



International Organization for Accreditation Services

**RULES & PROCEDURES
for ACCREDITATION OF
CERTIFICATION BODIES**



ACCREDITATION SCHEME FOR CERTIFICATION BODIES

RULES AND PROCEDURES FOR ACCREDITATION OF CERTIFICATION BODIES

INTRODUCTION

The **International Organization for Accreditation Services** (IOAS) is the National Accreditation Authority of Grenada established in the year 2010. The IOAS offers accreditation services to bodies that provide Conformity Assessment Services such as Certification Bodies, Inspection Bodies, Testing and Calibration Laboratories, and Bodies Certifying Persons

The work procedures of the IOAS for Certification Bodies are based on ISO/IEC 17011 – General Requirements for Accreditation Bodies Accrediting Conformity Assessment Bodies. Preference will be given to Subject Specific Documents published by International Accreditation Forum (IAF), wherever applicable. The Governing Council of IOAS or relevant advisory committees if required, will advise IOAS management in the areas for which there are no IAF or other acceptable explanatory documents available.

1. GENERAL

1.1 Scope

This document outlines the policies and procedures to be adopted when Certification Bodies seek accreditation for their certification activities from IOAS. Certification activities for accreditation by IOAS cover Product Certification and Systems Certification and Certification of Persons. Accreditation will be granted against the applicable International Standards or widely accepted standards or guidelines that are auditable or verifiable.

2. ACCREDITATION REQUIREMENTS

2.1 Accreditation Criteria

The applicable international documents, used by the IOAS for accreditation, are presented in the table below.

ACTIVITY	APPLICABLE STANDARD/GUIDE
Quality Management System Certification	ISO/IEC 17021:2011
Environmental Management System Certification	ISO/IEC 17021:2011
Food Safety Management System (ISO 22000)/HACCP	ISO/IEC 17021:2011 ISO/TS 22003: 2007
Occupational Health and Safety	ISO/IEC 17021:2011
Product certification	ISO/IEC Guide 65:1996 ISO/IEC 17065: 2012
Certification of Persons	ISO/IEC 17024:2003 ISO/IEC 17024:2012

In addition the publications including Mandatory documents and Resolutions published time to time by International and Regional Accreditation Organizations as applicable are considered as Accreditation Criteria. Depending on each accreditation scheme / scope (s) Specific criteria have been laid down and the above standard shall be read in conjunction with the relevant specific criteria.

If any document mentioned above is revised, the IOAS will automatically adopt those amendments/modifications in its criteria and parties concerned are given sufficient time as prescribed in publications of International/Regional Accreditation Organizations or as deemed suitable by IOAS for transition.

2.2 Eligibility

The applicant Certification Body must comply with all criteria of APPLICABLE STANDARD/GUIDE. In addition to this the applicant Certification Body must comply with the relevant specific criteria (if any) of IOAS for the scopes covered in their certification scheme.

Certification Bodies that perform Systems Certification activities (Quality Management System, Environmental Management System, and Food Safety Management System etc.), Product Certification or any other certification that has international or local recognition and acceptance can be accredited by IOAS.

IOAS does not accredit Certification Bodies that provide accreditation services or Certification Bodies that issue declarations of conformity using accreditation standards or standards similar to the accreditation standards.

The applicant Certification Body must ensure that their auditors are qualified and involved in continual professional development activities gaining skills and competencies as well as updating themselves to meet the demands and expectations of the clients/ stakeholders.

3. ACCREDITATION PROCESS

The accreditation process consists of registration followed by an adequacy assessment, preliminary assessment and an initial assessment (Final assessment for the grant of Accreditation). The process is completed with the decision on accreditation. After the accreditation is granted, the post accreditation phase begins.

4.1.3 Acknowledgement and Registration of Application

IOAS on receipt of application, the quality manual, other relevant documents and the fees, shall issue an acknowledgement to the Certification Body. After scrutiny of application for its completeness in all respects, a unique customer reference number shall be allocated to the particular application, which shall be used for correspondence with the Certification Body thereafter. IOAS may request for additional information / clarification(s), if necessary from the applicant Certification Body.

If, on the basis of documents and information provided by the Certification Body, IOAS is of the opinion that an assessment cannot result in accreditation, the applicant Certification Body shall be informed in writing giving reasons. An Authorized Officer under the supervision of Technical Manager of the accreditation scheme, will be appointed on behalf of IOAS to deal with the application and the case file being maintained thereafter. All information of the Certification Body shall be kept strictly confidential.

4.2 Assessment process

4.2.1 Appointment of Lead Assessor

The IOAS shall appoint a Lead Assessor from the pool of Assessors to carry out assessments on the System adopted by the applicant Certification Body. Other general criteria for the selection of Lead Assessor include his/her acceptance by the applicant Certification Body, free from any direct or indirect involvement with the particular Certification Body which may compromise his/her impartiality and independence, and availability during assessment process.

The Lead Assessor shall have the overall responsibility of conducting the Assessment Process. As such he/she shall be responsible for evaluating the adequacy of the quality manual and conducting Preliminary Assessment and Initial Assessment on the Certification Body.

The Lead Assessor shall preferably have technical expertise in one of the main disciplines for which the application has been made. However, in exceptional cases, a Lead Assessor belonging to a different technical field of expertise may be appointed considering his proven competence in evaluating Quality Management Systems.

4.2.2 Adequacy of Quality Manual

The Lead Assessor with the assistance of IOAS will commence the assessment process with an adequacy assessment -document and record review - based on the application submitted. The aim of the adequacy assessment is to determine whether the Certification Body is sufficiently

prepared for a preliminary assessment and having a reasonable chance of getting Accreditation and to ascertain the compliance of the documents with the criteria specified in the APPLICABLE STANDARD/GUIDE. The adequacy assessment is also meant to obtain a clear idea of the intended scope of the accreditation.

The Lead Assessor, shall inform IOAS regarding the adequacy of the quality manual with a report indicating inadequacies (if any) in the quality manual which in turn should be communicated to the Client Certification Body. Based on this feedback the Certification Body shall amend the manual and also implement the quality system accordingly.

If the Certification Body satisfies the relevant requirements at the adequacy Assessment stage or after the Certification Body has taken necessary corrective action based on the adequacy assessment, the assessment process will move into the next phase.

If, on the basis of documents and information provided by the Certification Body, IOAS is of the opinion that an assessment cannot result in accreditation, the applicant Certification Body shall be informed in writing and the documents concerned will be returned to the Certification Body for necessary improvement. All information of the Certification Body shall be kept strictly confidential.

4.2.3 Appointment of Assessment Team

Towards the task of on-site assessment, the Lead Assessor shall be assisted by a team of Assessors/ technical experts who will be appointed by IOAS as appropriate with the scope of accreditation and in accordance with the criteria adopted for the selection of Lead Assessors. The IOAS shall propose the composition of assessment team. The Certification Body may lodge an appeal against specific team members. Such an appeal shall be motivated by clear reasons. If no replacement is available, it is possible that the visit will be postponed, or that a part of the scope will not be assessed until a suitable replacement is found.

4.2.4 Onsite Assessment Plan

The IOAS contacts the Certification Body to agree on the date(s) and schedule for the assessment. Based on this IOAS prepares the Assessment schedule (CB-PL-01) and the composition of the team and send it across to the Certification Body well in advance.

4.2.5 Onsite Assessment

The Onsite Assessment will be carried out in two stages namely Pre-assessment and Initial Assessment (The Final Assessment for the grant of Accreditation). During both these stages witness assessment at the site of the applicant Certification Body's Client may be required.

Although there are no strict demarcations for these two assessments, the objectives of these Assessments may be expressed in the following manner.

- **Pre-assessment**

- a. Assess the completeness of the documentation structure of the implemented system
- b. Assess the degree of preparedness of the Certification Body for the assessment

- c. Study the scope of accreditation so that the time frame, number of Assessors required in various disciplines and visits to sites, if applicable, for the assessment can be determined more accurately

- **Initial Assessment**

- a. Assess the effectiveness of the implementation of the documented system
- b. Certification Body's Competence in Performing Conformity Assessment.
- c. Take a decision on the Recommendation for the Grant of Accreditation

At the end of each assessment the Lead Assessor shall submit an Assessment Reports as appropriate to the objective of the assessment.

4.2.6 Conducting the Assessment

The assessment team shall commence an on-site assessment with an opening meeting at which the purpose of the assessment and criteria are clearly defined and the assessment schedule and the scope for the assessment are confirmed. During the assessment, the Assessment team will assess the documentation and implementation of the management system as well as the competence of the Certification Body in accordance with the APPLICABLE STANDARD/GUIDE and specific criteria (if any) of IOAS. The CB shall provide with the assessment team a list of certified companies, scopes certified, certification files, list of auditors and experts, audit programme of each certified company and use of certification & accreditations logos.

In doing so, the assessment team will take a representative sample in the areas within the scope of the accreditation. This process shall be extended to witness assessment activities also. The Certification Body shall demonstrate that it is competent in all the activities at all sites for which accreditation has been requested. With regard to the management system of the Certification Body, the assessment team shall be able to assess at least one complete cycle of the Internal Audit and Management Review.

Under normal circumstances the onsite Assessment shall be terminated with the closing meeting. In the closing meeting the team discusses the results of the assessment with the Certification Body. The nonconformity reports are handed over to the Management of the Certification Body, so it can immediately proceed with the implementation of corrective action plan. The Assessment should not proceed into next stage unless all Non Conformities are satisfactorily addressed and closed.

4.2.7 Assessment Techniques

The IOAS Assessors use one or more combination of the following assessment techniques when conducting the assessment.

- **Document review:** assessing quality manuals, procedures etc. for compliance with the criteria; a document review can also involve records at the Certification Body's Location, such as personnel files, quality control charts, audit reports, management review reports, audit files etc.;
- **Office assessment:** an assessment at the premises of the Certification Body in order to assess the implementation of the system;

- **Interviews:** evaluating the expertise of the Certification Body's personnel via targeted interviews.
- **Witnessing:** observing audits and examination carried out by the Certification Body
- **Testing and Inspection :** Determination of product and process characteristics including sampling in case of Product Certification

For the purpose of witness assessment, the Certification Body may be requested to provide a list of suitable sites. However the selection of the sites will be done at the discretion of IOAS. This particular assessment shall be either compliance audit or reassessment and if these are not possible the IOAS shall witness at least two surveillance assessments for each stage.

4.2.8 Corrective Actions & Follow-up of Assessment

Certification Body shall take necessary corrective action on the remaining non-conformance(s)/ other concerns and shall submit a report on the action taken to IOAS within a maximum period of six months.

If it deems necessary, IOAS should communicate with the Certification Body and shall ensure that all outstanding non conformities are available with and are well understood by the Certification Body. IOAS should monitor the progress and coordinate the activities with regard to the closure of non-conformities. The decision with regard to closure of Non Conformities shall be taken by the Assessment Team.

When there are significant non-conformities identified during the on-site assessment, the progress is monitored closely and in this regard the IOAS may arrange for a verification visit for the closure of the non-conformities.

Whatever it may be the case all non-conformities raised during the assessment shall be closed before consideration for the Grant of Accreditation.

4.2.9 Assessment Report

The assessment report prepared by the Lead Assessor in the formats prescribed shall be handed over to IOAS once the particular assessment phase is complete. The assessment report shall contain the evaluation of compliance to APPLICABLE STANDARD/GUIDE and relevant specific criteria (if any) and the non-conformances, if any. In case of initial assessment, the assessment report shall also provide a recommendation towards grant of accreditation or otherwise.

4.3 Accreditation decision

After satisfactory closure of all non conformities, the IOAS prepares a report considering all relevant information gathered during the processing of the application, the assessment report prepared by the assessment team, additional information received from the Certification Body and the Consequent verification activities. The summary report is placed before the Accreditation Committee which is appointed by the Governing Council. The Accreditation Committee for Certification Bodies studies the final report and the recommendation given by the team then makes its own recommendations on grant of Accreditation. The Accreditation Committee recommendations regarding grant of Accreditation shall be submitted to the Council through Director/CEO, IOAS for approval.

The IOAS informs the Certification Body in writing of the decision taken. If a positive decision is taken, the IOAS will draft the accreditation documents. In case of a negative decision, the IOAS will wait for a period of six months before accepting a new application from the same Certification Body.

4.3.1 Issue of Accreditation Certificate

As soon as a decision is taken to grant Accreditation IOAS shall prepare the following Documents.

- Accreditation certificate with a unique number for identification duly signed by the Director / CEO, IOAS. This certificate specifies the date on which the accreditation was granted, the standards based on which the accreditation was granted and the period of validity of the certificate.
- A Schedule Referring to the Scope of Accreditation.
- Accreditation Agreement -Terms and condition for maintaining accreditation .(This contains the rights and obligations of parties; the party providing the accreditation and the party being accredited and signed by both parties.

The applicant Certification Body must fulfil all the financial obligations due to IOAS, before receiving the certificate(s).

5. POST ACCREDETATION PROCESS

5.1 Post Accreditation Assessments

The IOAS accreditation certificate shall be valid for a period of 3 years. During the validity of accreditation, the Certification Body must continuously comply with the requirements of APPLICABLE STANDARD/GUIDE and “Terms and condition for maintaining accreditation” .In this regard IOAS shall periodically review the validity of Accreditation. To this end, the IOAS carries out surveillance assessment annually and a re-assessment within three years. During the accreditation period, the scope of the accreditation may be changed.

5.1.1 Surveillance

IOAS shall conduct annual surveillance of all accredited Certification Bodies. Surveillance is aimed at examining whether the accredited Certification Body is maintaining all the requirements of APPLICABLE STANDARD/GUIDE and IOAS specific criteria (if any). IOAS shall inform the accredited Certification Body at least two months before the due date of accreditation for conducting the surveillance visit and the Certification Body shall confirm its readiness within 30 days.

The Certification Body during the validity of accreditation may request to enhance the scope of accreditation for which they should preferably apply two months before the conduct of assessment/ surveillance. The modus operandi for surveillance visit is similar to the initial assessment albeit it will cover only selected areas. The non-conformities, if any, shall be closed within three months of conduct of surveillance. The summary of the surveillance report along with other relevant information shall be submitted to the Director / CEO, IOAS him/her to make a decision on the continuation of accreditation or otherwise. IOAS shall inform the Certification Body, in writing, about the decision.

5.1.2 Reassessment and Renewal of Accreditation

The IOAS will intimate the Certification Body in writing on the expiry of Accreditation approximately four months in advance and the Certification Body has to respond at least one month before the expiry. The Certification Body may also apply for renewal of accreditation by submitting a new application in the prescribed Application form (CB-FM(P)-01) if desired so. Along with this a copy of the current Quality Manual of the Certification Body which describes the existing quality system in accordance with APPLICABLE STANDARD/GUIDE should be made available. The request shall be accompanied with the prescribed re-assessment fee.

The Certification Body may request for extension of scope of accreditation, which should be explicitly mentioned in the application form. The procedure for processing of renewal of application is similar to that of first application except that no Preliminary Assessment is conducted and likewise the procedure for the on-site reassessment visit is similar to that of initial assessment. If the results of reassessment visit are positive and all non-conformances are closed before the expiry of the certificate, then the validity of the certificate is extended by a further period of three years without any discontinuity. In case of renewal a new certificate of accreditation is issued while the certificate number is retained.

5.1.3 Supplementary/ Special Assessments

The IOAS may organize Supplementary/ Special Visits under the following circumstances:

- Repeatedly finds nonconformities of category Major or large numbers of nonconformities of Category Minor during the surveillance/ reassessment.
- Receiving complaints that are substantiated with facts or on instances where the Certification Body is found to be misusing the Certificate/ Accreditation Logo.
- Based on public complaints, publications or information from interested parties and the government.

The Director/CEO, IOAS may decide to carry out Special Assessments at any time during the period of validity of Accreditation. The execution of special assessments may take place with no prior notification or with very little time between notification and execution.

Special Assessment may also become necessary when changes occur in Accreditation Criteria, Organizational Structure and in Management/ Ownership. However in these cases the IOAS will give Certification Bodies sufficient time for preparation.

All costs associated with special assessments will be charged to the Certification Body.

5.2 Changes in the Accreditation / Specific Criteria

If there is a change in the APPLICABLE STANDARD/GUIDE or in the accreditation criteria of IOAS, IOAS shall inform the Certification Body of this in writing indicating the transition period, which shall be at least 6 months duration. Upon receiving such information, the Certification Body must confirm to IOAS, its willingness in writing to modify its quality system in accordance with the changes. Upon receiving confirmation from the Certification Body, IOAS may conduct a supplementary / special assessment to assess the implementation of same.

5.3 Changes Affecting the Certification Body Operations

In the event of the Certification Body informing IOAS about any changes affecting the Certification Body's activities and operations, IOAS may organize a supplementary/ special visit. Certification Body shall communicate this with relevant documentary evidence along with the amended Quality manual. The final decision is communicated to the Certification Body along with an amended certificate. The costs associated with the issue of amended certificate will be charged to the Certification Body.

5.4 Reduction of the Scope

During assessments by the IOAS, the accredited Certification Body shall demonstrate that it complies with all accreditation criteria regarding the entire scope and that it has complied with these criteria from the date on which accreditation was granted. If a Certification Body is of the opinion that parts of the scope no longer conforms to the accreditation criteria, it is expected that the Certification Body will withdraw the relevant part of the scope itself. If during an assessment it becomes clear that it is necessary to withdraw accreditation for parts of the scope, the IOAS will also review the validity of the remaining accredited scope.

In order to demonstrate that a Certification Body has complied with and is complying with the criteria for the complete scope of accreditation, the Certification Body shall be able to provide records of the activities carried out. During IOAS assessments, these records shall demonstrate that the procedures for carrying out specific activities (product certification and system certification decisions) have been applied correctly by qualified personnel in the past year.

The concerned part of the scope shall be withdrawn if records do not demonstrate this. If this means that the entire scope is withdrawn, then the entire accreditation is withdrawn. However the Certification Body concerned can again be granted accreditation for the APPLICABLE STANDARD/GUIDE and the scope involved, under the same registration number, if a new application is sent in to the IOAS within two years after the withdrawal.

5.5 Extension of Scope

At any given moment, the Certification Body can request an extension of the scope. To this end, a written application shall be sent to the IOAS. An assessment for extension of scope will not be initiated if nonconformities are currently open in related parts of the scope or in the general management system of the Certification Body.

The IOAS distinguishes between extension within and extension outside the scope already accredited. Extensions of the scope that fall within the framework of the same accreditation standard will be considered Extension within the scope and if not it will be considered otherwise. Requests for accreditation involving a different accreditation standard shall be treated as a new application.

Depending on the size and nature of the extension requested, the extent of the assessment needed for the extension will be determined by IOAS on a case by case basis. All costs for extension of scope will be charged to the Certification Body.

5.6 Transfer of Accreditation

If the ownership or name of an accredited Certification Body changes, the accreditation may be transferred to the new owner or to the new name if the Certification Body involved make such requests in writing. For such a transfer the following pre-conditions apply:

- The Certification Body remains operating within the legal and regulatory framework of the country in which it operates
- The policy and management system remain unchanged;
- The management and key personnel remain unchanged;
- The former owner does not remain active in the same sphere of activity or a similar area under the old name or a related name;
- The general composition of the Certification Body's personnel remains the same;
- The basic infrastructure and other facilities are not compromised.

The Certification Body shall provide the IOAS with the necessary documents showing that the above conditions are met. The costs for reviewing the documents/ conducting onsite review will be charged to the Certification Body.

If all requirements are met, the new Certification Body retains the registration/accreditation number and receives the new accreditation documents. The surveillance and re-assessment schedule will remain unchanged.

6. OBLIGATIONS

6.1 Certification Body

6.1.1 General

A Certification Body shall always comply with the relevant regulations and accreditation criteria. This not only applies to accredited Certification Bodies but also to Certification Bodies whose accreditation has been suspended.

6.1.2 Co-operation

The Certification Body shall provide the IOAS assessment teams with all the necessary support in order to carry out their work efficiently, safely and honestly, whereby:

- It shall be possible to check the compliance of the Certification Body's management system within the criteria;
- It shall be possible to gain insight into the relationship between the documented system and the APPLICABLE STANDARD/GUIDE via an up-to-date review;
- It shall be possible to observe the activities at the Certification Body.
- The Certification Body shall provide the assessment team with the necessary safety instructions and safety equipment;
- If requested, the Certification Body shall provide access to all relevant locations, dossiers and documents;
- In case the assessment of IOAS requires the participation of clients or other related bodies of the Certification Body, the Certification Body shall take measures to assure this

participation; in particular Certification Bodies shall have enforceable arrangements with its clients holding an accredited certificate, to ensure IOAS access to witness the certification bodies audit team performing an audit at the Certification Body's client's site.

- Assessors of IOAS shall not be put in a position where their independence and objectivity could be compromised.

6.1.3 Logo

Accredited Certification Bodies have the right to use the applicable accreditation logo. As such, on grant of accreditation, the Certification Body may use IOAS logo on letterheads, brochures and any other material issued to its clients including the certificates. However such usage shall be confined within the scope of Accreditation. The guidelines for using IOAS logo is given in the document "Terms & Conditions for use of the Accreditation Symbol".

Misuse of the logo by accredited Certification Bodies may lead to suspension or withdrawal of the accreditation. If non-accredited Certification Bodies use the logo, the IOAS can resort to legal action.

6.1.4 Reporting Changes

The Certification Body shall inform the IOAS within one month of every change that can have considerable impact on the activities covered by the scope. Such changes may be of following nature:

- Changes in the legal, commercial or Certification Body's organizational status;
- Changes in the sphere of activities or economic activities of the Certification Body
- Change in management and in structure;
- Policy changes;
- Changes in personnel that fill key positions, such as managers and decision-makers and personnel with specific and unique expertise for the Certification Body;
- Changes in location and other resources that can have a significant influence on the accredited activities carried out;
- Significant changes in working procedures.

If a Certification Body expects the changes to have a temporary negative effect on the accredited activities, then the Certification Body can request a voluntary suspension. In case of that the IOAS possesses the right to carry out extra assessments to ensure that the Certification Body again complies with the accreditation criteria before lifting the suspension. If during a periodical assessment of IOAS it is found that IOAS was not informed about changes may decide to extend the assessment to review the changes and their impacts.

6.2 IOAS

6.2.1 Behavior of Assessment Teams

The assessment team will limit its assessment activities to an investigation of whether the Certification Body complies with the applicable criteria. In doing so, Assessors will make use of the relevant criteria documents, scope-related documents (including standards, descriptions of

methodology, diagrams etc.) and generally accepted interpretations. Assessors may not accept any gifts, presents etc. from Certification Bodies that may compromise their neutral role in assessments. Assessors shall follow the safety instructions of the Certification Body being assessed.

6.2.2 Confidentiality

The IOAS protects the confidential nature of the assessment findings unless Certification Body has given written consent or legally obligated to do so. If the Certification Body provides third parties with access to the assessment report, it shall provide access only to the complete assessment report. Assessors and all other persons who, work for the benefit of the accreditation by the IOAS, shall have access to the Certification Body's files only after they sign and handover confidentiality statement to the particular Certification Body. Besides this all the assessors shall sign a confidentiality agreement (GN-FM-01) with IOAS before they could be taken into the Assessor Pool.

6.2.3 Changes in Criteria and Interpretations

The IOAS informs the Certification Bodies about changes in the various accreditation criteria and their interpretations. The Certification Bodies are given sufficient time to adapt their system to the changes

6.2.4 Limitations

The IOAS shall not undertake any service which affects impartiality, such as consultancy or services that are to be performed by any Certification Body.

7. SUSPENSIONS AND WITHDRAWALS

7.1 Suspensions

7.1.1 General

During the suspension period, the Certification Body may not make use of the accreditation mark or in any other way actively refer to the accredited status. Certification Bodies may not accept any new certification requests for issuing accredited certificates. Existing certification contracts shall be respected, which means that the Certification Body continues to carry out the necessary surveillance activities.

A suspension is lifted if an additional assessment shows that the reason for the suspension no longer exists. If the suspension period ends without this being the case, the IOAS implements the withdrawal procedure. In exceptional cases, the Director/CEO, IOAS may extend the period for further period of six months.

7.1.2 Voluntary

A Certification Body may request a voluntary suspension from the IOAS if it is temporarily unable to comply with the accreditation criteria. In such circumstances, the Certification Body is not permitted to make use of the logo or refer to the accredited status. It is not possible to submit a request for a voluntary suspension during the period that an IOAS assessment is being carried out.

7.1.3 Imposed by IOAS

If a Certification Body not demonstrably eliminate one or more nonconformities within the applicable period, or the Certification Body fails to fulfill its obligations related to the accreditation, the IOAS suspends the accreditation for a period of at most six months. The Certification Body is informed of this in writing. A suspension is put into effect by the Director/CEO, IOAS on the recommendations (AC-FM-14) made by the Accreditation Committee

7.1.4 Publicity

IOAS will notify the interested parties and the public through suitable media.

7.2 WITHDRAWALS

7.2.1 General

The accredited Certification Body and the IOAS can withdraw an accreditation and thus cancel the accreditation agreement. From the moment of withdrawal, the Certification Body will have to refrain from using the accreditation symbol or otherwise referring to the accredited status. In such situations the certificates issued under IOAS-accreditation shall also have to be withdrawn.

7.2.2 Voluntary

If Certification Body wishes, for whatever reason, to end its accreditation, it shall submit a request to the IOAS for voluntary withdrawal in writing. Withdrawal may apply to a part of the scope or the entire scope. The IOAS confirms the withdrawal in writing.

7.2.3 Imposed by IOAS

If IOAS determines that a suspension has not been removed within the applicable period or if evidences are found to substantiate that the Certification Body brings the Accreditation into grave disrepute, the IOAS will impose the withdrawal. IOAS informs the Certification Body of the withdrawal in writing. After a withdrawal, the IOAS will not accept an application for accreditation from the same Certification Body within a period of six months.

7.2.4 Publicity

IOAS will notify the interested parties and the public through suitable media.

8. DISPUTES, COMPLAINTS AND APPEALS

8.1 Disputes

The IOAS defines a dispute as difference of opinion between the accredited Certification Body or the Certification Body to be accredited and the IOAS with regard to:

- The interpretation of a requirement of a standard;
- The working procedure of the IOAS.

The Certification Body can report the existence of such dispute to the Director/CEO, IOAS in writing. The Director/CEO, IOAS will consult with the parties involved and with the Technical Advisory Committee and takes a decision. The decision will be communicated to the parties in writing.

8.2 Complaints

The IOAS distinguishes two types of complaints:

- Complaints about the IOAS and its Assessors.
- Complaints about registered or accredited Certification Bodies.

In both these cases Director/CEO, IOAS or the panel appointed by him/her will investigate the complaints.

Complaints shall be submitted in writing. The IOAS will confirm the receipt of the complaint. The complaints will be handled in accordance with the Complaint handling Procedure (GN-PR(P)-08). If a complaint is not submitted in writing, if it is not motivated or if the complainant and the party complained about are not clearly indicated, the IOAS will treat the complaint as it sees reasonable and proceed with the complaint handling accordingly.

8.3 Appeals

Certification Bodies are free to make appeal against decisions taken by the IOAS such as appointment of assessors, grant of accreditation, reduction/ expansion of scopes, suspensions/ withdrawal etc. All such appeals will be dealt with in accordance with the IOAS Appeal procedure GN-PR(P)-09.

Cost associated with the processing and handling the appeals are charged are charged to the Certification Body.

9. PUBLICITY

IOAS shall publish at least once in a year the details of scope of accreditation & accreditation status of the accredited Certification Bodies along with their contact addresses.

10. LIABILITY

IOAS shall not be responsible for any damages, which the Certification Body may suffer as a result of any action or negligence by those who are carrying out the tasks on behalf of IOAS and any failure to the grant of accreditation or abeyance / suspension / forced withdrawal of the accreditation, and neither shall IOAS be held responsible for any damage whatsoever, caused to any party by the acts of certification Body.

11. MEASUREMENT TRACEABILITY

In the process of granting certification to its clients certification body shall comply with the measurement traceability policy of IOAS and ensure that traceability of measurement to SI units is maintained as described in the prescribed Certification criteria.

Appendix 1

SCOPES OF ACCREDITATION

(For management systems other than FSMS)

NACE Rev.2 code

Section A – Agriculture, Forestry and Fishing

- | | |
|---|-------------|
| 1. Crop and animal production, hunting and related activities | Division 01 |
| 2. Forestry and logging | Division 02 |
| 3. Fishing and aquaculture | Division 03 |

Section B- Mining and Quarrying

- | | |
|--|-------------|
| 4. Mining of coal and ignite | Division 05 |
| 5. Extraction of crude petroleum and natural gas | Division 06 |
| 6. Mining of metal ores | Division 07 |
| 7. Other mining and quarrying | Division 08 |
| 8. Mining support service activities | Division 09 |

Section C - Manufacturing

- | | |
|---|-------------|
| 9. Manufacture of food products | Division 10 |
| 10. Manufacture of beverages | Division 11 |
| 11. Manufacture of tobacco products | Division 12 |
| 12. Manufacture of textiles | Division 13 |
| 13. Manufacture of wearing apparel | Division 14 |
| 14. Manufacture of leather and related products | Division 15 |
| 15. Manufacture of wood and of products of wood and cork,
except furniture; manufacture of articles of straw and plaiting
materials | Division 16 |
| 16. Manufacture of paper and paper products | Division 17 |
| 17. Printing and reproduction of recorded media | Division 18 |
| 18. Manufacture of coke and refined petroleum products | Division 19 |
| 19. Manufacture of chemicals and chemical products | Division 20 |
| 20. Manufacture of basic pharmaceutical products
and pharmaceutical preparations | Division 21 |
| 21. Manufacture of rubber and plastic products | Division 22 |
| 22. Manufacture of other non-metallic mineral products | Division 23 |
| 23. Manufacture of basic metals | Division 24 |
| 24. Manufacture of fabricated metal products, except machinery
and equipment | Division 25 |
| 25. Manufacture of computer, electronic and optical products | Division 26 |
| 26. Manufacture of electrical equipment | Division 27 |
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