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# MAURITAS G8

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Guidance for MAURITAS Assessors and  
Technical Experts for the accreditation of  
certification bodies providing audits and  
certification of management systems

Mauritius Accreditation Service

## CONTENTS

<b>FOREWORD .....</b>	<b>2</b>
<b>ABOUT MAURITAS PUBLICATIONS .....</b>	<b>2</b>
<b>1. PURPOSE.....</b>	<b>3</b>
<b>2. SCOPE AND RESPONSIBILITIES .....</b>	<b>3</b>
<b>3. REFERENCES .....</b>	<b>3</b>
<b>4. DEFINITIONS .....</b>	<b>4</b>
<b>5. IAF DOCUMENTS .....</b>	<b>5</b>
<b>6. ACCREDITATION PROCESS.....</b>	<b>7</b>
<b>7. WORKING INSTRUCTIONS .....</b>	<b>7</b>
<b>8. NONCONFORMITY REPORT.....</b>	<b>10</b>
<b>9. GENERAL ATTRIBUTES OF ASSESSORS AND/OR TECHNICAL EXPERTS .....</b>	<b>11</b>
<b>10. ASSESSOR/TECHNICAL EXPERT MONITORING .....</b>	<b>11</b>
<b>11. INVOICING.....</b>	<b>11</b>
<b>12. IMPARTIALITY.....</b>	<b>11</b>
<b>13. CONFIDENTIALITY .....</b>	<b>12</b>
<b>14. DISTRIBUTION OF DOCUMENTS .....</b>	<b>12</b>
<b>15. RELATED FORMS: .....</b>	<b>12</b>
<b>APPENDIX A: AMENDMENT TABLE.....</b>	<b>13</b>

## 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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# Guidance for MAURITAS Assessors and Technical Experts for the accreditation of certification bodies providing audits and certification of management systems

## 1. Purpose

1.1 This document gives a general guidance for the performance of assessments of Certification Bodies (CBs) providing audits and certification of management systems. In addition, this document gives additional information which is of interest for MAURITAS Assessors and Technical Experts.

## 2. Scope and Responsibilities

2.1 It is the responsibility of the CB, Team Leaders, Assessors and/or Technical Experts to follow this document for preparing and performing assessments effectively.

## 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 **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

3.3 **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

3.4 **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

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

3.6 **MAURITAS G3** : MAURITAS assessments - A Guide for Certification Bodies providing management systems audit and certification

3.7 **MAURITAS G7** : MAURITAS fees - A guide for certification bodies

3.8 **MAURITAS R1** : Regulations to be met by certification bodies, inspection bodies and calibration and testing laboratories.

3.9 **MAURITAS R2** : Regulations to be met by applicant and accredited CABs

- 3.10 MAURITAS R4** : Conditions for the use of MAURITAS accreditation symbol
- 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 Conformity Assessment Purposes
- 3.14 IAF MD 5** : Determination of Audit Time of Quality, Environmental and Occupational Health and Safety Management Systems
- 3.15 IAF MD 7** : IAF Mandatory Document for the Harmonisation of Sanctions and Dealing with Fraudulent Behaviour
- 3.16 IAF MD 11** : IAF Mandatory Document for Application of ISO/IEC 17021 for Audits of Integrated Management Systems
- 3.17 IAF MD 12** : Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries
- 3.18 IAF MD 13** : Knowledge Requirements for Accreditation Body Personnel for Information Security Management Systems (ISO/IEC 27001)
- 3.19 IAF MD 15** : IAF Mandatory Document for the Collection of Data to Provide Indicators of Management System Certification Bodies' Performance
- 3.20 IAF MD 16** : Application of ISO/IEC 17011 for the Accreditation of Food Safety Management Systems (FSMS) Certification Bodies
- 3.21 IAF MD 17** : Witnessing Activities for the Accreditation of Management Systems Certification Bodies
- 3.22 IAF MD 28** : IAF Mandatory Document for the upload and maintenance of data on the IAF Database
- 3.23 ILAC/IAF JWG A-Series FAQ1**

## **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 Major Nonconformities**

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

### **4.3 Minor Nonconformities**

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

### **4.4 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 and other accreditation requirements set by MAURITAS.

#### **4.5 Assessment Team**

The Assessment Team comprises a Team Leader and Assessor(s)/Technical Expert(s) (may be accompanied by a MAURITAS Staff).

#### **4.6 Assessor**

A person assigned by MAURITAS to perform, alone or as part of an Assessment Team, an assessment of a Conformity Assessment Body.

#### **4.7 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).

#### **4.8 The International Accreditation Forum (IAF)**

The world association of Conformity Assessment Accreditation Bodies and other bodies interested in conformity assessment in the fields of management systems, products, services, personnel and other similar programmes of conformity assessment. Its primary function is to develop a single worldwide program of conformity assessment which reduces risk for business and its customers by assuring them that accredited certificates may be relied upon. Accreditation assures users of the competence and impartiality of the body accredited. IAF website can be accessed on [iaf.nu](http://iaf.nu).

## **5. IAF Documents**

Applicant and accredited CBs should meet the requirements of the relevant standard in the applied field. IAF mandatory documents and guidelines specify how to meet the different requirements in the standard.

CBs offering management systems certification should refer to the relevant IAF documents as specified below:

### **5.1 IAF MD 1: IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization**

This document is for the audit and, if appropriate, the certification of management systems of organizations with a number of sites with a single management system.

### **5.2 IAF MD 2: Transfer of Accredited Certification of management systems**

This document provides normative criteria on the transfer of accredited management system certification between CBs. The criteria may also be applicable in the case of acquisitions of CBs accredited by an IAF or Regional MLA signatory.

### **5.3 IAF MD 4: IAF Mandatory Document for the Use of Information and Communication Technology (ICT) for Conformity Assessment Purposes**

This mandatory document provides for the consistent application of information and communication technology when used as part of the conformity assessment methodology. The scope of this document includes management systems, validation and verification, personnel certification and product certification and is applicable to conformity assessment bodies and accreditation bodies. The use of ICT is not mandatory and may be used for other types of conformity assessment activities, but if used as part of the conformity assessment methodology, it is mandatory to conform to this document.

#### **5.4 IAF MD 5: Determination of Audit Time of Quality, Environmental and Occupational Health and Safety Management Systems**

This document is mandatory for the consistent application of the relevant clauses of ISO/IEC 17021-1 for audits of quality, environmental, and occupational health and safety management systems. All clauses of ISO/IEC 17021-1 continue to apply and this document does not supersede any of the requirements in that standard.

#### **5.5 IAF MD 7: IAF Mandatory Document for the Harmonisation of Sanctions and Dealing with Fraudulent Behaviour**

This mandatory document clarifies situations where sanctions are to be applied to applicant or accredited conformity assessment bodies and the subsequent necessary communication which shall be taken by accreditation bodies.

#### **5.6 IAF MD 11: IAF Mandatory Document for Application of ISO/IEC 17021-1 for Audits of Integrated Management Systems**

This document provides requirements for the application of ISO/IEC 17021 for the planning and delivery of audits of IMS and, if appropriate, the certification of an organization's management system(s) against two or more sets of audit criteria/standards.

#### **5.7 IAF MD 12: Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries**

CBs that provide certification in countries outside the country in which their head office is located will have to meet the requirements of IAF MD 12 document.

#### **5.8 IAF MD 13: Knowledge Requirements for Accreditation Body Personnel for Information Security Management Systems (ISO/IEC 27001)**

This document provides specific knowledge requirements for Accreditation Body personnel to harmonize their application of the related Clause 6.1.2 of ISO/IEC 17011 for the accreditation of bodies providing audit and certification of information security management systems (ISMS) to ISO/IEC 27001-1.

#### **5.9 IAF MD15: IAF Mandatory Document for the Collection of Data to Provide Indicators of Management System Certification Bodies' Performance**

This document provides the "indicators" which Accreditation Bodies shall require accredited Management System Certification Bodies to report to them on a periodic basis.

#### **5.10 IAF MD16: Application of ISO/IEC 17011 for the Accreditation of Food Safety Management Systems (FSMS) Certification Bodies**

This document specifies normative criteria for Accreditation Bodies assessing and accrediting CABs which provide audit and certification of FSMS, in addition to the requirements contained with ISO/IEC 17011. It is also appropriate as a requirements document for the peer evaluation process for the IAF Multilateral Recognition Arrangement (MLA) among Accreditation Bodies.

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## 5.11 IAF MD 17: Witnessing Activities for the Accreditation of Management Systems Certification Bodies

This document is mandatory for the consistent application of the relevant clauses of ISO/IEC 17011 Conformity assessment - General requirements for accreditation bodies accrediting conformity assessment bodies.

## 5.12 IAF MD 28: IAF Mandatory Document for the Upload and Maintenance of Data on IAF Database

This document outlines the mandatory requirements for ABs and CBs to achieve the IAF Database Principles, provides guidance as to how ABs and CBs will conform with those requirements, and outlines sanctions for nonconformity with the requirements of this MD.

# 6. Accreditation Process

**6.1** Assessment should be performed in accordance with MAURITAS practice and in accordance with relevant international guidelines and requirement standards. The criteria in these international standards refer to Assessor's conduct, report, organisation and performance of the assessment. MAURITAS G3 provides an indication on how assessments of CBs are to be carried out by MAURITAS against the requirements that are applicable for each scheme.

# 7. Working instructions

## 7.1 Instruction for Team Leader

For an initial application and extension of scope, the Team Leader should review the Quality Documentation using the relevant cross reference matrix **F 4.10**. The Team Leader should compile the inputs from the other Assessment Team members and provide a consolidated document review report, **F 4.02**, to the Case Officer. The Team Leader should recommend which of the following actions should be taken:

- 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.

For performing assessment of applicant and accredited CBs, the tasks for the Team Leader will consist of the following:

### 7.1.1 Prior to the assessment visit:

- a) The Team Leader should review the relevant section of the organisation's documentation against **F 4.10**. In case of an application:
  - If there are essential shortages which are vital for the applicant about the applicant's documentation for accreditation, a written feedback to the Case Officer should be given together with a note identifying the shortages, and which can be transmitted to the applicant.
  - If there are no essential shortages, the Team Leader should either conduct the preliminary visit or the initial assessment as mutually agreed by MAURITAS and the CB.
  - Team leader is responsible that the other participants in the Assessment Team have clear instructions about what is expected to be done, including time limits. The instructions must not be in conflict with MAURITAS agreement with the current Assessor/Technical Expert.

- b) In case of applicant CBs, the Team Leader will carry out a document review exercise. The Team Leader should compile a report taking into consideration the review of the Assessor and /or Technical Expert. The Team Leader should then submit the document review report **F 4.02**, within 3 months to the Case Officer for onward submission to the CB. Comments from the other members of the Assessment Team will be included in the report.
- c) As a result of the document review, the Team Leader should make use of the report, **F 4.02**, to prepare for the assessment exercise.
- d) After consultation with the Assessment Team, the Case Officer should plan for the visit and necessary witnessing. The Case Officer coordinates with the CB and Assessment Team, in writing, regarding the assessment exercise. The Case Officer sends a copy of the plan to the Assessment Team and the CB.
- e) The Team Leader should give necessary guidance to its Assessment Team. (This may be done in a briefing meeting within the Assessment Team before the opening meeting).

#### **7.1.2 During the office assessment and witnessing:**

- a) The Team Leader should assess against the requirements of the relevant accreditation criteria, **F 4.10**.
- b) The Team Leader should witness the CB's audit at a certified/applicant client organisation and evaluate CB's competence. The Team Leader should also ensure that the CB covers all relevant aspects. Forms **F 4.03** and **F 4.10** should be used to carry out witnessing and office assessment respectively.
- c) During witnessing, the Team Leader should abstain from being actively engaged in the process. In order not to interfere with the c CB's personnel, the Team Leader may ask questions, to a limited extent, in order to clarify things.
- d) If the witnessing takes place at companies where there is a requirement for the use of personnel protection equipment, the Assessment Team should call attention to that, if protection equipment is not distributed. In such cases, if protection equipment is not provided, the Assessment Team should not perform the witnessing.
- e) The Team Leader should carry out the opening meeting, the assessment, the witnessing, the closing meeting and reporting of nonconformities as described in this document.
- f) The Team Leader should liaise and guide the other members in the Assessment Team.
- g) The Team Leader should witness the CB performing relevant audits and record same on **F 4.03**. Team leader should, together with the Assessor and/or Technical Expert, give feedback to auditors who have been witnessed when the witnessing is finished.
- h) Unsatisfactory performance should be reported as nonconformities, **F 4.05**.
- i) The Team Leader should verify the relevant implementation of corrective actions for nonconformities raised during the previous MAURITAS visit, **F 4.05**
- j) The Team Leader should evaluate the work done by the other Assessors and/or Technical Experts.
- k) The Team Leader should only assign tasks to the Assessment Team members for which they have been qualified to perform.

### 7.1.3 After the assessment visit:

- a) For Office Assessments, the Team Leader should evaluate the reports, **F 4.07**, from the other Assessors for requirements they covered during the assessment visit. If they are satisfactory, the Team Leader merges and sends a final report, **F 4.07**, to the Case Officer within **1 month** from assessment date.
- b) For Witnessing Assessments, the Team Leader will prepare a report on the witnessing carried out using form **F 4.03**. The MAURITAS Staff, accompanying the Technical expert, should evaluate the report **F 4.15** and merges the content of the latter in his/her report **F 4.03**. Both reports are sent to the Case Officer within **1 month** from assessment date, to be sent to the CB.
- c) If necessary, the Case Officer should liaise with the Assessment Team and the CB to agree upon a time for verification of corrective action.

## 7.2 Instruction for Assessors and/or Technical Experts concerning ISO/IEC 17021-1 Management Systems (certification of Quality Management Systems, Hazard Analysis and Critical Control Point Systems, Food Safety Management Systems, Environmental Management Systems and Information Security Management Systems).

### 7.2.1 Initial application and Extension of Scope:

- a) The Assessors and / or Technical Expert should review the Quality Documentation using the relevant cross reference matrix (**F 4.11 / F4.16 / F4.17**) and submit the input to the Team Leader for compilation and generation of the consolidated document review report, **F 4.02**.
- b) For performing assessment of applicant and accredited CBs, the tasks for the Assessor and/or Technical Expert will consist of the following:

### 7.2.2 Prior to the assessment visit:

- a) The Assessor and/or Technical Expert should review the relevant section of the organisation's documentation against **F 4.11, F 4.16 or F 4.17** and submit same to the Team Leader for generation of document review report **F 4.02**.

### 7.2.3 During the office assessment and witnessing:

- a) The Assessor should assess against the requirements of the relevant accreditation criteria as per forms **F 4.11, F 4.16 or F 4.17** and should use these forms to carry out the office assessment.
- b) The Assessor and/or Technical Expert should witness the CB's audit at a particular company, evaluate CB's competence within a technical area, interview CB's auditors with technical competence etc. The Assessor and/or Technical Expert should also ensure that the CB covers all relevant aspects. Forms **F 4.03** and **F 4.15** should be used respectively to carry out witnessing assessment.
- c) During witnessing, the Assessor and/or Technical Expert should abstain from being actively engaged in the process. So as not to interfere with the CB's auditors, questions can, to a limited extent, be asked in order to clarify things.
- d) If the witnessing takes place at companies where there is a requirement for the use of personnel protection equipment, the Assessment Team should call attention to that, if protection equipment is not distributed. In such cases, if protection equipment is not provided, the Assessment Team should not perform the witnessing.

- e) The Assessor and/or Technical Expert should witness the CB performing relevant audits and record same on **F 4.03** as mentioned above. The Assessor and/or Technical Expert should, together with the Team Leader, give feedback to auditors who have been witnessed when the witnessing is finished.
- f) Unsatisfactory performance should be reported as nonconformities, **F 4.05**.
- g) The Assessor should verify the relevant implementation of corrective actions and root cause analysis for nonconformities raised during the previous MAURITAS visit, **F 4.05**
- h) The Assessor should liaise with the Team Leader on progress of the assessment.
- i) The Assessor should review the relevant section of the CB's documentation.
- j) The Assessor and/or Technical Expert's services are used in the assessment of systems certification, in connection with witnessing of a CB's audit at a particular company, evaluation of a CB's competence within a technical area, assistance by interviewing of a CB's personnel with technical competence etc. For example, by witnessing of a CB for its environmental management systems it will be relevant to include Assessor and/or Technical Expert with environmental competence.
- j) After a witnessing of a CB's audit at a company, a report, **F 4.03**, should be prepared by the Assessor and/or Technical Expert and same should be submitted to the Team Leader within **3 weeks** after the witnessing, unless otherwise agreed.

## 8 Nonconformity report

**8.1** Nonconformities are classified into two categories depending on the degree of seriousness: **Major** and **Minor** nonconformities.

**8.2** Nonconformity report form, **F 4.05**, should be used to describe the categories of the nonconformities. Follow up and verification are carried out on the agreed corrective actions during the next visit.

**8.3** The nonconformity report should contain only factual observations related to lack of compliance within a specific clause in the applicant's own procedures or with respect to MAURITAS regulations or the requirement of the accreditation standard. The assessor should avoid making tendentious or emotive statements in the report or using it as opportunity to lecture the organisation on how to manage its affairs. It should be the responsibility of the Team Leader assisted by the Assessment Team to discuss and agree on all identified nonconformities prior to the closing meeting.

**8.4** All relevant sections in the nonconformity report form should be filled in.

**8.5** The time limit for the CB to send its root cause analysis and proposed corrective actions for all nonconformities is **1 month for initial assessment** and **2 weeks for assessments, re-assessments or extension of scope**. The Assessor and /or Technical Expert must, within **2 weeks** from date of receipt of proposed corrective action and root cause analysis from MAURITAS, forward to the Case Officer a recommendation about closing of each nonconformity.

**8.6** The time limit for the CB to send its implemented corrective actions for all nonconformities is within **3 months for initial assessment** and **2 months for assessments, re-assessments or extension of scope**. The Team Leader may convene the Assessor and/or Technical Expert where necessary for a meeting to review the technical non-conformities, root cause analysis and the corrective actions and ask for feedback on the corrective actions.

**8.7** The Assessment Team may close the nonconformities based on the following judgement:

- based on satisfactory descriptions of corrective actions and objective evidence;
- after a visit to verify the implementation of the corrective action;

**8.8** All nonconformities have to be verified at the next visit.

**8.9** The Assessment Team must, within **2 weeks** from date of receipt of root cause analysis and corrective action, forward to the Case Officer a recommendation about closing of each nonconformity. Alternatively, they must give feedback in writing to MAURITAS about nonconformities where corrective actions are not acceptable.

**8.10** In case of recommendation for suspension, MAURITAS procedures for suspension will be followed.

## **9 General attributes of Assessors and/or Technical Experts**

**9.1** During an assessment visit or witnessing, different problems may show up. It should always remain the duty of the individual Assessor and/or Technical Expert to weigh all the evidence available before making a judgment on a particular situation in an organisation. The Assessors should always bear in mind the need for tact and objectivity. It is important to be aware that to be assessed may be a great mental stress for the auditees.

**9.2** The Assessors and/or Technical Experts should act in a prejudice manner and be able to accept new solutions on old problems as long as the existing requirements are satisfactory met.

## **10. Assessor/Technical Expert Monitoring**

**10.1** At least once every three years, MAURITAS should carry out monitoring of each active Team Leader and Assessor and Technical Expert, **F 1.27**. This monitoring should be performed during a visit to a CB or during a witnessing audit and should be recorded. The monitoring should be performed by the Director of MAURITAS or any relevant senior staff designated by him.

**10.2** Every three years, all Team Leaders, Assessors and Technical Experts will be requested formally by MAURITAS to confirm, or otherwise, that their originally identified competencies are still valid. This may be done through the use of an updated CV. The Assessors will be expected to inform MAURITAS of any changes.

## **11. Invoicing**

**11.1** For local Team Leaders, Assessors and Technical Experts who are hired as private persons by MAURITAS, they should be remunerated at a rate fixed by MAURITAS.

**11.2** In cases where no suitably qualified Team Leader/Assessor can be identified in Mauritius, it may be appropriate to consider using a Team Leader/Assessor who is already qualified and trained by another accreditation body.

**11.3** In both cases, **MAURITAS G7** will be followed.

## **12. Impartiality**

**12.1** MAURITAS Team Leaders, Assessors and/or Technical Experts are obliged to inform MAURITAS if they or their employers have performed any service during the last three years for a client being assessed by filling in form **F 1.23**, prior to any assessment activity

**12.2** In the same way, they are obliged to inform MAURITAS of other situations which possibly can affect the evaluation of a current client.

## 13. Confidentiality

**13.1** MAURITAS Team Leaders, Assessors and Technical Experts are obliged to be strictly observant of the rules of the Official's Secrets Acts and MAURITAS rules for confidentiality. The Assessment Team members are obliged to sign the MAURITAS declaration of confidentiality, **F 1.02**, prior to being given access to any information.

**13.2** Information about MAURITAS applicant/accredited CBs which is acquired through any assessment activity as MAURITAS Team Leader/Assessor and/or Technical Experts should not be revealed to a third party.

**13.3** Documentation received from MAURITAS or MAURITAS applicant/accredited CBs or documentation prepared by the Assessor himself should be protected against access from a third party. Confidential documents must not be sent by telefax if not agreed by the affected party.

**13.4** Quality documentation as well as management review, complaints, internal audit reports and other documents provided by the CB must be destroyed/deleted by the Assessment Team after completion of the assessment.

**13.5** MAURITAS policy is also not to reveal information about applicant's identity outside MAURITAS.

## 14. Distribution of documents

**14.1** MAURITAS management system has all the necessary documents for performance of accreditation activities and they are accessible on the MAURITAS website ([www.mauritas.org](http://www.mauritas.org)). MAURITAS will inform their Team Leaders, Assessors and Technical on all relevant documents which are necessary for performance of MAURITAS tasks.

**14.2** Information about changes will normally be done by use of e-mail or from MAURITAS website. Assessors and Technical Experts have the obligation to keep themselves updated.

## 15. Related Forms:

Declaration of impartiality	F 1.23
Declaration of confidentiality	F 1.02
Report from Document Review	F 4.02
Nonconformity report	F 4.05
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
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
Contract Agreement for the provision of independent assessor/technical expert services	F 1.07

**Appendix A: Amendment Table**

SN	Section	Amendment