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## **IOAS ACCREDITATION and ASSESSMENT**

### **Application information**

#### **SUMMARY OF PROCEDURES**

This document guides you through the accreditation/assessment application process. If you have any questions at any time, please don't hesitate to contact us.

1. The applicant certification body (CB) requests information indicating which accreditations or assessments are required.
2. IOAS will provide an application pack and appropriate information for the accreditation(s) or assessments requested. We are happy to arrange a conference call at this stage to clarify questions on schemes and scopes.
3. The CB completes an application form, indicating the scope of accreditation being sought including the applicable Standard(s) and categories.
4. After review and approval of the application form and supporting documents, the application is accepted.
5. IOAS will create a document checklist indicating all requirements that must be addressed by the CB in their documentation and provide it to the applicant CB along with the IOAS service contract and Application fee invoice (all details of fees are contained in fee schedule [LS0503](#)).
6. The CB collates necessary documentation and completes a document checklist. It is returned with an application fee and the signed accreditation service contract.
7. The documentation is checked by IOAS to see if it is sufficiently comprehensive and with required text in English. Note that all your standards (if part of the application) need to be translated. We also need all main procedural and policy documents translated whether these are all in the Quality Manual or an Operating Manual or are just individual documents. Finally, if there is anything else referenced in the document checklist, the relevant paragraph or page or section must be translated. The CB is informed of necessary additional information or translations.
8. IOAS conducts a comprehensive review of the documentation and prepares a document review.
9. IOAS informs applicant of the non-compliances found in the review of documentation. These are noted as 'non-conformities' (NCs), 'deficiencies' (Ds) and 'more information requests' (MIs). The CB is required to supply evidence of corrective actions to remedy all NCs and Ds and explanation of any MIs within 6 weeks.
10. IOAS reviews the corrective actions taken by the CB and if these are satisfactory the visit is organised. If they are not satisfactory IOAS will normally allow an additional period for compliance. Where the CB has not made sufficient progress on resolving issues, an explanatory visit may be offered (at CBs expense) or the IOAS may decide that a visit will not be possible until the compliance issues are resolved and recommend to the IOAS Accreditation Committee to terminate the application.
11. IOAS prepares and sends an assessment visit plan. The plan includes name(s) of assessor(s), a proposed visit schedule, and cost estimate. The duration of the visit is dependent on the complexity and size of the CB and the number of assessments applied for.



12. An invoice is sent to CB for the visit, reporting and travel days indicated in the visit plan. This must be paid prior to the visit.
13. The assessor will arrange the visit with the applicant CB. The visit will be carried out and a report compiled.
14. IOAS will review the report and inform the CB of any additional non-conformities or deficiencies. The CB will be required to correct all NCs and Ds within 6 weeks for accreditation to be possible. A copy of the visit report will be sent to the CB.
15. The CB may appeal overall decisions and may also challenge the justification for individual non-conformities within certain timelines.
16. An additional invoice for travel and accommodation expenses will be sent to the CB.
17. IOAS Accreditation Committee reviews the corrective actions and if these are satisfactory, accreditation will be granted or recommended depending on the scheme requirements. If unsatisfactory, an additional period for corrective actions may be allowed or the CB will be informed of IOAS's unwillingness to accredit and the reasons therefore.
18. The appropriate Annual Fee is paid by the CB prior to receiving the accreditation certificate.
19. For formal accreditation a Certificate of Accreditation will be issued to the accredited organisation after full payment is made. Where an assessment is being made for regulatory purposes, a report and/or recommendation is made available.

*Note: The above is meant only as a quick guide and does not substitute for the full procedures.*  
Abbreviations used: AC - Accreditation Committee, CB - Certification Body, CM - Client Manager,

### **Notice to Applicants on Scheduling Time**

The purpose of this notice is to inform you of the likely demands on staff time and budget in the various stages of the processing of an accreditation or assessment application to the IOAS. CBs should use this information in conjunction with a timetable to assist in forward planning, thereby minimising delays and potential disruption of your normal office routines.

#### **Pre-application:**

This is probably the most time-consuming stage for the applicant, particularly if the documents require translations. Depending on your circumstances it may be worth considering engaging a professional translator to assist in the process.

In order to avoid confusion and consequent delay, it is important that the document checklist is completed fully. For this reason, the instructions accompanying the checklist should be carefully read.

Although it is essential that before application the CB has read the scheme requirements and prepared suitable system documentation it is possible that you will not have some of the documents required. This should be indicated on the document checklist or your Client Manager (CM) will not know whether the omission is accidental. It is up to you to decide whether you wish to immediately create documents that are missing although it is recommended that the process of drafting be started even if the document is not included in the application. Apart from the most essential documents, the fact that a document does not exist is unlikely to prevent the application being accepted. Instead it will be noted as a nonconformity in the screening and time allowed for you to develop the document.



### **IOAS document review:**

During the review of documentation, your CM may contact you for clarification of some issues, for further translations or for additional documents. The extent to which this is likely depends largely on the care with which you completed the document checklist and followed instructions regarding translations. In cases where substantial portions of the documentation are missing, the CM may request additional documentation before beginning the full screening which can lead to considerable delay. Without delays you can expect this part of the procedure to take 2 to 3 months.

### **After the screening**

Once your documentation has been screened against the relevant requirements you will be sent both the document review report and a list of non-compliances in an excel spreadsheet format. The list will be divided into **Non-conformities** (NCs), **Deficiencies** (Ds) and requests for **More Information** (MIs). You will be required to take corrective actions to resolve all non-conformities and respond to requests for More Information.

The time period allowed for submitting the corrective actions to NCs and Ds is 6 weeks. If you need your Board of Directors or some other organ to approve changes to policies and procedures or production standards it is important that you schedule such a meeting to fall within these 6-week period. The IOAS does not accept draft documents as evidence of compliance.

### **Arranging the visit**

Shortly after completing the document review your CM will contact you to start arrangement for the on-site visit. The CM will require your assistance in providing the information required to work out the details of the visit. You will be given a week to object to the assigned assessor/s or accompanying observer/s if applicable. Also notice that the necessary staff included on the visit plan must be available during the visit as well as members of any of the CB committees if requested. If no objection received after that week, IOAS will proceed with the logistics of the visit (ticket purchase, accommodation booking, etc).

Without delays this procedure would normally take about 1 month as there needs to be some time for the assessor to prepare sufficiently for the visit. Various delays may occur. If you object to the assigned assessor, and your objection is accepted by IOAS, time will be needed to make alternative arrangements. You should not, however, refrain from such objections just to save time. During preparation of the visit plan, the CM will also determine the exact duration of the visit and you will be asked to provide information to make this calculation possible. To avoid delays you should provide as comprehensive a response to the CM questions as you are able. Distances and travel times to the various regions in which you operate can be compiled beforehand and thus aid in completing this process as swiftly as possible.

### **The Visit:**

The visit consists of an interview with CB personnel, review of company and quality system files, review of operator files and visits to operators. IOAS will choose one or more operators to carry out “witness audits” during a normal scheduled inspection (i.e. accompany the inspector on his/her visit to observe the process.) and “review audits”, visiting operators to check the accuracy of the previous inspection reports. All these visits shall be arranged before the visit.

The assessor visit will make considerable demands on your staff time. Interviews will be conducted with key personnel including relevant Board or Committee members and the assessor will require your assistance to locate information in the files. A certain amount of disruption to normal office procedures can be expected.



CBs may choose whether they wish to provide transport for the assessor, rather than bearing the cost of car hire where applicable.

In case the operator files in the office are not in English or in a language that IOAS assessor can understand or the on-site visits are carried out in other language but English, the CB shall arrange for translation to the IOAS assessor.

### **Following the visit**

A report will be compiled following the visit. This will include any non-compliances already noted by the assessor at the visit exit interview. As before, the list will be divided into non-conformities, deficiencies and observations. There may also be a section with questions where the IOAS needs more information. You will be required to take corrective actions to resolve all non-conformities, deficiencies or give more information. The time period allowed for these corrective actions and submission of further information is 6 weeks.

If the assessment visit revealed significant failings in performance IOAS may decide that another short visit will need to take place to check on the corrective actions that have been made before accreditation is possible.

### **Annual update and Surveillance**

Once accredited, the CB is subject to ongoing monitoring. The Annual update (doc FR0505) requires you to report on changes that have occurred in the previous year. Detailed instructions are sent to all CBs at the beginning of the calendar year or some months before a surveillance visit is due.

Review of the Annual update report will be followed by a surveillance visit. At this visit you will be required to have at hand all documentary evidence of your compliance with the applicable requirements.

### **Seeking Assistance**

If at any stage in the process you are unclear as to the requirements, you should seek assistance from your assigned CM. This can considerably reduce later delays resulting from incorrect or deficient submissions.

It is not possible to give an exact timetable for the completion of the assessment process. There are a number of factors that can delay completion of any of the stages in the process. Applicant CBs should be aware of these and attempt to plan ahead to avoid delays as much as possible.

### **Neutrality of the Accreditation Process**

The neutrality of the accreditation process is ensured through the structure of the CB and by means of a number of procedures and policies. These are summarised in IOAS General Operating Manual and separate scheme requirements.

Declarations of interests are held on file for all assessors and for the members of the IOAS Board and Accreditation Committee. These are updated and reviewed annually to determine any conflicts. A list of CBs from which individuals will be excluded is kept. In addition, the applicant CB may object to any personnel if a conflict of interest is perceived.



All accreditation sessions are preceded by members of the AC declaring any interests they may have in relation to the CB case to be discussed. The Programme Manager has the AC members' list of exclusions at hand. Any person with a conflict is required to absent themselves from the discussion.

It should be noted that IOAS AC members do not normally receive the original CB information such as the rules and procedures and financial data. Unless there is good reason, they receive only the screening and assessment visit reports and the non-compliance forms.

Applicant CBs may themselves object to particular members of the AC being present in discussions concerning their accreditation. Such objections should be made at the time of application and must be in writing, stating the reasons for the objection. However, please note that all members of IOAS AC are appointed in their own right as individuals and not as representatives of organisations. Accreditation discussions are conducted in a spirit of neutrality and fairness.

Applicant and accredited certification bodies are able to check the composition of the IOAS Board of Directors, the Impartiality Committee and the Accreditation Committee by referring to the IOAS web site.