



Procedure PR0501 - Assessment and Re-Assessment Procedures

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A. Preamble

A.1 Introduction and purpose of the policy

The purpose of this document is to describe all procedural steps to determine whether an applicant or re-applicant Certification Body (CB) complies and continues to comply with IOAS requirements and those of the relevant scheme owner(s).

A.2 Scope

This procedure covers assessment and re-assessment processes only and does not refer to surveillance, which is documented in [PR0508](#) Surveillance Procedures. Assessment organisation and assessment procedures are treated separately in [PR0503](#) and [PR0504](#). For transfers of accreditation see [PR0519](#). Refer to the relevant flow charts ([PR0501a](#) and [PR0501b](#)) for details on which template letters and emails are applicable to each step in the process. Each of these templates also includes the appropriate deadlines and timeframes that the CB must adhere to.

A.3 Definitions

Reference is made to the relevant IOAS Operating Manuals for general definitions.

A.4 Distribution and Access

This policy is distributed to all Board members, Accreditation Committee (AC) members and personnel. It is available to all interested parties, including applicant and accredited certification bodies, on request.

A.5 Authority and revision

This policy is approved by the IOAS Executive Director (ED). It is the responsibility of the ED to review the appropriateness of the procedure from time to time. It may be revised when the need arises. Revisions must be approved by the ED. Its effectiveness in meeting the quality policy of IOAS will be assessed during Internal Audit and any measures for improvement will be communicated to the ED and the Board.

B. Access to Accreditation

B.1 IOAS works with a number of scheme owners relevant to the fields of organic and sustainable agriculture, environmental management, fair trade and social justice.

B.2 Application for accreditation or assessment is open to all certification bodies whose activities fall within these areas of interest. Current schemes and accepted scopes of activity offered by IOAS are described on IOAS website at www.ioas.org.

B.3 IOAS is willing to discuss applications relating to programmes and scopes that are not currently covered and will assess whether they contribute to the IOAS mission and whether sufficient expertise and resources are available before proceeding.

B.4 Access is not conditional upon membership of any association or group, the size of the applicant or the number of CBs already accredited. Some scheme owners with which IOAS works have their own application procedure and requirements (including application fees) which must be observed before IOAS can proceed with the assessment. When this is the case, it is indicated in the relevant IOAS Operating Manual for the scheme.



C. Language of Operation

C.1 The operating language of IOAS is English and all formal written communication between parties is conducted in this language. For this reason, CBs need to have one staff member (preferably) or at least one other individual available with full command of English.

D. Status of Certification Body (CB)

D.1 Applicant CBs shall have access to and have read all relevant scheme owner documents, IOAS procedures for accreditation and the IOAS contract of service and shall have understood the requirements and adapted their certification programme(s) to comply with such requirements before application.

D.2 Applicants shall have a fully developed certification programme at the time of application in order that the IOAS assessment is meaningful. This means that the CB has an established quality system and supporting documentation relevant to the scheme(s) applied for.

D.3 IOAS shall conduct an assessment, including audits of clients of the CB (i.e., operators), only when the CB can guarantee the availability of at least one operator that can be the subject of a witness audit during assessment.

D.4 Accreditation shall not be awarded until a certification decision has been made for at least one operator under the scheme. Where necessary, both the witness audit and the certification decision can be mock processes.

D.5 Where scheme owners prescribe, the number of operator audits at the time of the initial assessment may be more than that stated above. The relevant IOAS Operating Manual for each scheme indicates whether this is the case.

D.6 Unless scheme owner rules state otherwise, CBs must have at least one operator in the scheme before the first anniversary of their initial accreditation decision and must maintain at least one client in the programme; otherwise, the accreditation shall be withdrawn.

D.7 CBs that are already accredited by another ISO/IEC 17011-compliant entity and that wish to transfer accreditation to IOAS for the same scope may do so without undergoing a full assessment process. See the IOAS transfer procedure ([PR0519](#)).

E. Application

E.1 For those schemes that require approval by the scheme owner and/or ISO/IEC 17065:2012 accreditation as a pre-requisite, the IOAS application review will only commence once confirmation of acceptance has been received from the scheme owner and/or a copy of the ISO/IEC 17065:2012 accreditation certificate is supplied.

E.2 On initial enquiry, IOAS will send the CB the application ([FR0501](#)) and all the referenced documents.



- E.3 The CB is asked to complete and return the application form ([FR0501](#)). Any CB documents referenced in the application must be also submitted.
- E.4 Upon confirmation that the applicant has submitted a complete application, the CB is sent an application acknowledgement, and all personnel are notified that the application has been received so that any conflicts may be declared.
- E.5 For new applicants an invoice is requested for the application fee. The Finance Administrator (FA) will send the application invoice to the CB.
- E.6 Upon receipt of application fee payment for new applicants, the responsible personnel will communicate receipt of the completed application to IOAS management and the OM will identify the CSM who will conduct the review of the application.

F. Acceptance of Application

- F.1 The application review is conducted by the CSM to verify scope and IOAS resources in terms of competence and personnel availability to ensure that the application can be handled in a timely manner. The review also includes an evaluation of the CB's understanding of the accreditation requirements and the overall suitability of the application. The results are documented on the application review record ([FR0500](#)).
- F.2 If the review process deems the application unsatisfactory, the CSM sends out an application rejection letter, providing the reason for the rejection and information on what the CB needs to do before they can resubmit. Three rounds of submission are permitted, after which the application is cancelled. The decision on cancellation will be made by the CSM in consultation with the OM.
- F.3 If the review process deems the application satisfactory, the CSM will enter the CB data into the database and will send the application acceptance letter, including the Contract for Provision of IOAS Assessment and Surveillance ([PL0502](#)) and list of CB documents ([FR0598](#)) to be submitted by the applicant for the document review.
- F.4 Then an invoice is requested for the applicable document review fee. The FA will send the document review fee invoice to the CB based on the scope indicated in the application form (for re-applications the CB is invoiced the Re-Applicant fee only, which covers the document review).
- F.5 In the event that IOAS is willing to accept a CB's initial application but is not able to conduct the initial assessment in a timely manner, this will be communicated to the applicant CB for their consideration (this is not applicable to re-applications).
- F.6 If needed, an explanatory meeting with the CB is scheduled to discuss the assessment and accreditation process in more detail.



G. Receipt of CB Documents, Document Review and Issue of Reports

- G.1 The CB returns the completed list and supporting documents, including the signed contract (for new applicants only), within the timeframe indicated in the application acceptance letter.
- G.2 For new applicants, once the signed contract and payment of the document review fee are received, the Communications Manager (ComM) is notified to post the new application on the IOAS website. The ComM posts a reapplication for accreditation on the IOAS website when the reapplication is received and accepted.
- G.3 Once all requested documents and payment of the document review fee are received, the CSM acknowledges receipt and informs the CB of the assigned assessor. If the CB objects to the assessor, they must inform IOAS, indicating the reason for the objection in writing.
- G.4 The document review is conducted against the accreditation requirements and the requirements of the applied scheme(s). For reassessments, the assigned assessor shall also review the background material of the CB, which should at least include the Strengths & Weaknesses form. When deviations are identified, corresponding findings shall be raised.
- G.5 Once the document review is completed the strengths and weaknesses form is updated (or initiated if new applicant) by the assigned assessor using [FR0508](#).
- G.6 Following completion of the document review, it shall be peer reviewed by another assessor if the original reviewer has been employed by IOAS for less than 12 months, has conducted less than 3 document reviews OR on request by the original reviewer according to requirements in PL0402.
- G.7 Once finalised, the document review report is made available to the CB. No submission by the CB is required before the (re)assessment. All issues identified during document review will be reviewed by the assessor at the time of the assessment.
- G.8 However, if Critical non-conformities (CNCs) are identified by the assessor at document review, the results of the document review are sent to the Technical Director (TD) for review prior to sending it to the CB. The TD decision could be that:
- G.8.1 The issues identified are not serious enough to consider them as critical and therefore, they are downgraded to NCs. The document review is provided to the CB and move forward to the (re-) assessment; **or**
- G.8.2 The issues identified are serious enough to be graded as CNCs, but CB can be given the opportunity to address them before continuing. In this case, the document review is provided to the CB with:
- a. In the case of first applicants: an intent of application termination if the CNCs are not addressed by the time of the assessment, in accordance with the termination policy ([PL0519](#));



- b. In the case of re-applicants: a notification of intent to suspend the accreditation if the CNCs are not addressed within 3 weeks; **or**

G.8.3 In the case of first applicants, the issues identified are not only serious enough to be graded as CNCs but also to consider that the assessment process should be halted immediately and prevent the application from going any further. In this case, the document review report is provided to the CB with an intent of application termination and one week to provide any comments on the report that will be forwarded to the Accreditation Committee for a decision on whether or not to issue the CB a termination letter.

H. Assessment Arrangements

H.1 Upon completion of the document review, the initial assessment arrangements may be undertaken in accordance with [PR0503](#) and a draft assessment plan is prepared by the CSM in consultation with the assigned assessor.

H.2 The CB is asked to supply information on the operator audit(s) that will be conducted as part of the assessment process.

H.3 Once the assessment plan is confirmed by all parties, it is sent to the CB.

H.4 The CSM ensures that all forms and documents required for the assessment are made available to the assessor, which shall at least include the Strengths & Weaknesses form, previous assessment report and all non-conformities and corrective actions related to that assessment.

For assessment organisation and assessment procedures, see [PR0503](#) and [PR0504](#).

I. Assessment Report and Issuance of NCs

I.1 At the exit meeting, the assessor shall communicate the NCs identified during the assessment to the CB and inform them of the due date for submission of corrective actions, which shall be 6 weeks from formal issuance of NCs. At this point, no additional NCs or CNCs can be added to the report but recategorization may occur in the case of CNCs. NCs from prior assessments should be reviewed before the exit meeting, in the event that a current NC should be pointed out as a repeated issue. Repeated OFIs may be recategorized as NCs and repeated NCs may be recategorized as CNCs. Following completion of the assessment, the assessor shall send to the CSM a copy of the exit interview that was provided to the CB at the end of the assessment. The assessor must also submit expenses and additional time slip (if applicable) to the IOAS finance department within 7 days of completing the visit.

I.2 Assessors must submit to the CSM the completed assessment report and updated S&W form within 14 days from exit meeting.



When CNCs are identified

- I.3 If CNCs are raised at the Exit meeting, they are submitted to the TD for review immediately after the assessment.
- I.4 After confirmation of the CNCs by the TD, a notification will be issued with a 6-week due date to address the CNCs. The 6-week due date is calculated from the date of formal issuance of the CNCs. In the case of a new applicant, the notice is issued with an intent of application termination, and in the case of re-accreditation, the notification is issued with an intent to suspend.
- I.4.1 The CB is not permitted to make a second submission within the 6-week period (as is permitted under J.2 below when only NCs are cited). Submissions to resolve all CNCs and NCs must be made as a single submission; multiple submissions on different dates for individual CNCs or NCs will not be accepted.
- I.5 In the case of a new applicant, or for a COR re-accreditation, the CB may request additional time to resolve the CNCs. Such requests for additional time must be received prior to the original due date.
- I.6 If the assessor considers the CNCs are resolved within the stipulated timeframe, the matter will be sent to the TD for lifting the intent to suspend or the intent to terminate the process in the case of a new application and continue the (re)accreditation process. The CSM will inform the CB accordingly.
- I.7 If the assessor does not consider the CNCs resolved within the stipulated timeframe (including a thorough root cause analysis and corrective action plan), or the TD disagrees with assessor's review, the entire assessment package (including CB responses to any cited NCs) will be sent to the Accreditation Committee (AC), after TD review, for a decision. The 3-week additional submission permitted for NCs described in Section J.4 below is not applicable under these circumstances and no additional time is given to resolve either the NCs or the CNCs. The CSM will inform the CB that the file has been sent for AC consideration. The AC shall take into account any responses and comments submitted by the CB and decide whether to:
- I.7.1 Require an additional assessment to verify implementation of corrective actions before either (re-)accreditation or termination/suspension/withdrawal respectively.
If the AC requires an additional assessment, this will be scheduled at the earliest availability of the CB and IOAS assessor (for re-accreditation, the expiration date of the CB's current accreditation certificate must also be considered). This should normally be conducted by the same assessor who completed the original assessment; **or**
- I.7.2 Immediately suspend or withdraw accreditation or terminate the process in the case of a new application. In this case, all outstanding NCs related to the suspended, withdrawn or terminated scope will follow the same process as the CNCs. In case of suspension or withdrawal of accreditation, these shall be implemented according to policies [PL0506](#) or [PL0507](#), as appropriate. Termination of assessment shall be implemented according to [PL0519](#).



When no CNCs are identified

- I.8 The CSM sends the assessment report to the CB together with a cover letter reminding the CB about the 6-week due date for submission of evidence of corrective actions to address all NCs (see Section J.1 below).

Optional Quality Review

- I.9 Periodically, the Technical Director and/or Operations Manager may decide that the report should be reviewed to ensure that all required data fields are complete, evidence is sensible, NC are stated clearly, and categorisation is correct, and references line up. Determination that a quality review is needed may be based on considerations such as previous poor CB feedback about an assessor, complaints about clarity of a particular assessor's report, Appeal Committee concerns about the content of an assessor's reports, etc. When a quality review is deemed necessary, clarification or further explanation from the assessor may be requested. In cases where there is disagreement between the assessor and the peer reviewer, the TD (or designee) is consulted for their opinion on the perspectives of both the assessor and peer reviewer to bring about resolution. The reviewer shall complete form [FR0591](#) to assess the quality of the assessment report, which will be taken into consideration as part of assessor's performance monitoring and calibration.

J. Review of Non-Conformities (NCs) and Opportunities for Improvement (OFIs)

- J.1 In order to resolve NCs, the CB shall submit (as appropriate) corrections that include an adequate root cause analysis, analysis of extent and corrective action plan and/or corrective action(s) (collectively referred to as a CAR submission) within 6 weeks of formal issuance of the NCs. Note that, for corrective actions that require a longer implementation period, a detailed plan with specific timelines might be accepted to consider the NC resolved.
- J.2 CAR submissions for all NCs from the same activity with the same due date must be made as a single submission. If the CB's first submission (*1.1 submission*) is received at least 7 calendar days before the original deadline, and the submission is determined by the Assessor to be inadequate, the CB will be informed that they are permitted to make a second submission (*1.2 submission*). The due date for the end of the 6-week period will be adjusted, to reflect a pause in the submission period whilst the review of the 1.1 submission was completed. If the CB's submission is received less than 7 calendar days before the due date, only one submission in the submission period is permitted. (Note – as set out in section I.4.1 above, no 1.2 submission is possible, if any CNCs have been issued).
- J.3 OFIs need not be responded to but shall be reviewed at the next assessment/surveillance. If errors remain during future assessments, OFIs may be elevated to NCs.
- J.4 If the NCs are not considered resolved by the assessor by the 6-week deadline, the CSM will issue a notice with a final due date of 3 weeks to resolve all issues. This time period is referred to as submission period 2. In the case of a new applicant, the notice is issued with an intent of application termination, and, in the case of a re-accreditation, the notification is issued with a warning of potential suspension. At the end of this time period, the file will go to the AC for decision. A similar process applies for the first submission period. If the CB's submission (*2.1 submission*) is received at least 7



calendar days before the final due date, and the submission is determined by the Assessor to be inadequate, the CB will be informed that they are permitted to make an additional submission (2.2 *submission*). The final due date will be adjusted, to reflect a pause in the submission period whilst the review of the 2.1 submission was completed. If the CB's submission is received less than 7 days before the final due date, only one submission in the submission period is permitted. (Note – as set out in section I.7 above, no submission period 2 is available, if any CNCs have been issued).

- J.5 The CB may request additional time in submission period 2 to resolve the NCs (4 weeks in general). For a re-accreditation, additional time may also be requested but the expiration date of the CB's current accreditation certificate must be considered. Such requests for additional time must be received prior to the due date specified in J.4. In general, if no specific concerns are identified by the assessor during the process, the additional time will be granted. If doubts arise about the eligibility for the additional time, assessor shall discuss it with the TD before sending the intent to suspend letter.
- J.6 When the assessor has accepted the CB submission, the file is prepared for AC decision, including recommendation(s) prepared by the assessor and any additional information noted by the CSM. If NCs remain unresolved at the end of the stipulated time period, the TD is first consulted for a decision on whether:
- J.6.1 The outstanding issues are serious enough to submit to the AC a recommendation for suspension, withdrawal or termination; OR
- J.6.2 The outstanding issues are minor enough to warrant flexibility in considering downgrading them to OFIs or allowing the CB to respond further before preparing the file for AC decision.
- J.7 The AC shall decide whether to proceed with granting (re)accreditation, suspending or withdrawing the CB, or terminating the process in the case of a new applicant.
- J.8 If the decision is to suspend, the process in [PL0506](#) is followed. If the decision is to withdraw, the process in [PL0507](#) is followed. In the case of termination of application, [PL0519](#) is followed.
- J.9 If the decision is to accredit, the CSM will update the database and notify all personnel and Scheme Owners accordingly. The FA is informed to issue the First Annual Fee Invoice (for new applicants only).
- J.10 For COR accreditation, the assessment report and (re)accreditation recommendation letter is sent to CFIA. For COR re-accreditation, the recommendation is sent to CFIA two-to-three weeks before the expiry date of accreditation.
- J.11 The CSM will issue a certificate, if appropriate.
- J.12 The IOAS website CB listing is updated (in the case of COR, the update will not take place until a COR accreditation letter has been issued, at which time the CSM will notify the Communication Manager of the need to update the website).



K. Re-Application

- K.1 Every 5 years, by the date indicated in the database, the assigned personnel shall send the CB the application form together with the re-application pack, which includes IOAS [General Operating Manual](#) and corresponding scheme operating manual(s).
- K.2 In preparation of the re-application pack, IOAS personnel will ensure that a new quote and schedule are generated for the CB in the database.
- K.3 The CB is required to send the completed re-application form within a specified timeline, so that IOAS can proceed with the re-application review. Pre-approval of re-applications by scheme owners is not required unless new scopes are added.
- K.4 If the CB has not submitted the completed re-application form by the due date and has not negotiated any alternative date, the CSM will send a warning with the indication that failure to submit will result in a sanction, according to the IOAS sanctions policy [PL0505](#).
- K.5 Once the re-application form is received, the CSM will prepare the application review form ([FR0500](#)) and the same process as described under section F above for assessments will be followed.

(End)