate expiry date.

For the new certificate date to be continuous from the previous one, the certified period shall be no longer than 3 years.

Applications received with expiry dates of more than 3 years, even by one day, will have the expiry date amended to reflect the above, that is, the certificate expiry date will be shown as exactly 3 years from the certificate start date.#

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Annex 1: RCBs Must meet the Additional ISO/IEC 20000-1:2011 Requirements

The following section has compared ISO/IEC 17021: 2015 with the objective of auditing and certifying IT Service Management Systems (ITSMS) in accordance with ISO/IEC 20000-1:2011 and the APMG scheme, some additional requirements and guidance to ISO/IEC 17021:2015 are necessary. These are provided by this document. Only additional requirements have been included below.

Clauses 4, 5, 6 - There are no additional requirements

Clauses 7.1-7.2.3 - There are no additional requirements

Clauses 7.2.4-5 - see additional requirements below

Appendix 2 – Proposed APMG/ISO 20000 Auditor Competency Requirements

- No recognition should be given for any training certificate that does not relate to an ISO/IEC 20000 Auditor qualification (e.g. ITIL, ISO/IEC 27001, etc.)
- No recognition should be given to an ISO/IEC 20000 Auditor training certificate issued through internal training within the RCB unless it is recognized by an external accreditation body, such as IRCA and PECB.
- APMG RCBs shall ensure through their initial application review processes that ISO 20000 Auditors are assigned to audits under the APMG Scheme, that have been qualified through either;
 - A direct route of completing an APMG (or itSMF) ISO 20000 Auditor training course and hold a valid certificate, or
 - An indirect route of an alternative accredited (e.g. IRCA and PECB) ISO 20000 Auditor training course and valid certificate plus the completion of an APMG / ISO 20000 Auditor examination and award of a valid certificate/conference call interview with a competence evaluation.

SM 7.2.4: All technical experts used on audits must have successfully completed either the three-day *itSMF/APMG* accredited ISO/IEC 20000 Consultant training course or the APMG Auditor equivalent, hold the associated certificate and have two years relevant IT service management experience, or have completed and passed the APMG conversion assessment.

SM 7.2.5: The following criteria shall be applied for each auditor in the ITSMS audit team. The auditor shall have:

- a) at least four years full time practical workplace experience in information technology, of which at least two years in a role or function relating to IT Service Management;
- b) successfully completed a minimum of a five day training programme on the subject of auditing and audit management, two days of which shall have been an *itSMF* accredited ISO/IEC 20000 Auditor training course or the APMG equivalent and hold the associated certificate;
- c) prior to assuming responsibility for performing as an auditor, the candidate should have gained experience in the entire process of assessing an ITSMS. This experience should have been gained by participation in a minimum of two ITSMS assessments, including review of documentation and improvement programmes, implementation assessment and audit reporting;
- d) Maintained their own knowledge and skill in auditing ITSMS.

Auditors performing as lead auditor shall additionally fulfil the following requirements:

1. have acted in the role of audit team leader in at least three ITSMS audits, under the direction and guidance of an auditor competent as an audit team leader
2. have demonstrated they possess adequate knowledge and attributes to manage the assessment process;

Any variations to these pre-requisite levels shall be documented by the certification body e.g. for personnel already qualified as auditors in a related discipline.

7.2.6-9 There are no additional requirements.

SM 7.2.10: Auditors shall be able to demonstrate their knowledge and experience, as outlined above, for example through:

- a) recognized ITSMS-specific qualifications;
- b) registration as an auditor;
- c) approved ITSMS training courses;
- d) up to date continual professional development records;
- e) practical demonstration through witnessing auditors going through the ITSMS audit process on real client systems
- f) at least annually recorded personal reviews and fee

Clauses 8.1-8.4 There are no additional requirements.

8.1: The certification body shall inform APMG of any new certifications or changes in certification status within twenty working days of the decision being taken.

SM 8.4.1: The APMG Scheme certification mark is a registered trademark. Certification bodies are licensed to use the logo, either in colour or black and white, for the following purposes:

- a) in marketing collateral describing the APMG Certification Scheme and any specific associated service that they offer
- b) on certificates issued to organisations successfully passing an audit

When used in colour, the mark shall be reproduced in the exact colours and font of the issued logo. The mark will be supplied to certification bodies on acceptance of their application to join the scheme.

The certification body may sub-license organisations, which they have certified under the Scheme, to use the mark subject to the conditions above on their corporate collateral. The certification body will inform such organisations of the permitted uses of the mark when issuing a certificate. In particular the mark must not be altered or used in a misleading way, for example to imply certification of something which is not certified. No other use of the logo is permitted and APMG will take strong action against any perceived abuse of the mark, whether by a certification body or any other organisation.

9 Process requirements

9.1 General requirements

SM 9.1.1: A certification body may offer other management system certification linked with ITSMS certification, or may offer ITSMS certification only. The ITSMS audit can be combined with audits of other management systems. This combination is possible provided it can be demonstrated that the audit satisfies all requirements for certification of the ITSMS. All the elements important to an ITSMS shall appear clearly, and be readily identifiable, in the audit reports. The quality of the audit shall not be adversely affected by the combination of the audits.

NOTE ISO 19011 provides guidance for carrying out combined management system audits. Please also refer to Annex A of this document.

9.1.2 There are no additional requirements.

SM 9.1.3: The following requirements apply to the audit team as a whole.

a) In each of the following areas at least one audit team member shall satisfy the certification body's criteria for taking responsibility within the team:

- 1) managing the team
- 2) management systems and process applicable to ITSMS
- 3) knowledge of ITSMS processes and their implementation
- 4) knowledge of ITSMS effectiveness review and measurement of the processes
- 5) related and/or relevant ITSMS standards, industry best practices and procedures
- 6) knowledge of incident handling methods,
- 7) knowledge of the current technology where service management might be relevant or an issue,
- 8) knowledge of risk management processes and methods.

b) The audit team shall be competent to review all aspects of the service level agreements in the client organization's ITSMS back to the appropriate elements of the ITSMS.

c) The audit team shall have appropriate work experience and practical application of the service management processes (this does not mean that an auditor needs a complete range of experience of all areas of service management, but the audit team as whole shall have enough appreciation and experience to cover the ITSMS scope being audited).

Technical experts with specific knowledge regarding the process and IT service management issues and legislation affecting the client organization, but who do not satisfy all of the above criteria, may be part of the audit team. Technical experts shall work under the supervision of the lead auditor. An audit team may consist of one person provided that the person meets all the criteria set out in a) above.7.3

SM 9.1.4 Certification bodies shall allow auditors sufficient time to perform the activities related to an assessment. Annex A provides a framework for determining auditor time expected for an effective audit.

SM 9.1.5: Multiple site sampling decisions in the area of ITSMS certification are more complex than the same decisions are for quality management systems. Where a client organization has a number of sites meeting the criteria from a) to c) below, certification bodies may consider using a sample-based approach to multiple-site certification audit:

- a) all sites are operating under the same ITSMS, which is centrally administered and audited and subject to central management review;
- b) all sites are included within the client organization's internal ITSMS audit programme;
- c) all sites are included within the client organization's ITSMS management review programme.

A certification body wishing to use a sample-based approach shall have procedures in place to ensure the following.

- a) The initial contract review identifies, to the greatest extent possible, the difference between sites such that an adequate level of sampling is determined.
- b) A representative number of sites have been sampled by the certification body, taking into account:

- 1) the results of internal audits of head office and the sites
- 2) the results of management review
- 3) variations in the size of the sites

- 4) variations in the business purpose of the sites
- 5) complexity of the ITSMS
- 6) complexity of the service management systems at the different sites
- 7) variations in working practices
- 8) variations in activities undertaken
- 9) any differing legal requirements.

c) A representative sample is selected from all sites within the scope of the client organization's ITSMS; this selection should be based upon judgmental choice to reflect the factors presented in item c) above as well as a random element.

d) The surveillance programme has been designed in the light of the above requirements and covers all sites of the client organization or within the scope of the ITSMS certification within a reasonable time.

The audit shall address the client organization's head office activities to ensure that a single ITSMS applies to all sites and delivers central management at the operational level. The audit shall address all the issues outlined above.

9.1.6 There are no additional requirements.

9.1.7 There are no additional requirements.

9.1.8 There are no additional requirements.

SM 9.1.9: The audit plan shall identify any network-assisted auditing techniques that will be utilized during the audit, as appropriate.

NOTE Network assisted auditing techniques may include, for example, teleconferencing, web meeting, interactive web based communications and remote electronic access to the ITSMS documentation and/or ITSMS processes. The focus of such techniques should be to enhance audit effectiveness and efficiency, and should support the integrity of the audit process.

SM 9.1.10: The certification body may adopt reporting procedures that suit its needs but as a minimum these procedures shall ensure that:

a) a meeting takes place between the audit team and the client organization's management prior to leaving the premises, at which the audit team provides:

- 1) a written or oral indication regarding the conformity of the client organization's ITSMS with the particular certification requirements,
- 2) an opportunity for the client organization to ask questions about the findings and their basis;

The audit report should provide the following information:

- a) an account of the audit including a summary of the document review;
- b) an account of the certification audit of the client organization's implementation of the service management core processes;

9.1.11 There are no additional requirements.

9.1.12 There are no additional requirements.

9.1.13 There are no additional requirements.

SM 9.1.14: Those who make the certification decision shall not have participated in the audit.

9.2 Initial audit and certification

SM 9.2.1: The certification body shall ensure that the scope and boundaries of the ITSMS of the client organization are clearly defined in terms of the characteristics of the business and the organization. Information on scope statements is contained in the document BS ISO/IEC 20000-3:2012 Information technology — Service management Part 3: Guidance on scope definition and applicability of ISO/IEC 20000-1

9.2.1 Application - There are no additional requirements.

9.2.2 Application review - There are no additional requirements.

9.2.2.1 - There are no additional requirements.

9.2.2.2 - There are no additional requirements.

9.2.2.3: There are no additional requirements.

SM 9.2.2.4: The entity, which may be an individual, which takes the decision on granting/withdrawing a certification within the certification body, should incorporate a level of knowledge and experience in all areas which is sufficient to evaluate the audit processes and associated recommendations made by the audit team.

9.2.3 Initial certification audit - There are no additional requirements.

9.2.3:1 There are no additional requirements.

SM 9.2.3.1.1: Integration of ITSMS documentation with that for other management systems.

The client organization can combine the documentation for ITSMS and other management systems (such as quality, information security, health and safety, and environment) as long as the ITSMS can be clearly identified together with the appropriate interfaces to the other systems.

Note: ITSM organizations and ITSMS processes can be complex and subsequent to frequent change. In such situations annual audits may not be appropriate and certification bodies should demonstrate they have considered these issues.

9.2.4: Initial certification audit conclusions - There are no additional requirements.

9.2.5: Information for granting initial certification - There are no additional requirements.

9.2.5.1: There are no additional requirements.

9.2.5.2: The entity which takes the decision on granting certification should not normally overturn a negative recommendation of the audit team. If such a situation does arise, the certification body shall document and justify the basis for the decision to overturn the recommendation.

9.3 Surveillance activities - There are no additional requirements.

9.4 Recertification - There are no additional requirements.

9.5 Special audits - There are no additional requirements.

9.6 Suspending, withdrawing or reducing the scope of certification

SM 9.6.1: Any suspensions, withdrawals or reductions of certification or certification scope shall be notified to APMG within twenty working days of the occurrence.

10 Management system requirements for certification bodies - There are no additional requirements

Annex 2: Audit Times Based on IAF Guidelines

This table provides a framework for determining the amount of auditor time required for conducting an ITSMS audit of a Service Provider organization, based on the number of employees within the scope of the certification audit.

These figures relate to total on and offsite time. A minimum of 80% of this time should be spent on-site.

Number of employees in IT	Auditor time required in a certification audit	Annual auditor time required in a surveillance audit
1 - 25	3	1
26 - 45	4	1 or 2
46 - 65	5	2
66 - 85	6	2
86 - 125	7	2 or 3
126 - 175	8	3
176 - 275	9	3
276 - 425	10	3 or 4
426 - 625	11	4
626 - 875	12	4
876 - 1175	13	4 or 5
1176 - 1550	14	5
1551 - 2025	15	5
2026 - 2675	16	5 or 6
2676 - 3450	17	6
3451 - 4350	18	6
4351 - 5450	19	6 or 7
5451 - 6800	20	7
6801 - 8500	21	7
8501 - 10700	22	7 or 8
>10700	Follow progression above	

Note: The number of days within this table relates to both stage 1 and stage 2 audits and assumes that the organization is located within a single site with a normally scoped certification.

Note: The auditor time required for a re-certification audit is estimated at 66% of the time required for the initial certification audit.

Note: The auditor time for surveillance audits each year is normally 33% of the auditor time required for the initial certification audit.

ANNEX 3: Criteria for Approving APMG ISO/IEC 20000 Lead Auditors and Auditors

- No recognition should be given for any training certificate that does not relate to an ISO/IEC 20000 Auditor qualification (e.g. ITIL, ISO/IEC 27001, etc.)
- No recognition should be given to an ISO/IEC 20000 Auditor training certificate issued through internal training within the RCB unless it is recognized by an external accreditation body, such as IRCA and PECB.
- APMG RCBs shall ensure through their initial application review processes that ISO/IEC 20000 Auditors are assigned to audits under the APMG Scheme, that have been qualified through either;
 - A direct route of completing an APMG (or itSMF) ISO/IEC 20000 Auditor training course and hold a valid certificate, or
 - An indirect route of an alternative accredited (e.g. IRCA and PECB) ISO/IEC 20000 Auditor training course and valid certificate plus the completion of an APMG / ISO 20000 Auditor examination and award of a valid certificate/conference call interview with a competence evaluation.

Annex 4: Schedule of RCB Charges

Fee structure and definitions

The price list that is effective from 18 January 2018 is shown below. APMG prices are reviewed annually and are subject to amendment at any time.

Item	Price
RCB ISO/IEC 20000 Scheme Registration initial application fee	£850.00
Reregistration fee (every 3 years)	£850.00
Certified Organisation Fee (fee per certificate)	£150.00
Desk top review - per auditor day	£950.00
Web-based audit - per auditor day	£950.00
Review of non-conformity findings - per auditor day, charged in increments of 0.25 days	£950.00
On site audit - per auditor day	£950.00
Non-UK Travel time - per auditor day	£950.00
Auditor Travel & Subsistence Expenses charged back at cost	

Note The standard of air travel is normally economy on short haul, premium economy on medium haul and business class on long haul (i.e. flights of more than 7 hours, including connecting flights without an overnight stopover)

APMG will, where possible, group RCBs by geographical region to share the costs of travel and the cost of the time taken to travel by each RCB. These arrangements will be communicated to you ahead of the visit for your agreement.

Units of Time

Rates for our services will be calculated in days, half days or quarter days per person. We will not bill our time for journeys wholly within the United Kingdom mainland. If the working day is unduly prolonged, an additional half or quarter day per person may be charged.

Travel Rechargeable Time

Total travel time to reach assessment destinations outside of the United Kingdom and/or offshore work which is based in the UK will be charged at the relevant day rate in days, half days or quarter days per person. For the purposes of calculating total travel rechargeable time, United Kingdom will include the Crown Dependencies where the total travel time is less than 3 hours.

APMG reserves the right to charge for travel time for an assessment resource to travel from outside of the UK to conduct an assessment in the UK, where that assessment resource is specifically required by the customer.

Time spent during trapped weekend days are not generally billed, unless worked at customer's request. However, assessment team expenses for trapped days will be billed (See below for current Travel and Subsistence rate).

Expenses

See details in the price list above.

Cancellation Policy and Charges

Where the customer cancels or postpones the date of a visit after it has been agreed, a fee is payable as set out below.

Surveillance and Reassessment visits will normally be booked and agreed with the customer three or more months in advance. Other assessments, including witnessed assessments associated with surveillance and reassessment visits are booked at shorter notice.

If a customer cancels or postpones a visit, once this has been agreed, the costs incurred by APMG will be invoiced in full. APMG reserves the right to withhold any grant, maintenance or renewal of accreditation until it is settled.

Non-payment of invoices which require payment in advance of the assessment date on the due date of the invoice is considered as a cancellation of the assessment by the customer and the cancellation policy will apply.

Needs re-writing to include the parts of APMG15/015 where we rely on NAB reports but will accept ISO/IEC 20000 reports with our "deltas", but that we will conduct an on line audit every year and reserve the right to do a full audit once every 3 years.

Reinstatement Fee

Where a customer's registration is suspended for financial reasons e.g. late payment of invoices, a fee will be charged for reinstating the registration when the debt has been settled.

Quotations

Customers are entitled to quotations before work begins and are required to confirm their acceptance of the quotation within 14 days of the date of issue. Once work has started, the customer is deemed to have accepted the quotation and is committed to paying for the quoted quantity of effort and any expenses incurred in arranging the visit.

Although we will endeavour to carry out the job within the effort allowed by the quotation, we reserve the right to agree and bill for a different quantity if this is what is actually worked. Accordingly, it is in customers' interests to ensure that their records and evidence are of the agreed standard. Any non-conformities that are identified during an assessment will require additional effort and therefore will result in additional charges.

Invoicing

Invoices are normally raised in sterling and are due and payable in full, are raised in electronic format and sent via email. We may, on a case by case basis, be able to invoice in other currencies, upon application.

Value Added Tax will be applied according to UK rules. Any non-UK taxes and all other transaction charges relating to the payment remain the responsibility of the customer.

Payment Terms

For UK customers, our standard payment terms are 30 days from the date of the invoice, except where indicated that payment is required before any work is undertaken. We reserve the right to withdraw credit, (for example in cases of bad credit or payment history) in which case payment is required in advance of any work being undertaken.

For customers who are required to pay in advance of any work undertaken, invoices will be issued as soon as work is scheduled and no more than four months in advance of the day that work is to be undertaken.

Fees up to and including initial assessment and any associated supplementary or close out work must be paid before accreditation is granted.

Payment Methods

For applications submitted via the online portal, there are two options for payment: one via a third-party online payment system using credit cards or via electronic bank transfers upon receipt of an invoice after successful completion of the application.