



MAURITAS

A18

Procedure for Assessment and Extension of Scope of Accredited Certification Bodies

Mauritius Accreditation Service

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Foreword

The MAURITIUS ACCREDITATION SERVICE (MAURITAS) is a governmental body established in 1998 to provide a national, unified service for the accreditation of Conformity Assessment Bodies (CABs) such as calibration/testing laboratories, certification bodies and inspection bodies. Organizations that comply with the MAURITAS requirements are granted accreditation by MAURITAS.

About MAURITAS publications

MAURITAS publications are categorized as follows:

- R series Publications containing general policy and requirements related to MAURITAS accreditation.
- G series Publications providing guidance on MAURITAS requirements.
- A series Publications related to assessment procedures.
- P series MAURITAS quality system procedures
- F series MAURITAS Forms
- Directories Classified listing of accredited organizations.

Mauritius Accreditation Service (MAURITAS)
4th Floor, Crescent House
Cnr Deschartes and Foucault Streets
Port Louis
Mauritius
Tel: +230 208 16 90
Fax: +230 210 61 01
Email: mauritas@govmu.org
Website: www.mauritas.org

Procedure for Assessment and Extension of Scope of Accredited Certification Bodies

1. Purpose

1.1 This procedure shall ensure a uniform and correct execution of the processes associated with the assessment and extension of scope activities for accredited Certification Bodies (CBs) that perform management system certifications.

2. Scope and responsibility

2.1 This procedure sets out how MAURITAS will carry out assessments of accredited CBs in order to assess their compliance with the requirements of ISO/IEC 17021-1 and its associated standards, MAURITAS requirements and/or relevant requirements at sub-regional, regional and international level.

Where relevant, this procedure also includes activities related to an extension of scope within the existing main scope of accreditation for management system certifications.

2.2 All personnel who perform assessment activities of accredited CBs shall adhere to this procedure.

3. References

The following documents contain provisions which, through reference in this text, constitute provisions of the MAURITAS accreditation system. For dated references, subsequent amendments to, or revisions of, any of these publications do not apply. For undated MAURITAS references, the latest edition of the document referred to, applies. MAURITAS maintains a register, of the current valid MAURITAS accreditation documents.

3.1 **ISO/IEC 17021-1** : Conformity assessment – Requirements for bodies providing audit and certification of management systems- Part 1: Requirements

3.2 **ISO/IEC 17021-2** : Conformity assessment -- Requirements for bodies providing audit and certification of management systems -- Part 2: Competence requirements for auditing and certification of environmental management systems.

3.3 **ISO/IEC 17021-3** : Conformity assessment -- Requirements for bodies providing audit and certification of management systems -- Part 3: Competence requirements for auditing and certification of quality management systems.

3.4 **ISO 22003-1** : Food Safety - Part 1: Requirements for bodies providing audit and certification of food safety management systems.

3.5 **ISO/IEC 27006-1** : Information–security, cybersecurity and privacy protection - Requirements for bodies providing audit and certification of information security management systems – Part 1: General.

3.6 **MAURITAS A Series documents**

3.7 **MAURITAS G Series documents**

3.8 MAURITAS R Series documents

- 3.9 ISO/IEC 17011** : General requirements for accreditation bodies accrediting conformity assessment bodies.
- 3.10 IAF MD1** : IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organisation
- 3.11 IAF MD 2** : IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems
- 3.12 IAF MD 4** : IAF Mandatory Document for the Use of Information and Communication Technology (ICT) for Auditing/Assessment Purposes
- 3.13 IAF MD 5** : Determination of Audit Time of Quality, Environmental and Occupational Health and Safety Management Systems
- 3.14 IAF MD 7** : IAF Mandatory Document for the Harmonisation of Sanctions and Dealing with Fraudulent Behaviour
- 3.15 IAF MD 12** : Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries
- 3.16 IAF MD 13** : Knowledge Requirements for Accreditation Body Personnel for Information Security Management Systems (ISO/IEC 27001)
- 3.17 IAF MD 15** : IAF Mandatory Document for the Collection of Data to Provide Indicators of Management System Certification Bodies' Performance
- 3.18 IAF MD 16** : Application of ISO/IEC 17011 for the Accreditation of Food Safety Management Systems (FSMS) Certification Bodies
- 3.19 IAF MD 17** : Witnessing Activities for the Accreditation of Management Systems Certification Bodies
- 3.20 IAF MD 28** : IAF Mandatory Document for the Upload and Maintenance of Data on IAF Database
- 3.21 IAF ML 1** : Guidance for the Exchange of Documentation among MLA Signatories for the Assessment of Conformity Assessment Bodies
- 3.22 ILAC/IAF JWG A-Series FAQ1**
- 3.23 Mauritius Accreditation Service (Certification Body Accreditation Fees) Regulations 2007**
- 3.24 Mauritius Accreditation Service (Certification Body Accreditation Fees) (Amendment) Regulations 2013**

4. Definitions

4.1 Accreditation

A third-party attestation related to a CB conveying formal demonstration of its competence, impartiality and consistent operation in performing specific conformity assessment activities.

4.2 Assessment

Process undertaken by MAURITAS to determine the competence of a CB, based on standard(s) and/or other normative documents for a defined scope of accreditation.

4.3 Witnessing

Witnessing is the on-site observation by MAURITAS of the CB carrying out conformity assessment activities within its scope of accreditation to evaluate if audits are satisfactorily performed.

4.4 Major nonconformities

Nonconformities that affect the capability of the management system to achieve the intended results.

4.5 Minor nonconformities

Nonconformities that do not affect the capability of the management system to achieve the intended results.

4.6 Assessment programme

Set of assessments consistent with a specific accreditation scheme that MAURITAS performs on a specific CB during an accreditation cycle

4.7 Assessment plan

Description of the activities and arrangements for an assessment

4.8 MAURITAS personnel

Internal or external individuals carrying out activities on behalf of MAURITAS

4.9 Assessor

Person assigned by MAURITAS to perform, alone or as part of an assessment team, an assessment of a CB

4.10 Team Leader

Assessor who is given the overall responsibility for the management of an assessment

4.11 Technical Expert

Person assigned by MAURITAS, working under the responsibility of an assessor, who provides specific knowledge or expertise with respect to the scope of accreditation to be assessed and does not assess independently. However, a Technical Expert can work in an area alone if an Assessor/Team Leader is available and periodically checking and communicating with the Technical Expert (this includes also keeping in touch via email or telephone or a mobile application).

4.12 NACE code system

NACE code system is the European standard for industry classifications and was introduced in 1970. NACE stands for "Nomenclature Générale des Activités Economiques dans L'Union Européenne".

The list of scopes of accreditation are based on the statistical nomenclature for economic activities NACE rev. 2 published by the Commission of European Communities (official Journal L 393/1, 30.12.2006).

The field of activities can be accessed on website:

<https://ec.europa.eu/eurostat/documents/3859598/5902521/KS-RA-07-015-EN.PDF>

4.13 IAF scope of accreditation

IAF scope of accreditation is based on the statistical nomenclature for economic activities NACE Rev.2 published by the Commission of European Communities. The IAF scope for a Certification Body may be expressed in terms of one or more elements from a list of economic activities.

5 Registration of application for extension of scope

This section outlines the registration of applications for extension of scope within the main scope of accreditation by MAURITAS.

S.N	Responsibility	Activity	Documents
5.1	Registry	Registers the application for extension of scope (within the existing main scope of accreditation, under management system certifications) done by the accredited CB on the application form. Forwards same to the Director, MAURITAS	F 4.01

6 Planning of Assessment

6.1 Planning of Extension of Scope within the existing main Scope

This section describes the planning process for an extension of scope within the existing main scope of accreditation.

S.N	Responsibility	Activity	Documents
6.1.1	Director of MAURITAS	Forwards the application form to Head of Quality and CB Section.	F 4.01
6.1.2	Head of Quality and CB Section CB Section Staff	<ul style="list-style-type: none"> Reviews that the application is complete and all information have been provided; Ensures that cross-reference matrices have also been submitted by the CB and are correctly completed; Takes into consideration the extension of scope for accreditation applied by the accredited CB together with the associated risks related to activities, location and personnel and any cross-frontier activities for the accreditation cycle. <p>Gives feedback to the applicant about shortcomings in application and the documentation, if any.</p>	F 4.10 / F 4.11 / F 4.16 / F 4.17 IAF MD12
6.1.3	Head of Quality and CB Section CB Section Staff	At any point in the application for extension or during the assessment, if there is evidence of fraudulent behaviour, if the CB intentionally provides false information or if the CB conceals information, MAURITAS will reject the application and terminate the assessment process.	IAF MD7 MAURITAS A29

6.1.4	Case Officer	<p>Follows up with CB for payment of applicable application fee, if not yet paid.</p> <p>Carries out resource review as per the applicable section on “Resource Review” in MAURITAS A9 as well as takes into consideration the duration of the assessment so as to record the time schedule in order to determine the ability of MAURITAS to:</p> <ul style="list-style-type: none"> - carry out the extension of scope in terms of its own policy, its competence and the availability of suitable assessors, technical experts and decision makers; - carry out the extension of scope in a timely manner. <p>The assessment for the extension of scope is planned within 6 months from scheduled date of assessment. Reference is made to the established timeline in Annex B</p>	<p>F 1.09</p> <p>IAF MD 16 IAF MD 13 IAF MD 17 MAURITAS A25, A28</p>
6.1.5	<p>Head of Quality and CB Section</p> <p>CB Section Staff</p>	<p>The duration of assessment for the extension of scope will depend on the scope for which “extension of scope” has been applied for and the type of assessment to be carried out.</p> <p>Other factors as detailed in the “Resource Review” section in MAURITAS A9 may also be considered for duration of assessment.</p>	MAURITAS A9
6.1.6	<p>Head of Quality and CB Section</p> <p>CB Section Staff</p>	<p>Updates and reviews the assessment programme taking into consideration the extension of scope of accreditation of the CB together with the associated risks related to activities, location and personnel for the accreditation cycle. This assessment programme will be reviewed and updated as and when required.</p> <p>Follows up with the CB to ensure that the latter sends a complete and updated schedule of confirmed and planned audits (dates, location, audit team composition, audit type and scope) with respect to the extension of scope.</p>	F 4.18
6.1.7	<p>Head of Quality and CB Section</p> <p>CB Section Staff</p>	<p>Following review of assessment programme, plans to carry out at least one of the following activities depending upon the application for extension of scope of accreditation:</p> <ul style="list-style-type: none"> • Document review of performed audits in the related field of activities as well as the use of auditor competence for the extension of scope. • Witnessing of an audit in the field of activities for the extension of scope, as per MAURITAS A9 and MAURITAS A22. • Office assessment related to the activities for the extension of scope. 	<p>MAURITAS A9</p> <p>F 4.18</p> <p>MAURITAS A22</p>
6.1.8	Case Officer	<p>In the event of an on-site Office Assessment is planned:</p> <p>Carries out resource review as per section “Resource Review” in MAURITAS A9.</p> <p>Plans the Office Assessment as per applicable section in MAURITAS A18.</p>	<p>MAURITAS A9</p> <p>MAURITAS A18</p>

	<p>In the event of a Witnessing Assessment is planned: Carries out resource review as per section “Resource Review” in MAURITAS A9.</p> <p>Plans the Witnessing Assessment as per the applicable sections in “Planning of witnessing” in MAURITAS A18.</p> <p>In the event a document review is planned: Carries out resource review as per section “Resource Review” in MAURITAS A9.</p> <p>Plans the document review as per the applicable sections “Document Review” in MAURITAS A9.</p>	
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6.2 Planning of Office Assessment

This section describes the planning process for office assessments conducted for scheduled office assessments as well as those carried out for an extension of scope.

S.N	Responsibility	Activity	Documents
6.2.1	Head of Quality & CB Section CB Section Staff	<p>The first on-site Office Assessment is carried out 6 months after grant of accreditation and subsequent assessments are carried out at yearly intervals. Ensures that the assessments be carried out within 1 month of its scheduled date and plans assessments for the whole accreditation cycle of 4 years.</p> <p>Ensures that the Assessment Team assesses the performance of a sample of certification activities representative of the scope of accreditation of the CB. The assessment also needs to cover a sample of locations and personnel to determine the competence of the CB activities in its scope of accreditation.</p> <p>Reviews and updates the assessment programme for the accreditation cycle, for each Management System scheme, taking into consideration the factors listed below:</p> <ol style="list-style-type: none"> any cross-frontier activities/activities in multiple countries geographical/administrative units be assessed all parts of the accreditation scope and the management system be assessed at least once during the accreditation cycle key elements of the management system, including but not limited to complaints, management review and internal audit, to be assessed during each assessment associated risks related to activities, location and personnel for the scope of accreditation all requirements of ISO/IEC 17021-1, the relevant competence requirements as per Annex D of QAM1 and scope of accreditation are assessed during one accreditation cycle witnessing of the CB on-site audits; 	IAF MD17 MAURITAS A24 ISO/IEC 17021-1 F 4.18

		<p>h) necessary resources be allocated for the assessment; i) additional resources be allocated if the assessment includes an extension of scope. j) analysis of trends, if any, in nonconformities raised during the previous assessment visits</p> <p>Factors such as knowledge obtained by MAURITAS about the CB’s management system and activities and the performance of the CB are also considered when reviewing the assessment programme.</p> <p>Where applicable, reviews trends, if any, in nonconformities raised during the previous assessment visits at the CB for planning of assessments in an accreditation cycle.</p> <p>MAURITAS may use assessment techniques other than on-site assessment in case of extraordinary events.</p>	
6.2.2	Case Officer	<p>Follows steps in the section on ‘Resource Review’ in MAURITAS A9 to carry out resource review. Resource review is carried out within 2 weeks of the date of assessment.</p> <p>The Office Assessment of a CB will be undertaken for a minimum duration of two (2) days.</p> <p>Reference is made to the established timeline in Annex A and ‘Resource Review’ in MAURITAS A9 for duration of assessments.</p>	MAURITAS A9 F 1.09
6.2.3	Case Officer	<p>Within 2 months prior to the visit, is responsible for:</p> <ul style="list-style-type: none"> • Requesting to the CB its updated Quality Documentation as well as complaints, latest management review, complaints and internal audit reports. • Constitution of Assessment Team and any observers including information about their organisation and background; • Liaising with the CB for arrangements (witnessing and office assessment); • Liaising with foreign Accreditation Body (if any); • Proposing and confirming dates of assessment and witnessing; • Agreeing on organisations to be witnessed; • Discussing on a tentative plan and confirming same for assessment including clauses of the relevant standards and witnessing. <p>The plan will result from the assessment programme and shall document at minimum the following:</p> <ul style="list-style-type: none"> • activities to be assessed including applicable clauses of the relevant standard(s) and MAURITAS requirements • the location at which the activities will be assessed • personnel to be assessed where applicable • assessment techniques utilised including witnessing where applicable <p>Forwards the assessment plan for the on-site assessment to the CB at least one week prior to the assessment.</p>	MAURITAS A24 F 4.19

6.2.4	Assessment Team	Reviews the relevant Quality Documentation as well as latest management review, complaints and internal audit reports provided by the CB prior to the Office Assessment.	F 4.10 & F 4.11 / F 4.16 F 4.17
6.2.5	Case Officer	<p>Is responsible for providing the assessment pack as per form F 1.18 (at least one week before assessment), which includes:</p> <ul style="list-style-type: none"> • For Team Leader: <ul style="list-style-type: none"> - Assessment plan - Checklist for Assessors Pack ISO/IEC 17021-1 - Briefing Meeting with Assessors/Technical Experts - Nonconformity report - Team Leader’s Report from assessment of Certification Bodies for Management Systems - Cross reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Management Requirement - Cross reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Technical Requirements - Declaration of Confidentiality - Attendance Sheet - Agenda Opening Meeting - Agenda Closing Meeting - Relevant requirement documents including IAF documents and MAURITAS Regulations - Quality Documentation, Complaints, Internal Audit and Management Review reports of the CB - Feedback Form - Previous Nonconformity Reports, if any - Previous Accreditation Report • For Assessor/MAURITAS Staff accompanying the Technical Expert (at least one week before assessment): <ul style="list-style-type: none"> - Assessment plan - Nonconformity Report - Applicable cross reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Technical Requirements - Team Leader’s Report from assessment of Certification Bodies for Management Systems - Previous Nonconformity Reports - Relevant requirement documents including IAF documents and MAURITAS Regulations - Quality Documentation for the CB - Previous Accreditation Report, if any <p>In the case for Office Assessment for an extension of scope, the cross-reference matrix filled by the CB should be provided to the Assessment Team.</p>	<p>F 4.19 F 1.18 F 1.15 F 4.05 F 4.07</p> <p>F 4.10 F 4.11/F 4.16/ F 4.17 F 1.02 F 1.03 F 1.01 F 1.04 Relevant IAF MD MAURITAS R1, R2 and R4 F 1.21 F 4.05 F4.05</p> <p>F 4.05 F 4.11/F 4.16/ F 4.17 F 4.07 F 4.05 Relevant IAF MD MAURITAS R1, R2 and R4</p>

6.3 Planning of Witnessing Assessment

This section describes the planning process for witnessing assessments conducted for scheduled witnessing assessments as well as those carried out for an extension of scope.

S.N	Responsibility	Activity	Documents
6.3.1	Head of Quality & CB Section CB Section Staff	Follows up with the CB to ensure that the latter sends a complete and updated schedule of confirmed and planned audits (dates, location, audit team composition, audit type and scope) for each Management System scheme on a yearly basis. Reviews and updates the assessment programme taking into consideration any cross-frontier activities and covering the scope of the CB together with the associated risks related to activities, location and personnel for the accreditation cycle.	IAF MD17 MAURITAS A22, A24, A25, A28 F 4.18
6.3.2	Head of Quality & CB Section CB Section Staff	When planning how many and which audits are to be witnessed, the following factors are taken into consideration: <ul style="list-style-type: none"> • the accredited scope of the CB; • competence of CB team leaders/auditors; • number of auditors/ CB team leaders competent for the scope to be assessed; • whether auditors are internal staff or external resource • the CB's overall performance; • factors such as risk, process complexity or legislation etc. which may influence the ability of the certified organisation to demonstrate its ability to meet the intended outcomes of the Management System; • feedback from interested parties including complaints about certified organizations or customer surveys; • technical clusters already assessed • the results of the CB's internal audits; • audit programme for its current certification cycle; • type of audit being carried out by the CB (initial audit - stage 1/stage 2, surveillance or recertification); • agreements with the certified organisation; • scheme owner requirements, etc.; • changes in CB work patterns – growth of work within a specific region or technical area; • number of clients within the CB's scope of accreditation; • number of certificates issued for the scope; • confidence in the CB's auditor evaluation and approval process; and • results of previous witnessing activities. • Countries/geographical locations the CB operates and has key activities 	IAF MD17 IAF MD12

	<p>Head of Quality & CB Section</p> <p>CB Section Staff</p>	<p>Ensures the following when planning for the Witnessing Assessment:</p> <ul style="list-style-type: none"> • Each accreditation scheme shall be witnessed as per the requirements listed in the respective IAF Mandatory documents, i.e.: <ul style="list-style-type: none"> - after initial accreditation has been granted, MAURITAS shall perform at least one witnessing activity in each technical cluster of each Management System scheme. This witnessing programme will continue until the CB has demonstrated sufficient experience and performance for an enhanced programme. When this happens, MAURITAS shall perform at least one witnessing activity in each technical cluster of each MS scheme, to be complemented with other assessment activities to guarantee that each technical cluster is assessed during two successive accreditation cycles. MAURITAS shall justify why the witnessing programme was reduced. The witnessing frequency established in the first period should be reinstated if significant changes occur in the CB auditor qualification process, auditing practices or results and audit personnel; and - at least one witnessing activity in Food Chain Category (C+D) (if covered by the accredited scope of the CB) each year and at least one audit in each of the other clusters during the accreditation cycle. • The witnessing frequency established for the 1st cycle should be reinstated if significant changes occur in the CBs' auditor qualification process, auditing practices or results and audit personnel • A CB with more than 300 certificates shall be witnessed twice every year as a minimum • Witnessing of auditor shall be done for a representative number of staff of the CB. • Each CB with more than 10 certificates in other countries shall be witnessed at least once during the accreditation cycle. However, witnessing shall be considered in 1 out of 2 accreditation cycles in cases where the number of certificates is less than 10. • The extent of the witnessing shall be decided in the following way: <ul style="list-style-type: none"> - In case of new CB team leaders, full audits normally will be witnessed, unless the experience with the organisation shows that MAURITAS has confidence with their performance; - For CB team leader who have been witnessed earlier, the witnessing does not need to be for the full audit; - In case of extension of scope, the witnessing can be limited to the technical part of the audit. 	<p>IAF MD17 F 4.18</p> <p>IAF MD16</p> <p>MAURITAS A24</p> <p>IAF MD12</p>
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6.3.3	Case Officer	<p>Follows steps in the section on ‘Resource Review’ in MAURITAS A9 to carry out resource review. Resource review is carried out within 2 weeks of the date of assessment.</p> <p>For Witnessing Assessments, the minimum number of days for witnessing a particular IAF code/food chain category/IT business sector, for a given CB, shall be the same as the man days determined by the CB in compliance with IAF MD 5/ISO22003-1/ISO/IEC 27006-1.</p> <p>Reference is made to the established timeline in Annex A and “Resource Review” in MAURITAS A9 for duration of assessments.</p>	<p>MAURITAS A9 F 1.09</p> <p>IAF MD 5 ISO 22003-1 ISO/IEC 27006-1 MAURITAS A22</p>
6.3.4	Case Officer	<p>Is responsible for providing the assessment pack to the Assessment Team as per form F 1.18 (at least one week before assessment), which includes:</p> <ul style="list-style-type: none"> - Assessment plan - Checklist for Assessors Pack ISO/IEC 17021-1 - Briefing Meeting with Assessors/Technical Experts - Nonconformity report - Declaration of Confidentiality - Relevant requirement documents including IAF documents and MAURITAS Regulations - Copy of the previous report of the certified company for the last audit if a surveillance audit or a renewal will be witnessed; - Copy of audit plan - Copy of audit programme - Copy of audit team competence records - Justification for calculation of audit time - Witness Assessment Report for Management Systems - Technical Expert Witnessing Assessment Report (if Technical Expert in Team) - Feedback Form 	<p>F 4.19 F 1.18 F 1.15 F 4.05 F 1.02</p> <p>IAF MD5 F 4.03 F 4.15 F 1.21</p>

7 Execution of Assessment

7.1 Execution of Office Assessment

This section describes how office assessments are to be carried out for scheduled office assessments as well as those undertaken for an extension of scope.

S.N	Responsibility	Activity	Documents
7.1.1	Team Leader	<p>Carries out a briefing session with Assessment Team and observers, if any, so that they are aware of their duties during the assessment.</p> <p>Carries out an Opening Meeting that sets the scene and ensures that the purpose of the assessment and accreditation requirements are clearly defined as well as the assessment plan and the scope of the assessment are confirmed with the CB management and staff.</p>	<p>F 1.15</p> <p>F 1.01 F 4.19</p>
7.1.2	Assessment Team	<p>The Assessment Team conducts the assessment as per the assessment plan</p> <p>Assess the main office and selected geographical locations (if any) that are covered by the accreditation.</p> <p>Analyse all relevant information and objective evidence gathered during the assessment in order to determine the competence of the CB as determined through its conformity with the requirements of accreditation.</p>	<p>F 4.19</p> <p>F 4.10, F 4.11 F 4.16, F 4.17</p>
7.1.3	Assessment Team	<p>The Assessment Team shall monitor CB data upload conformance during the assessment process over the accreditation cycle, utilizing the IAF Database dashboard and its reports as applicable to ensure that the IAF MD28 requirements (including ISO/IEC 17021-1 requirements, if applicable) are being met, including:</p> <ul style="list-style-type: none"> (i) Uploads are being completed on time, by assessing the activity reports in the dashboard. (ii) If applicable, exclusions and use of confidentiality within the IAF Database follow the MD process. (iii) Any notifications sent to the CB regarding concerns with data have been addressed by the CB. <p>If the CB does not conform to the IAF MD28 requirements, MAURITAS will raise a nonconformity accordingly.</p>	IAF MD28
7.1.4	Assessment Team	<p>Prior to the closing meeting, an Assessors' meeting is held. In the event that the members of the Assessment Team cannot reach a conclusion with respect to a particular finding, the Team Leader shall report same to the relevant management level staff of MAURITAS (Assistant Accreditation Manager/Accreditation Manager/Director).</p>	<p>F 1.21 F 4.05</p>

		The Team Leader shall inform MAURITAS in the event that the Assessment Team is not able to perform the office assessment as per the assessment plan and the reasons thereof.	F 1.21 F 4.19
7.1.5	Team Leader	<p>Carries out a Closing Meeting with the management of the CB in order to present a summary of the results of the assessment, report on the findings identified during the assessment and detail in writing any nonconformities. The management is also informed on the recommendations that the Assessment Team will make to MAURITAS.</p> <p>No matters shall be included in the formal presentation of findings that do not appear in the Recommendation Report.</p> <p>Team Leader shall at the closing meeting:</p> <ul style="list-style-type: none"> • Give the CB representative a copy of the recommendation report and nonconformities, if any (deadline for root cause analysis and proposed corrective actions is 2 weeks and for implemented corrective actions, 2 months). <p>The CB is provided an opportunity to seek clarification on the findings, if any, and their basis.</p> <p>The Team Leader submits the assessment pack in the file to the Director of MAURITAS for review and feedback on the assessment.</p>	F 1.04 F 4.05 F 4.06 F 4.05 F 1.21
7.1.6	Assessor(s)	Submits a detailed report within 3 weeks from assessment date to the Case Officer. The latter forwards the reports to the Team Leader	F 4.07
7.1.7	Team Leader	<p>Submits a combined detailed report, including the technical part of the Assessor’s report, to the Head of CB and Quality section within 1 month from assessment date.</p> <p>If the Team Leader also is the Assessor, he/she shall submit two reports covering both functions.</p>	F 4.07
7.1.8	Assessment Team	<p>The written reports shall include comments on competence as determined through conformity, the scope assessed and a description of nonconformities.</p> <p>The comments on competence in the assessment report shall be adequate to support the conclusions reached during the assessment. The team’s observations on areas of improvement may be presented to the CB without recommending specific solutions.</p> <p>The implementation of the corrective actions shall be verified at the next visit.</p>	F 4.07

7.1.9	Head of the Quality and CB section	Reviews and forwards the detailed report to the Case Officer.	F 4.07
7.1.10	Case Officer	Forwards the report to the management of CB within 1.5 months from assessment date and reminds them about the right to complain against actual errors in the reports. MAURITAS shall be responsible for the content of all of its assessment reports. If the report on the outcome of the assessment differs from the outcome delivered at the closing meeting, MAURITAS shall provide a written explanation to the assessed CB.	F 4.07
7.1.11	Registry	Files all documents related to assessments and witnessing.	

7.2 Execution of Witnessing Assessment

This section describes how witnessing assessments are to be carried out for scheduled witnessing assessments as well as those undertaken for an extension of scope.

S.N	Responsibility	Activity	Documents
7.2.1	Team Leader	Carries out briefing meeting with the Assessment Team prior to the opening meeting of the CB at its client's place.	F 1.15
7.2.2	Assessors/Technical Experts along with MAURITAS Staff	Stay with the audit team as silent observers and do not interfere in the conduct of the audit throughout while taking notes on how the audit is being carried out.	
7.2.3	Team Leader	When the CB has completed the closing meeting of the audit with its client, the Team leader in cooperation with the Assessor and/or Technical Expert along with MAURITAS Staff shall prepare for a debriefing meeting with the team of auditors. The Team Leader shall give feedback on: <ul style="list-style-type: none"> • CB's performance, including any assessment findings/nonconformities, • Register nonconformities, if any; • Agree on time limit for closing of nonconformities to the audit team in the absence of the CB's clients. • The nonconformities shall be signed by the team leader of the CB. • A copy of the nonconformities is submitted to the team leader of the CB. 	F 4.05
7.2.4	Team Leader	The Team Leader submits the assessment pack, together with a copy of the audit report and feedback on the assessment, on file, to the Director of MAURITAS for review.	F 1.21

7.2.5	Assessors/Technical Experts along with MAURITAS Staff	<p>If Technical Experts are used, the Technical Expert(s) shall submit their witnessing reports to the Case Officer for compiling in the witnessing report of the MAURITAS staff within 2 weeks from the date of witnessing.</p> <p>The Assessors shall after the witnessing, within 3 weeks, issue reports and forward them to the Case Officer.</p> <p>The Team Leader shall within 1 month from assessment date issue the report to the Case Officer.</p> <p>If the Team leader also is an Assessor, a report for both functions shall be written and sent to the Case Officer.</p>	<p>F 4.15</p> <p>F 4.03</p> <p>F 4.03</p> <p>F 4.03</p>
7.2.6	Head of CB and Quality section	Reviews the witnessing report from the Team Leader and Assessor forwards the report to the Case Officer.	F 4.03
7.2.7	Case Officer	<p>Forwards the witnessing reports, including the recommendations, from the Assessment Team within 1.5 months from assessment date to the CB with information about the right to complain against actual errors.</p> <p>However, it must be ensured that the responsible person in the CB receives the reports.</p>	F 4.03
7.2.8	Registry	Files all documents related to assessments and witnessing.	

8 Recommendation for Extension of Scope

This section outlines the possible recommendations, which the Assessment Team can make, regarding an extension of scope within the existing main scope of accreditation.

S.N	Responsibility	Activity	Documents
8.1	Assessment Team	Give recommendation on the extension of scope applied with respect to the accredited management systems	F 4.06
8.2	Assessment Team	<p>Give recommendations on the reduction of scope regarding accreditation of management systems only if:</p> <ul style="list-style-type: none"> • CB has applied only for parts of a field of activities; • CB can only document a limited competence for administration of certification compared with the total field of activities; • Certain activities of the CB are quite different from other activities listed under the scope sector; • CB has limited experience. 	
8.3	Assessment Team	After assessment, the Assessment Team may not recommend extension of scope of accreditation if major non-conformities have been found at the CB.	F 4.06

9. Documents deleted/destroyed by Assessment Team

This section outlines the responsibilities of the Assessment Team regarding the handling of all assessment documents after completion of an assessment.

S.N	Responsibility	Activity	Documents
9.1	Assessment Team	After completion of the assessment, destroys/deletes all quality documentation as well as complaints, latest management review, internal audit reports and any other documents provided by the CB prior to the assessment	

10. Transition with respect to a new accreditation standard

This section outlines how assessments are to be planned in the case of transition to a new accreditation standard.

S.N	Responsibility	Activity	Documents
10.1	Head of Quality & CB Section CB Section Staff	Be responsible to plan the assessment process as per the transition plan developed by MAURITAS based on the relevant IAF MD documents, if any. The transition plan is also available on MAURITAS website. Be responsible to follow the accreditation process with the accredited CBs.	

11. Reporting of major nonconformities after assessments

This section outlines the recommendations which can be made by the Team Leader if several major nonconformities have been raised, showing that there is significant doubt on the capability of the management system of the CB to achieve its intended results, have been raised during an assessment.

S.N	Responsibility	Activity	Documents
11.1	Team Leader	<p>For scopes which have already been accredited, suspension may be recommended. During the closing meeting, informs the CB that a recommendation about suspension will be evaluated by MAURITAS if several nonconformity reports of type major have been issued and there is significant doubt that the capability of the management system to achieve its intended results is affected.</p> <p>In case of recommendation for suspension, immediately informs the recommendation about suspension to the Case Officer.</p> <p>In the case for application for extension of scope, the extension of scope of accreditation may not be recommended if major nonconformities have been raised during assessment at the CB.</p>	
11.2	Case Officer	Handles the recommendation for partial/full suspension as per MAURITAS A14.	MAURITAS A14

12. Closing of nonconformities

This section describes how major and minor nonconformities, raised during assessments at the CBs, are handled by MAURITAS.

S.N	Responsibility	Activity	Documents
12.1	Case Officer	<p>Receives from the CB proposed and root cause analysis and implemented corrective actions for all nonconformities within the agreed time limit (for proposed corrective actions: 2 weeks from date of assessment; and for implemented corrective actions: 2 months from date of assessment)</p> <p>Forwards copies of nonconformities and root cause analysis and corrective actions to the respective Team Leader/Assessors/Technical Experts along with MAURITAS Staff asking for feedback on the corrective actions and to determine if proposed corrective actions and the root cause analysis carried out are sufficient and appropriate.</p>	

12.2	Case Officer	Convenes the Team Leader, Assessors and/or Technical Experts along with MAURITAS Staff where necessary for meetings at MAURITAS office to review the technical nonconformities, root cause analysis and the corrective actions and asking for feedback on the corrective actions.	
12.3	Team Leader/ Assessors/Technical Experts along with MAURITAS Staff	<p>Closes the nonconformities based on the following:</p> <ul style="list-style-type: none"> - satisfactory descriptions of corrective actions and objective evidence of effective implementation of actions taken; - after a visit to verify the implementation of the corrective action; <p>All implemented corrective actions for nonconformities raised shall be verified at the next visit.</p>	F 4.05
12.4	Team Leader/ Assessors / Technical Experts	<p>Within 2 weeks from date of receipt of corrective action, forwards to the Case Officer a recommendation about closing of each nonconformity.</p> <p>Alternatively, gives feedback in writing to the Case Officer about nonconformities where corrective actions are not acceptable.</p>	
12.5	Case Officer	<p>Acknowledges with the Assessors/Technical Experts along with MAURITAS Staff about nonconformities where corrective actions are not acceptable.</p> <p>Gives feedback to the CB about unsatisfactory corrective actions and gives the CB in writing a new deadline for corrective actions (maximum one month).</p>	
12.6	Head of CB and Quality section	Evaluates actions towards the accredited CB if corrective actions have not been made for all nonconformities within 2.5 months after the assessment.	

13. Accreditation Report and Decision on maintenance / extension of scope of accreditation

This section outlines the process for the preparation of the accreditation report for submission to the Accreditation Committee, as well as the possible decisions that may be taken by the Committee.

S.N	Responsibility	Activity	Documents
13.1	Team Leader	<p>Prepares and submits an accreditation report, based on the recommendation of the Assessment Team, to the team for review and comments.</p> <p>For extension of scope, drafts a new/updated schedule and if relevant a new accreditation certificate based on the recommendation of the Assessment Team.</p> <p>After amendments, Team Leader submits the finalised accreditation report to Secretary of the Accreditation Committee and a copy to Director (within 1.5 months from clearance of all nonconformities).</p> <p>Submit the finalised accreditation report to Registry for further processing.</p>	<p>MAURITAS A13 MAURITAS A9</p>
13.2	Registry	Registers the Accreditation Report and submits to Assessment Team for signature.	
13.3	Director	<p>Prepares and submits a recommendation report to the Accreditation Committee.</p> <p>Can also take the decision on accreditation as per powers delegated by the Accreditation Committee as per MAURITAS P1.</p>	MAURITAS P1
13.4	Accreditation Committee	<p>Takes the decision about the status of the accreditation(s) (maintenance or extension of scope) based on the accreditation report submitted by the Assessment Team and the recommendation presented by the Director without undue delay.</p> <p>MAURITAS does not use the results of assessments performed by another Accreditation Body for decision-making.</p>	

Positive decision (maintenance of accreditation/ grant of extension of scope)			
13.5	Case Officer	<p>If the accreditation is maintained, informs the CB without undue delay on the decision of the Accreditation Committee/Director including justification where relevant.</p> <p>A new schedule/certificate is provided to the CB if there are any changes or changes due extension of scope. A copy of the signed schedule/certificate is kept in the respective CB file. The CB is requested to return the old schedule(s)/certificate(s).</p> <p>A copy of the accreditation report prepared by the Team Leader is sent to the CB.</p> <p>Informs the CB to upload information in relation the relevant Certified Entities that it certifies under ISO/IEC 17021-1, which falls under the extension of scope as per Section “Upload of Data on IAF Database” in MAURITAS A18.</p>	MAURITAS A18
Negative Decision (suspension)			
13.6	Director / Head of CB and Quality section / Case Officer	Handles the negative decision as defined in MAURITAS A9 .	MAURITAS A9, A14
13.7	Case Officer	<p>Case Officer issues a letter to the applicant without undue delay in which:</p> <ul style="list-style-type: none"> • Gives the reason for partial suspension; • Reminds about the right to appeal on the decision; 	
13.8	Director	Signs the letter.	
13.9	Director	Handles appeals, if any, on the decision of Accreditation Committee according to the MAURITAS P2 document.	MAURITAS P2
Partial granting of accreditation			
13.10	Case Officer	<p>Finalises the schedule of accreditation based on scoping limitations.</p> <p>Issues a letter to the applicant without undue delay in which:</p> <ul style="list-style-type: none"> • Gives the reason for partial granting; • Reminds about the right to appeal on the decision; • Encloses accreditation schedule(s) and asks for feedback whether the decision of Accreditation Committee is accepted to the applicant. 	MAURITAS A13 MAURITAS A9
13.11	Director	Signs the letter.	

13.12	Director	Handles appeals, if any, on the decision of Accreditation Committee according to the MAURITAS P2 document.	MAURITAS P2
No grant of accreditation (for extension of scope)			
13.13	Case Officer	Issues a letter to the applicant without undue delay in which: <ul style="list-style-type: none"> • Gives the reason for the refusal; • Reminds about the right to appeal on the decision. The reason may be insufficient competence, non-conformities cannot be closed, unsatisfactory audits, problem with the CB to meet other requirements etc.	
13.14	Director	Signs the letter.	
13.15	Director	Handles appeal on the decision of Accreditation Committee according to the MAURITAS P2 document.	MAURITAS P2
13.16	Registry	Makes records on all decisions and communications between CB and MAURITAS.	

14. Amended certificate/schedule

This section outlines the responsibility of the Case Officer to upload updated certificates/schedules on the MAURITAS website following any amendments.

S.N	Responsibility	Activity	Documents
14.1	Case Officer	Where a certificate/schedule has been amended, shall upload the updated certificate/schedule on the MAURITAS website	

15. Assessment visits carried out in other countries

This section outlines the procedure to be followed for assessments of CBs which have activities in multiple countries.

S.N	Responsibility	Activity	Documents
15.1	Case Officer	Assessment of the accreditations granted to CBs with activities in multiple countries shall be planned and performed according to this procedure and IAF MD12.	IAF MD12

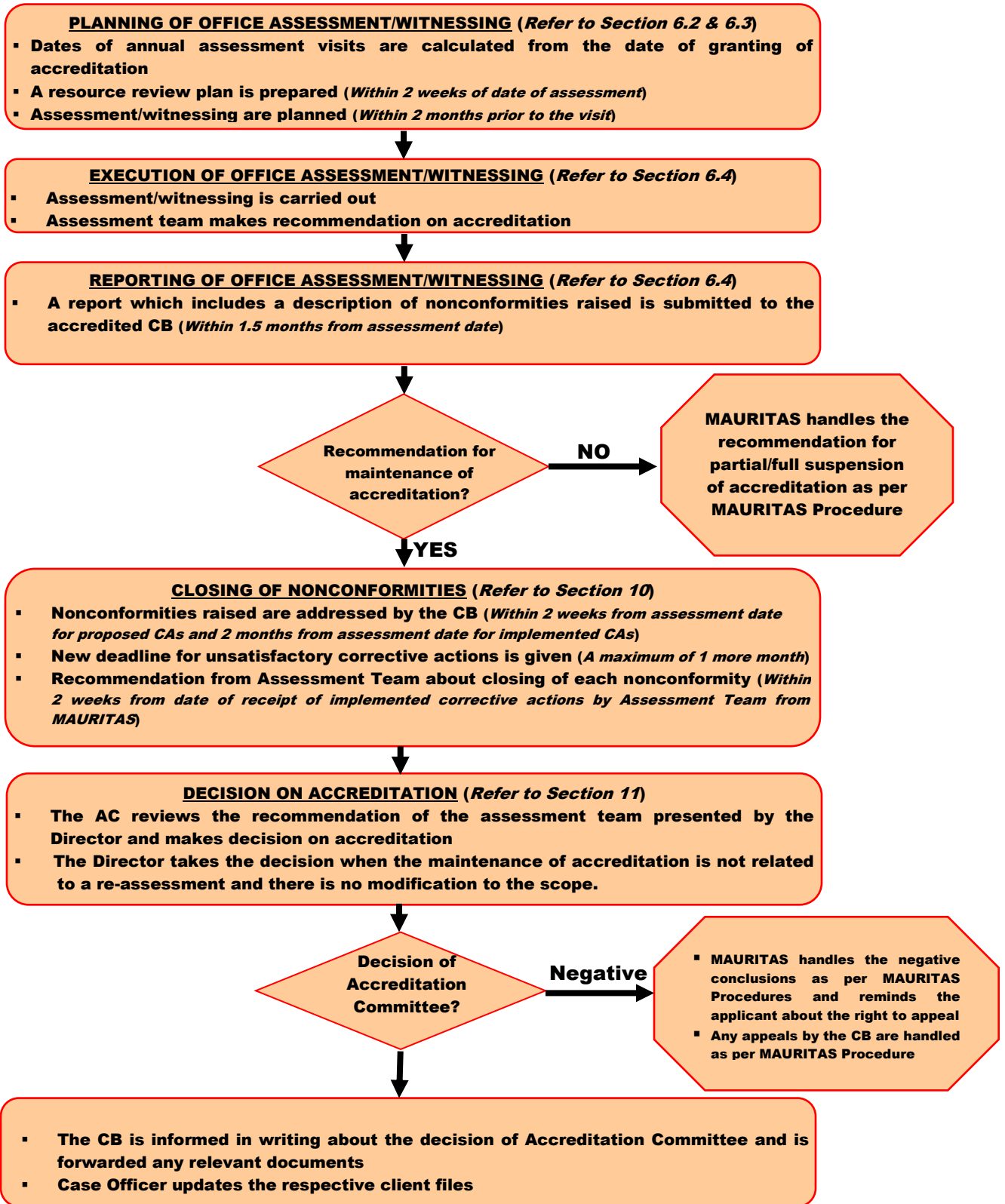
16. Related Forms

Application for Accreditation of certification body for management systems certification	F 4.01
Cross Reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Management Requirements	F 4.10
Cross Reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Technical Requirements for QMS	F 4.11
Cross Reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Technical Requirements for FSMS/HACCP	F 4.17
Cross Reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Technical Requirement for ISMS	F 4.16
Resource Review Form	F 1.09
Declaration of impartiality	F 1.23
Declaration of confidentiality	F 1.02
Checklist for Assessor's pack ISO/IEC 17021-1	F 1.18
Assessment Plan – Certification Bodies	F 4.19
Assessment Programme – Certification Bodies	F 4.18
Agenda Opening Meeting	F 1.01
Agenda Closing Meeting	F 1.04
Attendance Sheet	F 1.03
Briefing Meeting with Assessors/Technical Experts	F 1.15
Preliminary Visit Findings Form	F 1.20
Nonconformity report	F 4.05
Report from Document Review	F 4.02
Recommendation Report for ISO/IEC 17021-1	F 4.06
Team Leader/Assessor/Technical Expert Monitoring Checklist – Certification bodies	F 1.27
Team Leader's Report from assessment of Certification Bodies for Management Systems	F 4.07
Witness Assessment Report of Management Systems	F 4.03
Technical Expert Witnessing Assessment Report for Management Systems	F 4.15
Finance Form	F 2.16
Feedback from Assessment	F 1.21
Contract Agreement between CAB and MAURITAS	F 1.13
Combined Mark Contract Agreement – Certification Body	F 1.25
Contract Agreement for the provision of independent assessor/technical expert services	F 1.07

Appendix A: Amendment Table

SN	Section	Amendment
Issue 1, Revision 5		
1.	6.2.3, 7.1.1	Reference to observers in the Assessment Team has been added
Issue 2, Revision 5		
1.	13.1, 13.10	i. In column 4, Reference to MAURITAS A9 and MAURITAS A13 has been made
2.	13.10	i. In column 3, “Finalises the schedule of accreditation based on scoping limitations.” has been added
3.	Relevant sections	i. Reference to F 4.18 and F 4.19 has been made where “assessment programme” and “assessment plan” have been mentioned respectively

Annex A: TIMELINE FOR ASSESSMENT OF CERTIFICATION BODIES



Annex B: TIMELINE FOR EXTENSION OF SCOPE OF ACCREDITATION FOR ACCREDITED CERTIFICATION BODY

