



**ACCREDITATION SCHEME  
FOR  
ENVIRONMENT, HEALTH & SAFETY  
(EHS, ISO 14001 and OHSAS 18001)  
CONSULTANT ORGANISATION**

**NATIONAL ACCREDITATION BOARD FOR  
EDUCATION AND TRAINING (NABET),  
QUALITY COUNCIL OF INDIA (QCI)**

**National Accreditation Board for Education and Training**

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## **ABOUT QCI/NABET**

Quality Council of India (QCI) was set up jointly by the Government of India and the Indian Industry represented by the three premier industry associations i.e. Associated Chambers of Commerce and Industry of India (ASSOCHAM), Confederation of Indian Industry (CII) and Federation of Indian Chambers of Commerce and Industry (FICCI), to establish and operate national accreditation structure and promote quality through National Quality Campaign. QCI is registered as a non-profit society with its own Memorandum of Association. QCI is governed by a Council of 38 members with equal representations of government, industry and consumers. Chairman of QCI is appointed by the Prime Minister on recommendation of the industry to the government. The Department of Industrial Policy & Promotion, Ministry of Commerce & Industry, is the nodal ministry for QCI.

It functions through the executive boards in the areas i.e. Accreditation for Certification bodies, Assessment Bodies, Healthcare Establishments, Education & Vocational Training Providers, Consultant organisations, skill development etc.

In addition it has an exclusive Board for promotion of Quality.

National Accreditation Board for Education and Training (NABET), one of the constituent Boards of QCI, offers accreditation to the Consultant Organizations in various areas including Quality Management Systems, Environment Management Systems, Occupational Health and Safety and Auditors etc. NABET also accredits EIA Consultant Organisations, schools, Industrial Training Institutes and Vocational Training Providers.

NABET has mutual recognition arrangements with ANSI-USA and SQA-Scotland.

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## 1. ABBREVIATIONS

AC	Accreditation Committee
AO	Applicant Organisation(s)
ASSOCHAM	Associated Chambers of Commerce
ACO	Accredited Consultant Organisation
CAPA	Corrective Action & Preventive Action
CII	Confederation of Indian Industry
CO	Consultant Organisation
EHS	Environment, Health & Safety
EMS	Environment Management System (ISO 14001)
CV	Curriculum vitae
DA	Desktop Assessment
EMP	Empanelled
FICCI	Federation of Indian Chambers of Commerce and Industry
IA	Initial Assessment
IH	In- house
ISO	International Organization for Standardization
LA	Lead Assessor
MOU	Memorandum of Understanding
NABET	National Accreditation Board for Education & Training
NGO	Non-Government Organization
NC	Non- conformance
OA	Office Assessment
Obs.	Observations
OHSAS	Occupational Health and Safety Assessment System
QCI	Quality Council of India
QMS	Quality Management System
RA	Re-Accreditation
SA	Surveillance Assessment
TA	Technical Assessor
TC	Technical Committee
TQAS	Training Quality Assurance System

## 2. GENERAL INFORMATION

### 2.1 BACKGROUND FOR THE SCHEME

The Goal of **Environmental, Health and Safety (EHS or SHE or HSE)** is to protect employees, the public, the environment and to comply with applicable laws. EHS management has two general objectives: prevention of incidents and accidents that might result from abnormal operating conditions on the one hand and reduction of adverse effects that result from normal operating conditions on the other hand.

From a **health & safety** standpoint, it involves creating organized efforts and procedures for identifying workplace hazards and reducing accidents and exposure to harmful situations and substances. It also includes training of personnel in accident prevention, accident response, emergency preparedness, and use of protective clothing and equipment.

From an **environmental** standpoint, it involves creating a systematic approach to complying with environmental regulations, such as managing waste or air emissions all the way to helping sites reduce the company's carbon footprint.

Successful EHS programs also include measures to address ergonomics, air quality, and other aspects of workplace safety that could affect the health and well-being of employees and the overall community.

#### **Proper attention to workers' health and safety has extensive benefits:**

- Healthy workers are productive and raise healthy families; thus healthy workers are a key strategy in overcoming poverty.
- Workplace health risks are higher in the informal sector and small industries which are key arenas of action on poverty alleviation, where people can work their way out of poverty.
- Safe workplaces contribute to sustainable development, which is the key to poverty reduction.
- The processes of protecting workers, surrounding communities and the environment for future generations have important common elements, such as pollution control and exposure reduction.
- Much pollution and many environmental exposures that are hazardous to health arise from industrial processes that can be beneficially influenced by occupational health and safety programmes.
- Occupational safety and health can contribute to improving the employability of workers, through workplace (re)design, maintenance of a healthy and safe work environment, training and retraining, assessment of work demands, medical diagnosis, health screening and assessment of functional capacities.

- Occupational health is fundamental to public health, for it is increasingly clear that major diseases (e.g. AIDS, heart disease, cancer) need workplace wellness programmes.

Benefits of promoting the Environment, Health and Safety Management:

To the organisation	To the employee
A well-managed health and safety programme	A safe and healthy work environment
A positive and caring image	Enhanced self-esteem
Improved staff morale	Reduced stress
Reduced staff turnover	Improved morale
Reduced absenteeism	Increased job satisfaction
Increased productivity	Increased skills for health protection
Reduced health care/insurance costs	Improved health
Reduced risk of fines and litigation	Improved sense of well-being

Many organisations are expert in their area of business and intend to develop and implement EHS in their activities/ operations of their organisation(s), but they may or may not be aware about the EHS requirements, documentation and implementation of EHS effectively. Hence, there is a need of EHS consultant organisation in our country and around the world.

EHS CO should have qualified, credible and competent EHS experts, suitable resources, systematic working processes, consultancy quality assurance system etc. To bring uniformity, fairness, transparency, competency, quality assurance etc. in EHS consultant organization's (EHS COs), it is felt that there is a need for a well-designed Accreditation scheme for qualified and competent EHS consultant organisation(s). This will be highly useful to avoid variations in documentation and implementation EHS in organisation(s). This will improve holistic approach and effectiveness, motivate EHS CO's for continual improvements in their working. NABET-QCI has developed an accreditation Scheme for EHS CO's.

## 2.2 AN OUTLINE OF THE SCHEME

### Proposed Scheme:

In view of the above it is therefore proposed to develop a credible Accreditation Scheme specifying the accreditation requirements for the accreditation of Environment, Health and Safety Consultant Organization (EHS-CO) to fulfil the requirements of standard like suitable

infrastructure, competent human resource, EHS expert, system oriented working system, continual improvement, ethical working.

This scheme will be developed and operated by NABET-QCI in consultation with environment, occupational and safety organisations, institutes, EHS experts, regulators and other stakeholders to frame Independent, transparent and impartial accreditation scheme.

This comprehensive document describes the scheme's requirements of human resources, consultancy quality assurance systems and procedures to be followed, the assessment process and the accreditation criteria. Various aspects of the scheme will be –

- a) Eligibility (who can get accredited) and coverage of the Scheme
- b) EHS Experts – qualification, experience and requirement
- c) Consultancy quality assurance system
- d) Assessment process
- e) Accreditation process
- f) Closure/suspension/delisting/on hold etc. of applications
- g) Fee Structure
- h) Organizational continual improvement commitment towards developing and implementing EHS management system.

Scheme is dynamic in nature. Modifications and updation will take place from time to time, as it ought to be for continually improving the delivery and effectiveness of the training.

## 3. ACCREDITATION REQUIREMENTS AND PROCESS

### 3.1 ELIGIBILITY FOR EHS CONSULTANT ORGANISATION

Any legally identifiable institution/organisation engaged in the field of consultancy, training, EHS planning and implementation, social development, EHS personnel with requisite human resource and other facilities can apply for accreditation under the Scheme.

### 3.2 EHS Expert(s)

EHS is essentially a multi-disciplinary task which requires inputs from specialists having knowledge of environment, environmental issues, occupational health and safety, industry, social, economical, applicable local laws, legislation, processes development and their verifications regulatory framework related with EHS issues.

**EHS expert should be qualified, competent and experience person in documentation, implementation, assessing and reporting EHS management system.**

**Human Resource Requirement:** There shall be a team of minimum three persons for accreditation (minimum two in-house and other(s) may be in-house and/or empanelled).

- a. Minimum one in-house expert is must, requirements in respect of qualification and experience of EHS expert in relation to specific EHS related activities are laid down in **Appendix 1**.
- b. Two others may be EHS expert, one in-house EHS expert shall be available during the EHS consultancy like EHS activity planning, budget development, and implementation and monitoring of activity, report development and should be responsible for organising, conducting, evaluating and for all other activities related to EHS consultancy to client.
- c. List of proposed EHS experts (should have backup experts if possible) with her/his identified competence, their responsibilities in EHS and submit along with the application form. For empanelled/ visiting EHS expert, there should be a written agreement/MOU between the institution and empanelled EHS expert as mentioned in **Annexure 4**.
- d. One empanelled expert may be associated with maximum four EHS consultant organisations.
- e. One IH EHS experts must be fully involved in planning, implementing, monitoring, developing and reporting of EHS report.
- f. No. of experts should be proportional to the number of EHS projects undertaken.

### 3.3 SCOPE OF ACCREDITATION

An applicant EHS management system consultant organisation should define their expertise in different sectors of businesses, related activities of EHS, it is expected to satisfy the requirement of experienced EHS experts for EHS consultant activities planning, documenting, implementing, monitoring and reporting.

### 3.4 INFRASTRUCTURE

EHS Consultant Organisation(s) wishing to apply for accreditation under this Scheme should have the following infrastructural facilities:

- a. Office setup, some meeting/ discussion room
- b. Experts room / work stations
- c. Contemporary discussions/ training aids (as projectors, white board, markers, flipchart, audio, video facilities etc.) including requisite software for their staff or clients
- d. CO having library facilities or appropriate subscriptions to update their knowledge about the latest developments in the area of EHS.
- e. If EHS CO have offices at multi locations, these should be mentioned in application with details of experts, infrastructure etc.

### 3.5 CONSULTANCY QUALITY ASSURANCE SYSTEM (CQAS)

Consultant organisation should have quality assurance system for continually improving the delivery and effectiveness of EHS consultancy. It could be based on Quality Management System (QMS) as prescribed in ISO 9001:2008/2015 standards, however CQAS of the organization should have the procedures prescribed below:

- i. Procedure for evaluating, selecting and appointing EHS expert for the EHS consultancy
- ii. Procedure for organizing and conducting EHS consultancy
- iii. Procedure for collecting feedback, analysis and evaluation of feedback for improving the methodology, delivery and effectiveness of future EHS consultancy projects
- iv. Procedure for addressing complaints, suggestions and conflict of interest.
- v. Procedure for periodic reviewing the EHS requirements, law, rules and consultancy materials
- vi. Procedure for maintaining records and documents related to consultancy.
- vii. Procedure for ensuring the implementation of all the above procedures

Refer suggested guidelines - **Appendix 2**.

## 4. ASSESSMENT AND ACCREDITATION PROCESS

### 4.1 APPLICATION PROCESS

Details of the accreditation scheme and the Application Form (**Annexure 1**) are posted on the NABET/QCI website. Any organisation desirous to get accredited under this scheme should carefully go through the requirements of the scheme, processes and assess their own adequacy and take care of shortfalls, if any, before applying.

Application form complete in all respects giving relevant details of application fee can be sent in a soft copy, however, a hard copy of the same application form (Annexure 2 only) along with application fee should be sent to –

The Chief Executive Officer,  
National Accreditation Board for Education & Training,  
Quality Council of India, Institute of Town Planners India, 6th Floor,  
4 A, Mahatma Gandhi Road (Ring Road), New Delhi - 110 002, India  
Tel: +91 11 233 23 416 / 417 / 418 / 419 / 420 Fax: +91 11 233 23 415  
[nabet@qcin.org](mailto:nabet@qcin.org), [hari@qcin.org](mailto:hari@qcin.org),

Hard copy of any other document may have to be submitted if asked for by NABET, subsequently. NABET Secretariat will inform the AI of any clarification/additional information that may be required for completeness of the application.

### 4.2 ASSESSMENT PROCESS

**Assessment Process comprises three parts:**

#### 1. Initial Assessment -

**Application Completeness:** Submitted application shall be reviewed by NABET secretariat for its completeness. Inadequacies in application (if any) shall be informed to applicant institution. CO should submit complete response within 30 days. Only completed applications will be further processed.

**Note 1:** If inadequacies are found in the response, the same will be communicated with an additional time of 30 days. If CO fails to submit satisfactory response even after additional time then the application is made inactive.

**Note 2:** The inactive period will be for 60 days. The CO may submit satisfactory response in the given time. If the response is not satisfactory then the application will be treated as closed and the CO has to re-apply with full fees.

**a. Desktop Assessment:** NABET assessor conducts adequacy assessment (application & technical assessments of documents submitted by CO). Observation(s) and NCs (if any) would be communicated by NABET secretariat. ACO should submit complete response within 30 days. Decision regarding provisional accreditation would be communicated.

**Note 3:** Closure of NCs and observations submitted by CO will be verified by NABET assessor.

Note 1 & 2 given under a) will be followed for timelines.

**b. Office Assessment:** On-site office assessment includes interaction with each expert (in house and visiting) /quality manager, concerned administrative staff etc., verification of infrastructure, implementation of consultancy quality assurance system and clients feedback. Assessment report [findings like observation(s) and NCs (if any)] would be reported by NABET assessors to NABET secretariat and in turn communicated to CO. Corrective measures shall be submitted by CO within 30 days. Decision regarding grant/denial of accreditation would be communicated.

**Note 4:** Closure of NC's and observations submitted by CO will be verified by NABET assessor.

**2. Surveillance Assessment** – If there is no change in approved experts, consultancy quality manual, infrastructure, scope etc. then ACO shall pay surveillance fee and inform NABET for due surveillance, ACO need not to submit new application.

If there is any change in experts, team composition, quality manual, infrastructure, modification of scope etc. then new application with updated details and applicable fee shall be submitted and same process as above will be followed.

SA will be conducted with particular emphasis on performance, quality of consultancy delivery, client's feedback, implementation of CQAS, compliance to conditions of accreditation. SA to be carried out between 15-18 months from the date of accreditation.

**3. Re-Accreditation** – Process will be similar as initial assessment, with particular emphasis on performance, feedback by clients, continual improvement, CQAS etc. in three years from the date of accreditation. RA application shall be submitted 3 months prior to RA due date. RA process shall be completed before the expiry of accreditation to avoid any discontinuation of accreditation (**Appendix 3**)

### 4.3 ACCREDITATION CRITERIA

#### Accreditation under this criterion will be:

On the basis of desktop assessment (DA), report by assessor(s) and satisfactory closure of NCs and observations, office assessment will be conducted by NABET assessor(s). Based on office assessment report, NCs and observation, if any, shall be communicated to the CO for the compliance. CO shall submit evidence based compliance of NCs and observations at the earliest but not later than a month. If required additional office and witness assessment may be required for verification of closures.

Accreditation period of three years will be counted from the date of office assessment; however, this validity period is subject to satisfactory SA.

### 4.4 EXPANSION OF SCOPE

Any expansion in scope can be made by making a written request to NABET secretariat at any time. ACO must submit a complete application with required fee for seeking expansion including additional experts, improvements, resources, facilities now implemented based on which expansion is sought.

## **5. TERMS & CONDITIONS TO MAINTAIN ACCREDITATION**

### **5.1 COMPLIANCE TO THE CONDITIONS OF ACCREDITATION**

- a) Accreditation period of three years shall be counted from the date of office assessment; however, this validity period is subject to satisfactory SA.
- b) ACO shall submit complete SA/RA application three months prior to due date (18/36 months from the date of office assessment accreditation) to maintain the accreditation continuity.
- c) Accreditation shall expire at the end of its validity unless renewal is sought in time.
- d) All payments shall be made in advance.
- e) Franchising, licensing, subcontracting, merger, acquisition of NABET accredited consultant organisation(s) is NOT permissible.
- f) ACO shall submit a six monthly report about the EHS projects taken up and list of approved experts involved and status of project.
- g) Any change in EHS expert, employment status, scope etc. shall be informed to NABET within 15 days with relevant documents.
- h) ACO just after accreditation shall sign the 'Code of Conduct' (Annexure 3) and send it to NABET Secretariat.
- i) The ACO shall maintain relevant records of each consultancy conducted.

### **5.2 SUSPENSION OR CANCELLATION OF ACCREDITATION**

NABET shall suspend or cancel an accreditation on account of any or more grounds during accreditation process or after, but not limited, to the following:

- a) Non-compliance, violation of the NABET requirements, conditions of Accreditation
- b) Deviation from facts as stated in application and enclosures
- c) Submission of false or misleading information in the application or in subsequent submissions
- d) Improper use of NABET Accreditation mark.
- e) Carrying out changes in experts/ quality procedures without NABET's approval
- f) Failure to report any major legal (mandatory compliance) changes
- g) Using fraudulent practices by the ACO in respect of its submission/ interaction with NABET which would include, but not limited to, deliberate concealment and/or submission of false or misleading information, suppression of information, falsification of records or data, unauthorized use of accreditation, and non-reporting of complaints against training institutions to NABET.
- h) Non- payment of applicable fees in time to NABET.
- i) Not submitting SA/RA application in time and allowing to conduct RA/SA in time.
- j) Franchising, licensing or subcontracting of EHS consultancy/ programmes
- k) Any other condition deemed appropriate by NABET

### **5.3 CODE OF CONDUCT**

All ACO's are obliged to improve the standing of the profession by rigorously observing the Code of Conduct. Failure to do so may result in the suspension or cancellation of accreditation.

*The ACO undertakes:*

- a. To act professionally, accurately and in an unbiased manner.
- b. To be truthful, accurate and fair to the assigned work, without any fear or favour.
- c. To judiciously use the information provided by or acquired from the applicant and to maintain the confidentiality of information received or acquired in connection with the assignment.
- d. To avoid and / or declare any conflict of interest that may affect the work to be carried out.
- e. Not to act in a manner detrimental to the reputation of any of the stakeholders including NABET and the trainee.
- f. To co-operate fully in any formal enquiry procedure of NABET

## **5.4 COMPLAINTS AND APPEALS**

- i. The ACO shall establish documented procedures for handling and disposal of complaints and appeals within a reasonable time. The documented procedure shall include provision for :
  - a) Providing information regarding complaint handling process / appeals to all interested parties
  - b) Acknowledgement of complaints/appeals
  - c) Complaint analysis/ investigation for redress of complaint/appeals.
  - d) Communication with the complainant/appellate for satisfactory closure of the complaint/appeal.
  - e) Involvement of NABET in unresolved complaints or appeals if any.
- ii. The ACO shall maintain records of all complaints and appeals and their resolutions including actions taken.
- iii. All complaints and appeal to be assessable to NABET assessment.

## **5.5 PAYMENT OF FEES**

Details of fee structure are given in Section 6.

- a. The fees are to be paid by a Demand Draft payable at Delhi or a local Cheque of Delhi in favour of "Quality Council of India".
- b. Application fee has to be sent along with the application. Applications not accompanied by the application fee will not be processed further.
- c. Any pending fee payments must be made before finalising the date of assessment.
- d. Annual Accreditation shall be paid every year (from the date of provisional accreditation).
- e. No SA, re- accreditation, issuance of certificate etc. if dues are pending.
- f. The fees are not refundable
- g. Service Tax – extra as applicable.

## **5.6 GOVERNANCE**

QCI-NABET reserves the rights with respect to accreditation scheme for EHS Cos. QCI-NABET will have following functions (but not limited to):

- a. Changing/ modifying the criteria/ guidelines/ fee structure
- b. Suspension/cancelling of accreditation in case of violation of any clause of the Scheme
- c. Surprise visits/ extra witness assessments

## 5.7 CONFIDENTIALITY

- a. All information, documents submitted by an applicant to NABET shall be used by NABET (including NABET Assessors and Members of Accreditation Committee) for the purpose of assessment & accreditation only. These may also be used for research purpose or sharing with any ministry, APLAC and other members of the International Personnel Certification Association. However, the identity of the accredited CO would be protected for sensitive information related to business whenever it is called for/ appropriate. In case a CO wants the information to be kept confidential, a communication shall be sent to NABET citing reasons for the same. NABET reserves the right to take decision in this regard.
- b. ACO shall have adequate arrangements consistent with applicable laws to safeguard confidentiality of all information provided by stakeholders.
- c. The accredited CO should maintain confidentiality of their client's related information like location, products, processes, vendors, feedback form, personal details etc.

## 5.8 USE OF QCI/NABET LOGO

NABET Logo can be used by Accredited CO and is restricted only to the promotional material and stationary saying CO is accredited by NABET for EHS consultancy only.

NABET logo can be used by ACO only at following places:

- a) On promotional material and study material stating that the course is accredited by NABET
- b) On letter head and visiting cards mentioning that the organization is accredited by NABET for the specific consultancy.
- c) ACO should ensure that NABET logo should not be used until accredited by NABET.
- d) On suspension, withdrawal, after expiry of accreditation validity, earlier accredited ACO must not use NABET logo. It may attract legal implications.

## 6 FEE STRUCTURE

Fees will be charged to the AI under the following heads:

FEE DETAILS	Amount in Rs.
a) <b>Application Fee</b>	30,000/-
b) <b>Assessment Fee</b>	12,000/- per man day
I. <b>Desktop Review</b>	1 Day
II. <b>Office Assessment Fee</b>	1-3 Days
c)	
a. <b>Annual Fee</b>	30,000/- ( each year, 3 fee in three years)
b. <b>Per consultancy ( after 10 consultancy in a year)</b>	Rs. 5000/- ( if more than 10 consultancy in a year)
d) <b>Surveillance Fee (Every Year)</b>	12,000/- per man day
I. <b>Desktop Review</b>	1 Day
II. <b>Assessment Fee</b>	1-3 Days
e) <b>Re-Assessment{After 3 Years)</b>	
f) <b>Application Fee</b>	30,000/-
g) <b>Assessment</b>	12,000/- per man day
h) <b>Desktop Review</b>	1 Day
i) <b>Assessment Fee</b>	1-3 Days

### Terms and conditions

- a) Travels by air economy class or 2T AC (if no air connection), three star hotel boarding and lodging charges (to be borne by the CO at actual). If any deviation, then with the consent of CO.
- b) If closure of NCs/Observations require extra office/ witness assessment or for any additional verification visit that will be charged extra Rs. 12000/ Per person day
- c) Expansion of scope or modification of scope in SA, conducting more training then above fee will be applicable.
- d) Any change in certificate with respect to scope, premises, EHS expert, address etc. will be charged Rs. 1000/-.

## 6.1 PAYMENT OF FEES

- a) The fees are to be paid by a Demand Draft payable at Delhi or a local Cheque of Delhi in favour of "Quality Council of India".
- b) Application fee has to be sent along with the application. Applications not accompanied by the application fee will not be processed further.
- c) Any pending fee payments must be made before finalising the date of assessment.
- d) Annual Accreditation shall be paid every year from the date of accreditation (date of assessment).
- e) No SA or renewal of accreditation if dues are pending.
- f) The application fees are not refundable
- g) Service Tax – extra as applicable.

## 7 APPENDICES

### APPENDIX 1: EXPERIENCE AND QUALIFICATIONS REQUIREMENT OF EHS EXPERTS

#### i. Qualification

- a. Bachelor Degree in Engineering / Technology or Master degree in Science
- b. Lead auditors course in EMS and OHSAS
- c. Training on environment laws/ OHSAS applicable laws/ regulations

#### ii. Experience

- a. Overall experience of 15 years
- b. out of which minimum 5 years in developing EHS documents, implementation and auditing/assessing in the organisation(s) (understanding of EHS)
- c. as well as minimum 5 years industry / service experience in the area of EHS in EHS intensive activities (Industry experience)
- d. Conducted minimum 20 EMS/OHSAS/QMS assessments out of which at least 10 assessments as 3<sup>rd</sup> party Lead Assessor or as assessor of accreditation organisation **or**

**Completed 5 consultancy projects documentation and implementation of EHS management system. Or**

**Documented and implemented EHS in projects for 5 years and faced minimum 5 external audits of EHS system.**

## **APPENDIX 2: BROAD GUIDELINES FOR DEVELOPING CONSULTANCY QUALITY ASSURANCE SYSTEM (CQAS)**

Consultant organisation should have quality assurance system for continually improving the delivery and effectiveness of EHS consultancy. It could be based on Quality Management System (QMS) as prescribed in ISO 9001:2008/2015 standards, however CQAS of the organization should have the procedures prescribed below:

- i. Procedure for evaluating, selecting and appointing EHS CC/FAE for the EHS consultancy
- ii. Procedure for organizing and conducting EHS consultancy
- iii. Procedure for collecting feedback, analysis and evaluation of feedback for improving the methodology, delivery and effectiveness of future EHS consultancy programmes
- iv. Procedure for addressing complaints, suggestions and conflict of interest.
- v. Procedure for periodic reviewing the EHS requirements, law, rules and consultancy materials
- vi. Procedure for maintaining records and documents related to consultancy.
- vii. Procedure for ensuring the implementation of all the above procedures

**Some broad guidelines on issues to be addressed for each of the above items are given below:**

**I Procedure for evaluating, selecting, appointing EHS expert** – should give procedures for

- a. Prescribing qualifications, experience, competence requirements for EHS experts/resource persons (in-house/ external)
- b. Assessing performance of a candidate for EHS expert/resource person prior to appointment.
- c. Assessing performance of a /resource person after appointment and consultancy
- d. Identifying training areas of improvements for EHS expert/resource person
- e. Fixing Terms of Reference for retention and guidelines for a) Imparting training b) Code of conduct and Conflict of Interest

**II Procedure for handling client, developing and implementing EHS:** should give procedures for

- a. Meeting clients, discussions, defining minimum infrastructure requirements in terms of Conference space, seating, projectors, consultancy material etc.
- b. Defining roles and responsibilities of the Programme Coordinator and support system to coordinator
- c. Continuous upgrading the documentation and regular review of the milestones of the consultancy.
- d. Communication with client, giving information about consultancy activity, main area, communication channel information, feedback etc
- e. Developing procedure how to fulfil the requirements of consultancy and closure of project.

**III Procedure for Feedback collection, evaluation and improvements** – giving procedures for

- a. Inviting feedback on consultancy imparted from clients in specific formats to assess EHS expert competence, mode of delivery, effectiveness etc.
- b. Evaluating the feedback for areas of strengths and improvements in respect of documentation, implementation and quality of consultancy
- c. Corrective & preventive actions for gaps in the deliverables/ expectation of clients
- d. Action to be taken to close the gap on quality of consultancy including changing the concerned EHS expert, if required
- e. Updating the consultancy parameters, as necessary

- IV Procedure for addressing complaints, suggestions and conflict of interest –Applicable to CO**
- a. Informing the stakeholders about the provision of complaints, appeals and conflict of interest
  - b. Accepting complaints/ appeals
  - c. Handling and disposal (including authority and responsibility) of the same within reasonable time
  - d. Maintaining records of complaints/ appeals
  - e. Ensuring implementation of preventive/ corrective actions

**V Procedure for maintaining records and documents including consultancy material:**

- a. Approving documents prior to issue
- b. Up-dation of documents, as required
- c. Ensuring quick availability of relevant revision of the document
- d. Maintaining consultancy specific records of venue, date, promotional literature, EHS expert/resource persons involved,
- e. Storage, protection, retrieval and disposal of documents

**VI Procedure for periodic reviewing the performance and consultancy materials**

- a. Review of actions pending from last review
- b. Action on feedback from stakeholders to update course curriculum
- c. Updating of amendments in rules/laws, new case studies, latest scenario
- d. Updating as per new environmental aspects and impacts
- e. Administrative issues including future programmes.

**VII Procedure for ensuring the implementation of above all procedures**

## APPENDIX 3: ASSESSMENT PROCESS

### Assessment Process comprises three parts:

- **Desktop/Initial/Office Assessment** – completeness of application, technical assessments of documents submitted and office assessment including interaction with EHS expert(s) and concerned administrative staff to understand capability for consultancy
- **Surveillance Assessment** – Same as above, with particular emphasis on performance, quality and effectiveness of consultancy provided, compliance to conditions of accreditation, carried out between 12-18 months after initial accreditation.
- **Re-Accreditation** – same as 1<sup>st</sup> assessment, with particular emphasis on performance during the accreditation cycle including feedback by client(s), after 3 years of initial accreditation.

### Initial Accreditation

Aspects to be considered and their weightage:

#### For Accreditation –

1	Desktop assessment/Expert no., consultancy material (documentary evidence of knowledge base) competence of EHS experts available with Applicant Consultant Organisation	<b>40%</b>
2	Infrastructural facilities of Applicant Consultant Organisation	<b>20%</b>
3	Consultancy Quality Assurance System and implementation	<b>30%</b>
4	Feedback of clients	<b>10%</b>

## 8 ANNEXURES

### ANNEXURE 1: APPLICATION FORM

**APPLICATION FORM  
FOR  
ACCREDITATION SCHEME FOR  
EHS CONSULTANT ORGANISATION  
(EHS, ISO 14001 and OHSAS 18001)**

**Name of the Consultant Organisation:** \_\_\_\_\_

-----

**Scope EHS CO**

**Application Submitted to**

**National Accreditation Board for Education and Training**

**Quality Council of India**

Institute of Town Planners India, 6<sup>th</sup> Floor

4 A, Mahatma Gandhi Road (Ring Road)

New Delhi - 110 002, India

Tel +91 11 23323416 – 20, Fax +91 11 23323415

### GENERAL INSTRUCTIONS

- All columns of application form must be filled up in legible handwriting, typed or printed.
- Copies of all the relevant documents should be sent with the application

**A. General information about the Consultant Organisation**

1. Name of Institution \_\_\_\_\_
2. Postal Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ City \_\_\_\_\_  
 Pin Code \_\_\_\_\_ State \_\_\_\_\_  
 Phone No. with STD Code: \_\_\_\_\_  
 Fax No. : \_\_\_\_\_ Email: \_\_\_\_\_

3. Year of Establishment -
4. Name of the Head of the Institution -
5. Contact person -

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Tel No. \_\_\_\_\_ Mobile \_\_\_\_\_  
 Email \_\_\_\_\_



6. Year of CO Establishment

6.1 Details of consultancy provided in EHS and related field (s) -

- a. Total No. of EHS consultancy provided so far
- b. Detailed break up (Year wise and scope wise) as per table below

Sr. No.	Areas in which consultancy provided	Year	Duration	Remark

7. Other services provided by EHS CO (if any)

**B. Details of EHS CO's Governance and affiliation**

8. Status of EHS / Organization/ Company    Government                     

Society                                             Pvt

Trust                                             Other

9. Is the Applicant Organization is legally identifiable institute/organisation?    YES/NO

10. Year of Registration \_\_\_\_\_ Registration No. \_\_\_\_\_

11. Name & official address of the Registrar/ Director/ Owner/  
President/Chairman/Trustees/Partners of the applicant Organization

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No. with STD Code: \_\_\_\_\_

Email address \_\_\_\_\_

**(Note: Attach Registration Certificate as Enclosure -1)**

12. Is the CO Affiliated / registered with any Regulatory Body? -----

12.1 If YES, please mention the following:

a). Name of the Body (s) with which affiliated: -----

b). Affiliation No. and validity: -----

c). Year of affiliation: -----

**(Note: Attach affiliation certificate as Enclosure-2)**

12.2 Organization structure (with details of locations/ associates etc.) **(as Enclosure-3)**

## C. Details of Infrastructural & other Facilities

### 13. Infrastructure Details -

a. Physical Facilities (Rooms, Library, Laboratories, etc.)

S.No.	Item	Number of Rooms	Approx. Area (in sq. mts)
i.	Office setup, meeting room(s)		
ii.	Library*		
iii.	Other Rooms/ Hall		

**\*Attach photographs/video from different angles covering the facilities (As enclosure 4)**

**\*\*Provide the details of your lab or details of associated lab (if applicable)**

b. Other Facilities:

S.No.	Facilities*	Available (Yes/No)	Nos.
1	Audio-Video facilities available in the Institution – LCD/ /Computers/ Projector/ Speakers etc.		
2	Photocopiers/printers etc.		

**\*Attach photographs from different angles (Enclosure 5)**

### 14. Consultancy Facilities –

14.1 Summary of personnel involved in EHS consulting services –

- i. In house Experts –
- ii. Empanelled/ Visiting Experts –
- iii. Administrative staff -

**(Note: Attach list of proposed experts with their CV as per Annexure 4 in application)**

Sl. No.	Name	IH/ Emp.	Educational Qualification	Training Certificates, if any	Consultancy experience (Years)	EHS Experience (Years)	Industry Experience (Years)

***Kindly ensure that the proposed experts meets the qualification and experience requirements as prescribed in the Appendix 1 of the Scheme.***

15. Do the Consultant Organization comply with regulatory norms for labour, health and sanitary conditions, drinking water and fire safety? YES/NO

(Pl attach relevant documents – **Enclosure 6**)

#### D. Other Relevant Information

16. Does the CO receive any grant from Govt. of India / State Government / Union Territory or any other source?

(Attach – Enclosure -7: Details of grants received in last 3 years;  
Enclosure 8: Summary of Audited financial reports of last 3 years)

17 Have you developed a Quality Manual meeting the requirements CQAS of the Scheme as mentioned in Appendix 2) Yes/ No

(Attach Consultancy Quality Assurance System (CQAS), Institution Brochure and Associated Documents as Enclosure- 9 A, 9 B respectively.)

#### 18 Declaration

I hereby declare the above information is true and correct as per my knowledge.

Authorised Signatory

Name: \_\_\_\_\_

Date:

Designation: \_\_\_\_\_

Place:

19. Please find enclosed the Demand Draft/ Cheque (Delhi only) no..... for Rs..... dated ..... drawn on.....in **favour of Quality Council of India**, payable at New Delhi towards the application fees (**Enclosure 10**)

**List of Enclosures (to check)****Enclosed**

- |  |       |
|--|-------|
| 1. Registration Certificate of Trust/ Society  | Y/ N  |
| 2. Copy of Affiliation Certificate   | Y/ N  |
| 3. Organization chart  | Y/ N  |
| 4. Consultancy promotional material developed  | Y/N   |
| 5. List and resumes of experts/staff (indicating qualification &Experience)            | Y/ N  |
| 6. Admin. Support Staff (indicating qualification and Experience)                      | Y / N |
| 7. Details of Grants received in last 3 years, if any                                  | Y/ N  |
| 8. Summary of Audited Financial Reports of last 3 years                                | Y/ N  |
| 9. Consultancy Quality Assurance System, Institution Brochure and Associated Documents | Y/ N  |
| 10. Application Fee (as applicable)  | Y/N   |
| 11. Required Infrastructure Details  | Y/N   |

## ANNEXURE 2: DECLARATION OF ACCEPTING NABET'S CODE OF CONDUCT

### DECLARATION OF ACCEPTING NABET'S CODE OF CONDUCT

By

C.E.O. / Head of Applicant Consultant Organisation

This is to confirm that I ....., working as CEO/ Head of .....agree with the Code of Conduct (Section 10 of Scheme), conditions of accreditation of NABET and give an undertaking that I would abide by the stated conditions for all activities pertaining to EHS Consultancy Services/ Activities.

I also understand that awarding/ continuation of accreditation of my organization is subject to continual compliance to conditions of accreditation.

Name .....  
Designation .....  
Date .....  
Signature .....

# ANNEXURE 3: FACULTY RESUME FORMAT

**Resume Format**  
(For Faculty)

Affix  
Passport  
Size

Mr./Ms./Mrs.

\_\_\_\_\_ (First Name) (Middle Name) (Last Name)

1. Status in the Organization: In-house Full Time Employee  Visiting Faculty

2. Date of Birth \_\_\_\_\_

3. Home Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Pin Code \_\_\_\_\_

4. Tel. No. \_\_\_\_\_ 5. Fax No. \_\_\_\_\_

6. Email address \_\_\_\_\_

7. Office address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Pin Code \_\_\_\_\_

8. Tel. No. \_\_\_\_\_ 9. Fax No. \_\_\_\_\_

10. Email address \_\_\_\_\_

11. Mailing address

Home Office

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. General Education (Senior Secondary)

Period (Year)	Board	Qualification	Educational Institution & Address	Subjects	Grade

--	--	--	--	--	--

13. Technical Education (Graduation & above):

Period (Year)	Institution Name & Address	Qualification	Subjects	Grade / % Marks

14. Registered / recognized training courses attended:

S.No.	Title of the Course	Conducted / Organized by (Name & Address)	Dates		Result
			From	To	

15. Membership of Professional Bodies:

S.No.	Professional Body (Name & Address)	Membership		Valid Till
		Grade	No.	

16. Experience (Please write in chronological order with present experience listed first):

**A. General:**

Period (Month and Year)	Organization with address	Department	Designation	*Role/Duties/ Responsibilities

**B. Specific experience related to EHS applied for:**

S. No	Name of the Employer/Institute	Complete Name of the Project/ Training	Whether related to EHS Y/N	Roles and Responsibilities (Nature of Experience)	Period & Year


**C. EHS Assessment/Consultancy Conducted**

S. No.	Name & Location of the Organization	EHS Assessment Dates		Role: As a Lead Assessor/Technical Assessor
		From (dd/mm/yy)	To (dd/mm/yy)	

**17. Declaration by the applicant**

I attest that the above information relating to my education and experience is correct. I do understand that any incorrect information will result in the disqualification of self and the organizational accreditation with NABET.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**18. Declaration by the Institute**

The above information in relation to Dr./Mr./Ms. .... has been verified and found to be correct.

I understand in case the information is found to be incorrect it may result in the rejection/ suspension of this application for the accreditation of LMS Training Institution.

Attested By \_\_\_\_\_  
 Authorized Signatory: \_\_\_\_\_  
 Name \_\_\_\_\_  
 Designation \_\_\_\_\_

-----

## **ANNEXURE 4: VISITING FACULTY MOU/AGREEMENT**

### **MOU/AGREEMENT WITH VISITING FACULTY**

Written MOU/Agreement shall be signed between the institution and visiting/empanelled faculty whose services are used for conducting training modules. Such MOU/Agreement should include:

- i. Name of the faculty & institution
- ii. Name of selected modules, disciplines, lecture
- iii. Scope of services covered
- iv. Duration of association
- v. Specific roles & responsibilities and acceptance of visiting faculty
- vi. Not empanelled with more than two institutions

To submit your application or for further details contact:

**Chief Executive Officer**  
**National Accreditation Board for Education and Training**  
**Quality Council of India**

Institute of Town Planners India

6th Floor, 4 - A, Ring Road, I P Estate,

New Delhi – 110002

Tel: +91 11 233 23 416 / 417 / 418 / 419 / 420 Fax: +91 11 233 23 415

Email: [nabet@qcin.org](mailto:nabet@qcin.org), [hari@qcin.org](mailto:hari@qcin.org), [amit.nabet@qcin.org](mailto:amit.nabet@qcin.org)