

	<b>ENTERPRISE ACCREDITATION FOUNDATION</b>	<b>Document No:</b>	<b>EAF-IN.18</b>
		<b>Release Date:</b>	21/03/2020
	<b>Instruction For Accreditation Activities</b>	<b>Rev Date / No:</b>	<b>0</b>
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### 1. PURPOSE

The purpose of these instructions is to explain the duties of the accreditation activities perform assessments.

### 2. SCOPE

This document details and explain the various accreditation processes at EAF for Accreditation Program and Schemes.

### 3. IMPLEMENTATION

Accreditation at EAF requires a yearly activity beginning with an initial assessment ( in some cases CAB request a pre- assessment). When an organization becomes accredited, they are referred to as a Conformity Assessment Body (CAB). After the initial assessment a two (2) year anniversary (expiration) date is established.

At the mid-point of the initial accreditation cycle the CAB is required to undergo a surveillance assessment (typically one day) by an EAF assessor. This surveillance assessment is performed to confirm that the CABs management system has been fully implemented, corrective actions taken since the last assessment were effective and technical capabilities remain in compliance with the accreditation requirements.

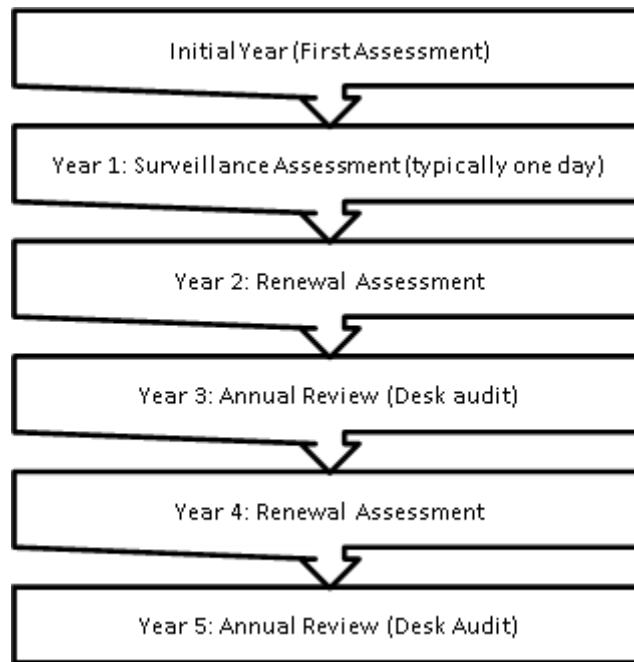
The renewal process is similar to the initial assessment process except that the surveillance assessment is typically not mandated at the mid-point of the next accreditation cycle, unless significant problems were noted during the last assessment that warrant follow-up or if significant issues have arisen since the last assessment that could call into question the organization's compliance with the accreditation requirements.

At the mid-point of subsequent assessment cycles, the CAB is required to submit updated information on its organization, facilities, key personnel, etc. along with specific quality system records that will be requested through the EAF portal or e-mail. The organization's assigned Authorized Person will perform a desk audit of this information.

The relevant Accreditation Department shall assign a case officer who will carry out the processes related to the application. The assigned case officer shall record the CAB's application information into EAF's documentation system. The case officer shall fill out the application review form.

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Accreditation Cycle Table



Accreditation is a yearly activity. Renewal assessments are to be completed every 2 years with Annual reviews to be completed on the off years.

#### 4. ACCREDITATION PROCESS

##### 4.1 Pre - ASSESSMENT (If Required)

Upon the request of the applicant body, a pre-assessment can be performed. A pre-assessment is a short assessment (a maximum of 1 day) with limited scope.

The case officer shall prepare and present an assessment proposal form to CAB and mutual agreement shall be achieved. Under normal circumstances, a lead assessor, and, where necessary, an/a assessor/technical expert shall carry out the pre-assessment. CAB's key personnel shall be available during the pre-assessment visit. During the assessment, at least

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how the management system is implemented is examined. The assessment team may wish to see CAB's relevant units and equipment.

For nonconformities detected during the assessment, check list shall be filled out and a copy shall be given to CAB at the closing meeting. Significant nonconformities are defined as Major nonconformities and less significant nonconformities are defined as Minor nonconformities.

The assessment team shall send the assessment report to CAB no later than 15 days after the completion of the pre-assessment.

After the pre-assessment, within at most 3 months as of the receipt of the assessment report, CAB should communicate to EAF in writing its decision on whether to continue the accreditation process or not. If the decision is positive, the accreditation process is continued.

## 4.2 PREPARING FOR ACCREDITATION ASSESSMENT

### 4.2.1 Forming Assessment Team

4.2.2 Assessment Proposal will make to the CAB.

4.2.3 After forming the Assessment Team, the documents of CABs will be review and evaluation and records by the Assessment Team.

## 4.3 PERFORMING THE ACCREDITATION

4.3.1 On-site Assessment will be done by Assessment Team

4.3.2 On-site assessment consists mainly of two parts: witness assessment and office assessment.

4.3.3 During the office assessment, assessment techniques such as reviewing CAB documents, reviewing records, reviewing performance in proficiency testing and inter-laboratory comparisons, interview etc. can be used.

4.3.4 Assessors and technical experts involved in the assessment of laboratories and inspection bodies shall carry out the assessment by interviewing the relevant personnel and by having them apply the methods to determine the competency of methods found in the application scope and the competency of the personnel applying these methods.

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4.3.5 Assessment Report , Assessment team members shall send their assessment reports to CAB through the case officer within a month at the latest following the completion of the assessment.

4.3.6 Corrective Actions , CAB should submit the records of the corrective actions that it carried out to resolve nonconformities detected during the accreditation assessment to EAF within 3 months at most.

## 5 ACCREDITATION DECISION

5.1 Accreditation decisions can be taken based on the results of accreditation assessments, changes in the legal status and/or technical competencies of CABs, a technical decision taken by the international accreditation associations or EAF regarding the accreditation offered in a specific area.

5.2 After the assessment team submits its final evaluation on the accreditation assessment and its recommendation regarding accreditation to EAF, the case officer shall compile the assessment report and additional documents and records for the assessment, as well as other relevant documents, if available, and the proposed scope, review and check the entire file, and initiate the work necessary for accreditation decision.

5.3 Upon the completion of the technical review, the file shall be submitted to the chair of the relevant Accreditation Decision Committee.

5.4 All decisions regarding CAB's accreditation (granting, maintenance, scope change, re-accreditation, suspension, scope reduction, withdrawal of accreditation etc.) shall be made by the Accreditation Decision Committee (ADC).

## 6. ISSUANCE OF THE ACCREDITATION CERTIFICATE

6.1 After the decision of ADC, The case officer shall inform the assessed CAB after the accreditation decision.a

6.2 An "Accreditation Certificate", stating the accreditation scope in its annexes, shall be prepared for the accredited bodies.

6.3 After all the documents to be sent to the accredited body are prepared, the Accreditation Certificate and Accreditation Scope documents shall be sent along with the Accreditation Documents Submitted Form.

6.4 Accreditation Certificate will be published at EAF website.