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QUALITY MANUAL

Table of Contents

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

Change Record

Revision #	Revision Date	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, • Section 1: Introduction • Update Managing Director's role • Update Operations Administrator's Update of Global Prospective
2.1	2018	J. Wood	Update: - Introduction of Insights Association relationship from 2017 merger of MRA & CASRO - Managing Director's role & responsibilities - Revised Organizational Chart - Confidentiality/no-conflict policies - Advisory Committee to CIRQ Board of Directors
2.2	May 2018	J. Wood/C. Kneidl	Revisions made to ensure compliance with ISO 17065, and that description of the 20252/26362 Core Procedures in Quality Manual match the C1-C11 detailed procedures document following review of same. Also added appropriate changes regarding the inclusion of auditing and certification services related to ISO27001.
2.3	February 2019	C. Kneidl/J. Wood	Revisions made to incorporate release of ISO 20252:2019.
2.4	Sept 2019	J.Wood	Update: New CIRQ ISO 20252 Certification Mark

Certification Institute for Research Quality (CIRQ)
QUALITY SYSTEM MANUAL

I. Introduction

Launched in 2017, the Insights Association was formed through the merger of two organizations with long, respected histories of servicing the market research and analytics industry: CASRO (founded in 1975) and MRA (founded in 1957). The result is a new, larger and more connected association with a unified, coordinated and higher profile voice, aligned in mission and message, and ultimately more effective at advancing the industry and profession in which we all share an abiding passion.

The Insights Association strives to effectively represent, advance, and grow the research profession and industry. Specifically, the organization:

- Provides government advocacy through legislative, regulatory and judicial means
- Cares for and improves the industry's image in the eyes of the media and public
- Markets the business case for industry products and services to buyers and users
- Sets and enforces professional standards
- Establishes and reinforces best practices
- Helps members grow their businesses, their departments, and themselves as research professionals

CASRO was 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.

In 2018, the Insights Association undertook an update and published the new Insights Association Code of Standards and Ethics for Market Research and Data Analytics, and members are required to adhere to this 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 Insights Association Code extends beyond Insights Association members. It is a major reference document for international research businesses and for the global research community. Further, Insights Association 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.

Insights Association's extensive services to members (and non-members) provide information and guidance on research and research business issues and trends. It also holds unique position 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, Insights Association (previously CASRO) provides singular leadership as the official U.S. delegate to the Technical Committee (TC) of the International Standards Organization (ISO) in the development and maintenance of quality standards for the global survey research industry. Through their membership on this Technical Committee, these two prior standards were released as indicated below:

- ISO 20252, initially released in 2006 and revised in 2012
- ISO 26362 for access panels, released in early 2009.

And in February 2019 the new ISO 20252:2019 standard, which combines the two prior standards, was released.

Insights Association's involvement with maintaining 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. Insights Association 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 Insights Association 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: The ISO research standard that provide the infrastructure needed for quality processes related to research project management

Insights Association believes that certification to the above-mentioned ISO standard will provide tangible benefits to research companies, to the clients of research companies, and to the public.

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. As a result, 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, and subsequently in the global arena, desiring to be certified to ISO 20252:2012 and/or ISO 26362. With the merger between CASRO and the MRA to form the Insights Association, the name of CIRQ has been officially changed to the Certification Institute for Research Quality, enabling the continued use of the CIRQ acronym. Beginning in February 2019 CIRQ will begin the process to transition its procedures and train its auditors to certify survey research companies to the new ISO 20252:2019 standard.

CIRQ shares offices and some back-office functions with Insights Association, 1156 15th Street, NW, Suite 302, Washington, DC, 20005.

The Insights Association is uniquely positioned to carry on the work initially undertaken by CASRO to continue growth and development of this certification body and provide a credible and authoritative ISO 20252:2019 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, Insights Association 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 Insights Association to be the leading and most respected voice for U.S. research businesses and the executive leaders of those businesses.

In 2017, at the request of a number of CIRQ clients, CIRQ sought a way to also begin offering auditing and certification services to survey research companies that also wished to become certified to ISO 27001-2013. Recognizing that the requirements of this standard were outside of the survey research arena, CIRQ identified PECB North America as a potential partner. CIRQ's parent organization, Insights Association, entered into a formal agreement with PECB North America on behalf of CIRQ in 2017.

PECB Corp Inc. is a duly accredited and duly authorized certification body by the International Accreditation Service Inc. (IAS) with the ability to sell and provide individual and corporate ISO standards compliance based accredited certifications services worldwide.

IAS is a duly recognized accreditation body by the IAF (International Accreditation Forum) which has the authorization and full capacity to accredit and authorize Certification Bodies to certify individuals and corporation on various ISO standards.

IAF is one of the four (4) international organization duly authorized by ISO (International Organization for Standardization) with the duly authorized ability to provide the accreditation body denomination and capacity to act as such under ISO guidelines and compliance relating to various ISO standards.

PECB North America Inc recognizes CIRQ as an organization operating in compliance with all ISO requirements for certification bodies. While CIRQ has provided certification services for ISO 20252 and 26362 to its affiliated members (and non-members) since 2011, CIRQ now outsources the ability to use the auditing and certification body services of PECB Corp Inc. for ISO 27001. (*ISO/IEC 17065 6.2.2.1, 6.2.2.3-4 External resources (outsourcing*).

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 20252:2019 Standard
- ISO 27001: 2013
- CIRQ Operating Agreement
- IRS Group Exemption for CIRQ
- Insights Association Code of Standards and Ethics for Market Research and Data Analytics
- CIRQ agreement – PECB North America, Inc, 2018

II. Definitions

(ISO/IEC 17065:2012 Clause 3)

For the purposes of this document, the terms and definitions given in ISO 20252:2019 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 20252:2019. 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.
15. 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

(ISO/IEC 17065:2012 – Clause 4.4)

CIRQ has been established to provide auditing and certification services to Insights Association members, as well as other non-member survey research service providers, that wish to be certified to ISO 20252. Through its partnership with PECB North America, CIRQ also offers auditing and certification services to survey research companies wishing to be certified to ISO 27001. The scope of certifications is focused on companies headquartered in North America. PECB North America is a duly recognized accreditation body by the IAF (International Accreditation Forum) which has the authorization and full capacity to accredit and authorize Certification Bodies to certify individuals and corporations on various ISO standards.

CIRQ offers 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 – December 2011. (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 Insights Association members and non-members, relative to ISO 20252:2019 and/or ISO 27001:2013. The policies and procedures of CIRQ are administered consistently, rigorously, and in a non-discriminatory way at all times.

References:

- Global Specification Protocol-Dec. 2011, ICF
- ISO/IEC 17065:2012
- ISO/IEC 17021:2011
- CIRQ Intranet

IV. Quality Policy

The quality policy of the Certification Institute for Research Quality (CIRQ) is……

CIRQ is committed to providing timely, thorough and impartial assessment of their customers' quality research management systems in order to make a determination regarding certification to ISO 20252 and/or ISO 27001.

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.

V. 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 standard; and
- Establish strong links with other certification bodies and relevant organizations with coverage outside of North America.

VI. 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 and ISO 27001 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 Insights Association, 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 by CIRQ and may not be disclosed to any third party (including the Insights Association) 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 Statement of Applicability 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 (defined as employees, independent contractors, board 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.

Definitions

Auditor: An independent contractor who assesses and documents compliance with a standard

Auditing Conflicts: Situations where an auditor audits a company for which they are currently employed or consulting, or for which they have been employed or done consulting in the past 3 years

Consultant: Anyone who provides assistance, advice, know how, or guidance in exchange for a payment currently or within the last 3 years

Consulting Ban List: A list of companies where auditors agree to not conduct audits for in the next 3 years

Consulting Conflict: When an auditor has done consulting for a competitive company of the client, and the client objects to the auditor being assigned to audit their company.

Self-Declaration of No Conflicts: A declaration from an auditor and/or client prior to each potential audit that they are not aware of any conflicts that exist between the client and auditor.

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 auditors 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. Declarations will be in writing, and as follows:

No Conflict Statement (FC5001)

It is the policy of CIRQ to disqualify any auditor from the responsibility of performing assessments or certification activity for any company in which the auditor has a current, prior or future interest. To the best of my knowledge, I will not accept assignments in which I have (1) a vested interest in the assigned client, (2) been employed by the client in some capacity within the past three years, currently, or will agree to be employed by the client in some capacity in the next year (3) provided consulting services to the client within the past two years or will provide consulting to the client in the next year, or (4) provided specific and tailored training services to the client within the past two years. If prior to or during the course of an assignment I identify a situation in which I believe the impartiality of the audit can be/has been compromised, I will notify the CIRQ Managing Director immediately.

Such declarations and the outcomes shall be documented and retained on the CIRQ Intranet in the

client folders. . 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 CIRQ Board for their determination.

References:

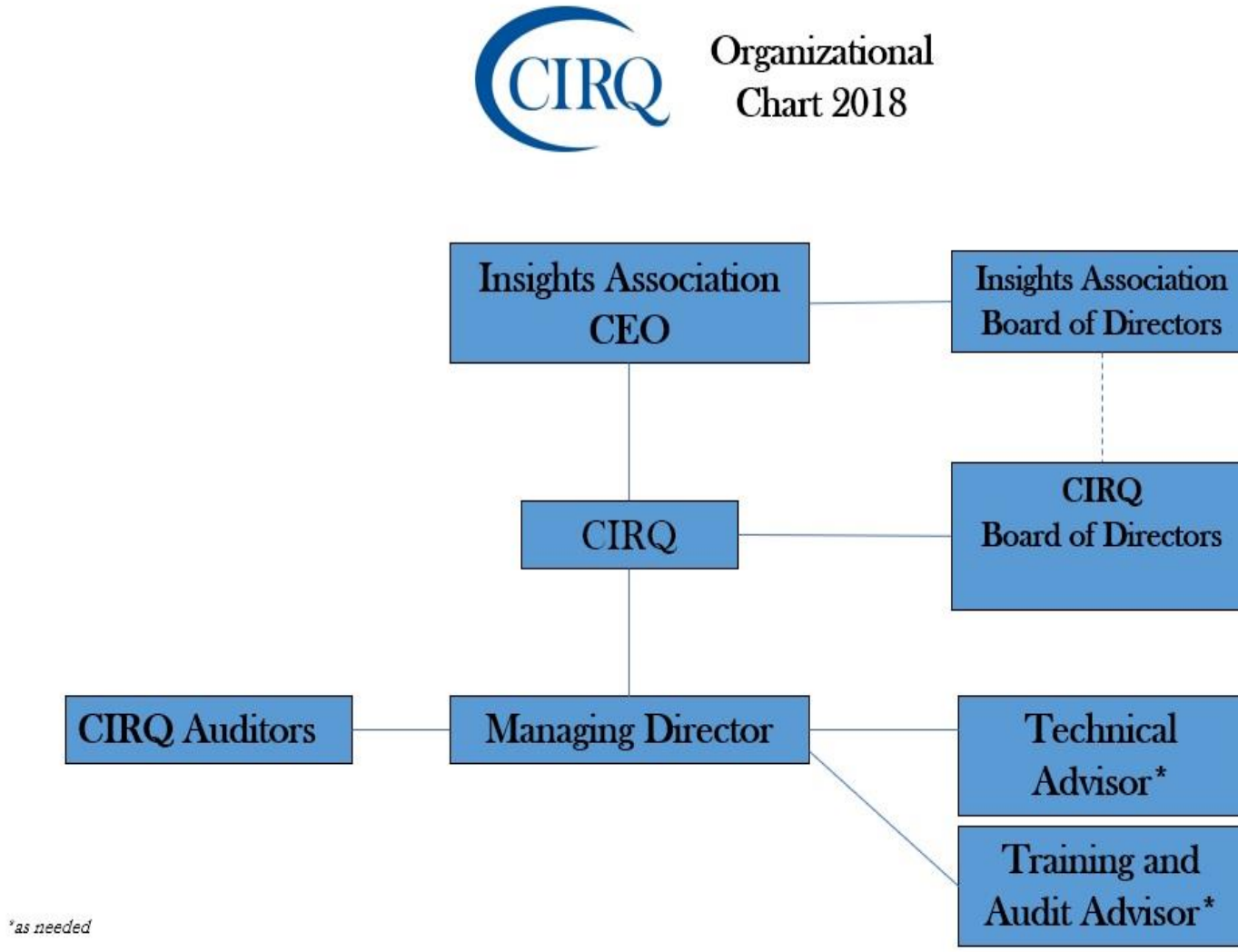
- CIRQ Organization Handbook
- Annual Agreements signed by Independent Contractors (TS7001)
- Auditor Declaration of No Conflict (FC 5001)

VII. Organization Responsibilities and Authority

(ISO/IEC 17065:2012- Clauses 4.1.1, 4.3, 5.1, 6.1.2.2)

CIRQ is set up as a wholly owned, non-profit subsidiary of Insights Association in order to facilitate impartiality and foster confidence in the auditing it conducts and the decisions it makes regarding certification to ISO 20252; and through its partnership with PECB the ISO27001 standard Documentation of CIRQ's legal status and liability insurance are maintained at CIRQ offices. Financial records for the Insights Association and CIRQ are maintained separately for both organizations, and securely maintained at the offices shared by the Insights Association and CIRQ.

The organizational chart on the next page reflects the general structure of CIRQ.



The CIRQ Managing Director (MD) and the CIRQ Board of Directors 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 the Global Specification Protocol-Dec. 2011, ICF;
- Ensuring that the policies and procedures of CIRQ are impartially administered;
- Establishing the CIRQ Quality Policy and Quality Objectives ;
- 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;
- Communicating the importance of CIRQ's role in the survey research industry to CIRQ staff and customers; and
- CIRQ's promotion of its auditing and certification services to survey research companies, that represent potential customers.

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

- A Managing Director who is a current Insights Association full time employee
- CIRQ trained Auditors including Independent Contractors
- 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
- A Board of Directors (*ISO/IEC 17065:2012 Clause 5.1)* currently made up primarily of volunteers who serve on a part-time basis and in an honorary capacity. At present, this Board consists of:
    - Managing Director of CIRQ
    - Insights Association CEO
    - CIRQ Board Chairperson (volunteer)
    - 2 additional CIRQ Board members (volunteers)

  The CIRQ Board chair and the other 2 members represent various disciplines within the survey research industry. Overtime, as CIRQ grows, the Board may be increased by adding individuals representing the following:

    - The individual responsible for the quality system in a CIRQ customer company certified to ISO 20252:2019
    - A representative from another national association, if any, that establishes collaborative relationships with CIRQ
    - An Insights Association Board member
    - An Insights Association member, but non-Board member
    - The Insights Association's General Counsel

The Insights Association CEO shall have interim financial responsibility for CIRQ. The Managing Director will report to the Insights Association CEO. A Training and Audit Advisor and a Technical Advisor will be consulted on a case-by-case basis; Auditors will report directly to the Managing Director. As the base of customers grows additional positions may be created.

CIRQ shall solely retain the authority for granting, maintaining, extending, suspending or withdrawing certification for ISO 20252; and through its partnership with PECB for the same with regard to ISO 27001.

All CIRQ staff will work in accordance with the existing CIRQ Organization Handbook, maintained on the CIRQ Intranet in Level 1 Corporate. During orientation training, CIRQ management, staff 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 Core Procedure documents and the Support Procedures (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
- Ensure & facilitate impartiality in CIRQ operations from outside influence in order to foster confidence in the auditing it conducts and the decisions it makes regarding certification to ISO 20252:2019 and ISO 27001:2013.
- Hire all CIRQ staff, including Auditors, and ensure all staff complete appropriate training
- Oversee activities of all staff and conduct annual review of their performance, except for Board Members who do not receive annual performance reviews
- Serve as liaison with PECB for delivery of auditing and certification services for ISO 27001

- Review and approve all audit materials including making final determination on certification matters or refer to the CIRQ Board 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 20252:2019 certification to Insights Association 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 Board 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 Insights Association CEO
- Represent CIRQ at industry events
- Develop new CIRQ offerings
- 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 for ISO 20252, C1-C10 for ISO 27001 and supporting procedures)
- Revise old forms and develop new ones to better address CIRQ's needs
- Manage internal audit program
- Manage the Complaint, Appeal and Dispute procedure, as well as the Risk Management Procedure
- Update CIRQ Quality manual as needed/required to maintain self-certification status
- Field phone and email inquiries related to CIRQ
- Participate in marketing creation and associated efforts for CIRQ
- Update CIRQ website

Qualifications, Competencies and Knowledge requirements:

- Competent in the interpretation of ISO 20252:2019
- Knowledge of and understanding of the CIRQ operational procedures and those Insights Association 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 – As needed

- Support the impartiality in CIRQ operations from outside influence in order to foster confidence in the auditing it conducts and the decisions it makes regarding certification to ISO 20252:2019.
- Support promotion of ISO 20252:2019 certification to Insights Association 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 20252:2019
- 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 – As needed

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 20252:2019 certification
- Support facilitation of impartiality in CIRQ operations from outside influence in order to foster confidence in the auditing it conducts and the decisions it makes regarding certification to ISO 20252:2019.
- Support promotion of ISO 2025 certification to Insights Association members and non-members
- Deliver periodic reports to CIRQ Board of Directors 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

Board of Directors:

(ISO/IEC 17065:2012 - Clause 5.2)

To ensure impartiality and independence of CIRQ from the Insights Association, a CIRQ Board of Director Chairperson will be appointed by the Insights Association CEO. The CIRQ Chair will then nominate additional CIRQ Board members. This Board comprises individuals with appropriate experience and expertise drawn from a cross section of disciplines, and should represent parties concerned in the development of policies and principles regarding the functioning of CIRQ. There may be a need to supplement this Board from time to time due to growth, resignations, workload etc.

Prospective members may be identified by the Managing Director of CIRQ, the Insights Association CEO, or other Board members. Current members of the CIRQ Board or technical experts with appropriate expertise shall evaluate the nominee's competence, before a recommendation is made or accepted.

Responsibilities include**:**

- Ensure the independence and impartiality of CIRQ by providing support to the Managing Director or taking independent action, as needed
- Provide input regarding:
    - policies and principles of CIRQ related to impartiality of CIRQ's certification services
    - any tendency of CIRQ to allow commercial or other considerations to prevent consistent, impartial certification services

    - matters affecting impartiality and confidence in certification
- Approve appointment of, and continue liaison with, CIRQ's management team
- As requested by Managing Director, assist with complaint/appeal issues and risk management issues
- Ensure adherence to the policies/procedures in the CIRQ Organization Handbook, which incorporates relevant sections of the Insights Association Board of Directors Book, including the Code of Conduct and the Code of Standards and Ethics for Survey Research
- Maintain the confidentiality of all information created or acquired during the course of offering its certification services, unless it is publicly available or when agreed between the client and CIRQ

Auditors:
A pool of Auditors has been established and is maintained by 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) for ISO 20252 and/or C1-C10 Procedures document (Level 2) for ISO 27001.

Under the agreement with PECB, CIRQ contracts with PECB auditors trained in the ISO 27001 technical standard. In these cases, PECB provides many of the forms and templates CIRQ uses in the audit process, and the certified client receives a Certificate of Compliance that is co-branded with CIRQ, on a PECB template.

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
- Support the facilitation of impartiality in CIRQ operations from outside influence in order to foster confidence in the auditing it conducts and the decisions it makes regarding certification.
- Maintain the confidentiality of all information created or acquired during the course of offering its certification services, unless it is publicly available or when agreed between the client and CIRQ

Qualifications, Competencies and Knowledge requirements:
- Competent in the interpretation of ISO 20252:2019 and/or ISO 27001
- Trained auditor according to the training standards prescribed by CIRQ
- Market, opinion and social research industry knowledge and/or experience
- General computer skills
- Report writing skills
- Communication and consultation skills

CIRQ Personnel
Names, qualifications, and experience of CIRQ Management, Auditors or Advisors are available by

referencing files established and maintained on the CIRQ Intranet site (see CIRQ Records/Personnel Records folder).

Relationship to Insights Association
CIRQ is a wholly owned, non-profit subsidiary of Insights Association and shall operate independent of Insights Association, other than some back office functions that support both entities.

References:

- CIRQ Core Procedures, C1-C11 – ISO 20252 (Level 2)
- CIRQ Core Procedures, C1-C10 – ISO 27001 (Level 2)
- CIRQ Support Procedures, S1-S11 (Level 2)
- CIRQ Auditor Training Manual-Version April 2018, August 2018 Training Materials, Feb/March 2019 Training Materials
- CIRQ Operating Agreement
- IRS Group Exemption for CIRQ
- Confidentiality, Non-compete, and Non-solicitation Agreement (TS7001)
- Declaration of No Conflict (FC5001)
- CIRQ agreement – PECB North America, Inc, 2018

VIII. Quality System Structure

(ISO/IEC 17065:2012 Clause 8.1)
CIRQ has established, documented and maintains a Quality System (QS) which 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. This level covers both Core and Support 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; or when there are changes to the ISO 20252:2012 or ISO 26362 standards

CIRQ has identified 11 Core Procedures for ISO 20252, 10 Core Procedures for ISO27001, and 11 Support processes needed for its QS to provide consistent auditing and certification services to its customers. These Core & Support processes address the requirements of *Clauses 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 outlined in the next section of this manual.

References:

- S6 Documentation Procedure
- CIRQ Intranet Site

IX. Operations

(ISO/IEC 17065:2012- Clause 7)

The certification schemes covered in this manual complies with ISO 17065, and is in accordance with the Global Specification Protocol-Dec. 2011, ICF. It shall apply to all companies seeking certification, and these companies shall meet the requirements of ISO 20252:2019 and/or ISO 27001. 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/regulations based on their geographic coverage.

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. Also included in the following outline is a description of the Support Processes needed for CIRQ's quality system. Refer to the C1-C11 Procedures-ISO20252 document and the S1-S11 Procedures documents (Level 2) for a more detailed explanation of CIRQ's certification process and support procedures.

See also the C1-C10 Procedures – ISO 27001 document (Level 2) for a detailed explanation of the certification process as it relates to this standard.

The Managing Director has overall responsibility for the Core procedures, supported by auditors on specific steps, and for the Support Procedures.

A. Core Process Definitions for ISO 20252 (the C1-C10 procedures – ISO 27011 are similar but adjusted to apply to the partnership between CIRQ and PECB for certifications to ISO 27001)

C1. Application for Certification

(ISO/IEC 17065:2012 – Clauses 4.1.2, 7.2 and 7.3)

Companies seeking to be certified to ISO 20252:2019 shall have implemented a Quality System including documentation meeting the requirements of this 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 review the RFQ and Authorization to Proceed to confirm the submitted Statement of Applicability and any requested exemptions to particular Annexes. CIRQ shall then define the objective and criteria for the audit, obtaining Client agreement on same. CIRQ's Managing Director (MD) has primary responsibility for this process.

Required Records:

- Completed RFQ (FC1001 2.1 Request for Quotation)
- Authorization to Proceed (FC1003 1.7 Authorization to Proceed)

References:

- Detailed procedures for the Application process in the C1-C11 Procedure document (Level 2)
- Audit & Certification Fees DC1001
- Audit Journey DC1002

C2. Self-Assessment (ISO 20252:2019)

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 readiness for audit, 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 MD confirms that there is no conflict of interest present. The completed Self-Assessment and Quality Manual are made available to the Auditor via the CIRQ Intranet site, 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 (WBC 3003 1.6 Self & Pre-Assessment Report Workbook ISO 20252:2019)
- Applicant's Quality Manual
- Declaration of No Conflict (FC5001)
- Standard Certification Agreement (TC4001 2.1 CIRQ Standard Certification Agreement 2019)

References:

- Detailed procedures for the Self-Assessment in the C1-C11 Procedure document (Level 2)

C3. Pre-Assessment (replaced with a Stage 1 Audit for certifications to ISO 27001)

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 20252:2019, 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 by the assigned auditor. A Pre-Assessment report

is prepared by the auditor. Through this Pre-assessment CIRQ requires a company to indicate compliance with the Core Framework of the ISO 20252 Standard (Clause 4), as well as with the various Annexes to which the client company attests—in order to move on to the Certification Audit. Any areas of shortfall regarding compliance 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, corrected and confirmed as corrected prior to the on-site audit.

Required Records:

- Pre-Assessment Report (WBC 3003 1.6 Self & Pre-Assessment Report Workbook ISO 20252:2019)
- CLC 7001 1.4 Audit Program Checklist

References:

- Detailed procedures for the Pre-Assessment in the Core 1-11 Procedure document (Level 2)
- Auditor Training Materials, August 2018 and Feb/March 2019
- ISO 20252:2019 Standard

At this stage of the process, if the company is a small Australian survey research company the S9 procedure is followed in place of C4-C11.

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, and in most cases, the Lead Auditor should be the same person as the one who conducted the Pre-Assessment. If additional auditors are needed for the actual audit, the Managing Director assigns the auditor(s), and confers with the audit team about audit logistics and locations. The Managing Director also confirms that there is no conflict of interest on the part of the additional auditors. 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)
- Declaration of No Conflict (FC5001)

References:

- Detailed procedures for Audit Planning in the Core 1-11 Procedure document (Level 2)
- Auditor Training Manual Version April 2018 and Training Materials dated August 2018 and February - April 2019
- On-site Audit Tool Workbook (WBC4003 1.7)
- Applicant's RFQ (FC1001 2.1 Request for Quotation)

- Completed Self and Pre-Assessment Report (WBC 3003 1.6 Self & Pre-Assessment Report Workbook ISO 20252:2019)

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

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

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. In selecting these other locations, both the size of the location (i.e. # of staff) and where the attested to Annexes are produced should be considered. Processes and activities carried out by the Company, related to the Statement of Applicability for ISO 20252:2019, 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 of any particular Annex. If there is no project available to audit for a specific Annex for two years in a row, the Statement of Applicability must be revised.

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 review of the Statement of Applicability to confirm it still appropriately describes the services offered by the company to their clients
- A review the most critical activities and processes related to clause 4, the Core Framework, as well as one or more projects representing each Annex to which the company attested.
- 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 covered by the Statement of Applicability, as well as **all** locations of the Company. Again, if there is no project available to audit for a specific Annex for two years in a row, the Statement of Applicability must be revised.

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 covered by the Statement of Applicability for ISO 20252:2019, 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 (WBC4003 1.7)
- CLC 7001 1.4 Audit Program Checklist

References:

- On-site Audit Tool Workbook (WBC4003 1.7)
- Completed Self and Pre-Assessment Report (WBC 3003 1.6 Self & Pre-Assessment Report Workbook ISO 20252:2019)
- Auditor Training Manual Version April 2018 and Training Materials from August 2018 and February - April 2019
- ISO 20252:2019 Standard

C6. Preparation of Audit Reports

(ISO/IEC 17065:2012 - Clause 7.4.6, 7.4.9, 7.5)

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 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 uploaded to the CIRQ Intranet for the MD's review, and following CIRQ's review and approval, it will be sent to the customer along with notification regarding certification status. The On-Site Audit Workbook should be uploaded to the CIRQ Intranet at the same time as the Draft report.

Required Records:

- Audit Report (WBC6001 Audit Report Workbook 1.6)
- CLC 7001 1.4 Audit Program Checklist

References:

- On-site Audit Tool Workbook (WBC4003 1.7)
- Audit Report Workbook (WBC6001 Audit Report Workbook 1.6)
- Auditor Training Manual Version April 2018 and Training Materials from August 2018 and February - April 2019

C7. Certification Process

(ISO/IEC 17065:2012 - Clauses 7.6, 7.7, 7.8, 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 meet the requirements of the ISO Standard, a recommendation shall be made regarding certification in the report they submit to CIRQ. Any Non-Conformances identified during the audit shall be resolved before certification is granted, maintained or renewed. On approval by the Managing Director of CIRQ, a certificate will be issued (following the Initial audit and each subsequent Re-Certification audit) and the CIRQ Certification Register on CIRQ's website will be updated with the Company's name and Statement of Applicability 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 Insights Association. The Company must establish and maintain procedures for notifying their clients of any goods or services provided or produced outside the certification Statement of Applicability 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 Surveillance Audits or Re-Certification Audit cannot be conducted in the timeframe mentioned above, CIRQ will grant a reasonable extension, in most cases not more than 60 days, until the Surveillance or Re-Certification Audit can be scheduled and new certificates issued for the Re-Certification Audit.

The certified company has the right to reduce or expand its Statement of Applicability, 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. brings 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:

- CLC 7001 1.4 Audit Program Checklist
- Certification Register on CIRQ Internet site
- Certificate of Compliance (TC7001 1.3 CIRQ Certificate of Compliance 20252:2019)
- Letter explaining Certification, Denial of Certification, Suspension of Certification, or Withdrawal of Certification

References:

- Certificate of Compliance Template (TC7001 1.3 CIRQ Certificate of Compliance 20252:2019)
- Certification mark and CIRQ logo
- S1 Terms of Use for CIRQ certification mark

C8. Soliciting Customer Feedback

The Managing Director will contact each customer within 2 weeks following delivery of the Audit report to solicit their feedback, via email. This communication shall follow a prescribed outline of discussion points, shall be documented, and a record of the communication shall be maintained in the customer's

file. Follow up calls will be made where deemed necessary. The Managing Director shall share this feedback with the auditor(s) as appropriate.

Required Records:
- Completed Customer Feedback Form (FC8001)

C9. First Surveillance Audit

(ISO/IEC 17065:2012 – Clause 7.9)

This audit shall take place 12 months following the Initial Certification Audit. Planning for it will begin approximately 3-4 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 C4-C8 above

References:
- See steps C4-C8 above
- Results of Initial Certification Audit

Second Surveillance Audit

(ISO/IEC 17065:2012 – Clause 7.9)

This audit shall take place 12 months following the First Surveillance Audit. Planning for it will begin approximately 3-4 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 C4-C8 above

References:
- See steps C4-C8 above
- Results of Initial Certification Audit
- Results of 1st Surveillance Audit

C10. Re-Certification Audit

(ISO/IEC 17065:2012 – Clause 7.9)

This audit shall take place 12 months following the Second Surveillance Audit. Planning for it will begin approximately 3-4 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 C4-C8 above

References:
- See steps C4-C8 above
- Results of Initial Certification Audit
- Results of 1st Surveillance Audit
- Results of 2nd Surveillance Audit

C11. Certification Body Transfer

Clients wishing to transfer their certification to CIRQ shall complete the Authorization to Proceed for Certification Body Transfer (FC1004) form and return it with the indicated fee. CIRQ then requests the company's quality manual, key processes and recent audit reports for review. Client is notified that any outstanding non-conformances must be resolved prior to certification body transfer.

For all transfers, except Australian companies, a review of the Quality Manual, procedures and previous audit report is performed by an assigned Auditor, and client is billed for ½ audit day.

For an Australian Transfer: Transfer Fee is Charged, Australian auditor reviews the same documents per the Australian Audit Certification Procedure.

Required Records:

- Authorization to Proceed for Certification Body Transfer (FC1004)
- Client's Quality Manual and key processes
- Client's recent audit reports

B. Support Process Definitions

S1. Terms of Use for CIRQ Certification Mark (see also PECB 12002-PO5 Level 2 document)

(ISO/IEC 17065:2012 - Clause 4.1.3)

The Insights Association's Certification 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 20252:2019 (the "Standard") 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 the Standard 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 in the Statement of Applicability. 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 the Standard.

5. Companies that have achieved certification but are **not** Insights Association members may only use the CIRQ Certification Mark and are not entitled to use the separate and distinct Insights Association logo in their materials.

6. The use of CIRQ's name and/or the Certification Mark and/or the use of the Insights Association 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 Insights Association 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 the Standard and its use of the CIRQ Certification Mark based on failure to comply with the Standard 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. CIRQ and Insights Association reserve the right to require that an organization in violation of trademark usage remove them from the organizational website 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 ISO 20252:2019 the International Standard for Market, Opinion and Survey Research including Insights and Data Analytics. This certification covers [insert Statement of Applicability].

References:

- CIRQ logo (for internal CIRQ use only):

- Certification Institute for Research Quality aka 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 CIRQ Board he/she selects (other than the Insights Association CEO and Insights Association'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 Insights Association, so that Insights Association can review the situation against the Insights Association 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 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, 8.7, 8.8)

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.

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 ISO 17065:2012 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 April 2018

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 CIRQ Board. 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 CIRQ Board within an agreed upon timeframe.
Management Reviews shall be held once each year, at a minimum. In addition, the Managing Director or the CIRQ Board may review quality issues periodically and may decide to hold additional Management Reviews as needed. Results of all Management Reviews are recorded by the Managing Director 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/Documents

(ISO/IEC 17065:2012 - Clause 7.12, 8.3, 8.4)

This procedure covers the document retention, control and security procedures, in compliance with the above noted clauses of ISO/IEC 17065:2012, , 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, both Core and Support (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 20252:2019/27001 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 Managing Director 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 20252:2019 standard 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 ISO17065 require changes to the CIRQ Quality System, or when there are changes to the ISO 20252 standard. 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 (or Application) 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 (Application) 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 for 20252 will be numbered with the first 4 digits of the unique client number described above. Certificates of Compliance for 27001 will have their certificate number assigned by PECB.
- 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_05.08.18
- Only the CIRQ Managing Director 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 CIRQ Managing Director is the only person who 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, or to assigned client folders on this site on an ad hoc basis. As of this 2019 revision, the Managing Director of CIRQ is its only employee. At the discretion of the Managing Director, the Training and Audit Advisor may be given read and write privileges to assist with internal audits or other updates to the quality system.
    - CIRQ Board members will have "read only" access to the Level 1 folder in the Vault.

References:

- CIRQ Intranet
- S6 Documentation procedure at Level 2 on the 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, TS7002, TS7003)
- New Auditor Training Assessment Report (FS7001)
- Auditor Assessment (FS7003)

References:

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

S8 Changes in Certification Requirements

This procedure describes the steps that shall be taken when changes occur in ISO 20252 or in CIRQ's certification scheme applying to this standard. These changes may require notification to clients and/or CIRQ staff.

Required Records:

- Written communications to clients describing change stored in Client folder on CIRQ Intranet
- Written communications to staff describing change stored in Personnel folder on CIRQ Intranet
- Updates to Changes in Certification Requirements Register (DS8001) on CIRQ Intranet, Level 3 in the Document Vault

References:

- S8 Procedure in Level 2 on the CIRQ Intranet site

S9 Australia Audit & Certification Procedure
See S9 procedure at Level 2 of the Intranet.

S10 Expiration of Certification Procedure
This procedure describes the steps that shall be taken when a company is approaching the expiration date of their ISO certification.

Required Records:

- Written communication to client notifying them of upcoming expiration date, stored in Client folder on CIRQ Intranet
- CLC 7001 1.4 Audit Program Checklist

References:

- S10 Procedure in Level 2 on the CIRQ Intranet site

S11. Risk Management Procedure
In order to maintain the impartiality and credibility of CIRQ as an auditing and certification body, an assessment of risks will be undertaken on an as needed basis, and minimally at least once a year. Identified risks and the threats posed will be documented on the Risk Register along with an assessment of the level of risk (High, Medium, Low) and steps taken to prevent or correct situations that occur.

Required Records:

- Risk Register on CIRQ Intranet, Level 2 in the Document Vault

References:

- S11 Procedure in Level 2 on the CIRQ Intranet site

X. APPENDIX

A. References

(ISO/IEC 17065:2012 -Clause 2)

- ISO 20252:2019
- ISO 27001:2013
- Global Specification Protocol for Organizations Certifying to an ISO Standard related to Market, Opinion and Social Research – December 2011
- ISO 19011: 2002, Guidelines for quality and/or environmental management systems auditing
- CIRQ Organization Handbook 2018
- Code of Standards and Ethics for Marketing Research and Data Analytics 2018
- Insights Association's Employee Handbook
- Insights Association's Code of Conduct
- Federal legislation in the U.S.
  - HIPPA
  - GLB
  - COPPA
- Privacy Shield requirements
- GDPR