

ACCREDITATION COMMISSION FOR CONFORMITY ASSESSMENT BODIES

QUALITY MANUAL

Accreditation Process			Authorized By:
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8.1	Accreditation Criteria and Information:
8.1.1	<p>The CAB shall comply with the current requirements of the following standards/documents as appropriate:</p> <ul style="list-style-type: none"> a. ISO/IEC 17021:2011 Conformity assessment -- Requirements for the bodies providing the audit and the certification of the management systems. b. ISO/IEC 17021:2011 Conformity assessment -- Requirements for the bodies providing the audit and the certification of the Fastener Quality Assurance System covered by the latest Fastener Quality Act (FQA) Public Law 101-592 as amended 1999 of the United States of America as per the Consensus Standard or Standards. c. ISO/IEC 17024:2012 Conformity assessment -- General requirements for the bodies operating certification of persons. d. ISO/IEC 17020:2012 General criteria for the operation of various types of bodies performing inspection. e. ISO/IEC 17025:2005 General requirements for the competence of testing and calibration laboratories. f. ISO/IEC 17025:2005 General requirements for the competence of laboratories that conduct Tests and Measurements of Fasteners covered by the latest Fastener Quality Act (FQA) Public Law 101-592 as amended 1999 of the United States of America as per the Consensus Standard or Standards. g. ISO 15189:2012 Medical laboratories -- Particular requirements for the quality and the competence. h. ISO/IEC 17043:2010 - Conformity assessment -- General requirements for proficiency testing i. ISO Guide 34:2009 - General requirements for the competence of reference material producers. j. ISO/IEC 17065:2012- Conformity assessment – Requirements for bodies certifying products, processes and services; k. ISO 14065:2013 Green House Gases – requirements for Green House Gas validation & verification bodies for using accreditation or other forms of recognition; l. ACCAB’s “Responsible Education Provider” TM Accreditation Standard for Further Education & Training Institutions.
8.1.2	Publicly Available Information:
8.1.2.1	<p>ACCAB shall make the following information publically available and shall update it at adequate intervals as necessary:</p> <ul style="list-style-type: none"> a. ACCAB’s assessment and accreditation processes, including arrangement for granting, maintaining, extending, reducing, suspending and withdrawing of accreditation; b. References to the requirements of accreditation including technical requirements; specific to each field of accreditation, where applicable; c. General information about the fees related to the accreditation; d. Description of the rights and obligations of CABs e. Information on procedures for lodging and handling complaints and appeals;

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- f. Information about authority under which the accreditation program operates;
- g. description of ACCAB's rights and duties;
- h. General information about means by which it obtains financial support;
- i. Information about its activities and stated limitations under which ACCAB operates;
- j. Sample accreditation agreement and the application forms; and
- k. Information about the related bodies, if applicable.

8.2 Application for Accreditation:

8.2.1 A request for ACCAB accreditation can be made to ACCAB in person, by post, by telephone or by e-mail for relevant information on Accreditation, alternatively the ACCAB accreditation process, relevant documentation and the Application Form are made available to the prospective clients on the ACCAB website www.accab.org. The applicant should read and understand ACCAB's Accreditation Scheme Manual especially the Requirements for Granting and Maintaining Accreditation and the Current Fee Structure before submitting the application in the prescribed format.

8.2.2 It is expected that the applicant CABs have a specific & assured plan of action for obtaining the ACCAB accreditation and nominate a senior & accountable person to co-ordinate all the activities related to the accreditation process. The person nominated should be familiar with the CAB's documented quality system.

8.2.3 An applicant CAB shall ensure that a quality manual is prepared in accordance with the requirements specified in the ACCAB Accreditation Scheme Manual and this should be supplemented by a set of other documents such as procedures, work instructions, records etc. The applicant CAB shall ensure that the procedures described in the quality manual and other documents are being implemented. Preferably the applicant CAB must have conducted at least one Internal Audit and one Management Review before the submission of application.

8.2.4 The applicant CAB shall submit the duly completed application form and the applicable annexure along with a copy of the quality manual and other relevant documents and records to ACCAB. The application form and the documents can be submitted electronically. The application must be accompanied with the prescribed application fee. CAB shall give due consideration to the scope applied for. In case, the CAB finds any clause of the Standard/Requirements (in part or full) is not applicable then valid justification should be given.

8.2.5 The ACCAB provides no guarantees to the applicant CABs that their application for accreditation will be successful. In such cases the ACCAB reserves the right to forfeit the application fee.

8.2.6 The ACCAB shall issue an acknowledgement to the applicant on receipt of the application, the quality manual, other relevant documents and the requisite fees. On receipt, the application shall be examined by ACCAB for its completeness in all respects. ACCAB may request for additional information / clarification(s), if necessary from the applicant CAB. If the application is found complete in all respects, a unique ACCAB Registration Number shall be allocated to the applicant, which shall be used for correspondence with the ACCAB thereafter.

8.2.7 The applicant CAB shall be informed in writing if ACCAB is of the opinion that an assessment cannot result

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	in accreditation on the basis of either the documents and/or information provided by the CAB or ACCAB's own policy, its competence and the availability of suitable resources, experts and its ability to carry out the initial assessment in a timely manner.
8.2.8	The ACCAB Chief Executive Officer shall deal with the application and the case file shall be maintained thereafter. All information of the CAB shall be kept strictly confidential.
8.2.9	This registration is valid for a period of three years. During this period, the CAB shall be notified if there are any changes in the accreditation procedures and requirements. The CAB shall be notified well in advance before the expiry of this period. The applicant CAB shall also have an obligation to inform to ACCAB if any changes have taken place at its end.
8.2.10	If an ACCAB accredited CAB wishes a second or further accreditation against another internationally accepted standard or for that matter any recognized and accepted standard, the procedure is the same as for a new registration. However, in such case, the assessment effort by the ACCAB may be limited to cover the areas not covered by the existing accredited system and certain specific areas as decided by ACCAB.
8.2.11	In case an applicant CAB is already accredited for the applied scope by another Accreditation Body, the ACCAB may grant accreditation after a reduced assessment; however any such decision shall be taken at the sole discretion of ACCAB.
8.2.12	In case a CAB requests accreditation for a Certification Activity where an established Standard/ Guide is not available or not listed in this document, ACCAB, in consultation with the Technical Advisory Committee shall decide on the suitable accreditation criteria to be followed by the CAB.
8.2.13	The applicant CAB must submit essential documents as evidence to substantiate their claim when they seek accreditation under Special Cases.
8.3	Resources Review:
8.3.1	ACCAB reviews its ability to carry out the assessment of the applicant CAB, in terms of its own policy, the competence and availability of suitable assessors and experts.
8.3.2	ACCAB review shall be carried out at the enquiry stage, shall include its ability to carry out the initial assessment in timely manner.
8.4	Subcontracting:
8.4.1	<p>This is applicable only when it has been decided to sub-contract total assessment work to an external body (not applicable to the individual assessors and experts subject to the criteria noted below). The audit can be accreditation, surveillance, renewal or follow-up audit:</p> <ul style="list-style-type: none"> a. ACCAB takes full responsibility for all the subcontracted assessments and ensures that it has competence in decision making; b. ACCAB maintains its responsibility for granting, maintaining, extending, reducing, suspending or withdrawing accreditation; c. ACCAB ensures that the body and its personnel involved in the assessment process , to which

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	<p>assessment has been subcontracted, are competent and comply with applicable requirements of ISO/IEC 17011 and any provisions given by ACCAB;</p> <p>d. ACCAB obtains consent of the CAB to use particular subcontractor; and</p> <p>e. ACCAB lists the subcontractor it uses and has means for assessing and monitoring their competence and for recording results.</p>
8.5	Preparation for Assessment:
8.5.1	Applicant CAB may voluntarily request ACCAB to conduct pre-assessment to assess their readiness for accreditation prior to or after embarking on the formal accreditation process. ACCAB does not issue any formal report for pre-assessment.
8.5.2	The ACCAB shall formally appoint an assessment team consisting of a lead assessor to carry out assessments on the system adopted by the applicant CAB. When selecting the assessment team for each assessment, ACCAB shall ensure that their skills are appropriate to the assessment and their availability and they are free from any direct or indirect involvement with the applicant CAB which may compromise their impartiality and independence.
8.5.3	The ACCAB shall inform the CAB of the names of the members of the assessment team and the organization they belong to, sufficiently in advance to allow the applicant CAB to object to the appointment of any particular assessor or expert. Such an objection shall be moved by clear reasons and evidence. In such cases the suitable replacement shall be found and given to the assessment team.
8.6	Document and Record review:
8.6.1	The Assessment Team shall review all relevant documents and records supplied by the CAB to evaluate its system, as documented, for conformity with the relevant standard(s) and other requirements for accreditation.
8.6.2	The non-conformities found during this review shall be reported in writing to the CAB.
8.6.3	The ACCAB shall not proceed with an on-site assessment until reported non conformities are resolved and suitable corrective actions are taken.
8.7	Onsite Assessment:
8.7.1	The ACCAB shall carry out on site assessment of conformity assessment services of the CAB's premises of CAB from which one or more key activities are performed, and where relevant, shall perform witnessing at other selected locations where the CAB operates, to gather objective evidence that the applicable scope of the CAB is competent and conforms to the relevant standard(s) and other requirements for accreditation.
8.7.2	At the end of each assessment the Lead Assessor shall submit an Assessment Reports as appropriate to the objective of the assessment.
8.7.3	The ACCAB shall contact the CAB to concur on the date(s) and schedule for the assessment. Based on this ACCAB shall prepare the Assessment Schedule and the composition of the team and send it across to the CAB well in advance.

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8.7.4	The ACCAB assessment team shall conduct the assessment of the CAB's premises from which one or more key activities are performed.
8.7.5	The on-site assessment shall commence with an opening meeting at which the purpose of the assessment and criteria are clearly defined and the assessment schedule and the scope for the assessment are confirmed.
8.7.6	The ACCAB assessment team shall assess the documentation and implementation of the management system as well as the competence of the CAB in accordance with the requirements of applicable standards and normative documents during the assessment.
8.7.7	The ACCAB assessment team can take a representative sample in the areas within the scope of the accreditation.
8.7.8	The ACCAB requires that the CAB demonstrates that it is competent in all the activities at all sites for which accreditation has been applied for.
8.7.9	The ACCAB's assessment team shall assess at least one complete cycle of the Internal Audit and Management Review.
8.7.10	In ordinary situations the onsite assessment shall be concluded with the closing meeting. In the closing meeting the assessment team shall discuss the results of the assessment with the CAB. The nonconformity reports are handed over to the Management of the CAB, so it can immediately proceed with the implementation of corrective action plan. The assessment shall not proceed further into next stage unless all Non Conformities are satisfactorily addressed and closed.
8.7.11	The purpose of the witness assessment is to assess the process of determining the competence of CAB's assessors/technical personnel and the degree and effectiveness of the applicant CAB's management system. The witness assessment shall focus on issues pertaining to the CAB's assessor/technical personnel competency requirements & training processes rather than against an individual assessor.
8.7.12	For the purpose of witness assessment, the CAB may be requested to provide a list of suitable sites. However the selection of the sites shall be done at the discretion of ACCAB. This particular assessment shall be either compliance audit or reassessment. The surveillance assessments may be witnessed as exceptional cases at the discretion of the Chief Executive Officer of ACCAB.
8.8	Analysis of Findings & Assessment Report:
8.8.1	The ACCAB requires that the CAB takes necessary corrective actions on the Non-Conformance(s)/ other concerns and shall submit a report on the actions taken to ACCAB within a maximum period of three months.
8.8.2	The ACCAB assessment team shall take decision with regard to closure of Non Conformities.
8.8.3	The ACCAB may arrange for a verification visit for the closure of the significant Non-Conformities identified during the on-site assessment, the progress is monitored closely and in this regard.
8.8.4	The ACCAB requires that whatever may be the case all Non-Conformities raised during the assessment shall be closed before consideration for the Grant of Accreditation.

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8.8.5	<p>The Lead Assessor shall prepare an assessment report with the inputs from the assessment team members. The assessment report shall include recommendations on suitability for accreditation. The recommendation together with supporting documentation shall be forwarded to the Accreditation Approval Committee for the decision. The reporting shall include:</p> <ol style="list-style-type: none"> a. Unique identification of the CAB; b. Date(s) of the on-site assessment; c. Name(s) of the assessor(s) and/or experts involved in the assessment; d. Unique identification of all premises assessed; e. Proposed scope of accreditation that was assessed; f. The assessment report; g. A statement on the adequacy of the internal organization and procedures adopted by CABs to give confidence in its competence, as determined through its fulfillment on the requirements of accreditation; h. Information on the resolution of all nonconformities; i. Any further information that may assist in determining fulfillment of requirements and competence of the CABs; and j. Where applicable, summary of the results of proficiency testing or other comparisons conducted by the CABs and any actions taken as a consequence of the results.
8.9	Accreditation Decision & Granting Accreditation:
8.9.1	The Accreditation Approval Committee (AAC) of ACCAB shall prior to making a decision for granting/extending of accreditation shall ensure that it is fully satisfied that the relevant information provided by the assessment team is adequate to decide that the requirements for accreditation have been fulfilled.
8.9.2	Where the ACCAB uses the results of an assessment already performed by another accreditation body, it shall have assurance that the other accreditation body was operating in accordance with the requirements of ISO/IEC 17011:2004.
8.9.3	The ACCAB shall inform the CAB in writing of the decision taken without undue delay.
8.9.4	If the CAB is not satisfied with any of the decisions taken by ACCAB regarding grant of accreditation it can file an appeal as per the Complaints & Appeals Procedure.
8.9.5	The ACCAB shall issue an Accreditation Certificate on receiving the accreditation decision by the Accreditation Approval Committee.
8.9.6	<p>The ACCAB Accreditation Certificate shall identify:</p> <ol style="list-style-type: none"> a. The name and logo of the ACCAB; b. The unique identity of the accredited CAB; c. All premises from which one or more key activities are performed and which are covered by the accreditation; d. The unique accreditation number of the accredited CAB; e. The standards based on which the accreditation was granted; f. The effective date of granting the certificate; g. The period of validity of the certificate; h. A Schedule Referring to the Scope of Accreditation.

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8.9.7	The ACCAB accreditation certificate shall be valid for a period of 3 years.
8.9.8	The applicant CAB must sign the Accreditation Agreement - ACCAB-ASM-10.0 including fulfilling all the financial obligations due to ACCAB, before receiving the accreditation certificate(s).
8.10	Appeals:
8.10.1	If the CAB is not satisfied with any of decisions taken by ACCAB regarding grant of accreditation it can file an appeal as per the Complaints & Appeals Procedure.
8.11	Post Accreditation Assessments:
8.11.1	During the validity of accreditation, the CAB must continuously comply with the requirements of applicable standards and other requirements specified in the ACCAB's Accreditation Scheme Manual. In this regard ACCAB shall periodically review the validity of Accreditation by conducting surveillance assessment annually and a re-assessment within three years. During the accreditation period, the scope of the accreditation may be altered.
8.11.2	Surveillance:
8.11.2.1	The ACCAB shall inform the accredited CAB at least two months before the due date of accreditation for conducting the surveillance visit and the Certification Body shall confirm its readiness within 30 days. Delay in this matter may result in the suspension of the accreditation.
8.11.2.2	The methodology for conducting surveillance assessment is similar to the initial assessment although it shall cover only selected areas. The Non-Conformities, if any, shall be closed within three months of conduct of surveillance. Based on the surveillance report along with other relevant information, recommendation shall be submitted to the Chief Executive Officer of ACCAB for a decision on the continuation of accreditation or otherwise. ACCAB shall inform the CAB, in writing, about the decision.
8.11.3	Reassessment and Renewal of Accreditation:
8.11.3.1	The ACCAB shall inform the CAB in writing on the expiry of Accreditation approximately three months in advance and the CAB has to respond at least one month before the expiry. If CAB does not respond in the prescribed time limit, then, it shall be considered as a fresh applicant CAB.
8.11.3.2	The procedure for processing of renewal of application is similar to that of initial application. The CAB may request for extension of scope of accreditation, which should be clearly mentioned in the application form.
8.11.3.3	The ACCAB shall extend the validity of the certificate by a further period of three years without any discontinuity provided the results of reassessment visit are positive and all non-conformances are closed before the expiry of the certificate.
8.11.3.4	The ACCAB shall issue a new certificate of accreditation while the registration number remains the same.
8.11.4	Supplementary/ Extraordinary Assessments:

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8.11.4.1	The ACCAB may organize Supplementary/ Extraordinary Assessments as a result of Complaints supported by facts and evidence from the interested parties regarding the certification activities or any adverse publication in the media or misuse of ACCAB logo.
8.11.4.2	The ACCAB reserves the right to conduct the Extraordinary Assessments without any prior notice or with very little time between notification and execution.
8.11.4.3	Extraordinary Assessment may also become necessary when significant changes occur relevant to the accreditation or any aspect of the status or operation of CAB or in the accreditation Criteria. However in these cases the ACCAB shall give sufficient notice to the concerned CAB.
8.12	Extension of Accreditation:
8.12.1	The CAB desirous of an extension of the scope shall submit a written application to the ACCAB.
8.12.2	The CAB must understand the difference within and outside the scope. Extensions within the framework of the same accreditation standard shall be considered Extension within the scope and if not it shall be considered outside the scope. Any requests for accreditation involving a different accreditation standard shall be treated as a new application.
8.12.3	The ACCAB shall determine the extent of the assessment needed for the extension depending on the size and nature of the extension requested.
8.12.4	The ACCAB shall not proceed with the request of the extension of scope until such time all non conformities are closed in the management system of the CAB.
8.13	Suspending, Withdrawing or Reducing Accreditation:
8.13.1	The ACCAB shall make decisions to suspend and/or withdraw accreditation when an accredited CAB has persistently failed to meet the requirements of accreditation or to abide by the rules of accreditation.
8.13.2	The ACCAB required the accredited CAB to demonstrate the compliance with the accreditation criteria regarding the entire scope and that it has complied with these criteria from the date on which accreditation was granted. In order to demonstrate that a CAB has complied with and is complying with the criteria for the complete scope of accreditation, the CAB shall provide records of the activities carried out. The concerned part of the scope shall be withdrawn if records do not demonstrate this. If this means that the entire scope is withdrawn, then the entire accreditation is withdrawn.
8.13.3	It is expected that the CAB withdraws the relevant part of the scope by itself, if a CAB fails to demonstrate the compliance with the accreditation criteria regarding the scope in question.
8.13.4	The ACCAB shall review the validity of the remaining part of accredited scope.
8.13.5	The CAB can file a fresh application for grant of withdrawn part of the accreditation at the later date.
8.13.6.1	Transfer of Accreditation:
8.13.6.1.1	The accreditation may be transferred at the sole discretion of ACCAB if the CAB makes such request in

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	<p>writing if the ownership or name of an accredited CAB changes provided:</p> <ol style="list-style-type: none"> a. The basic resources, infrastructure and other facilities remain intact; b. The CAB continues to operate within the legal and regulatory framework of the country in which it operates; c. The documented policy and management system remain unchanged; d. The general composition of the CAB's management and key personnel remains same; e. The material evidence exists that the former owner(s) do not operate under the same trade name, similar name, related name and similar business activities.
8.13.6.1.2	The ACCAB shall require CAB to provide the necessary documents showing that the above conditions are adequately met. The costs for reviewing the documents/ conducting onsite review shall be charged to the CAB.
8.13.6.1.3	The ACCAB shall allot the same registration/accreditation number and issue the new accreditation documents provided if such review is positive. The surveillance and re-assessment schedule is subject to change depending on the review.
8.13.6.1.4	ACCAB shall not transfer accreditation / compliance status from one accredited/ compliant body to another or from an accredited / compliant body to a non-accredited body.
8.14	Records of CABs:
8.14.1	<p>ACCAB shall maintain records of all applicants and accredited organizations. The files shall contain at least the following information:</p> <ol style="list-style-type: none"> a. Application forms; b. A copy of the accreditation certificate and schedule of accreditation; c. Correspondence including correspondence with assessors; d. Information on proficiency testing/inter-laboratory comparisons (where relevant); and e. Assessment report.
8.14.2	ACCAB shall maintain database of the accreditation scopes of all accredited organizations and publish on the ACCAB website.
8.15	Proficiency Testing & Other Comparisons for Laboratories:
8.15.1	Proficiency Testing:
8.15.1.1	ACCAB requires that applicant and accredited testing laboratories shall have a program and procedure in place for the Proficiency Testing & Other Comparisons. Laboratories are required to maintain complete records of participation in such schemes and to have procedures for evaluation of performance and implementation of corrective action. ACCAB shall assess performance during assessments, surveillance and re-assessments. If the results are outside the acceptable limits, corrective action shall be instituted. If causes for unacceptable results are not found within a reasonable time or if a laboratory is not undertaking suitable investigation to solve the problem, then the accreditation of the specific parameter/method/analysis may be suspended or terminated.
8.15.1.2	ACCAB requires that applicant and accredited laboratories participate in appropriate proficiency testing

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schemes when and where such schemes are available in their technical field of work and are justifiable in terms of economic benefit to the supply chain stockholder.

8.15.2 Traceability:

8.15.2.1 ACCAB shall require applicant and accredited laboratories to demonstrate calibration of critical equipment and the measurement results generated by that equipment, relevant to their scopes of accreditation have traceability to the International System of Units (SI units). Where this is not possible, traceability shall be to certified reference materials provided by a competent supplier and/or to other specified methods or consensus standards.