MAURITAS A9

Procedure for Preliminary Visit, Initial Assessment and Re-assessment of Certification Bodies

Mauritius Accreditation Service
CONTENTS

FOREWORD ........................................................................................................................................... 2
ABOUT MAURITAS PUBLICATIONS ........................................................................................................... 2
1. PURPOSE ............................................................................................................................................... 3
2. SCOPE AND RESPONSIBILITY ............................................................................................................... 3
3. REFERENCES .......................................................................................................................................... 3
4. DEFINITIONS ......................................................................................................................................... 4
5. REGISTRATION OF APPLICATIONS ..................................................................................................... 6
6. INITIATION OF THE ACCREDITATION PROCESS .................................................................................. 6
7. RESOURCE REVIEW ............................................................................................................................... 7
8. DOCUMENT REVIEW ............................................................................................................................ 10
9. PRELIMINARY VISIT ............................................................................................................................. 11
10. PLANNING OF INITIAL ASSESSMENT VISIT ...................................................................................... 12
11. EXECUTION OF ASSESSMENT VISIT ................................................................................................... 16
12. REPORTING OF OFFICE ASSESSMENT ............................................................................................... 17
13. WITNESSING ....................................................................................................................................... 18
14. CLEARANCE OF PROPOSED CORRECTIVE ACTIONS ........................................................................ 20
15. CLOSING OF NON-CONFORMITIES .................................................................................................... 21
16. ACCREDITATION REPORT AND DECISION MAKING ....................................................................... 22
17. PUBLISHING AND INTERNAL REGISTRATION OF ACCREDITATION ................................................ 25
18. ADDITIONAL ACCREDITATION WITH FOREIGN ACCREDITATION BODY ........................................ 25
19. RE-ASSESSMENT .................................................................................................................................. 25
20. DOCUMENTS RETURNED BY ASSESSORS/TECHNICAL EXPERTS .................................................. 29
21. TRANSITION WITH RESPECT TO A NEW ACCREDITATION STANDARD .......................................... 29
22. REPORTING OF MAJOR NON-CONFORMITIES AFTER ASSESSMENTS ........................................... 29
23. ASSESSMENTS CARRIED OUT IN OTHER COUNTRIES ................................................................... 30
24. INVOICING .......................................................................................................................................... 30
25. LACK OF PROGRESS IN THE APPLICATION PROCESS ..................................................................... 30
26. RELATED FORMS .................................................................................................................................. 31
ANNEX A .................................................................................................................................................... 32
ANNEX B .................................................................................................................................................... 35
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.

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Procedure for Preliminary Visit, Initial Assessment and Re-assessment of Certification Bodies

1. Purpose

1.1 This procedure shall ensure a uniform and correct execution in handling of applications for accreditations and renewal of existing accreditations.

2. Scope and Responsibility

2.1 This procedure comprises handling of all applications for accreditation and the process for renewal of existing accreditations granted by MAURITAS.

2.2 Procedure for Assessments and Extensions of scope are described in MAURITAS A18 and A19 respectively. All personnel involved in these activities have the responsibility to 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/TS 22003 : Food safety management systems -- Requirements for bodies providing audit and certification of food safety management systems.

3.5 ISO/IEC 27006 : Information technology -- Security techniques -- Requirements for bodies providing audit and certification of information security management systems.

3.6 ISO/IEC 27006/ AMD 1 : Information technology -- Security techniques -- Requirements for bodies providing audit and certification of information security management systems -- Amendment 1.
3.7 MAURITAS A Series documents
3.8 MAURITAS G Series documents
3.9 MAURITAS R Series documents
3.10 ISO/IEC 17011: General requirements for accreditation bodies accrediting conformity assessment bodies.
3.11 IAF MD 1: IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization
3.12 IAF MD 2: IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems
3.13 IAF MD 4: IAF Mandatory Document for the Use of Information and Communication Technology (ICT) for Auditing/Assessment Purposes
3.15 IAF MD 7: Harmonisation of Sanctions
3.16 IAF MD 12: Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries
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 20: Generic Competence for AB Assessors: Application to ISO/IEC 17011
3.21 IAF ML 1: Guidance for the Exchange of Documentation among MLA Signatories for the Assessment of Conformity Assessment Bodies
3.22 IAF COVID FAQs 5-8, 10, 13, 17, 18, 26, 27, 31 and 34
3.23 ILAC/IAF JWG A-Series FAQ1

4. Definitions

4.1 Accreditation
A third-party attestation related to a Certification Body conveying formal demonstration of its competence to carry out specific audit and certification activities.

4.2 Renewal
Renewal is an official recognition of the fact that an organisation has maintained a quality system and competence in accordance with the conditions to remain accredited. Renewal takes place every 4 years after first time accreditation and is executed in the same way as for the first time accreditation.
4.3 Multisite-organisation
Multisite-organisation is defined as an organisation having an identified central function at which certain activities are planned, controlled or managed and a network of local offices or branches (sites) at which such activities are fully or partially carried out.

4.4 Critical locations
Critical locations are locations that will be included in the scope of accreditation and that perform key activities. Key activities are:

- Making offers
- Approval of governing documents
- Qualification of auditors
- Selection of auditors
- Decision on certification

4.5 Major non-conformities
Non-Conformities that affect the capability of the management system to achieve the intended results.

4.6 Minor non-conformities
Non-Conformities that do not affect the capability of the management system to achieve the intended results.

4.7 Assessment programme
Set of assessments consistent with a specific accreditation scheme that the accreditation body performs on a specific certification body during an accreditation cycle.

4.8 Assessment plan
Description of the activities and arrangements for an assessment.

4.7 Accreditation Body personnel
Internal or external individuals carrying out activities on behalf of the accreditation body.

4.8 Assessor
Person assigned by an accreditation body to perform, alone or as part of an assessment team, an assessment of a conformity assessment body.

4.9 Team Leader
Assessor who is given the overall responsibility for the management of an assessment.

4.10 Technical Expert
Person assigned by an accreditation body, 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).

4.11 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 field of activities can be accessed on website:


4.12 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 applications**

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<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
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<tbody>
<tr>
<td>Support Services</td>
<td>Registration of applications</td>
<td>MAURITAS filing system</td>
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<td></td>
<td>Establishes an application file for the applicant</td>
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6. **Initiation of the accreditation process**

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<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
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<tbody>
<tr>
<td>Director of MAURITAS</td>
<td>Forwards the application to Head of Quality and Certification Body (CB) Section.</td>
<td>F 4.01</td>
</tr>
<tr>
<td>Head of Quality and CB Section</td>
<td>Checks that the application is complete and that all information have been provided and all relevant questions have been answered with respect to the normative (Generic and Specific) document(s) applicable. Checks that applicant has also submitted the cross reference matrices. If application is not complete, gives feedback to the applicant about any need for completion of the application.</td>
<td>IAF MD20 F 4.01 Refer to Annex B of MAURITAS A9 F 4.10 F 4.11 or F4.13</td>
</tr>
<tr>
<td>Head of Quality and CB Section</td>
<td>Assigns a MAURITAS Staff to process the application.</td>
<td></td>
</tr>
<tr>
<td>Case Officer</td>
<td>At any point in the application or during the assessment process, if there is evidence of fraudulent behaviour, if the CB intentionally provides false information or if the CB conceals information, MAURITAS shall reject the application and terminate the assessment process. Prepares an assessment programme taking into consideration any cross-frontier activities and covering the scope of the applicant certification body together with the associated risks related to activities, location and personnel for the accreditation cycle. This assessment programme shall be reviewed and updated as and when required. Ensures that competence is assessed throughout the scope in the accreditation cycle for all IAF codes/Food Chain Categories of each Management System scheme, through the use of the various mechanisms including:</td>
<td>IAF MD12 IAF MD17 F 4.12</td>
</tr>
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</table>
i) office assessment activities;
ii) witnessing activities; and
iii) other assessment activities, as deemed necessary by MAURITAS.

Case Officer

In case of new applicant, fills in the Resource Review Form so as to ensure that MAURITAS has the required resources for this application.

Records the time schedule prior to each assessment so as to:
- Review its ability to carry out the assessment in terms of its own policy and procedures, its competence and the availability of the assessment team and decision makers.
- Review its ability to carry out the assessment in a timely manner.

Follows the steps in the section on ‘Resource Review’ below to carry out the resource review.

7. **Resource Review**

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<th>Responsibility</th>
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<th>Documents</th>
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</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Fills in the resource review form and records the time schedule for the next accreditation activity/ies.</td>
<td>F 1.09</td>
</tr>
</tbody>
</table>
| Case Officer   | Takes into consideration the duration of the assessment, when filling in the resource review form, based on the following factors: 
- The preliminary visit will be completed within a minimum of one (1) day. 
- The initial assessment/re-assessment of CB will be undertaken for a minimum duration of two (2) days (in case of office assessment). 
  *The number of days for the office assessment will be increased depending on:*
  a) complexity of the CB  
b) number of geographical locations of the CB activities  
c) the structure of the quality system  
d) the proposed scope(s) of accreditation  
e) where relevant, the combination of multi-standards for accreditation  
f) effective number of personnel involved within the scope of certification;  
g) confirmed and planned audit schedules and locations; |
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<tr>
<th>Case Officer</th>
<th>Finalises date and time for the assessment with the CB and the Assessors/Technical Experts.</th>
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</table>

**Case Officer**

When the assessment cannot be conducted in a timely manner, same shall be communicated to the CB.

When necessary, identifies new Team Leader, Assessors and/or Technical Experts.

When preparing for the assessment, the assessment team as a whole shall have:

- appropriate knowledge of the specific scope of accreditation and
- understanding sufficient to make a reliable assessment of the competence of the CB to operate within its scope of accreditation.

Note: Reference is made to the established timeline in Annex A.

**Case Officer**

Submits Resource Review to Head of Quality and CB Section for recommendation and to the Director for approval.

**Director of MAURITAS**

Evaluates and approves the resource review form for allocated resources and that the competence is sufficient for the applicant.

**Case Officer**

Requests all proposed members of the assessment team to declare any former, existing or envisaged link or competitive position between themselves/their parent organisation and the certification body to be assessed in case of document reviews, assessments, re-assessments and extension of scope.

Also, requests all proposed members of the assessment team to sign a declaration of confidentiality.
In the event that one or more of the proposed team member declares any interest or link, MAURITAS shall then review and evaluate the threat to impartiality and will perform a new resource review, if required. The process will be repeated with new proposed team members.

| Case Officer | Gives information (within 2 weeks) to the CB about:  
| | • Proposed assessment team including information about their organisation and background;  
| | • Cost estimate;  
| | • Time schedule.  
|  
| Note: The determination of the assessment durations is as determined during the resource review exercise.  
|  
| Finalises all the above-mentioned information with the accredited CB prior to carry out the assessment.  
| Reviews the Quality Documentation  
| Ensures that the CB is assessed for all activities in its scope of accreditation through the use of a combination of on-site assessments and other assessment techniques sufficient to provide confidence in conformity with the relevant accreditation criteria.  
|  
| Within 2 weeks of the initial/re-assessment date, all the above-mentioned information must be finalised with the CB prior to carrying out the assessment.  
| Applicant needs to:  
| • Give a written feedback for acceptance of the assessment team;  
| • Opportunity to lodge an objection to the appointment of any member of assessment team and give reason for same with supporting justifications  
|  
| Case Officer | Appoints new assessment team if they are not accepted by the CB, and recommends actions based on the CB’s reason. If the reason given is not considered to be valid by the Quality and CB Section, and local Assessors/Technical Experts are not available, the CB will have to bear the cost of using foreign Assessors/Technical Experts.  
|  
| Carries out necessary changes in the cost estimate and time schedule by new appointment of Team Leader, Assessors and/or Technical Experts.  
| Completes a new Resource Review for allocated Resources.  
| Submits to Head of Quality and CB Section for recommendation.  
| Clearly defines the assignment to the assessment team. |
8. Document review

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</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Carries out a resource review as per section on ‘Resource Review’ above.</td>
<td>F 1.09</td>
</tr>
<tr>
<td>Team Leader/Assessor(s)/Technical Expert(s) along with MAURITAS Staff</td>
<td>Review the documentation of the applicant with the relevant standard(s) and other requirements of accreditation within 3 months. The document review exercise shall be performed only once by the assessment team. Reviews relevant parts of the applicant’s documentation when necessary and reports to the Case Officer.</td>
<td>F 4.10, F 4.11, IAF MD20, F 4.02</td>
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</table>
| Team Leader/Assessor/Technical Expert along with MAURITAS Staff | Recommends which of the following actions should be taken, based on document review carried out:  
  a) the organisation is not in a position to proceed to preliminary visit; or  
  b) the organisation is ready for a preliminary visit; or  
  c) the organisation is ready for an initial assessment.  
In case the assessment team recommends not to proceed with preliminary visit of the CB, based on the non-conformities found during the document review, the results with justification will be reported in writing, along with the justifications, to the CB.  
In case the recommendation of the assessment team differs from the request of the CB with respect to preliminary visit, MAURITAS will then discuss with the CB so as to reach a mutually agreed way forward. | |
| Case Officer   | Submits the filled document review report to the Head of Section together with the recommendation of the assessment team. | F 4.02 |
Head of Quality and CB
Takes note of the document review report as well as the recommendation report of the assessment team.

Case Officer
Sends the report together with a covering letter to the applicant.

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<th>Responsibility</th>
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<tr>
<td>Case Officer</td>
<td>Follows steps in ‘Resource Review’ section and appoints new Assessors and/or Technical Experts if they are not accepted by the CB, and may recommend actions based on the CB’s reason. If the reason given is not considered to be valid by MAURITAS, and local Assessors/Technical Experts are not available, the CB will have to bear the cost of using foreign Assessors and/or Technical Experts.</td>
<td>F1.09</td>
</tr>
<tr>
<td>Case Officer</td>
<td>The following information is confirmed with the CB at least one week before the preliminary visit: • Updated Quality Documentation; • Proposed assessment team including information about their organisation and background. The assessment team will consist of a Team Leader and, where required, Assessors and/or Technical Experts for each specific scope to be assessed; • Cost estimate; • Time schedule.</td>
<td></td>
</tr>
<tr>
<td>Case Officer</td>
<td>Prior to the preliminary visit, requests all proposed members of the assessment team to declare any former, existing or envisaged link or competitive position between themselves/their parent organisation and the certification body to be assessed. Requests all proposed members of the assessment team to sign a declaration of confidentiality. In the event that one or more of the proposed team member declares any interest or link, the resource review process will be repeated with new proposed team members.</td>
<td>F 1.23</td>
</tr>
<tr>
<td>Case Officer</td>
<td>Provides the assessment team with relevant requirement documents, assessment plan, previous assessment records, if applicable, document review report and relevant documents and records of the applicant CB at least 1 week prior to the preliminary visit.</td>
<td>F 1.18    F4.02</td>
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9. Preliminary visit
### 10. Planning of initial assessment visit

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<th>Responsibility</th>
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<th>Documents</th>
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| **Case Officer** | When preparing for the assessment, shall ensure that:  
  - the assessment be planned based on preparedness of applicant;  
  - the planning be within the framework which are | IAF MD20  
  F 1.04  
  F 1.20  
  F 4.06  
  IAF MD20  
  MAURITAS A26  
  F 4.10  
  F 4.11 or F 4.13  
  F 1.20 |

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**Team Leader**

Carries out an Opening Meeting that sets the scene, and its purpose is to ensure that the CB management and staff understands how the Team Leader will proceed with the assessment.

**Assessors and/or Technical Experts along with MAURITAS Staff**

The preliminary visit is carried out over a one-day duration at the office of the CB by the Team Leader and if required Assessor(s)/Technical Expert(s) along with MAURITAS Staff will be appointed by MAURITAS.

**Assessment Team**

Ensures that, at any stage of the preliminary visit, does not provide guidance on how to implement the requirements of the relevant standard and avoid consultancy.

**Team Leader**

A Closing Meeting is held to present a summary of the results of the assessment, including the assessment findings and to inform the management, verbally, of the recommendations that the Team Leader will make to MAURITAS.

Forwards the report to the Case Officer within 2 weeks.

**Case Officer**

Informs the Head of CB and Quality Section and Director, MAURITAS about recommendation of the assessment team.

Evaluates the report and informs the applicant about status by issuing a letter to the CB on one of the following alternative conclusions:

- The applicant is ready for initial assessment;
- The applicant is ready for initial assessment after implementing corrective actions;
- Initial Assessment cannot be performed (provides justification).

Only one preliminary visit shall be carried out by MAURITAS per application.

MAURITAS will not issue to the CB any detailed checklist or documents that have been used during the course of the preliminary visit.
| Case Officer | Records the selection of geographical locations, if any. | IAF MD 1 |
| Case Officer | When preparing for the assessment, the assessment team as a whole shall have: | IAF MD 20  
| | • appropriate knowledge of the specific scope of accreditation and  
| | • understanding sufficient to make a reliable assessment of the competence of the CB to operate within its scope of accreditation.  
| | Needs to consider the risks associated with the activities, locations and personnel covered by the scope of accreditation for which the CB has applied.  
| | Follows steps in ‘Resource Review’ section to carry out resource review. | MAURITAS A25  
| Case Officer | Planning of initial assessment shall also be with respect to:  
| | • Request prior to the assessment, the updated Quality Documentation as well as complaints received, latest management review and internal audit reports.  
| | • Constitution of assessment team;  
| | • Liaising with the CB for arrangements (witnessing and office assessment);  
| | • Liaising with foreign Accreditation Body (if any);  
| | • Proposing dates of assessment and witnessing;  
| | • Agreeing on organisations to be witnessed;  
| | • Discussing on tentative plan for assessment, including covering all clauses of the relevant standard, and witnessing.  
| | Needs to also review and update the assessment programme accordingly to cover the activities to be assessed, locations, personnel and the assessment techniques used, including witnessing where appropriate. In cases where witnessing in not appropriate, needs to provide justification. | MAURITAS A28  
| Case Officer | Planning of office assessments are based on the following criteria:  
| | • The scope of the application;  
| | • Competence of CB lead auditors/auditors;  
| | • the CB’s overall performance and preliminary visit findings/previous office assessment report;  
| | • factors such as process complexity or legislation etc. which may influence the ability of the certified | F1.20  
| | | F4.07 |
organisation to demonstrate its ability to meet the intended outcomes of the Management System:
- feedback from interested parties including complaints about certified organizations;
- the results of the CB’s internal audits;
- changes in CB work patterns – growth of work within a specific region or technical area since last preliminary visit;
- number of clients within the CB’s scope of accreditation;
- CB’s auditor evaluation and approval process.

| Case Officer | The following information is provided at least one week before the initial assessment:  
  • Proposed assessment team including information about their organisation and background for carrying out the office assessment and the witnessing if applicable  
  • The assessment team will consist of a Team Leader and, where required, Assessors and/or Technical Experts for each specific scope to be assessed;  
  • Cost estimate;  
  • Time schedule.  
  The determination of the assessment durations is based on the scope of accreditation applied and MAURITAS previous experience with similar CB in completing similar assignments. |
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<td>IAF MD17</td>
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<th>Case Officer</th>
<th>In the event that one or more of the proposed team member declares any interest or link, the resource review process will be repeated with new proposed team members.</th>
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<td>F 1.23</td>
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<tr>
<th>Case Officer</th>
<th>Ensures during planning that witnessing of auditors be done for a representative number of staff of the CB</th>
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| | MAURITAS A24  
 MAURITAS A22  
 IAF MD17 |

| Case Officer | Is responsible that the assessment plan is adequately defined, including locations, personnel and activities as well as sufficient time to perform the assessment and covers all clauses of the relevant standard(s).  
 Is responsible for providing the following forms to the Team Leader (at least one week before assessment):  
  • Assessment plan  
  • Checklist for Assessors Pack ISO/IEC 17021-1  
  • Briefing Meeting with Assessors/Technical Experts  
  • Witness Assessment Report for Management Systems |
|---|---|
| | IAF MD20  
 F 1.18  
 F 1.15  
 F 4.03 |
- Non-Conformity report
- Summary report
- Team Leader’s Report from assessment of Certification Bodies for Management Systems
- Declaration of Confidentiality
- Attendance Sheet
- Agenda Opening Meeting
- Agenda Closing Meeting
- Previous Preliminary Visit Findings, if any
- Previous Audit report of the organisation to be witnessed, if applicable
- Relevant requirement documents including IAF documents and MAURITAS Regulations
- Quality Documentation, Complaints, Internal Audit and Management Review reports of the CB

Is responsible for providing the following forms to the Assessor/MAURITAS Staff accompanying Technical Expert (at least one week before assessment):
- Assessment plan
- Non-Conformity Report
- Team Leader’s Report from assessment of Certification Bodies for Management Systems
- Witness Assessment Report for Management Systems
- Previous Audit report of the organisation to be witnessed
- Relevant requirement documents including IAF documents and MAURITAS Regulations
- Quality Documentation.

| Case Officer | Forwards the assessment plan for the on-site assessment to the applicant at least one week prior to the assessment. | IAF MD20 |
| Assessors/Technical Experts | Carry out document review based on the Quality Documentation provided by the Case Officer prior to the assessment | F4.10, F4.11 or F4.13 |
| Assessors/Technical | Bring along, on the assessment visit, all the relevant | |
11. **Execution of assessment visit**

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<tr>
<td>Team Leader</td>
<td>Carries out a briefing session with assessment team so that they are aware of their duties during the assessment. Carries out an Opening Meeting that sets the scene, defines clearly the accreditation requirements, confirms the assessment plan and the scope of the assessment. The purpose of the Opening Meeting is to ensure that the certification body management and staff understand how the assessment team will proceed with the assessment.</td>
<td>F 1.15 F 1.01 IAF MD20</td>
</tr>
<tr>
<td>Team Leader, Assessors or Technical Experts along with MAURITAS Staff</td>
<td>Assess the following subjects based on the assessment plan: • All elements in the relevant standard; • All parts of the management system. Assess the main office and all geographical locations (if any) that are covered by the accreditation. The Assessment Team shall perform the initial assessment as per the assessment plan. The Team Leader shall inform MAURITAS in the event that the assessment team is not able to perform the initial assessment as per the assessment plan the reasons thereof. Analyse all relevant information and objective evidence gathered in order to determine the competence of the CB as determined through its conformity with the requirements of accreditation.</td>
<td>Relevant requirement of the standard(s), IAF MD (1, 4, 5, 13, 16, 20) F 4.10, F 4.11 or F 4.13, F 4.05, MAURITAS A24 MAURITAS A26</td>
</tr>
<tr>
<td>Assessors or Technical Experts along with MAURITAS Staff</td>
<td>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 shall report same to the relevant management level staff of MAURITAS (Assistant Accreditation Manager/Accreditation Manager/Director). 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.</td>
<td>F 1.21 F 4.05</td>
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### 12. Reporting of office assessment

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</tr>
</thead>
<tbody>
<tr>
<td>Team Leader</td>
<td>A Closing Meeting is held to present a summary of the results of the assessment, report on the findings identified during the assessment and to inform the management of the recommendations that the Assessment Team will make to MAURITAS. No matters shall be included in the formal presentation of findings that do not appear in the Recommendation Report.</td>
<td>F 1.04</td>
</tr>
<tr>
<td></td>
<td></td>
<td>F 4.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>F 4.06</td>
</tr>
</tbody>
</table>
| **12. Reporting of office assessment** | **Team Leader** shall at the closing meeting:  
  - Present a summary of the result of the assessment and the recommendation of the assessment team;  
  - Give the Certification Body representative a copy of the recommendation report and non-conformities, if any; (deadline for root cause analysis and corrections/corrective actions 3 months for initial assessment and 2 months for re-assessment).  
  
  The CB is provided an opportunity to seek clarification on the findings, if any, and their basis. | F 4.06    |
|                              |                                                                                                                                            | F 4.05    |
| Technical Expert along with | **Submit reports to the Team Leader within 3 weeks from assessment date for all assessments.**                                                                                                       | F 4.07    |
| MAURITAS Staff/Assessor     |                                                                                                                                                                                                     |           |
| Team Leader                  | **Submits report resulting from the assessment including the Assessor/Technical Expert’s report to the Head of CB and Quality section within 1 month from assessment date for all assessments.**  
  
  If the Team Leader is also the assessor, he/she shall submit one report covering both functions. | F 4.07    |
| Team Leader and assessor     | **The report shall include comments on competence as determined through conformity, the scope assessed and a description of the non-conformities. 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.**  
  
  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.  
  
  The implementation of the corrective actions shall be verified at the next visit. | F 4.07    |
13. **Witnessing**

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer / Head of Section</td>
<td>Follows steps in ‘Resource Review’ section</td>
<td>F1.09</td>
</tr>
</tbody>
</table>
|                                 | When deciding how many and which audits are to be witnessed, takes into account the following factors:  
|                                 | ▪ The scope of the application;  
|                                 | ▪ Competence of CB Lead Auditors/Auditors  
|                                 | ▪ the CB’s overall performance  
|                                 | ▪ factors such as process complexity or legislation etc. which influence the ability of the certified organisation to demonstrate its ability to meet the intended outcomes of the MS  
|                                 | ▪ feedback from interested parties including complaints about certified organizations  
|                                 | ▪ the results of the CB’s internal audits  
|                                 | ▪ 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  
|                                 | ▪ confidence in the CB’s auditor evaluation and approval process;  
|                                 | ▪ previous or other office or witnessing assessment reports, etc;  
|                                 | ▪ at least one witnessing activity is carried out in each technical cluster of each management system scheme.  
|                                 | ▪ 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.  
|                                 | Also plans witnessing in case of complaints, disputes or complaints against the CB.                                                                                                                                                                                                                                                                                                                                         | MAURITAS A22, MAURITAS A24, MAURITAS A25, MAURITAS A28, IAF MD17, F4.03, F4.07, IAF MD17 |
regulator feedback.

Ensures that the witnessing shall cover the whole audit and that witnessing of auditor be done for a representative number of staff of the CB

The number of witnessing will depend upon:
- The number and type/variations in the business sectors which are applied for;
- The certification scheme and scope of certification for which certification body is accredited;
- In what countries the certification body operates and has key activities.

Evaluates the necessity for competence in the assessment team in addition to the Team Leader:
- For certification of quality management system depending on how special the business area is;
- For EMS normally with participation of personnel with environmental competence.

Participation in witnessing shall be limited as much as possible, but not affecting required competence in the assessment team.

Records witnessing based on the agreement with the applicant.

Full on-site audits shall be witnessed unless objectives for a particular activity can be satisfied with a partial witnessing.

<table>
<thead>
<tr>
<th>Team Leader and assessor</th>
<th>Receive the following documentation from CB prior to the witnessing:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>copy of the previous report on the certified company for the last audit if a surveillance audit or a renewal shall be witnessed;</td>
</tr>
<tr>
<td></td>
<td>copy of audit programme for the certified organisation if a surveillance audit or a re-certification shall be witnessed;</td>
</tr>
<tr>
<td></td>
<td>copy of audit plan;</td>
</tr>
<tr>
<td></td>
<td>copy of audit team competence records and justification for calculation of audit time.</td>
</tr>
</tbody>
</table>

Carry out the witnessing as per section on ‘Performance of witnessing’ in MAURITAS A18. All information collected during the witnessing is treated as confidential.

Give feedback on certification body’s performance, including any assessment findings/non-conformities, to the audit team when the witnessing is completed, in the absence of the certification body’s clients.

Agree on the time limit for closing of eventual non-conformities, if any.

The assessor(s) submit witnessing reports to the Team.
Leader within 3 weeks from the date of witnessing. 

Team Leader forwards the witnessing report to the Case Officer within 1 month from date of assessment.

**F 4.03**

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head of CB and Quality section</td>
<td>Reviews and approves the witnessing report from the Team Leader and Assessor forwards the report to the Case Officer.</td>
<td><strong>F 4.03</strong></td>
</tr>
</tbody>
</table>
| Case Officer                                | Forwards the witnessing report from the Team Leader and Assessor to the applicant within one month from assessment date and reminds the applicant about the right to complain on actual errors in the reports. 

It must be ensured that the responsible person in the certification body receives the witnessing reports. | **F 4.03** |
| Support Services                            | Files all documents related to assessment and witnessing.                                                          |           |

### 14. Clearance of proposed Corrective Actions

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
</table>
| Case Officer                                 | Receives from the organisation proposed corrective actions and root cause analysis carried out for all non-conformities within the agreed time limit (*1 month for initial assessment and 2 weeks for re-assessment*).  

Forwards copies of non-conformities and proposed corrective actions to the respective Assessors/Technical Experts asking for review to determine if proposed actions and the root cause analysis carried out are sufficient and appropriate and their feedback. | **F 4.05** |
| Team Leader/Assessor/Technical Expert along with MAURITAS Staff | Within 1 week from date of receipt of proposed corrective action and root cause analysis, forwards to the Case Officer a recommendation about acceptance of each proposed corrective action and the root cause analysis. 

Alternatively, gives feedback in writing to the Case Officer about non-conformities where proposed corrective actions are not acceptable. |           |
| Case Officer                                 | Acknowledges with the Assessor/Technical Expert about non-conformities where proposed corrective actions/root cause analysis are not acceptable. 

Gives feedback to the applicant about unsatisfactory proposed corrective actions/root cause analysis and |           |
gives the applicant, in writing, a new deadline for corrective actions (maximum 1 week).

Head of CB and Quality section Evaluates actions towards the applicant if proposed corrective actions/root cause analysis have not been made for all non-conformities within 2 months in case of initial assessment and 1 month in case of re-assessment.

15. Closing of non-conformities

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Receives from the organisation a description of implemented corrective actions for all non-conformities within the agreed time limit (<strong>3 months for initial assessment and 2 months for re-assessment</strong>). Forwards copies of non-conformities and corrective actions to the respective Team Leader/Assessors/Technical Experts along with MAURITAS Staff asking for feedback on acceptance of the corrective actions.</td>
<td>IAF MD20</td>
</tr>
<tr>
<td>Case Officer</td>
<td>Convenes the Team Leader/Assessors/Technical Experts along with MAURITAS Staff where necessary for a meeting to review the technical non-conformities and the corrective actions and asking for feedback on the corrective actions.</td>
<td></td>
</tr>
</tbody>
</table>
| Team Leader/Assessor/Technical Expert along with MAURITAS Staff | Closes the nonconformities based on the following judgement:  
  • If the nonconformity shall be closed based on satisfactory descriptions of corrective actions and objective evidence of effective implementation of actions taken;  
  • If the nonconformity shall be closed after a visit to verify the implementation of the corrective action;  
  All nonconformities shall be verified at the next visit. |           |
| Team Leader/Assessor/Technical Expert along with MAURITAS Staff | Within 2 weeks from date of receipt of corrective action, forwards to the Case Officer a recommendation about closing of each nonconformity. Alternatively, gives feedback in writing to the Case Officer about nonconformities where corrective actions are not acceptable. |           |
| Case Officer                          | Acknowledges with the Team Leader/Assessors/Technical Experts along with MAURITAS Staff about non-conformities where                                                                                     |           |
corrective actions are not acceptable.

**Case Officer**
Gives feedback to the applicant about unsatisfactory corrective actions and gives the applicant in writing a new deadline for corrective actions (maximum one month).

**Head of CB and Quality section**
Evaluates actions towards the CB if corrective actions have not been made for all non-conformities within 3.5 months after the initial assessment and 2.5 months after the re-assessment.

### 16. Accreditation Report and Decision Making

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Positive recommendation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Team Leader. Case Officer in case Team Leader is external.</td>
<td>Prepares and submits an accreditation report, based on the recommendation of the assessment team, to the team for review and comments. After amendments, Team Leader submits the accreditation report to Head of CB and Quality section for review, if Team Leader is not the Head of CB and Quality (within 1.5 months from clearance of all non-conformities). Submit the finalised accreditation report to Registry for further processing.</td>
<td></td>
</tr>
<tr>
<td>Support services</td>
<td>Registration of the accreditation report and submission to assessment team for signature.</td>
<td></td>
</tr>
<tr>
<td>Accreditation Committee</td>
<td>Makes decision about accreditation (granting and renewal) based on the recommendation presented by the Director of MAURITAS without undue delay.</td>
<td></td>
</tr>
<tr>
<td>Case Officer</td>
<td>Gives the new applicant a new accreditation number (for granting of accreditation).</td>
<td></td>
</tr>
<tr>
<td>Director of MAURITAS</td>
<td>Based on the decision to grant or renew accreditation, the Director of MAURITAS signs the accreditation certificate and schedule and gives it back to MAURITAS Staff to forward to CB.</td>
<td></td>
</tr>
<tr>
<td>Case Officer</td>
<td>Ensures that an updated copy of the accreditation schedule and certificate is uploaded on the MAURITAS website. Requests whether newly accredited CB wishes to make use of the Combined Mark or MAURITAS symbol solely. Prepares the relevant Contract Agreement stating the conditions for use of the Combined Mark/MAURITAS symbol. On receipt of the signed</td>
<td>F 1.25</td>
</tr>
</tbody>
</table>
contract agreement, forwards a soft copy of the Combined Mark/MAURITAS Symbol to the CB. Prior to using same, the CB shall submit to MAURITAS a proof of print of the material for approval.

| Case Officer | Makes records about accreditation. Forwards the tentative assessment dates for the four year-accreditation cycle starting from date of grant of accreditation. Also forwards the accreditation certificate, accreditation schedule and contract agreement to the CB accompanied by a letter informing the CB about decision without undue delay. After signature of contract, forwards the accreditation symbol to the CB. In case of re-assessment and whenever there have been changes, requests CB to return current original certificate and/or schedule to MAURITAS and take new certificate and/or schedule. Ensures that an updated copy of the accreditation schedule and certificate is uploaded on the MAURITAS website. |
| F1.13 |

**Negative recommendation**

| Case Officer | Drafts a letter for the applicant including the reason for negative recommendation from the assessment team and gives the draft letter to the Head of CB and Quality section, together with the accreditation report. The letter shall include the CB’s right to appeal against the decision of the Accreditation Committee. |
| | |

| Head of CB and Quality section | Evaluates the draft letter and the accreditation report and submits his recommendation to the Director of MAURITAS with the letter. |
| | |

| Accreditation Committee | Makes decision about accreditation (granting and renewal) based on the recommendation presented by the Director of MAURITAS. |
| | |

| Director of MAURITAS | Based on the decision about the recommendation for refusal, the Director of MAURITAS signs the letter to the CB. |
| | |

| Support Services | Makes records about the decision Forwards the letter to the CB without undue delay. |
| | |

**Limited granting of accreditation**

| Case Officer | Forwards the accreditation schedule and certificate to the CB and gives information about the limitation compared with the application and with information about the right to appeal against the decision of the Accreditation |
| | |
Committee.
Ensures that an updated copy of the accreditation schedule and certificate is uploaded on the MAURITAS website.

### Deferred decision on accreditation

<table>
<thead>
<tr>
<th>Role</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team Leader, MAURITAS Staff in case Team Leader is external</td>
<td>Prepares and submits an accreditation report, based on the recommendation of the assessment team, to the Head of CB and Quality section and to the Director of MAURITAS for review. (within 1.5 months from clearance of non-conformities)</td>
</tr>
</tbody>
</table>

Accreditation Committee

<table>
<thead>
<tr>
<th>Role</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation Committee</td>
<td>Makes decision about accreditation (granting and renewal) based on the recommendation presented by the Director of MAURITAS. However, Accreditation Committee may defer the decision on accreditation at a later stage until the applicant submits further information and evidence of competence.</td>
</tr>
</tbody>
</table>

### Post Expiry

<table>
<thead>
<tr>
<th>Role</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accreditation Committee/Director (in case of suspension)</td>
<td>When decisions are taken for renewal, ensures that there are no laps/discontinuation in the accreditation cycle and therefore, applies the requirement listed in the section on ‘Decisions’ in MAURITAS P1.</td>
</tr>
</tbody>
</table>

### Post decision

<table>
<thead>
<tr>
<th>Role</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Prepares letter to be sent to CB informing about decision and right to appeal.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Role</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Updates the assessment programme taking into consideration any cross-frontier activities and covering the scope of the applicant certification body 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. 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) on a yearly basis.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Role</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Ensures that competence is assessed throughout the scope in the accreditation cycle for all IAF codes of each Management System scheme.</td>
</tr>
</tbody>
</table>

When the CB has demonstrated sufficient experience and performance for an enhanced programme, at least one witnessing activity in each technical cluster of each MS scheme shall be performed, to be complemented with other assessment activities to guarantee that each technical cluster is assessed during two successive accreditation cycles. The witnessing frequency established for the 1st cycle should be reinstated if significant changes occur in the CB’s auditor.
qualification process, auditing practices or results and audit personnel.

### 17. Publishing and internal registration of accreditation

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Makes arrangements for publication and internal registration of accredited certification bodies on the MAURITAS website.</td>
<td></td>
</tr>
</tbody>
</table>

### 18. Additional accreditation with foreign Accreditation Body

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head of CB and Quality Section</td>
<td>If certification body is requesting accreditation with a new Accreditation Body, seeks the consent from the certification body for the exchange of documentation between the ABs.</td>
<td>IAF ML1</td>
</tr>
</tbody>
</table>

### 19. Re-Assessment

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>CB and Quality Section</td>
<td>Is responsible for analysing trends, if any, in non-conformities raised during the previous 3 assessment visits at the CB for planning of its re-assessment in an accreditation cycle. Ensures witnessing is carried out for all accredited IAF scopes that are mandatory to be witnessed during an accreditation cycle.</td>
<td>IAF MD 17</td>
</tr>
<tr>
<td>Case Officer</td>
<td>Reviews the assessment programme taking into consideration any cross-frontier activities and covering the scope of the certification body together with the associated risks related to activities, location and personnel for the accreditation cycle. Factors such as knowledge obtained by MAURITAS about the CB’s management system and activities and the performance of the CB is also considered when reviewing the assessment programme.</td>
<td>IAF MD 12 MAURITAS A22 MAURITAS A24</td>
</tr>
<tr>
<td>Case Officer</td>
<td>Ensures that the CB is assessed for all activities in its scope of accreditation for which it is accredited through the use of a combination of on-site assessments and other assessment techniques sufficient to provide confidence in conformity with the relevant accreditation criteria.</td>
<td></td>
</tr>
<tr>
<td>Case Officer</td>
<td>Plans the assessment such that the assessment team assesses the performance of a sample of certification activities representative of the scope of accreditation of the CB. The sample needs to cover a sample of locations and personnel to determine the competence of the CB activities in its scope of accreditation for which it has been accredited.</td>
<td>MAURITAS A22 MAURITAS A24 MAURITAS A26</td>
</tr>
<tr>
<td>-------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------</td>
</tr>
</tbody>
</table>

Case Officer

Planning starts at least 2 months prior to the re-assessment date taking into consideration the information gathered from the assessments performed during the accreditation cycle.

The assessment team as a whole shall have:
- appropriate knowledge of the specific scope of accreditation and
- understanding sufficient to make a reliable assessment of the competence of the CB to operate within its scope of accreditation.

Needs to consider the risks associated with the activities, locations and personnel covered by the scope of accreditation for which the CB is accredited.

Needs to develop an assessment plan to cover the activities to be assessed, locations, personnel and the assessment techniques used, including witnessing where appropriate. In cases where witnessing in not appropriate, needs to provide justification.

Carries out resource review as per section ‘Resource Review’.

| Case Officer | Planning of re-assessment activities is also considered with respect to:  
|--------------|----------------------------------------------------------------------------------------------------------------------------------|
|              | - Request of the updated Quality Documentation as well as complaints, latest management review and internal audit reports.  
|              | - Request of the filled cross reference matrices of the CB  
|              | - Constitution of assessment team 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 dates of assessment and witnessing;  
|              | - Agreeing on organisations to be witnessed;  
|              | - Discussing on tentative plan for assessment, including covering all clauses of the relevant standard and witnessing.  
|              | The re-assessment shall be carried out within 1 month of its scheduled date and shall cover all the requirements of the relevant standard(s) for which the CB is accredited. | F4.10, F4.11 or F4.13 |
|              |                                                                                                                                  | F1.09 |

<table>
<thead>
<tr>
<th>Case Officer</th>
<th></th>
<th>MAURITAS A22 MAURITAS A24 MAURITAS A25 MAURITAS A28</th>
</tr>
</thead>
</table>
For subsequent renewals, the accreditation is valid for 4 years from the date of grant of accreditation.

For accreditations that cover more than 1 geographical location, a renewal shall as a minimum, include assessment of the locations that have not been assessed earlier during the accreditation period.

<table>
<thead>
<tr>
<th>Case Officer</th>
<th>The following information is also provided at least one week before the re-assessment:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Proposed assessment team including information about their organisation and background;</td>
</tr>
<tr>
<td></td>
<td>- Cost estimate;</td>
</tr>
<tr>
<td></td>
<td>- Time schedule.</td>
</tr>
</tbody>
</table>

Note: The determination of the assessment durations is as determined during the resource review exercise.

<table>
<thead>
<tr>
<th>Case Officer</th>
<th>Requests all proposed members of the assessment team to declare any former, existing or envisaged link or competitive position between themselves/their parent organisation and the certification body to be assessed.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In the event that one or more of the proposed team member declares any interest or link, the resource review process will be repeated with new proposed team members.</td>
</tr>
<tr>
<td></td>
<td>Also, requests all proposed members of the assessment team to take a confidentiality pledge.</td>
</tr>
</tbody>
</table>

| Case Officer | Informs the CB about the proposed assessment team composition and organisations to which they belong to, for carrying out the office assessment and the witnessing if applicable (at least one week before assessment). |

<table>
<thead>
<tr>
<th>Team leader/ Assessor/ MAURITAS Officer accompanying the Technical Expert</th>
<th>Reviews the Quality Documentation as well as latest management review, complaints and internal audit reports prior to the office assessment.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>F 4.10</td>
</tr>
<tr>
<td></td>
<td>F4.11 or F4.13</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Case Officer</th>
<th>Is responsible that the assessment plan is adequately defined, including locations, personnel and activities as well as sufficient time to perform the assessment and covers all clauses of the relevant standard(s).</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Is responsible for providing the following forms to the Team Leader (at least one week before assessment):</td>
</tr>
<tr>
<td></td>
<td>- Assessment plan</td>
</tr>
<tr>
<td></td>
<td>- Checklist for Assessor Pack ISO/IEC 17021-1</td>
</tr>
<tr>
<td>Case Officer</td>
<td>Sends updated Quality Documentation as well as latest management review and internal audit reports to assessment team for review.</td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Team Leader/ Assessor/ MAURITAS Officer accompanying the Technical Expert</td>
<td>Review the updated Quality Documentation of the Certification Body as well as latest management review and internal audit reports and return same, if hard copy, to MAURITAS.</td>
</tr>
<tr>
<td>Team Leader and Assessor and/ or Technical Expert</td>
<td>Carry out re-assessment activities on-site (office assessment and witnessing) in accordance with the procedure similar to first time accreditation. Handle the different categories of non-conformities in accordance with MAURITAS A18.</td>
</tr>
</tbody>
</table>
Handle the report writing and decision making for renewal of accreditation in accordance with the relevant sections in MAURITAS A9.

**Case Officer**
Together with the Director of MAURITAS, evaluates acceptance of a prolongation of deadline, if any, for presentation of satisfactory corrective actions, however no longer than until two months before the accreditation expires.

Evaluates actions if the corrective actions for the same non-conformity have been presented several times (more than 3 times), that can jeopardise MAURITAS’ integrity.

**Director of MAURITAS**
Evaluates if the accreditation can be renewed for 6 months even if not all non-conformities are closed.

### 20. Documents returned by assessors/technical experts

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer/Support Services</td>
<td>Ensures that documents given to the Assessors and Technical Experts in hard copy are taken care of in a proper way using the following alternatives:</td>
<td>IAF MD20</td>
</tr>
<tr>
<td></td>
<td>• External Assessors and/or Technical Experts return documents to MAURITAS, if any, which are then returned to the organisation;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Shredding</td>
<td></td>
</tr>
<tr>
<td></td>
<td>In case of soft copies, sends an email to the assessment team to request deletion of soft copies after all corrective actions have been cleared.</td>
<td></td>
</tr>
</tbody>
</table>

### 21. Transition with respect to a new accreditation standard

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Be responsible to plan the assessment process as per the transition plan developed by MAURITAS. The transition plan is also available on MAURITAS website.</td>
<td>IAF MD20</td>
</tr>
<tr>
<td></td>
<td>Be responsible to follow the accreditation process with the accredited CBs.</td>
<td></td>
</tr>
</tbody>
</table>

### 22. Reporting of major non-conformities after assessments
23. **Assessments carried out in other countries**

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Plans assessments of foreign CBs to be performed according to this procedure and IAF MD12</td>
<td>IAF MD12</td>
</tr>
</tbody>
</table>

24. **Invoicing**

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Invoices the applicants and accredited organisations.</td>
<td></td>
</tr>
</tbody>
</table>

25. **Lack of progress in the application process**

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Activity</th>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Officer</td>
<td>Agrees with the Director of MAURITAS if the application shall be dismissed when there has not been any progress in the accreditation process in the last 2 years.</td>
<td></td>
</tr>
</tbody>
</table>
26. Related Forms

- Resource Review Form, F 1.09
- Team Leader/Assessor/Technical Expert Monitoring Checklist – Certification bodies, F1.27
- Contract Agreement between CAB and MAURITAS, F 1.13
- Combined Mark Contract Agreement – Certification Body, F 1.25
- Briefing Meeting with Assessors/Technical Experts, F1.15
- Contract Agreement for the provision of independent assessor/technical expert services, F 1.07
- Checklist for Assessor’s pack ISO/IEC 17021-1, F1.18
- Preliminary Visit Findings Form, F1.20
- Declaration of Confidentiality, F 1.02
- Attendance Sheet, F 1.03
- Agenda Opening Meeting, F 1.01
- Agenda Closing Meeting, F 1.04
- Declaration of impartiality, F 1.23
- Application for Accreditation of certification body for management systems certification, F 4.01
- Report from Document Review, F 4.02
- Non-Conformity report, F 4.05
- Recommendation Report, F 4.06
- Team Leader’s Report from assessment of Certification Bodies for Management Systems, F4.07
- Witness Assessment Report of Management Systems, F 4.03

Appendix A: Amendment Table

<table>
<thead>
<tr>
<th>SN</th>
<th>Section</th>
<th>Amendment</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>
Annex A

TIMELINE FOR INITIAL ASSESSMENT FOR CERTIFICATION BODIES

Application (Refer to Section 5)
- Submission of completed application, relevant documentation and application fee
- Registration of Application

REVIEW OF APPLICATION (Refer to Section 6)
- Application is reviewed

Application complete?

No

Feedbacks are given to the applicant

RESOURCE REVIEW (Refer to Section 7)
- A resource review, along with cost estimate, is performed and communicated to applicant (Within 2 weeks of the initial assessment date)

DOCUMENT REVIEW (Refer to Section 8)
- Document review is carried out (Within 3 months of receipt of application)

PRELIMINARY VISIT (Refer to Section 9)
- A preliminary visit is carried out

INITIAL ASSESSMENT (Refer to Section 10, 11, 13)
- Initial assessment is planned (based on preparedness of applicant)
- Initial assessment is carried out
- Assessment team makes recommendation on accreditation

REPORTING OF ASSESSMENT/WITNESSING AUDIT (Refer to Section 12, 13)
- The A submits a report to the TL (Within 3 weeks from assessment date)
- The TL submits a report to the Head of CB and Quality section (within 1 month from assessment date)
- A report is submitted to the applicant (Within one month from assessment date)

Contd.
CLOSING OF NON-CONFORMITIES (Refer to Section 14, 15)
- Non-conformities raised are addressed by the applicant (Within 1 month from assessment date for Proposed and 3 months from assessment date for Implemented)
- New deadline for unsatisfactory corrective actions is given (A maximum of 1 (one) more month)
- Recommendation from assessment team about closing of each non-conformity (Within 2 weeks from date of receipt of corrective actions by assessment team from MAURITAS)

DECISION ON ACCREDITATION (Refer to Section 15)
- An accreditation report is submitted to the Head of CB and Quality section and to the Director (Within one and a half months from clearance of all non-conformities)
- The Accreditation Committee reviews the recommendation presented by the Director and makes decision on accreditation

Decision of Accreditation Committee?
- Positive
- Negative

(Refer to Section 16)
- The applicant is informed in writing about the decision of Accreditation Committee
- Accreditation documents and symbol are forwarded to the CB
- Accreditation is valid for a period of 4 years

REGISTRATION OF ACCREDITATION (Refer to Section 17)
- New accredited CAB is registered on the MAURITAS website

RENEWAL OF ACCREDITATION (Refer to Section 19)
- Renewal activities are planned (At least 2 months prior to Re-assessment)
- Renewal activities are carried out in accordance with the procedure for first time accreditation

(Refer to Section 16)
- MS handles the negative conclusions as per MAURITAS A9
- Any appeals by the CB are handled as per MAURITAS P2
TIMELINE FOR RE-ASSESSMENT OF CERTIFICATION BODIES

PLANNING OF RE-ASSESSMENT/WITNESSING (Refer to Section 13, 19)
- Dates of re-assessment visits are calculated from the date of granting of accreditation
- A resource review plan is prepared (Within 2 months prior to the visit)
- Re-Assessment/witnessing are planned (Within 2 months prior to the visit)

EXECUTION OF RE-ASSESSMENT/WITNESSING (Refer to Section 13, 19)
- Re-assessment/witnessing is carried out
- Re-assessment team makes recommendation on accreditation

REPORTING OF RE-ASSESSMENT (Refer to Section 12, 13)
- A report which includes a description of non-conformities raised is submitted to the accredited CB (Within one month from assessment date)

Recommendation for renewal of accreditation?

NO

MAURITAS handles the recommendation for partial/full suspension of accreditation as per MAURITAS Procedure

YES

MAURITAS handles the negative conclusions as per MAURITAS Procedures and reminds the applicant about the right to appeal

Any appeals by the CB are handled as per MAURITAS Procedure

CLOSING OF NON-CONFORMITIES (Refer to Section 15)
- Non-conformities raised are addressed by the CB (Within 2 weeks from re-assessment date for proposed CAs and 2 months from re-assessment date for implemented CAs)
- New deadline for unsatisfactory corrective actions is given (A maximum of 1 more month)
- Recommendation from assessment team about closing of each non-conformity (Within 2 weeks from date of receipt of implemented corrective actions by assessment team from MAURITAS)

DECISION ON RENEWAL OF ACCREDITATION (Refer to Section 19)
- The AC reviews the recommendation of the assessment team presented by the Director and makes decision on accreditation

Decision of Accreditation Committee?

Negative

MAURITAS handles the negative conclusions as per MAURITAS Procedures and reminds the applicant about the right to appeal

Any appeals by the CB are handled as per MAURITAS Procedure

Positive

The CB is informed in writing about the decision of Accreditation Committee and is forwarded any relevant documents

MS updates the respective client files
ANNEX B

LEVELS OF NORMATIVE DOCUMENTS USED BY MAURITAS (CB)

MAURITAS shall base itself on the relevant levels of the IAF MLA structure when reviewing applications and issuing accreditation certificates and schedules for the Certification Body Accreditation Scheme. The levels of the IAF MLA structure (henceforth referred to as ‘Level(s)’) to be considered by MAURITAS shall be:

Level 3 - IAF endorsed generic accreditation normative document used by MAURITAS to assess the CB competence for each accreditation activity. For example:
- For management system certification - ISO/IEC 17021-1
- For product certification - ISO/IEC 17065

Level 4 – IAF endorsed sector specific normative documents, used by MAURITAS, in combination with the generic normative document listed in Level 3 to assess the CB competence in the relevant sector. For example:
(a) Normative document to be used in combination with ISO/IEC 17021-1:
- For certification of Food Safety Management Systems (FSMS) - ISO/TS 22003;
(b) Normative documents to be used in combination with ISO/IEC 17065:
- GLOBALG.A.P. Integrated Farm Assurance General Regulations

Level 5 – IAF endorsed conformity assessment normative document used by CBs. For example:
(a) Normative document used by Management System Certification Bodies:
- For certification of Quality Management Systems (QMS) - ISO 9001;
- For certification of Environmental Management Systems (EMS) - ISO 14001;
- For certification of Food Safety Management Systems (FSMS) - ISO 22000;
(b) Normative document used by Product Certification Bodies:
- GLOBALG.A.P. IFA Control Points and Compliance Criteria