

Objective:

This Conflict of Interest Policy is established to identify, manage, and mitigate conflicts of interest within IGSPL, ensuring the integrity and impartiality of our certification processes in accordance with ISO 17021 requirements.

Scope:

This policy applies to all individuals involved in certification activities within IGSPL, including but not limited to management, certification personnel, and supporting staff.

Definition of Conflict of Interest:

A conflict of interest arises when an individual's personal, financial, or other interests could compromise their objectivity, independence, or impartiality in the execution of certification activities.

Identification and Disclosure:

1. Obligation to Disclose:

- All personnel involved in certification activities at IGSPL have an obligation to promptly disclose any potential conflict of interest to the Managing Director.
- b. The obligation to disclose extends to personal relationships, financial interests, or any other situation that may affect impartial decision-making.

2. Confidential Reporting Mechanism:

- A confidential reporting mechanism is established to facilitate the open and secure disclosure of conflicts of interest within IGSPL.
- b. Disclosures may be made anonymously to encourage transparency and protect those reporting conflicts.

3. Regular Awareness Training:

- a. All IGSPL personnel undergo regular training sessions to raise awareness about situations that may constitute a conflict of interest.
- b. The training emphasizes the importance of vigilance and proactive disclosure to maintain the credibility of our certification processes.

Assessment and Mitigation:

Mr. Mr. P. Sivasankar
Prepared By: Quality Manager

P. Jush

Mr. M.Ibrahim Approved By: MD

M. Ibral.

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1. Risk Assessment:

- a. Upon receipt of a conflict-of-interest disclosure, the Managing Director at IGSPL conducts a thorough risk assessment to evaluate the potential impact on impartiality.
- b. The risk assessment considers factors such as the nature and severity of the conflict, potential influence, and any mitigating factors.

2. Mitigation Measures:

- a. Tailored mitigation measures are implemented to address identified conflicts of interest within IGSPL.
- b. Mitigation may involve personnel reassignment, establishing independent review panels, or seeking external expertise to ensure an unbiased certification process.
- c. The effectiveness of mitigation measures is regularly reviewed, and adjustments are made as necessary.

Involvement of Impartiality Committee:

1. Formation and Composition:

- a. An Impartiality Committee is established within IGSPL to oversee and monitor matters related to impartiality.
- b. The committee comprises representatives from different functional areas to ensure diverse perspectives.

2. Roles and Responsibilities:

- a. The Impartiality Committee is responsible for reviewing and advising on conflict-of-interest matters.
- b. The committee ensures that decisions related to conflicts of interest align with the principles of impartiality.

Decision-Making Committee:

1. Formation and Composition:

- a. A Decision-Making Committee is formed within IGSPL to handle specific conflict of interest cases.
- b. The committee includes individuals with relevant expertise and ensures a fair and unbiased decision-making process.

2. Roles and Responsibilities:

P. Jush

Mr. M.Ibrahim Approved By: MD M. Ibral.

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- a. The Decision-Making Committee is tasked with making informed and impartial decisions regarding conflict of interest cases.
- b. The committee's decisions are documented, and the rationale for each decision is transparently communicated to relevant parties.

Documentation and Transparency:

1. Comprehensive Record Keeping:

- a. Detailed records of conflict disclosures, risk assessments, and mitigation measures within IGSPL are maintained.
- b. Records related to the involvement of the Impartiality Committee and Decision-Making Committee are documented for transparency.

2. Regular Internal Audits:

- a. Internal audits of conflict of interest documentation within IGSPL are conducted regularly to ensure compliance with established procedures.
- b. Audit findings are documented, and corrective actions are implemented promptly to address any identified non-compliance issues.

P. Jush

Mr. Mr. P. Sivasankar Prepared By: Quality Manager Mr. M.Ibrahim Approved Bv: MD

M. Ibral.