



MAURITAS

A9

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

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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 of the processes associated with handling of applications for accreditation and for the preliminary visit, initial assessment and re-assessment of Certification Bodies (CBs).

2. Scope and Responsibility

2.1 This procedure sets out how MAURITAS will process applications for accreditation, preliminary visit, initial assessment and re-assessment of CBs, in 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.

2.2 Procedure for Assessments and Extensions of scope for accredited CBs are described in MAURITAS A18. 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 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 **ISO/IEC 17011** : General requirements for accreditation bodies accrediting conformity assessment bodies.
- 3.7 **MAURITAS A Series documents**
- 3.8 **MAURITAS G Series documents**
- 3.9 **MAURITAS R Series documents**
- 3.10 **IAF MD 1** : IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization
- 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 audit and certification 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 satisfactory performed.

4.4 Renewal

Renewal is an official recognition of the fact that a CB has maintained a Management 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.

4.5 Multisite-organisation

Multisite-organisation is an organisation having an identified central function at which certain activities are planned, controlled or managed and a network of other local offices or branches (sites) at which such activities are fully or partially carried out.

4.6 Critical locations

Critical locations are locations that will be included in the scope of accreditation and are where key activities are carried out. Key activities are:

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

4.7 Major nonconformities

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

4.8 Minor nonconformities

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

4.9 Assessment programme

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

4.10 Assessment plan

Description of the activities and arrangements for an assessment

4.11 MAURITAS personnel

Internal or external individuals carrying out activities on behalf of MAURITAS

4.12 Assessor

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

4.13 Team Leader

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

4.14 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).

4.15 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 lists 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>

4.16 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

S.N	Responsibility	Activity	Documents
5.1	Registry	Registers application for accreditation by CB on the application form and forwards same to the Director, MAURITAS	F 4.01

6. Initiation of the accreditation process

S.N	Responsibility	Activity	Documents
6.1	Director of MAURITAS	Forwards the application form to Head of Quality and CB Section.	F 4.01
6.2	Head of Quality and CB Section	<p>Reviews that the application is complete and all information has been provided by the CB.</p> <p>Reviews that all relevant questions have been answered with respect to the normative (Generic and Specific) document(s) applicable.</p> <p>Checks that applicant has also submitted and correctly completed the applicable cross reference checklist(s).</p> <p>If application is not complete, gives feedback to the applicant about any need for completion of the application.</p> <p>Requests the Registry to open an application file for the applicant.</p> <p>At any point in the application or during the assessment process, if there is evidence of fraudulent behaviour or if the CB intentionally provides false information or if the CB conceals information, MAURITAS shall reject the application and terminate the assessment process.</p>	<p>F 4.01</p> <p>Annex J of QAM1</p> <p>F 4.10 / F 4.11 / F 4.16 / F 4.17</p> <p>IAF MD7 MAURITAS A29</p>
6.3	Head of Quality and CB Section	Assigns a Case Officer to process the application.	
6.4	Case Officer	<p>Follows up with the CB for payment of applicable application fees, if not yet paid.</p> <p>Prepares an assessment programme for each Management System scheme applied for, taking into consideration any cross-frontier activities and covering the scope of the applicant CB, together with the associated risks related to activities, location and personnel for the accreditation cycle.</p>	<p>IAF MD12 F 4.18</p>
6.5	Head of Quality & CB Section CB Section Staff	<p>This assessment programme shall be reviewed and updated as and when required.</p> <p>Ensures that competence is assessed throughout the scope in the accreditation cycle for all IAF codes/Food Chain Categories/ISMS scope of each Management System scheme, through the use of the various mechanisms including:</p> <ul style="list-style-type: none"> (i) Office Assessment activities; (ii) Witnessing Assessment activities; and (iii) Other Assessment activities, as deemed necessary by MAURITAS. 	<p>F 4.18</p> <p>IAF MD17</p>

6.6	Case Officer	<p>In case of new applicant, carries out a preliminary resource review exercise so as to ensure that MAURITAS has the required resources for this application.</p> <p>Records the time schedule for each proposed assessment so as to determine the ability of MAURITAS to carry out each assessment in a timely manner as per its own policy and procedures, its competence and the availability of the Assessment Team and decision makers.</p> <p>Follows the steps in the section on 'Resource Review' to carry out the resource review.</p>	F 1.09 Annex A of MAURITAS A9
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7. Resource Review

S.N	Responsibility	Activity	Documents
7.1	Case Officer	Fills in the resource review form and records the duration of the accreditation activity/ies.	F 1.09
7.2	Head of Quality & CB Section CB Section Staff	<p>Takes into consideration the duration of the assessment, when filling in the resource review form, based on the following factors:</p> <ul style="list-style-type: none"> - The preliminary visit will be completed within a minimum duration of one (1) day. - The initial assessment/re-assessment will be undertaken for a minimum duration of two (2) days (in case of Office Assessment). - For witnessing assessments, the minimum number of days for witnessing a particular IAF code/food chain category/ISMS scope, for a given CB client, shall be the same as the man days determined by the CB in compliance with IAF MD 5 or ISO 22003-1 or ISO/IEC 27006-1. - MAURITAS previous experience with similar CB in completing similar assignments <p>The following factors are also considered when planning for the duration of an office assessment:</p> <ol style="list-style-type: none"> 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; h) audit time determination and justification to the client's organization; i) number of qualified auditors (internal and external) involved in the relevant certification schemes; j) number of certified companies; and k) assessment/auditing techniques. 	<p>IAF MD 5 ISO 22003-1 ISO/IEC 27006-1 MAURITAS A22</p> <p>IAF MD 17 IAF MD 16</p>
7.3	Case Officer	<p>Finalises date and time for the assessment with the CB and the Assessment Team.</p> <p>When the assessment cannot be conducted in a timely manner, same shall be communicated to the CB.</p>	Annex A of MAURITAS A9

7.4	Head of Quality & CB Section CB Section Staff	When preparing for the assessment, the Assessment Team as a whole shall have: - appropriate knowledge of the specific scope of accreditation to be assessed - understanding sufficient to make a reliable assessment of the competence of the CB to operate within its scope of accreditation.	MAURITAS A2, A3, A24, A25, A28 IAF MD 13 IAF MD 16 IAF MD 17
7.5	Case Officer	Submits the resource review form to Head of Quality and CB Section for recommendation and then to the Director for approval.	F 1.09
7.6	Director of MAURITAS	Evaluates and approves the resource review form for allocated resources and the adequacy of competence of the Assessment Team.	F 1.09
7.7	Case Officer	Requests all proposed members of the Assessment Team and any observers to declare any former, existing or envisaged link or competitive position between themselves/their parent organisation and the CB to be assessed prior to document reviews, assessments, re-assessments, witnessing and extension of scope. Also, requests all proposed members of the Assessment Team and any observers to sign a declaration of confidentiality. In the event that one or more of the proposed team members or observer 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 resource review process will be repeated with new proposed team members or observers, if any.	F 1.23 F1.02
7.8	Case Officer	Gives information (within 2 weeks of the assessment date) to the CB about: - Proposed Assessment Team and any observers including information about their organisation and background; The Assessment Team will consist of a Team Leader and, where required, Assessors for each certification scheme to be assessed for an office assessment; Technical Experts may also be used in witnessing assessments for the specific scope to be assessed; Observers, if any, accompanies the Team Leader or Assessor in an office assessment and shall not influence the conduct of or participate in the assessment. - Cost estimate; - Time schedule & assessment plan Note: The determination of the assessment duration is as determined during the resource review exercise. Within 2 weeks of the document review exercise/preliminary visit/initial/re-assessment/witnessing assessment date, all the above-mentioned information must be confirmed with the CB prior to carrying out the document review / preliminary visit / assessment.	F 4.19

7.9	Case Officer	Ensures that the CB: <ul style="list-style-type: none"> - Gives a written feedback for acceptance of the Assessment Team and any observers; - Is given an opportunity to lodge an objection to the appointment of any member of Assessment Team or observer, if any, and gives reason for same with supporting justifications. 	
7.10	Head of Quality & CB Section CB Section Staff	Appoints new Assessment Team or observers, if any, 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 MAURITAS and local Assessors/Technical Experts are not available, the CB will have to bear the cost of using foreign Assessors/Technical Experts. If reasons are considered to be valid, updates the resource review form for allocated resources. Carries out necessary changes in the cost estimate and time schedule and appoints new Team Leader, Assessors and/or Technical Experts and observers, if any. Submits the updated resource review form to Head of Quality and CB Section for recommendation.	F 1.09
7.11	Director of MAURITAS	Approves the changes in the resource review.	F 1.09
7.12	Case Officer	Provides the Assessment Team and observers, if any, with relevant requirements documents, previous assessment records, if applicable and relevant documents and records of the CB. Clearly defines the assignment to the Assessment Team.	F 1.18

8. Document review

S.N	Responsibility	Activity	Documents
8.1	Case Officer	Carries out a resource review as per section on 'Resource Review' in this document.	F 1.09
8.2	Team Leader/ Assessor(s)	<p>Review the documentation of the applicant CB with the relevant standard(s) and other requirements of accreditation.</p> <p>The document review exercise shall be completed within 3 months of receipt of application.</p> <p>The document review exercise shall be performed only once by the Assessment Team and shall be documented in the document review report.</p> <p>Assessors shall review relevant parts of the applicant CB documentation and submits the document review report(s) to the Case Officer.</p> <p>Team Leader compiles the document review report.</p>	<p>F 4.10 / F 4.11 / F 4.16 / F 4.17</p> <p>F 4.02</p>
8.3	Team Leader/ Assessor(s)	<p>Recommends which of the following actions should be taken, based on document review carried out and submits same to the Case Officer:</p> <ul style="list-style-type: none"> (i) the CB is not in a position to proceed to preliminary visit; or (ii) the CB is ready for a preliminary visit; or (iii) the CB is ready for an initial assessment. 	F 4.02
8.4	Case Officer	Submits the filled document review report to the Head of Section including the recommendation of the Assessment Team.	F 4.02
8.5	Head of Quality and CB Section	<p>Takes note of the document review report as well as the recommendation of the Assessment Team.</p> <p>In case the Assessment Team recommends not to proceed with preliminary visit of the CB, based on the nonconformities found during the document review, the results with justification will be reported, in writing, to the CB.</p> <p>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.</p>	F 4.02
8.6	Case Officer	Sends the report together with a covering letter to the applicant.	F 4.02

9. Preliminary visit

S.N	Responsibility	Activity	Documents
9.1	Case Officer	Follows steps in 'Resource Review' section	F 1.09
9.2	Case Officer	Within 2 months prior to the visit, is responsible for requesting the CB its updated quality documentation as well as complaints, latest management review, complaints and internal audit reports.	
9.3	Case Officer	Provides the Assessment Team with relevant quality 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.	F 1.18 F 4.02 F 4.19
9.4	Team Leader	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.	F 1.01 F 4.19
9.5	Assessment Team	The preliminary visit is carried out over a duration of 1 day at the office of the CB by the Assessment Team. Carries out the preliminary visit against the relevant checklists. All nonconformities identified shall be recorded in the preliminary visit findings form, F 1.20.	F 4.10 / F 4.11 / F 4.16 / F 4.17 F 1.20
9.6	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.	
9.7	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 recommendation that the Team Leader will make to MAURITAS. A copy of the preliminary visit findings form, F 1.20, is handed over the management of the CB. Forwards the report to the Case Officer within 2 weeks.	F 1.04 F 4.06 F 1.20 F 4.07
9.8	Case Officer	Informs the Head of CB and Quality Section and Director, MAURITAS about recommendation of the Assessment Team.	F 4.07
9.9	Head of Quality & CB Section CB Section Staff	Evaluates the report and informs the applicant about status by issuing a letter to the CB on one of the following alternative conclusions: (i) The applicant is ready for initial assessment; (ii) The applicant is ready for initial assessment after implementing corrective actions; (iii) Initial assessment cannot be performed (provides	F 4.07

		<p>justification).</p> <p>Only one preliminary visit shall be carried out by MAURITAS per application.</p> <p>MAURITAS will not issue to the CB any detailed checklist or documents that have been used during the course of the preliminary visit.</p>	
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10. Planning of initial office assessment visit

S.N	Responsibility	Activity	Documents
10.1	Head of Quality & CB Section CB Section Staff	<p>When preparing for the initial assessment, shall ensure that:</p> <ul style="list-style-type: none"> - the initial assessment is planned based on preparedness of applicant CB; - the planning is within the framework which are agreed upon between the Case Officer, the Assessment Team and the CB; - For ‘multisite’ organisations the assessment is planned to include the main locations which are covered by the application and which perform one or more key activities. <p>Records the selection of geographical locations, if any.</p>	IAF MD 1
10.2	Case Officer	Follows steps in ‘Resource Review’ section to carry out resource review.	F 1.09
10.3	Case Officer	<p>Within 2 months prior to the visit, is responsible for:</p> <ul style="list-style-type: none"> - Requesting prior to the assessment, the updated quality documentation as well as complaints received, latest management review and internal audit reports. - Constitution of Assessment Team and observers, if any, 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 the dates of assessment; - Discussing on tentative plan and confirming same for assessment, including covering all clauses of the relevant standard. 	
10.4	Head of Quality & CB Section CB Section Staff	<p>Review and update the assessment programme accordingly to cover the risks associated with activities to be assessed, locations, personnel and the assessment techniques to be used, including witnessing where appropriate.</p> <p>In cases where witnessing is not appropriate, MAURITAS will provide justification.</p>	F 4.18

10.5	Head of Quality & CB Section CB Section Staff	<p>Planning of office assessments are also based on the following criteria:</p> <ul style="list-style-type: none"> - 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 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. 	
10.6	Case Officer	<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 covering all applicable clauses of the relevant standard(s). - 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 applicant CB at least one week prior to the assessment.</p>	F 4.19 F 4.18
10.7	Case Officer	<p>Is responsible for providing the assessment pack as per form F 1.18 to the Team Leader (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 - Team Leader's Report from assessment of Certification Bodies for Management Systems - Filled cross reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Management Requirement - Filled cross reference matrix-cum-checklist for ISO/IEC 17021-1:2015 Technical Requirements - Declaration of Confidentiality - Attendance Sheet - Agenda Opening Meeting - Agenda Closing Meeting - Previous Preliminary Visit Findings, if any - Relevant requirement documents including IAF documents and MAURITAS Regulations - Quality Documentation, Complaints, Internal Audit and Management Review reports of the CB - Feedback Form 	F 4.19 F 1.18 F 1.15 F 4.05 F 4.07 F 4.10 F 4.11 / F 4.16 / F 4.17 F 1.02 F 1.03 F 1.01 F 1.04 F 1.20 Relevant IAF MD MAURITAS R1, R2 and R4 F 1.21

10.8	Case Officer	<p>Is responsible for providing the assessment pack as per form F 1.18 to the Assessor (at least one week before assessment), including:</p> <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 - Relevant requirement documents including IAF documents and MAURITAS Regulations - Quality Documentation. 	<p>F 4.19 F 4.05 F 4.11 / F 4.16 / F 4.17 F 4.07 Relevant IAF MD MAURITAS R1, R2 and R4</p>
10.9	Assessment Team	<p>Carry out document review based on the quality documentation provided by the Case Officer prior to the assessment.</p> <p>Bring along, on the assessment visit, all the relevant forms which have been provided by MAURITAS including their document review carried out prior to the assessment.</p>	<p>F 4.10 / F 4.11 / F 4.16 / F 4.17</p>

11. Execution of initial office assessment visit

S.N	Responsibility	Activity	Documents
11.1	Team Leader	<p>Carries out a briefing session with Assessment Team and observer, if any, so that they are aware of their duties during the office 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>
11.2	Assessment Team	<p>Assess the following subjects based on the assessment plan:</p> <ul style="list-style-type: none"> - All elements in the relevant standard; - Applicable section of MAURITAS R documents - All parts of the CB management system. <p>Assess the main office and all geographical locations (if any) that are covered by the accreditation.</p> <p>The Assessment Team shall perform the initial assessment as per the assessment plan.</p> <p>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.</p> <p>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.</p>	<p>Relevant requirement of the standard(s), F 4.19</p> <p>Relevant IAF MD documents</p> <p>F 4.10 / F 4.11 / F 4.16 / F 4.17</p> <p>F 1.21</p>
11.3	Assessment Team	<p>Prior to the closing meeting with the management of the CB in order, 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 for clarification to the relevant management level staff of MAURITAS (Assistant Accreditation Manager / Accreditation Manager / Director).</p> <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.</p>	<p>F 1.21 F 4.05</p> <p>F 1.21</p>
11.4	Team Leader	<p>A Closing Meeting is held 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 of the CB 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>F 1.04 F 4.05 F 4.06</p>

12. Reporting of the initial office assessment

S.N	Responsibility	Activity	Documents
12.1	Team Leader	<p>Team Leader shall at the closing meeting:</p> <ul style="list-style-type: none"> - Present a summary of the result of the assessment and the recommendation of the Assessment Team on the competence of the CB on the accreditation scopes applied for; - Give the CB representative a copy of the recommendation report and nonconformities, if any; <p>The deadline for submitting root cause analysis and proposed corrective actions is one (1) month for initial assessment and two (2) weeks for re-assessment;</p> <p>The deadline for submitting implemented corrective actions is three (3) months for initial assessment and two (2) months for re-assessment.</p> <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>	<p>F 1.04 F 4.06 F 4.05</p> <p>F 1.21</p>
12.2	Assessor(s)	<p>Submits a detailed report on technical parts of the assessment to the Case Officer, within 3 weeks from assessment date for all assessments. The latter forwards report to the Team Leader.</p>	F 4.07
12.3	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 for all assessments.</p> <p>If the Team Leader is also the assessor, he/she shall submit one report covering both functions.</p>	F 4.07
12.4	Assessment Team	<p>The report shall include comments on competence as determined through conformity, the scope assessed and a description of the 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 possible 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

12.5	Head of CB and Quality	Reviews and sends the detailed report to the Case Officer.	F 4.07
12.6	Case Officer	<p>Forwards the report to the CB within 1.5 months from assessment date and reminds the applicant about the right to complain on actual errors in the reports.</p> <p>MAURITAS shall be responsible for the content of all of its assessment reports.</p> <p>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.</p>	F 4.07

13. Witnessing Assessment

S.N	Responsibility	Activity	Documents
13.1	Case Officer	<p>Follow steps in 'Resource Review' section.</p> <p>Evaluates the necessity for competence in the Assessment Team in addition to the Team Leader:</p> <ul style="list-style-type: none"> - For certification of management system depending on how special the business area is; - For EMS participation of personnel with environmental competence is required. 	<p>F 1.09</p> <p>MAURITAS A25 MAURITAS A28</p>
13.2	<p>Head of Quality & CB Section</p> <p>CB Section Staff</p>	<p>When deciding how many and which audits are to be witnessed, takes into account the following factors:</p> <ul style="list-style-type: none"> - 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, if applicable. - 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 or ISMS scope. 	<p>MAURITAS A22 MAURITAS A24</p> <p>IAF MD16 IAF MD17</p>

		<p>- 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.</p> <p>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.</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) on a yearly basis.</p> <p>Also plans witnessing in case of complaints, disputes or regulator feedback.</p> <p>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.</p> <p>Participation in witnessing shall be limited as much as possible, but not affecting required competence in the Assessment Team.</p> <p>Full on-site audits shall be witnessed unless objectives for a particular activity can be satisfied with a partial witnessing</p>	F 4.18
13.3	Case Officer	Prepares and provides relevant assessment packs for the witnessing assessment to Assessment Team.	F 1.18
13.4	Assessment Team	<p>Receives the following documentation from CB prior to the witnessing assessment through the Case Officer:</p> <ul style="list-style-type: none"> - copy of the previous report on the certified company for the last audit if a surveillance audit or a renewal shall be witnessed; - copy of audit programme for the certified organisation if a surveillance audit or a re-certification shall be witnessed; - copy of audit plan; - copy of audit team competence records; and - justification for calculation of audit time. <p>Carries out the witnessing as per section on 'Performance of witnessing' in MAURITAS A18. All information collected during the witnessing is treated as confidential.</p>	<p>IAF MD17</p> <p>IAF MD5</p> <p>MAURITAS A18 F 1.02</p>
13.5	Team Leader	For witnessing, a feedback is submitted to the Director on file.	F 1.21

14. Clearance of proposed corrective actions

S.N	Responsibility	Activity	Documents
14.1	Case Officer	<p>Receives from the CB proposed corrective actions and root cause analysis carried out for all nonconformities within the agreed time limit (1 month for initial assessment and 2 weeks for re-assessment).</p> <p>Forwards copies of nonconformities including proposed corrective actions and root cause analysis to the respective Assessors/Technical Experts along with MAURITAS Staff asking for review to determine if proposed actions and the root cause analysis carried out are sufficient and appropriate and their feedback.</p>	F 4.05
14.2	Assessment Team	<p>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.</p> <p>Alternatively, gives feedback in writing to the Case Officer about nonconformities where proposed corrective actions/root cause analysis are not acceptable.</p>	
14.3	Case Officer	<p>Acknowledges with the Assessor/Technical Expert about nonconformities where proposed corrective actions/root cause analysis are not acceptable.</p> <p>Gives feedback to the applicant about unsatisfactory proposed corrective actions/root cause analysis and gives the applicant CB, in writing, a new deadline for corrective actions/ root cause analysis (maximum 1 week).</p>	
14.4	Head of CB and Quality section	<p>Evaluates actions towards the applicant if proposed corrective actions/root cause analysis have not been made for all nonconformities within 2 months in case of initial assessment and 1 month in case of re-assessment.</p>	

15. Closing of nonconformities

S.N	Responsibility	Activity	Documents
15.1	Case Officer	<p>Receives from the CB a description of implemented corrective actions for all nonconformities within the agreed time limit (3 months for initial assessment and 2 months for re-assessment).</p> <p>Forwards copies of nonconformities and implemented corrective actions to the respective Team Leader/Assessors/Technical Experts along with MAURITAS Staff asking for feedback on acceptance of the implemented corrective actions.</p>	
15.2	Case Officer	<p>Convenes the Assessment Team where necessary for a meeting to review the technical nonconformities and the implemented corrective actions and asking for feedback on the implemented corrective actions.</p>	
15.3	Assessment Team	<p>Within 1 week from date of receipt of implemented 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 implemented corrective actions are not acceptable.</p>	
15.4	Assessment Team	<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 the nonconformities raised shall be verified at the next visit.</p>	
15.5	Case Officer	<p>Acknowledges with the Team Leader/Assessors/Technical Experts along with MAURITAS Staff about nonconformities where implemented corrective actions are not acceptable.</p>	
15.6	Case Officer	<p>Gives feedback in writing to the applicant CB about unsatisfactory implemented corrective actions and a new deadline for implemented corrective actions (maximum one month).</p>	
15.7	Head of CB and Quality section	<p>Evaluates actions towards the applicant CB if implemented corrective actions have not been made for all nonconformities within 4 months after the initial assessment and 2.5 months after the re-assessment.</p>	

16. Accreditation Report and Decision Making

S.N	Responsibility	Activity	Documents
16.1	Team Leader	<p>Prepares and submits the accreditation report, based on the recommendation of the Assessment Team, and draft certificate & schedule to the Assessment Team for review and comments.</p> <p>After amendments, Team Leader submits the finalised accreditation report and draft certificate & schedule to the Secretary of the Accreditation Committee and a copy to Director, MAURITAS (within 1.5 months from clearance of all nonconformities).</p>	IAF ID1 Annex A of ISO 22003-1 ISO/IEC 27006-1
16.2	Registry	Registers the accreditation report and submits to Assessment Team for signature.	
16.3	Director MAURITAS	Prepares and submits a recommendation report to the Accreditation Committee.	
16.4	Accreditation Committee	<p>Makes decision about accreditation based on the accreditation report submitted by the Assessment Team and the recommendation presented by the Director of MAURITAS without undue delay.</p> <p>MAURITAS does not use the results of assessments performed by another Accreditation Body for decision-making.</p>	
Positive recommendation			
16.5	Case Officer	Notifies the applicant CB in writing of the decision of the Accreditation Committee including justification where relevant.	
16.6	Head of CB and Quality section	Gives the applicant CB a new accreditation number (for granting of accreditation).	
16.7	Case Officer	Finalises the certificate & schedule as well as the contract agreement.	MAURITAS A13 F 1.13 Section 17 of MAURITAS A9
16.8	Director of MAURITAS	Based on the decision to grant or renew accreditation, the Director of MAURITAS signs the accreditation certificate and schedule & contract agreement and gives them back to the Case Officer to forward to CB.	

16.9	Case Officer	<p>Ensures that an updated copy of the accreditation schedule and certificate is uploaded on the MAURITAS website.</p> <p>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.</p> <p>On receipt of the signed 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.</p>	F 1.25
16.10	Case Officer	<p>Forwards the tentative assessment dates for the four year-accreditation cycle starting from date of grant of accreditation.</p> <p>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.</p> <p>After signature of contract, forwards the accreditation symbol to the CB.</p> <p>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.</p> <p>Ensures that an updated copy of the accreditation schedule and certificate is uploaded on the MAURITAS website.</p> <p>For subsequent renewals, the accreditation is valid for 4 years from the date of grant of accreditation.</p>	F1.13
Negative recommendation			
16.11	Case Officer	<p>Drafts a letter for the applicant CB including the reason for negative recommendation from the assessment team and the decision of the Accreditation Committee.</p> <p>Gives the draft letter to the Head of CB and Quality section, together with the accreditation report and the decision of the Accreditation Committee.</p> <p>The letter shall include the CB's right to appeal against the decision of the Accreditation Committee.</p>	
16.12	Head of CB and Quality section	Evaluates the draft letter and submits same to the Director of MAURITAS for signature.	
16.13	Director of MAURITAS	Based on the decision of the Accreditation Committee for refusal, the Director of MAURITAS signs the letter for the CB.	

16.14	Registry	Makes records about the decision of the Accreditation Committee. Forwards the letter to the CB without undue delay.	
Limited granting of accreditation			
16.15	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			
16.16	Accreditation Committee	Accreditation Committee may defer the decision on accreditation at a later stage until the applicant submits further information and evidence of competence.	
Post Expiry			
16.17	Accreditation Committee / Director MAURITAS (in case of suspension)	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.	MAURITAS P1
Post decision			
16.18	Case Officer	Prepares letter to be sent to CB informing about decision and right to appeal.	
16.19	Head of Quality & CB Section CB Section Staff	Updates the assessment programme taking into consideration any cross-frontier activities and covering the scope of the applicant 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. Ensures that competence is assessed throughout the scope in the accreditation cycle for all IAF codes/Food Chain Category/ISMS scope of relevant Management System scheme 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. 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.	IAF MD16 IAF MD17 F 4.18

17. Schedule of accreditation

S.N	Responsibility	Activity	Documents
17.1	Head of Quality & CB Section	<p><u>QMS Accreditation Scheme</u> Prepares the schedule for QMS accreditation scope based on IAF Codes with sector classification as defined in IAF ID1 and MAURITAS A13. Each IAF Code represents a broad economic sector and encompasses multiples activities as described in the corresponding NACE division. In the case where the CB has demonstrated competence only for specific activities or sub-sectors within the IAF Code, limitations within that IAF Code shall be applied. The limitation or exclusion shall be explicitly stated in the “Remarks” section of the schedule of accreditation as: <i>“Except NACE code(s) xxx”</i> In the case where full competence for an IAF Code has been demonstrated, the scope shall be granted at full IAF Code level. This shall be explicitly stated in the “Remarks” section of the schedule of accreditation as: <i>“Full scope”</i></p> <p><u>FSMS & HACCP Accreditation Scheme</u> Prepares the schedule for FSMS accreditation scope in accordance with the food chain categories and sub-categories specified in Annex A of ISO 22003-1 and MAURITAS A13. Where the certification body has demonstrated competence only for specific food chain categories or sub-categories listed in Annex A, any limitations within the relevant food chain category shall be clearly stated in the schedule of accreditation. Only those categories and sub-categories for which competence has been demonstrated shall be included in the schedule. Where the certification body has demonstrated competence for the full food chain category, for a particular Cluster, listed in Annex A, the complete category and all relevant sub-categories shall be stated in the in the schedule of accreditation without limitations.</p> <p><u>ISMS Accreditation Scheme</u> Prepares the schedule for ISMS accreditation scope in accordance with MAURITAS A13.</p>	IAF ID1 MAURITAS A13

18. Publishing of accreditation

S.N	Responsibility	Activity	Documents
18.1	Case Officer	Makes necessary arrangements for publication of the accreditation schedules on the List of Accredited Entities on the MAURITAS website.	

19. Upload of Data on IAF CertSearch Database

S.N	Responsibility	Activity	Documents
19.1	Case Officer	<ol style="list-style-type: none"> 1. Following decision to grant accreditation, uploads data on the CB as per IAF MD28 2. Requests the CB to upload information in relation to all Certified Entities that it certifies under ISO/IEC 17021-1 using one of the electronic methods made available in IAF Database 3. In exceptional cases where the CB is not able to upload all or part of the information as per the requirements of IAF MD28, the CB should provide a written justification to MAURITAS. MAURITAS shall review same to determine if justification is eligible to be accepted. 	IAF MD28
19.2	Case Officer	<ol style="list-style-type: none"> 4. In the case where the exclusion to upload data has been accepted, MAURITAS will advise the CB to provide at least quarterly, aggregated analytical data to IAF Database. MAURITAS will also periodically review the exclusion to ensure its current applicability. 5. In the case where the exclusion to upload data has not been accepted by MAURITAS, the CB may appeal the outcome in accordance with MAURITAS procedures. 6. MAURITAS will upload new data or update existing data to the IAF Database at least once a month so that the information uploaded in the IAF Database after each such update represents the then current version of all accreditations under ISO/IEC 17021-1. Where no changes are necessary, to click the "Update All" link to confirm the information is up to date. 	MAURITAS P2

20. Additional accreditation with foreign Accreditation Body

S.N	Responsibility	Activity	Documents
20.1	Head of CB and Quality Section	In the case the accredited CB is requesting accreditation with another Accreditation Body, seeks the consent from the CB prior to the exchange of accreditation documentation between the MAURITAS and the AB.	IAF ML1

21. Re-Assessment

S.N	Responsibility	Activity	Documents
21.1	Case Officer	<p>Planning starts in advance prior to the re-assessment date taking into consideration the information gathered from the assessments performed during the accreditation cycle as per assessment programme for each certification scheme.</p> <p>Ensures that the re-assessment be carried out within 1 month of its scheduled date.</p> <p>For subsequent renewals, the accreditation is valid for 4 years from the date of grant of accreditation.</p>	F 4.18
21.2	<p>Head of Quality & CB Section</p> <p>CB Section Staff</p>	<p>Updates and reviews the assessment programme, for each certification scheme, taking into consideration the following:</p> <ul style="list-style-type: none"> - the scope of the CB - activities in multiple countries - geographical/administrative units be assessed - associated risks related to activities, location and personnel for the accreditation cycle. - analysis of trends, if any, in nonconformities raised during the previous 3 assessment visits at the CB for the accreditation cycle - all elements of the management system, including but not limited to complaints, management review and internal audit, to be assessed for the re-assessment - requirements of ISO/IEC 17021-1 and the relevant competence requirements as per Annex D of QAM1 be assessed during the accreditation cycle - witnessing of CB on-site audits to ensure accredited IAF scopes/Food Chain Categories that are mandatory to be witnessed during an accreditation cycle are carried out. - necessary resources be allocated for the re-assessment; - additional resources be allocated if the re-assessment includes an extension of scope. <p>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.</p> <p>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.</p> <p>Plans the re-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 re-assessment also 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.</p>	<p>IAF MD 12</p> <p>IAF MD 16</p> <p>IAF MD 17</p> <p>MAURITAS A22</p> <p>MAURITAS A24</p> <p>F 4.18</p>

		<p>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.</p> <p>In cases where witnessing in not appropriate, needs to provide justification.</p>	
21.3	Case Officer	Carries out resource review as per section ‘Resource Review’.	F 1.09
21.4	Case Officer	<p>Prepares an assessment plan covering at minimum the following:</p> <ul style="list-style-type: none"> - activities to be assessed covering all clauses of the relevant standard(s) and MAURITAS requirements, relevant IAF Requirements and witnessing, where appropriate. - the locations at which the activities will be assessed - personnel to be assessed where applicable - assessment techniques utilised including witnessing where applicable 	F 4.19
21.5	Case Officer	<p>Within 2 months prior to the visit, is responsible for:</p> <ul style="list-style-type: none"> - requesting updated Quality Documentation as well as complaints, latest management review and internal audit reports. - liaising with the CB to submit filled applicable cross reference checklists by the CB - constituting the 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 and conforming dates of assessment and witnessing; - agreeing on organisations to be witnessed; - discussing on tentative plan and confirming same for assessment 	F 4.10 / F 4.11 / F 4.16 / F 4.17
21.6	Case Officer	<p>The following information is also provided at least one week before the re-assessment:</p> <ul style="list-style-type: none"> - Proposed Assessment Team and any observer, including information about their organisation and background; - Cost estimate; - Time schedule. <p>Note: The determination of the assessment durations is as determined during the resource review exercise.</p>	

21.7	Case Officer	<p>Provides relevant assessment packs and documents (at least one week before the assessment) for office re-assessment and for witnessing assessment to the Assessment Team and observer, if any, as per section “Planning of Initial Office Assessment” / “Witnessing Assessment” of this document.</p> <p>For office re-assessment, additionally also provides these documents:</p> <ul style="list-style-type: none"> - Previous Nonconformity Reports - Previous Accreditation Report <p>Previous preliminary visit findings form is not provided for re-assessment.</p>	F 1.18
21.8	Assessment Team	<p>Carry out document review based on the quality documentation of the CB provided by Case Officer prior to the re-assessment using the relevant cross reference checklist</p> <p>Carry out re-assessment activities on-site (office assessment and witnessing) in accordance with the section “Execution of initial office assessment”/ “Witnessing assessment” as detailed in this document.</p> <p>Report the conduct of the re-assessment in accordance with the section “Reporting of office assessment” as detailed in this document.</p> <p>Handle the different categories of nonconformities in accordance with the section “Clearance of proposed corrective Actions” & “Closing of nonconformities” of this procedure.</p> <p>Handle the report writing and decision making for renewal of accreditation in accordance with the section “Accreditation Report and Decision Making” of this procedure.</p>	F 4.10 / F 4.11 / F 4.16 / F 4.17
21.9	<p>Head of Quality & CB Section</p> <p>CB Section Staff</p>	<p>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 one month before the accreditation expires.</p> <p>Evaluates actions if the corrective actions for the same nonconformity have been presented several times (more than 3 times), that can jeopardise MAURITAS’ integrity.</p>	
21.10	Director of MAURITAS	Evaluates if the accreditation can be renewed for 6 months even if not all nonconformities are closed.	

22. Documents deleted/destroyed by Assessment Team

S.N	Responsibility	Activity	Documents
22.1	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.	

23. Transition with respect to a new accreditation standard

S.N	Responsibility	Activity	Documents
23.1	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.	

24. Reporting of major nonconformities after assessments

S.N	Responsibility	Activity	Documents
24.1	Team Leader	During the closing meeting, informs the CB on the recommendation for suspension if several major nonconformities have been raised and there is significant doubt that the capability of the management system to achieve its intended results is affected. In case of recommendation for suspension, immediately informs the recommendation about suspension to the Case Officer.	
24.2	Case Officer	Handles the recommendation for partial/full suspension as per MAURITAS A14.	MAURITAS A14

25. Assessments carried out in other countries

S.N	Responsibility	Activity	Documents
25.1	Case Officer	Plans assessments of foreign CBs to be performed according to this procedure and IAF MD12. Informs the CB that the latter shall bear all costs with respect to travel, accommodation, subsistence and travelling time for the Assessment Team.	IAF MD12
25.2	Assessment Team	On the basis of up-to-date knowledge of the full geographic scope of the CB's accredited activities, MAURITAS shall assess and confirm CB's conformity with the requirements of the relevant conformity assessment standard(s) within the CB's scope of accreditation.	IAF MD12

26. Invoicing

S.N	Responsibility	Activity	Documents
26.1	Case Officer	Invoices the applicants and accredited organisations after the assessment and follows-up for payments.	

27. Lack of progress in the application process

S.N	Responsibility	Activity	Documents
27.1	Case Officer	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.	

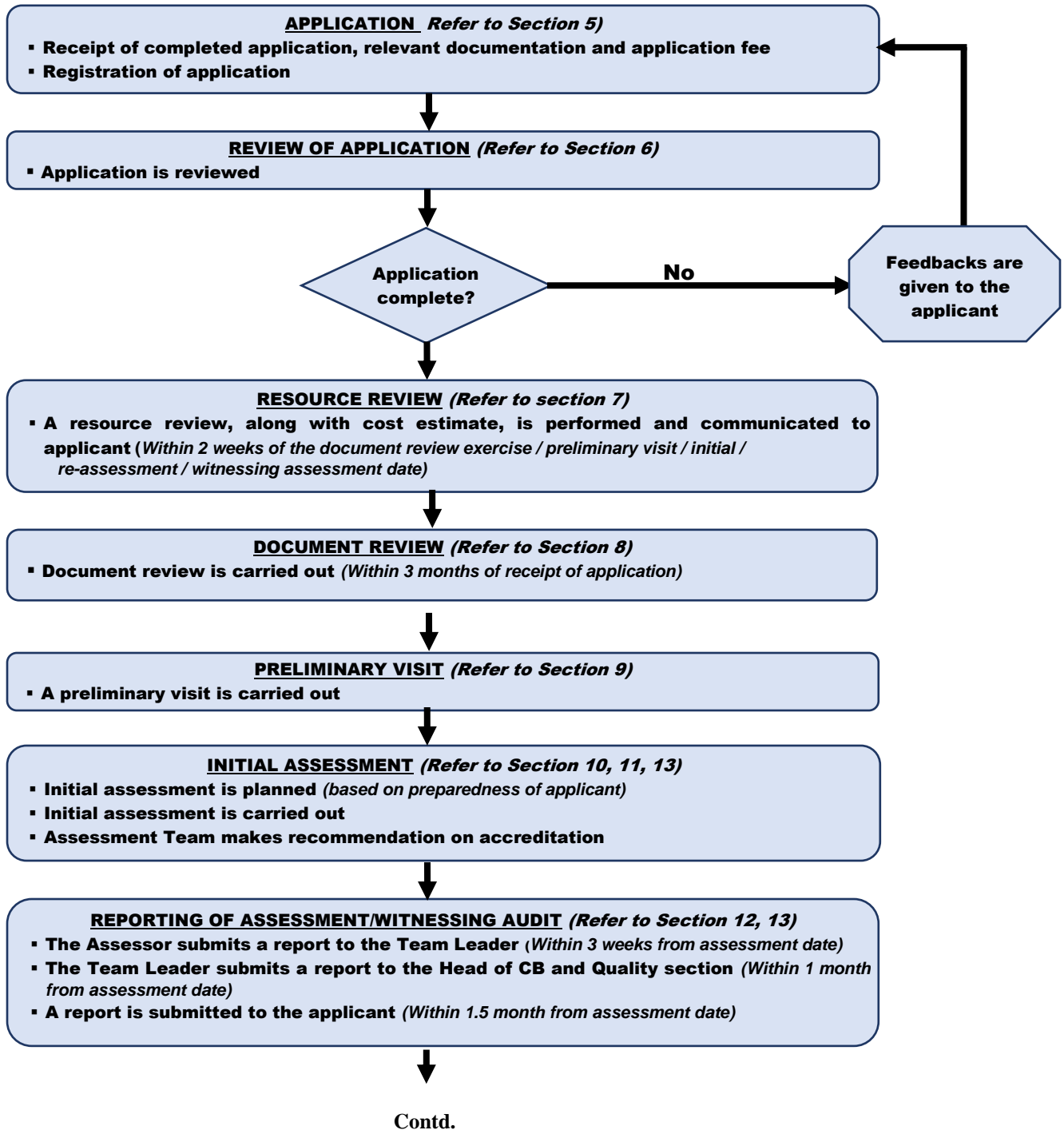
28. Related Forms

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
Agenda Opening Meeting	F 1.01
Agenda Closing Meeting	F 1.04
Assessment Plan – Certification Bodies	F 4.19
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
Assessment Programme Certification Bodies	F 4.18

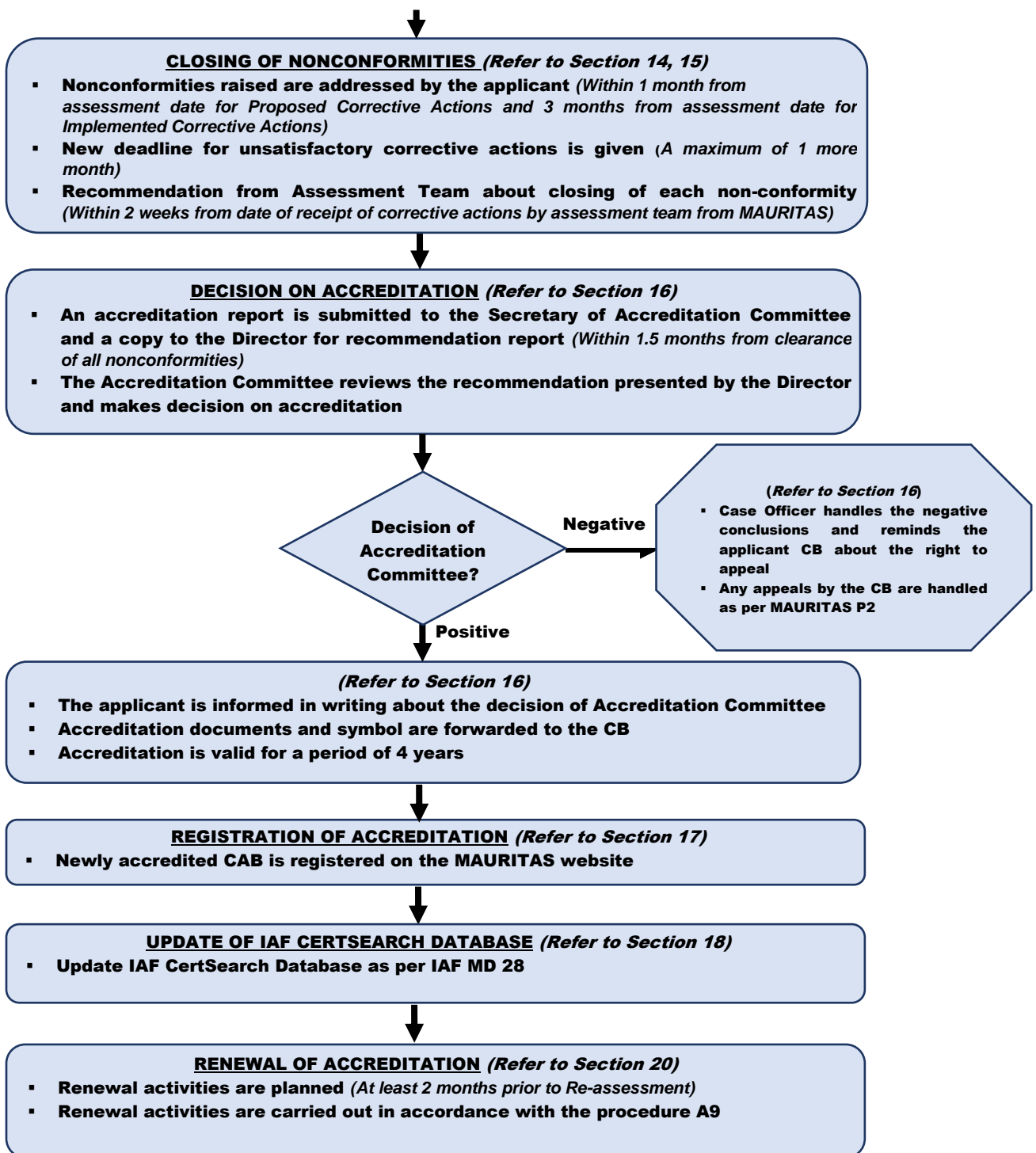
Appendix A: Amendment Table

SN	Section	Amendment
Issue 1, Revision 5		
1.	7.7, 7.8, 7.9, 7.10 ,7.12	i. Reference to observers in the Assessment Team has been added
Issue 2, Revision 5		
1.	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
2.	12.1	i. In column 2, at bullet i., “on the competence of the CB on the accreditation scopes applied for” has been added after “Assessment Team...” ii. In column 3, reference to “F 1.04” has been added
3.	16.1	i. In column 2, at line 2, paragraph 1 & 2 “and draft certificate & schedule” has been added ii. In column 3, reference to “IAF ID1, Annex A of ISO 22003-1, ISO/IEC 27006-1” has been added
4.	16.7	i. In column 2, at line 1, “Prepares” has been replaced by “Finalises” ii. In column 3, reference to “Section 17 of MAURITAS A9” has been added
5.	17	i. New section 17 “Schedule of Accreditation” has been added. Previous section 17 is now 18 and so on
6.	18.1	i. In column 2, at line 1, “of the accreditation schedules on the List of Accredited Entities on the MAURITAS website.” has been added after “...publication”
7.	25.2	i. A 2 nd row has been added: Column 2: “Assessment Team”. Column 3: “On the basis... CB’s scope of accreditation.”
8.	28	i. Reference to F 4.18 and F 4.19 has been added

Annex A: TIMELINE FOR INITIAL ASSESSMENT FOR CERTIFICATION BODIES



Contd.



Annex B: TIMELINE FOR RE-ASSESSMENT OF CERTIFICATION BODIES

