

Trust in safety

RAAD VOOR ACCREDITATIE



Foreword

Dear reader,

The financial year of 2011 saw many crises for our society, including in the area of safety.

There was the safety of our pensions, our banks, treatments in the care sector, trusting your kids to a nursery, storage of chemicals, digital data and of food, just to mention a few examples. We are sure you know of others.

These are crises which are often controlled by introducing new rules and/or the promise of more supervision whereas nowadays few resources are available and the public sector is withdrawing more and more.


More is needed, for instance a change in the behaviour of organisations. But there must also be the realisation that no matter how many controls are in place, something can always go wrong. The culture of learning from mistakes, incidents and accidents is something that will take us far.

The work of the Dutch Accreditation Council plays a major role in building this trust amongst the people. Making statements with regard to and justifying trust in the independence, expertise and improvement culture of laboratories, inspection and certification bodies is a major link in the chain of trust.

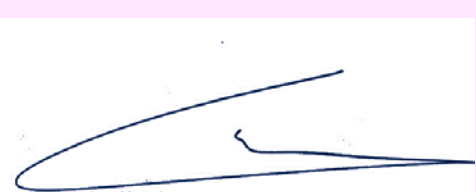
This chain is fed by ‘V words’: when Trust (Vertrouwen) has been created, the feeling of Safety (Veiligheid) quickly returns. We all gain by this. Churchill knew this with his “V for Victory”.

The RvA works actively to gain trust not only in connection with organisations. We are also looking for a dialogue with the ministries, so that together with the legislators and enforcers we can see where self-regulation can be improved for the benefit of health, safety and the environment. In this public report we give our opinion with regard to the opportunities which the RvA still sees to a large extent in this area and in the area of quality in the care sector. We like to contribute to integrating regulations, supervision, assessment and enforcement of quality. This not only reduces the pressure of rules and regulations; it also offers a guarantee of a higher quality. This means that the RvA has to become even more a learning organisation, working as a team with the other organisations involved in the cycle of quality and safety. This teamwork is in the first place the work of the people.

We hope you enjoy reading this report,



Jan van der Poel
Chief Executive



Ed Nijpels
Chairman of the Supervisory Board

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Trust in safety

Introduction

“Safety has become a primary necessity of life, an important aspect of daily existence. You can try to tame fate, but it will never become tame.” These were the words of the columnist Toine Heijmans in the Volkskrant of 20 January 2012 in a challenging vision he wrote in connection with the disaster of the Costa Concordia cruise liner.

“In times of uncertainty people need orientation points, they need connection. As these are less available the need for institutions will increase. Institutions are anchor points as it were on which one can concentrate, and which monitor stability.” These are statements made on 29 January 2012 in the TV programme Buitenhof by Herman Tjeenk Willink, the departing vice-chairman of the Council of State.

It appears from these quotes that the need for safety and security is present and recognised everywhere, including in daily life. How can you still trust the safety of water that comes out of the tap at home, healthcare provisions, the building sector, digital payment transactions, the food you buy in the supermarket, etc.?

Obviously there are more factors which affect our feelings of safety such as international relationships and the safety of our personal environment. Such factors affect our daily life as a citizen, the business sector and the public sector. International relationships present the continual threat of military conflicts, and there are crises within the EU and the financial sector. Sufficient examples can be mentioned which can cause a feeling of uncertainty and insecurity. As this text is being written, topics involving safety score no less than 37,000 hits in Google.

Safety is not only a current but also a historical theme. For instance in the years after the Second World War there was a great feeling of insecurity and uncertainty. In the following decades the government did a lot to provide people with a roof over their heads under which they could feel themselves to be safe. One example is the Dutch Retirement Provision Emergency Act (Noodwet Ouderdomsvoorziening) introduced by Minister Drees in 1947, which ten years later was converted by Minister Suurhoff into the Dutch General Old-age Pension Act (‘AOW’).

The Dutch Accreditation Council plays a major role in ensuring quality in a broad sense and thereby the feeling of safety and security in our society. It is particularly focussed on managing risks that are inherent in the current complex society and markets. Its core duty is therefore not building walls but opening doors, creating transparency and trust where our feeling of safety is involved.

This year’s public report of the Dutch Accreditation Council is dominated by the theme of safety. You will read in the first part for instance the way in which we are contributing to this via the development of our own organisation, the quality care we are dedicated to and the international role we play in the area of ensuring trust and the feeling of safety.

In this first section you will also find a number of contributions by external parties involved in this subject in the form of two interviews we were able to conduct with Mr. Alex Brenninkmeijer, the Dutch National Ombudsman, and Mr. Ferdinand Mertens, member of the Dutch Safety Board.

In addition, this section includes five sometimes provocative columns by people involved in several parts of our spheres of work. They particularly dedicated themselves to providing a contribution, for which our appreciation is more than called for. The writers are:

- Piet Mallekoote, Chairman of the Management Board of Currence, the organisation addressing the quality and safety of payment transactions in the

Netherlands. His theme is certainly current: the society regularly has concerns about the safety of digital payment traffic.

- Guido van Woerkom, is Managing Director of ANWB and also Chairman of the Supervisory Board of Evides Drinkwaterbedrijf. He writes on the theme of drinking water safety.
- Anton van Loon, Director of the BMWT trade organisation (amongst others sector organisation of importers and/or manufacturers of warehouse layouts) and member of the jury of the Award for the Safest Warehouse. His theme is: safety in the building and transport sector.
- Wim van Harten, a member of the Board of Management of the Netherlands Cancer Institute, professor at Twente University and Board Member of the Dutch Hospitals Association. He addresses the theme of safety in the care sector.
- Simone Hertzberger is head of the department of Quality and Sustainability of Ahold Europe and also a member of the Supervisory Board of the Dutch Accreditation Council. Her theme is food safety.

In the second section of this report we open another door: on transparency in the actual operations in our organisation. It includes a summary of the management bodies and advisory committees, a brief summary of our finances in the year 2011 (you can find a complete overview on our website www.rva.nl), a summary in figures of our activities in 2011, the accepted scheme managers and the marks of the Dutch Accreditation Council. A report such as this inevitably contains several abbreviations. Such abbreviations require explanations. You can find a summary of these in the last Appendix.

We hope the interviews, the columns and the report of our activities will inspire you with regard to the theme of safety and that your feeling of trust in the social contribution of the Dutch Accreditation Council is upheld and strengthened.



Dr. A.F.M. (Alex) Brenninkmeijer has been the Dutch National Ombudsman since 2005. He studied at University of Groningen where he graduated in Dutch law. Subsequently he obtained his doctorate at Tilburg University with an exploration into the meaning of the independent administration of justice in the democratic constitutional state.

Until his appointment as National Ombudsman Alex Brenninkmeijer was a judge in various judicial authorities in the field of social security, civil servants law and tax law. In 1995 he was appointed professor in state and administrative law at Leiden University. From 2003 onwards he has been a professor attached to the Albeda Chair for employment relationships at the government and ADR (Alternative Dispute Resolution). In addition, he is for instance editor in chief of the Mediation Manual (Handboek Mediation) and the magazine for Conflict Handling (Conflicthantering).

Alex Brenninkmeijer is a pioneer in the area of conflict arbitration and mediation. He specialises in good relationships between the people and the public sector, conflict analysis and methods of conflict solution.

The National Ombudsman formulated a vision for the press and its responsibility for reporting the policy of the public sector. In a nutshell:

The Dutch public sector is a ‘public matter’ and everybody’s trust in public matters is served by transparency and openness. It is contrary to the public interest to handle public sector information strategically thereby serving other interests than transparency. Everybody has a faultless compass for what is or is not honest. The price of not being honest with public sector information is loss of trust and credibility. Twisting or withholding information will always come out and it damages the trust in public matters.

That is why when dealing with public sector information the ‘Mark Rutte standards’ which he formulated previously, should always be applied:

- Be honest
- Be clear
- Handle information in a relaxed manner and avoid coming across as being forced
- Say when you know or don’t know something



Ferdinand Mertens (1946) is a Member of the Dutch Safety Board and until 1 September 2011 was a Professor at Delft University of Technology. Previously he has for instance worked as Inspector General of Education (1996 – 2000) and as Inspector General of Transport, Public Works and Water Management (2000 – 2005). Before this he was a professor at Erasmus University and his acceptance speech for this office had the title: Vriendelijk converseren en krachtig optreden; over vakmanschap in de beleidsadvisering (friendly conversation but forceful acts; about expertise in policy advising). He accepted his office at Delft University of Technology with the speech Toezicht in een polycentrische samenleving (Supervision in a polycentric society). In 2011 Sdu Uitgevers published his book Inspecteren; toezicht door inspecties (Inspecting; supervision by inspections). Sdu Den Haag.

The Dutch Safety Board carries out independent investigations into causes or probable causes of ‘incidents’ and categories of incidents. The term incidents does not only include disasters and accidents, but also incidents ‘which could have had an unfavourable outcome.’ The Safety Board is an autonomous administrative authority established by a Kingdom Act and has the power to investigate incidents in all imaginable areas. The Board maps lessons learnt from the investigation, makes recommendations for improving safety to responsible parties, such as the public sector, the business sector and social organisations and it monitors the follow-up of these recommendations.

Our contribution to a more compact public sector.

The cabinet aims to bring about a more compact public sector. What can the Dutch Accreditation Council contribute to this? You can find our vision in this chapter, which is also supported by the Supervisory Board. What is this vision?

The European Regulation 765/2008 resulted in the Dutch Accreditation Council, which since 1 January 2010 is seen as the national accreditation body in the form of an autonomous administrative authority. It is covered by the responsibility of the Ministry of Economic Affairs, Agriculture & Innovation. Thereby the Dutch Accreditation Council also obtained public recognition and embedding in the Netherlands.

The core of the activities of the RvA aims to determine in advance the expertise, independence, impartiality and the ‘self-purifying operation’ of the management system of bodies assessing the quality, safety and trustworthiness of products and services. That is why society can assume that the reports and certificates issued by the assessing bodies are reliable and offer extra guarantees for our safety.

The Dutch Accreditation Council takes as a starting point the responsibilities of the market parties and public sector regulators. This means that the suppliers of products and services are primarily responsible for the safety of the consumers. In our opinion the effectiveness of the work of official inspectorates would be increased if they are focussed more on detecting and upholding and less on indirect forms of control. The outcomes of their work could then more often form an input for improving the controls carried out by the market sectors themselves, and of the systems of external supervision by accredited laboratories, inspection bodies and certifiers. The risk assessments formulated by the official inspectorates can help in jointly addressing any problems. A joint approach is in the joint interest of all respective parties and society.

With regard to designing a more compact public sector the Dutch Accreditation Council sees in any event three opportunities to use accreditation better:

1. Notification

In order to issue certificates of conformity required by law bodies are often designated by or on behalf of ministers. Brussels considers accreditation for the respective sphere of work sufficient proof of expertise. Other forms of demonstrating expertise are discouraged and made unattractive.

The Dutch Accreditation Council considers that the Dutch public sector authorities designating the bodies should use accreditation as an alternative for assessments of the designated bodies - often called NoBo's, an abbreviation for ‘Notified Bodies’ - which these authorities are still currently conducting themselves. This would not only lead to downsizing the public sector but also encourage European harmonisation of the designated bodies. The accreditation requirements can then be coordinated between the ministries, bodies and the RvA. This would create accreditations which comply with the expectations of the national authority as well as international standards. In addition, accreditation contributes to transparency, regular and structured supervision and European support.

2. Inspection holidays

The current coalition agreement indicates that there should be a possibility of so-called ‘inspection holidays’. Concretely this means that in the event of sound self-regulation, inspections have to be carried out less often. Inspectorates could then deploy their manpower in less properly regulated and higher-risk sectors. To this end it is important that the authority and the market are aware of each others expectations, that the parties acknowledge and use each others criteria and that they do not each apply their own yardstick.

The RvA considers this a very feasible option, an option which is also in line with previous positions of the cabinet about the use of accreditation and certification.

3. Self-regulation

Policy departments of the various ministries can focus particularly on self-regulation via the so-called ‘Integral Balancing Framework’. This means that the ministries have to formulate the expectations of and the criteria for the result to be achieved. A system can then be designed in consultation with the scheme managers and the RvA that meets the expectations and the required results.

With this brief outline of its vision in the area of inspections, certificates of conformity and accreditation the Dutch Accreditation Council hopes to contribute to the formation of a more compact public sector, a major objective of the current cabinet.

International co-operation creates more safety

Accreditations are mutually recognised internationally (Mutual Recognition/Acceptance). To that end accreditation bodies enter into agreements within the global umbrellas of IAF and ILAC and the regional umbrella for Europe: the EA.

What is good enough for one country, is good enough for the other country. Certificates of conformity operate as a passport for products and services with the result that trust is created amongst buyers and users. Accreditation should justify this trust.

Peer Review

In order to support mutual acknowledgement, the accreditation bodies assess each other. This takes place in a so-called Peer Review, in which a team of assessors of other accreditation bodies verify whether the assessed organisation complies with the agreed international ISO/IEC 17011 standard. This is a guarantee of the expertise and independence of the accreditation body.

In the Autumn of 2010 the Dutch Accreditation Council underwent such a Peer Review. In 2010 and 2011 the RvA took measures to solve the findings detected during the Review. The complete report was published in 2011 on the website of the RvA, www.rva.nl.

In its turn the RvA also contributes to Peer Reviews in other countries by sending lead assessors and assessors for such Reviews. In connection with the European co-operation for Accreditation assistance has been rendered in 2011 to the evaluations of the National Accreditation Bodies of Croatia, Spain and the Czech Republic. In connection with an International Accreditation Forum (IAF) the RvA provided the lead assessor for the assessment of the Pacific Accreditation Co-operation (PAC) in the Asia-Pacific region. The RvA provides a major contribution to the training of and the continuous refresher courses for these peer reviewers.

International normalisation is the basis of harmonisation

The assessments of the RvA take place on the basis of accreditation standards. In order to harmonise the assessments internationally, an international standards framework is required. For laboratory and inspection activities these are currently the ISO standards, enjoying worldwide support. For the certification activities this movement got into its stride later. In this respect the European EN standard and the international IAF Guidelines were effective side by side. In the meantime there are ISO standards for certification of management systems and persons. In 2011 hard work was carried out with participation by the RvA on the creation of an ISO standard for the accreditation of product certification, the ISO/IEC 17065 which is expected to appear in 2012.

In 2011 the ISO 14065 was added to the spheres of work of the RvA for the benefit of the accreditation of validation and certification of greenhouse gases. This is important for the trust that society should have that the emission rights of greenhouse gases are determined in the proper manner.

Europe

The European co-operation for Accreditation has obtained a formal basis by the coming into force of European Regulation (EC) 765/2008 from 2010 onwards. The Peer Review is a process acknowledged throughout Europe. Accreditation by a European body is legally effective for harmonised standards throughout Europe. In order to promote harmonisation when standards appear (again) at European level, trainers will be trained who can pass on the European interpretation locally to colleague assessors. In 2011 the RvA provided multiple trainers.

In the areas of health, safety and the environment there are many European guidelines. In order to enhance compliance with them, at national level inspection bodies are being appointed and notified to Brussels, the so-called 'Notified Bodies'. Although these bodies are only designated nationally they are considered to have the expertise to be able to carry out their activities throughout Europe. So their results must be recognised throughout Europe.

According to Regulation 765 accreditation is the obvious route for the Member States to determine the expertise of the inspection bodies. In order to allow this to take place unequivocally throughout Europe, the European co-operation for Accreditation has drawn up a guideline (EA -2/17) specifically for the use of Notified Bodies. The RvA applied this guideline to its assessments for the first time in 2011. In 2012 the experiences will be evaluated with the bodies and the designating ministries.

Globally

The autonomous organisations of ILAC (Laboratories and Inspection) and IAF (Certification) are co-operating intensively in several areas. This applies to the organisation and the completion of the Peer Reviews, for communication and for assistance of countries just starting with accreditation.

In 2011 the ILAC and IAF agreements resulted in the acknowledgement of RvA accreditations for the American Energy Star Programme, a programme of the American Department of Energy and the Environmental Protection Agency (EPA). The aim is to reduce energy consumption.

In 2011 the IAF published guidelines for the certification of quality management systems for the production of medical aids.

In 2011 the IAF tightened up the rules for the use of the IAF mark by the certification bodies, in particular for the use in connection with product certification. The RvA has an agreement with approx. 15 certification bodies for the use of this mark by these bodies.

The status of the participation in mutual recognition as of April 2012 was:

EA: 31 signatories in 31 countries

IAF: 54 signatories in 51 economies

ILAC: 73 signatories in 61 economies



Supervision and advice: ensuring trust and safety

The Dutch Accreditation Council is allowed to operate with a high degree of independence but forms of supervision of the work of the RvA and advice in the accreditation decision-making process are of major importance in this connection. They guarantee independence, expertise and provide a critical test of our activities.

Supervision and advice contribute substantially to the trust in the public sector, society and our customers and the feeling of safety in performing our activities. To this end various bodies and committees are active within the RvA. In the organisational chart in Appendix 2 you can see the relation they have to each other and their composition. In this text we will outline the role and activities of the different bodies and committees.

Supervisory Board

The Supervisory Board of the RvA is comparable to the Supervisory Board of a commercial organisation. This Board ensures that the Executive Board realises the objectives of the RvA. Selection of the Members takes place on the basis of expertise and competencies.

It is preferable for the following competence areas to be represented on the Supervisory Board:

- commercial sector,
- public sector,
- research/technology,
- healthcare/medical,
- food and goods,
- quality.

When selecting Members the major personal qualities are:

- wide knowledge and experience of professional organisations;
- being able to advise and encourage properly;
- objective, detached approach;
- integrity and sense of responsibility;
- independent and critical attitude;
- formulation of a balanced opinion.

Executive Board

The Chief Executive organises the realisation of the Dutch Accreditation Council's objectives, the strategy and the policy, and the developments resulting from them. He accounts for this to the Supervisory Board.

Management

The management of the RvA consists of the Chief Executive and the Operational Director. They take care of a proper policy and management of the organisation and they report on this to the Supervisory Board.

Objection Chairmen Committee

It is possible that there may be an objection to a decision by the RvA. If that is the case, the Objection Chairmen Committee will be engaged. This Committee consists of at least one and not more than five legally trained Members. If a notice of objection has been received, the Executive Board will appoint a Member of the Chairmen Committee to form an advisory committee for that objection. The Members of this Committee are strictly independent. They will never be Members of the Executive Board of the RvA and do not carry out any activities under the responsibility of the Executive Board. They are appointed by the Supervisory Board. This guarantees impartial treatment of objections.

Accreditation Committee

The Accreditation Committee consists of four members. They are appointed by the Supervisory Board on the basis of their expertise in the accreditation fields, their integrity and independence. The Accreditation Committee meets once a month. Its duty is to advise the Chief Executive about granting accreditations. In addition, the Committee has the power to advise on suspending or withdrawing accreditations of bodies that have been granted accreditation. It receives information from the Executive Board and the management about the measures and sanctions with regard to bodies.

The Accreditation Committee does not make decisions. The decision-making is entrusted to the Executive Board. If the Executive Board has a different view from the advice of this Committee, the Supervisory Board will be heard. The Accreditation Committee reports annually on its activities to the Supervisory Board.

User Council

The User Council is an advisory panel laid down in the Articles. This Council consists of representatives of the direct RvA clients. The Supervisory Board receives the minutes of the meetings, so that it can include the opinions of users in its deliberations.

**We dedicate ourselves heart and soul
to your safety**
The internal organisation in 2011

In 2009 and 2010 several big and fundamental changes and projects took place in the Dutch Accreditation Council. These included the transition to an autonomous administrative authority, the move from the unit Health Care (CCKL) and a new ERP system. Our ambition in 2011 was to bring peace and quiet to the organisation and to focus on our core duties: service provision and accreditation. We delivered this ambition.

We did not start up any big new projects but we have worked hard on the improvement of internal processes, on making time for communication with the customer, on innovation of ICT facilities, on optimisation of the ERP system and on many other matters. All this with just one objective in mind: improving our service provision to internal and external customers, thereby contributing to the safety of our employees, organisations and the people. At the end of 2011 the customers of the RvA indicated that the positive results of these efforts were apparent.

Employees

In 2011 the HRM department has been intensively busy recruiting and selecting new employees. 11 new employees entered our employment, including a unit manager. Four employees left the RvA and five employees found another job at the RvA. On 31 December 2012 we had 81 FTEs in regular or temporary employment. The average age of our employees was 47.1 years and the average number of service years was 7.4.

We celebrated many anniversaries in 2011: Six employees celebrated a 12.5-year anniversary, two employees a 25-year anniversary.

The details referred to above only relate to the employees directly employed by the RvA. In addition, we co-operate with approx. 750 external specialists who are being deployed in the field for assessments. With the hours these specialists worked in 2011 for the RvA we created a total of an additional 19 FTEs work.

Training and education

A second major focus of the HRM department was education and training. In 2011 approx. 300 working days of employees were spent on training, partly organised by the RvA itself, partly by external specialists. Several training sessions had a technical content intended for assessors and lead assessors. But also office staff, account managers, project managers and project assistants followed training courses, for instance in the area of communication and office automation.

Risk Assessment and Evaluation

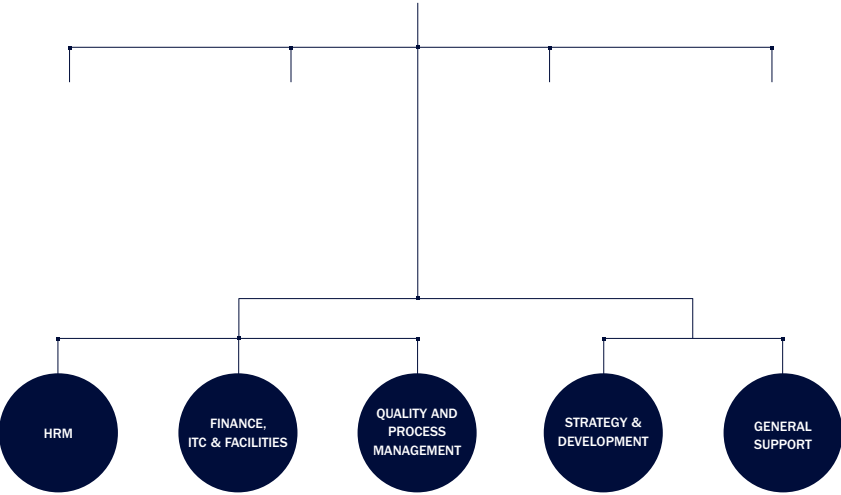
With a view to the safety of the RvA employees at the end of 2010 a Risk Assessment and Evaluation (RA&E) has been carried out. This resulted in an action plan with once only and periodic points for action, classified into high, medium or low categories. The RA&E and the action plan have been reviewed by a certified Higher Safety Expert. In 2011 a start was made on issuing points for action to the respective departments and implementing the improvement measures and controls. In this way the RvA is busy optimising good and safe working conditions for the internal and external employees in a substantiated and structured way.

Expertise groups

The Dutch Accreditation Council is a knowledge-intensive organisation. We have a lot of specific in-house knowledge about national and international standards and a wide range of areas of operation. Therefore it is of major importance for the RvA and for customers that this knowledge is shared as widely and as well as possible. That is why in 2011 we established expertise groups for the various standard areas. Lead assessors and account managers with specific knowledge of a certain standard serve in these expertise groups. They consult regularly about anything in their field and they act as the oracle for questions from internal and external customers of the RvA.

Work processes

The operational departments carried out particularly hard work on streamlining and where necessary improving the work processes. With this objective the Primary Process Management Steering Committee (Stuurgroep Beheer Primair Proces: ‘SBPP’) began its work. This steering committee examined efficiency improvements in the internal processes on a project basis. In this connection monitoring of promptness, making work methods uniform and process synchronisation between the operational departments come to mind.



Central Planning

In 2011 we began centralisation of the planning of lead assessors in connection with assessment projects. The aim of this centralisation is to deploy the (internal) lead assessors of the RvA better as regards time and to identify problems at an early stage. The central planners will realise optimum planning by means of an independent helicopter view of all projects and lead assessors, and better matches between lead assessors and the institutions they are assessing on the basis of qualifications.

Central planning is a new way of working for the RvA. For that reason central planning was introduced in phases in 2011. The further roll-out will follow in 2012. For the customers this means a dedicated lead assessor for an accreditation cycle with competencies that are even better in line with their activities and needs.

Finances, ICT and Facility Affairs

In the beginning of 2012 a new department head started in the Finances, ICT and Facility Affairs department. A lot happened in 2011, particularly in the area of ICT. The ICT hardware for employees was renewed and the printer park has been replaced. Moreover, the organisational structure of the ICT department of the RvA has been closely looked at and renewed. For optimum use of the various software packages (especially the ERP software) a process manager has been appointed who is close to the operational process. In 2012 we will also recruit a functional manager. In doing this we are ensuring that the ICT aids and the work processes at the RvA remain optimally synchronised with each other.

2012 Annual Plan according to the A3 method

With an ear cocked to what is current in the operational departments the management of the RvA prepares an annual inventory of the primary targets for the following year and connects to these the objectives and points of action for each department. All this is documented in the form of an annual plan.

In 2011 we decided to address this process in a more structured manner and to start working according to the A3 method. This method connects success-determining factors, measurable performance indicators and points of action to the vision and mission of the RvA. We draw up a plan for each department and by means of management discussions we monitor progress. This monitoring is supported by a digital package. In 2011 the management team of the RvA followed a workshop about this method and the 2012 annual plan has been drawn up according to the A3 method. In February 2012 the first A3 management discussions were planned.

One of our key objectives for 2012 is a customer-oriented and suitable service provision, in the planning by our internal office staff as well as in connection with the assessment on site by lead assessors and specialists. This key objective applies to all departments and has a high priority in all aspects of our work, not least when safeguarding the feeling of safety in our society is involved.

Our contribution to procurement based on quality in the care sector.

The newspapers are full of it: The healthcare providers are going to procure on the basis of quality. But what then is quality?

Is it the number of operations carried out by a specialist? Is it what a patient thinks? Is it something that the insurer thinks? Or is it something that the Health Care Inspectorate thinks? Or is it everything together? We are gradually getting used to demanding and receiving quality with regard to everything.

¹ Hazard Analysis and Critical Control Points is a risk assessment for foods

Along with other players in the care sector the RvA provides a contribution to ‘quality’ as an unequivocal concept. Apart from all kinds of often quite ‘invisible’ duties, with regard to the care sector, such as lift inspections and HACCP¹ certification under accreditation which are important for healthcare institutions, ISO 9001 is also often applied in the care sector whether or not via the HKZ focussed specifically on the care sector. By application of such standards the organisation becomes aware of the requirements of its customers however defined and of the objectives they associate with them. They assess themselves and thereby end up with plans for improvement, all this often reviewed by accredited certification bodies.

Laboratory accreditation

One segment of the care sector where work has already been done for quite some time with clear, widely supported standards is the medical laboratories segment. The CCKL laboratory accreditation is being used by over 250 medical laboratories to demonstrate their expertise and quality in the area of regulations as well as the contribution to the diagnosis and treatment of patients. This system originated in the scientific associations of the respective specialisms such as for instance clinical chemistry and medical microbiology. Initially the Dutch guidelines partly formed the basis of the ISO 15189 standard for medical laboratories which has in the meantime been accepted internationally. By complying with such a standard the results of the Dutch medical laboratories become qualified for use in international research. Working for clients in other countries is also facilitated by this. For insurers this standard is an independent criterion which objectifies the quality to be procured.

Switch to the ISO standard

The coming years will be dominated by the switch from the CCKL standard to the ISO standard and from exclusively assessing each other to assessment under the direction of an independent third party from the RvA. In that way the accreditation can obtain international recognition. In 2011 the scientific associations and the RvA formulated a transition plan. In the middle of 2012 we expect approval of the respective parties. The RvA expects that with the consolidation of the medical laboratories sector having commenced, despite the increasing economy of scale, the quality and expertise will remain safeguarded to the satisfaction of all interested parties. A safe feeling!

Quality leads to trust in safety Internal quality care and complaints handling

The Dutch Accreditation Council has its own quality care system in order to guarantee the execution of its mission and objectives. To monitor and optimise the proper operation of the system we use for instance observations during internal audits, complaints and feedback we have received from users.

Each year a management review will determine whether the quality care system meets our own wishes, the requirements of ISO/IEC 17011, the European Regulation EU 765/2008, the Dutch National Accreditation Body Appointment Act and the Dutch Autonomous Administrative Authorities Framework Act.

In 2011 the emphasis was placed on the internal audits of the effectiveness of the preventative and corrective measures. The immediate reason for this was the EA Peer review at the end of 2010. In addition, we concentrated on actually following the internal procedures and work regulations in the organisation. The management review was discussed with the Supervisory Board. The processing of complaints is a permanent agenda item in the meetings of the Supervisory Board and in the management meetings.

Handling complaints about the RvA

From way back the RvA has had a complaints scheme under private law. We handled complaints internally, usually without interviewing the complainant. During the course of 2011 this was converted into a scheme suitable to our duties as an autonomous administrative authority, according to the Dutch General Administrative Law Act (Algemene wet bestuursrecht). This scheme has been published.

In many cases the organisation has not yet achieved the six-week handling period in 2011, but the speed of handling complaints has increased. Whereas in 2010 55% were dealt with within 3 months, in 2011 this percentage increased to 75%. For 2012 the objective is to process the complaints within the set period.

From the complaints about the RvA in the year 2011 two particular aspects emerged:

- complaints about the execution of the work of assessors;
- complaints about communication with the institution to be assessed concerning interpretations and planning.

More than a third of the complaints originated from the certification bodies sector. Interpretation of the texts of the standards by these bodies leads rather to an almost legal discussion. Sometimes the assessor is blamed for this and a complaint then results. In order not to obfuscate the complaints scheme unnecessarily, a so-called dispute settlement scheme has been set up. Should there be an important substantive difference of opinion about the interpretation of the standard, the assessed parties can submit this to the RvA by reporting an interpretation dispute.

Signs of dissatisfaction about accredited bodies

Complaints about the conduct of accredited bodies should first be made known to that body. If the body complained of does not deal with the complaint properly, the complainant can turn to the RvA.

In 2011 there was a relatively high number of complaints about inspection bodies. Attention by authorities in the course of enforcement resulted in extra complaints about the correctness of the final audits of asbestos removal. Signs such as these gave the RvA a reason in various cases for an extra RvA investigation. If the complaint - and thereby the extra investigation of the RvA - appears to be unjustified, the body complained of without grounds will not pay for the investigation. The RvA will then bear the costs.

Recorded complaints about the performance of accredited bodies by category

| <i>Accreditation category</i> | <i>2011</i> | <i>2010</i> |
|-------------------------------|-------------|-------------|
| Laboratories | 0 | 0 |
| Inspection | 10 | 7 |
| Certification | 6 | 13 |
| CCKL Code of Practice | 0 | 0 |
| Other | 4 | 3 |
| Total | 20 | 23 |

Complaints being dealt with concerning the performance of the RvA by category

| <i>Accreditation category</i> | <i>2011</i> | <i>2010</i> |
|-------------------------------|-------------|-------------|
| Laboratories | 1 | 3 |
| Inspection | 1 | 1 |
| Certification | 5 | 17 |
| CCKL Code of Practice | 0 | 0 |
| Other | 7 | 5 |
| Total | 14 | 26 |

Processing notices of objection

In 2011 objections were lodged five times against a decision by the RvA of which four were to the additional conditions and/or accreditation renewal restricted to one year.

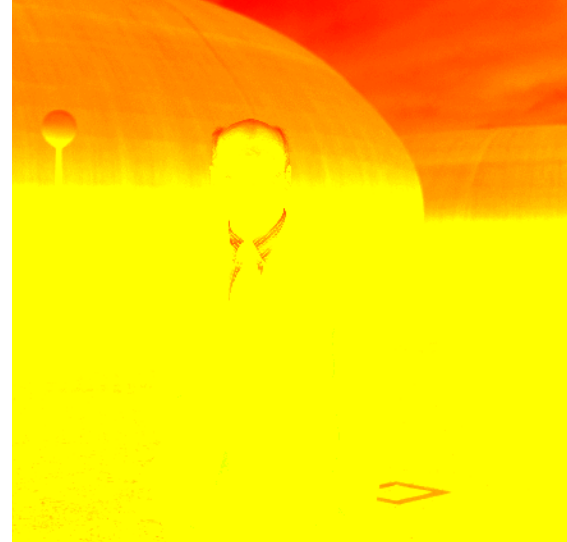
There was one session of an objections committee. In the other cases the party lodging objections withdrew the objection after additional communication and/or arrangements.

One of the appeals brought in 2010 has not yet been settled in 2011 by a judgement of the Administrative Court. At the request of the party lodging the appeal the case has been stayed.



Piet Mallekoote is Executive Director of Currence and of the Betaalvereniging Nederland association. Currence is the product owner of the national collective payment products PIN, Chipknip, Incasso, Acceptgiro and iDEAL. From the point of view of social efficiency, safety and user-friendliness these products are covered by several joint arrangements and rules which are binding on the parties offering these products (banks, payment institutions). Currence organises these arrangements and rules.

By the creation of the European payment market a large proportion of the national payment products will be replaced by European payment products in the coming years. This is already the case with the new card payment system: in this connection the national PIN brand was replaced in 2011 by international payment brands. In the European payment market the co-operation between providers of payment products at national level is still required. To that end banks established the Betaalvereniging Nederland association at the end of 2011. In its work the association also involves the requirements of users of payment products (consumers and entrepreneurs).



Guido van Woerkom studied law at Leiden University. His CV includes working for Albert Heijn and in 1990 he became managing director of a communication advice agency of the BBDO Groep Nederland. Shortly thereafter he joined the group management.

Since 1999 Guido van Woerkom has been the Managing Director of ANWB (the Dutch automobile association). His areas of interest are HRM, risk management, communication, governance and representation of interests. He has various additional offices. These include his role as the Chairman of the Supervisory Board of Evides NV, the water company in the south-west of the Netherlands. In addition, he is Chairman of Hotel School The Hague and of Ymere housing corporation. He has also supervisory functions in traffic safety (Vice-Chairman of SWOV) and Nederland Schoon (keep the Netherlands clean) and he holds various functions in international joint ventures such as the FIA, the Fédération Internationale de l'Automobile.



Anton van Loon is the Director of the BMWT, the sector organisation for manufacturers and importers of construction machinery and material handling equipment. The BMWT is involved in a large number of certified safety processes such as the BMWT-Keur quality mark and the Piek-Keur quality mark.

After studying engineering and didactics he has been active as a steel constructor, a consultant and in several administrative functions. In 1992 he became employed by the BMWT.

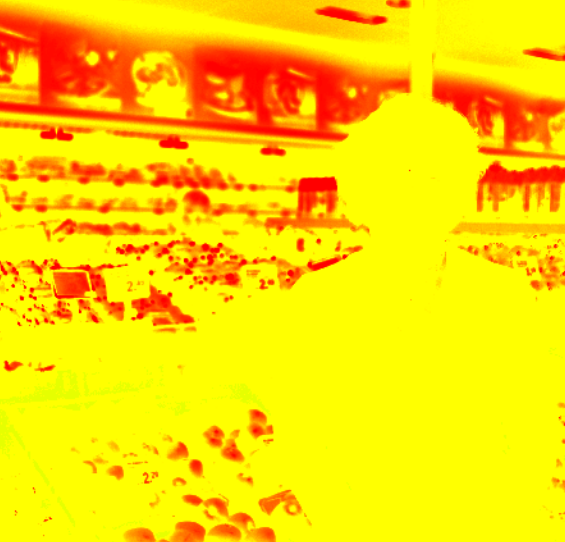
Anton van Loon advises the Board of the BMWT about safety systems. Moreover, he manages the existing certification schedules, he is for instance a member of the board of experts in the demolition sector and the Foundation for Supervisory Certification of Vertical Transport (Stichting Toezicht Certificatie Verticaal Transport: 'TCVT'). He is also a member of the jury for granting the Award for the Safest Warehouse, the Chairman of the Piek-Keur foundation and of several other bodies.



Prof. Dr. Wim H. van Harten is a member of the Board of Directors of the Netherlands Cancer Institute - Antoni van Leeuwenhoek Ziekenhuis. In addition, he is a part-time professor at the School of Management and Governance of Twente University where his teaching commitment is Quality Management of healthcare technology.

Contiguous from his graduation as a physician he has been active for 4.5 years in Africa (Cameroon). After his return he worked as head of the medical department of a healthcare insurer. From 1992 until 2001 he was initially a member of the Board and later General Director of the rehabilitation centre Het Roessingh in Enschede. In 1997 he obtained his doctorate with his research into the effects of a quality system.

Wim van Harten has published on process improvement and product development in rehabilitation care, quality management, entrepreneurship and various other developments in healthcare. He is also the Chairman of the Board of the Organisation of European Cancer Institutes (OECI), a Board Member of the Dutch Hospitals Association and Deputy Chairman of the Supervisory Board of Agendia BV.



Dr. Simone A. Hertzberger is head of the Quality and Product Sustainability department of Ahold Europa. She studied veterinary medicine at Utrecht University. In 1977 she became the head of the Microbiological Laboratory of the Netherlands Food and Consumer Product Safety Authority. In 1985 she entered employment with Ahold.

The Quality and Sustainability department is involved in preventative quality assurance, quality control, product and sustainability, social product issues and other subjects such as food and health, product safety, labelling and the law.

Simone Hertzberger advises the Management Board of the subsidiaries of Ahold Europa about the strategy for product safety, quality, the environment and other subjects in connection with Corporate Social Responsibility. She takes part in various steering committees and is a member of the Global Food Safety Initiative, the Supervisory Board of the Accreditation Council and the Board of the non-profit Stichting Inzamelen Kleding (KICI) foundation (for the collection of clothing). She is also a member of the Netherlands Council for Animal Issues (Raad voor Dierenaangelegenheden).

Administrative bodies and advisory committees

Appendix 1

This overview contains the composition of the administrative bodies and advisory committees as of 1 January 2012. In addition, we regularly engage advisory panels the composition of which can vary. Hence you will not see any names of the members of these advisory panels in this summary.

Supervisory Board

Drs. E.H.T.M. Nijpels (Chairman)

Dr. A.G.M. Buiting

Dr. S.A. Hertzberger

Ing. J. Visser

Ir. L. Visser

Director Operations

Ir. J.C. van der Poel (Chief Executive)

Ir. D.E. Aldershoff M.Sc. (Director Operations)

Accreditation Committee

Ir. M.N.D. de Vries (Chairman)

Dr. W. Huisman

Dr. Ir. J.M. van der Meer

Prof. Dr. Ir. O.A.M. Fisscher (as from 1 July 2012 onwards)

Objection Chairmen Committee

mr. L.A.F.M. Kerklaan

mr. M.N. van Zijl

User Council

Ir. J.C. van der Poel (Chairman RvA)

Ir. D.E. Aldershoff M.Sc. (Director Operations)

Th.J.W. Cieremans (Certification Institutions, VOC)

P. Cornelissen (Certification Institutions, VOC)

Dr. M. Curfs (Medical Laboratory Specialists, FMLS)

Dr. P.G.M. Hesselink (Laboratories and Inspection Institutions, FeNeLab)

Dr. G. Ponjeé (Medical labs)

Ph. de Ryck (Laboratories and Inspection Institutions, FeNeLab)

Ing. R. Veerman (Superintending Companies and Grain Factors, VEROCOG)

Brief financial overview

Appendix 2

As an independent foundation the Dutch Accreditation Council is a non-profit organisation. We secure our independence through a modern governance structure with the Supervisory Board and the Accreditation Committee and the User Council.

We also guarantee our independence by a healthy but limited amount of equity capital. This prevents us from taking too great financial risks when conformity issuing bodies decide to discontinue accreditation if the RvA takes a decision which is disagreeable to them. That is also safety.

The figures have been taken as a summary from the adopted annual accounts for 2011. No rights can be derived from them. The full annual accounts as prepared and adopted after approval by the Supervisory Board and the Minister of Economic Affairs, Agriculture and Innovation and provided with an unqualified report, can be viewed on www.rva.nl. If you type the search word

“jaarverslagen” (annual accounts), you will have access to the annual accounts for 2011. Obviously we will be pleased to send you a copy at your request. You can contact us via telephone number +31 (0)30 23 94 500.

Balance sheet as at 31 December 2011 (x €1,000)

| Assets | 2011 | 2010 |
|---------------------------------------------|--------------|--------------|
| Fixed assets | 360 | 398 |
| Receivables and Transitory Assets | 2,886 | 3,019 |
| Liquid resources | 2,552 | 2,769 |
| Total | 5,798 | 6,186 |
| | | |
| Liabilities | 2011 | 2010 |
| Equity capital | 2,737 | 2,537 |
| Short-term debts and transitory liabilities | 3,061 | 3,649 |
| Total | 5,798 | 6,186 |

Profit and loss account for 2011

The income of the RvA is generated particularly from activities carried out on the basis of rates. We determine these rates on the basis of a discussion of the budget with the User Council and after approval by the Supervisory Board and the Minister of Economic Affairs, Agriculture and Innovation.

The level of activities in 2011 was slightly higher than budgeted for particularly as a result of a larger number of initial and extension investigations and schedule assessments. The cost price was lower due to a favourable mix of the deployment of our own employees and freelance assessors. The operational result has been positively affected once by a release of loans to depositaries in 1995.

| Results for 2011 x €1,000 | 2011 | 2010 |
|---------------------------|--------------|--------------|
| Net turnover | 11,241 | 10,683 |
| Costs of turnover | 3,314 | 3,442 |
| Gross margin | 7,927 | 7,241 |
| | | |
| Personnel costs | 5,543 | 5,139 |
| Other costs | 2,243 | 2,063 |
| Sum total of costs | 7,786 | 7,202 |
| Operational result | 141 | 39 |
| Interest income | 59 | 30 |
| Result | 200 | 69 |

Rates

The starting point is to increase the rates by not more than the index of Statistics Netherlands (CBS) for business services. The rates have been adjusted as follows:

| | 2011 | 2010 |
|----------------------|--------------|--------------|
| Index applied | 1.1% | 2.0% |
| Rate (lead) assessor | +1.1% | +2% |
| Rate specialists | +1.1% | +1.8% |
| Other rates | +1% to +1.1% | +0% to +1.5% |

The rates for the activities in connection with the CCKL Code of Practice were also increased in 2011 by 1.1% (in 2010 by 2%). These rates are not covered by the Ministerial approval but for the rest are formed in the same manner as the other rates.

Our work in figures
Appendix 3

Trust and the feeling of safety require the possibility of auditing. In this Appendix you will find a summary in figures of our activities in 2011. As a comparison in several cases we also added previous figures.

| Accreditations granted as at 31 December 2011 | | | |
|-----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------|
| Standard | Explanation | The Netherlands 2011 | Abroad 2011 |
| Certification | Products & Services Management Systems Persons | 43 50 8 101 | 7 42 1 50 |
| | | | |
| | | | |
| | | | |
| Subtotal certification | | 101 | 50 |
| Inspection | Inspection | 122 | 6 |
| | | | |
| ISO/IEC 17020 | | | 5 |
| Laboratories RvA mark | Calibration Testing Proficiency testing Reference materials Medical laboratories in Multilateral Agreement | 54 225 12 2 10 303 | 3 17 1 0 1 22 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Subtotal laboratories | | 303 | 25 |
| Regulation (EC) no. 1221/2009 (EMAS) | EMAS verification | 1 527 | 0 78 |
| | | | |
| Total RvA mark | | 527 | 80 |
| Laboratories Care | Medical laboratories | 246 | 0 |
| | | | |
| CCKL Code of Practice | | | 238 |
| Total number of accreditations granted | | 773 | 748 |
| | | | 828 |

¹ This standard is the successor of the ILAC Guide 13.

Geographical spread of the accreditations granted under the RvA mark as at 31 December 2011

| Country | 2011 | 2010 | 2009 |
|---------------------------------------|------|------|------|
| The Netherlands | | | |
| (autonomous administrative authority) | 527 | 510 | 502 |
| Remainder of Europe | 25 | 33 | 37 |
| Rest of the world | 53 | 47 | 49 |
| Total | 605 | 590 | 588 |

Number of reports submitted to the Accreditations Committee

| Jaar | Aantal |
|------|--------|
| 2011 | 181 |
| 2010 | 200 |
| 2009 | 202 |

Accreditations Committee's recommendations per report (in %)

| | RvA mark 2011 | CCKL 2011 | Total 2011 |
|-------------------------|---------------|-----------|------------|
| Initial assessment | | | |
| positive recommendation | 28% | 30% | 29% |
| Reassessment positive | | | |
| recommendation | 67% | 60% | 64% |
| Postponed reports | 3% | 8% | 5% |
| Negative recommendation | 2% | 2% | 2% |
| Total | 100% | 100% | 100% |

In 2011 all recommendations given by the Accreditations Committee were adopted by the Executive Board.

Number of applications for new accreditations (excluding extensions)

| | |
|-----------------------|------|
| | 2011 |
| RvA mark | 48 |
| CCKL Code of Practice | 13 |
| Total | 61 |

Number of applications for extension investigations (RvA mark)

| | |
|------------------------|------|
| | 2011 |
| Certification | 57 |
| Inspection | 23 |
| Calibration laboratory | 7 |
| Test laboratory | 81 |
| Subtotal | 168 |
| Schedules | 38 |
| Other | 2 |
| Total | 208 |

| | | | |
|-------------------------------|-------------|-------------|--|
| Newly granted accreditations | | | |
| <i>Accreditation category</i> | <i>2011</i> | <i>2010</i> | |
| Certification | 7 | 5 | |
| Inspection | 10 | 7 | |
| Calibration laboratories | 3 | 3 | |
| Test laboratories | 19 | 15 | |
| Other | 0 | 4 | |
| Total RvA mark | 39 | 34 | |
| | | | |
| CCKL Code of Practice | 21 | 20 | |
| Total | 60 | 54 | |

Invoiced RvA mark assessment days, broken down by type of investigation

| | | | |
|-------------------------|------------------|------------------|------------------|
| <i>Assessment type</i> | <i>2011 in %</i> | <i>2010 in %</i> | <i>2009 in %</i> |
| Initial assessment | 9.8 | 8.6 | 7.0 |
| Extension | 9.7 | 9.4 | 7.9 |
| Reassessment | 18.2 | 26.6 | 33.9 |
| Surveillance assessment | 62.3 | 55.4 | 51.2 |
| Total | 100 | 100 | 100 |

Invoiced RvA mark assessment days, broken down by the role in assessment team

| | | | |
|---------------|------------------|------------------|------------------|
| <i>Role</i> | <i>2011 in %</i> | <i>2010 in %</i> | <i>2009 in %</i> |
| Lead assessor | 53 | 55 | 44 |
| Assessor | 8 | 6 | 15 |
| Specialist | 39 | 39 | 41 |
| Total | 100 | 100 | 100 |

Number of assessments of CCKL Code of Practice

| | | | |
|------------------------|-------------|-------------|-------------|
| <i>Assessment type</i> | <i>2011</i> | <i>2010</i> | <i>2009</i> |
| Initial assessment | 16 | 22 | 17 |
| Audit | 59 | 72 | 54 |
| Document audit | 14 | 24 | 38 |
| Reassessment | 56 | 47 | 36 |
| Total | 145 | 165 | 145 |

Disputes, suspensions and withdrawn accreditations

Disputes

A dispute is a difference of opinion between the assessed party and the RvA assessor about the interpretation of the requirements of the standard.

| | | | |
|------------------------------|-------------|-------------|-------------|
| <i>Assessment of dispute</i> | <i>2011</i> | <i>2010</i> | <i>2009</i> |
| Difference justified | 14 | 21 | 20 |
| Difference not justified | 3 | 6 | 4 |
| Difference partly justified | 3 | 3 | 2 |
| Disallowed | 2 | 1 | 2 |
| Pending | 8 | 0 | 0 |
| Total | 30 | 31 | 28 |

Suspended accreditations

| | | | | | | |
|-------------------------------|-----------------------|---------------------|-------------------|-----------------------|---------------------|-------------------|
| <i>Accreditation category</i> | <i>Voluntary 2011</i> | <i>Imposed 2011</i> | <i>Total 2011</i> | <i>Voluntary 2010</i> | <i>Imposed 2010</i> | <i>Total 2010</i> |
| Certification | 2 | 3 ¹ | 5 | 2 | 3 | 5 |
| Inspection | 0 | 1 ² | 1 | 1 | 1 | 2 |
| Calibration laboratories | 1 | 1 | 2 | 0 | 0 | 0 |
| Test laboratories | 3 | 0 | 3 | 1 | 2 | 3 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 |
| Total RvA mark | 6 | 5 | 11 | 4 | 6 | 10 |
| | | | | | | |
| CCKL Code of Practice | 2 | 1 | 3 | 1 | 0 | 1 |
| Total | 8 | 6 | 14 | 5 | 6 | 11 |

Withdrawn accreditations

| | | | | | | |
|-------------------------------|-----------------------|---------------------|-------------------|-----------------------|---------------------|-------------------|
| <i>Accreditation category</i> | <i>Voluntary 2011</i> | <i>Imposed 2011</i> | <i>Total 2011</i> | <i>Voluntary 2010</i> | <i>Imposed 2010</i> | <i>Total 2010</i> |
| Certification | 4 | 0 | 4 | 13 | 2 | 15 |
| Inspection | 3 ³ | 0 | 3 ³ | 4 | 1 | 5 |
| Calibration laboratories | 4 | 0 | 4 | 1 | 0 | 1 |
| Test laboratories | 14 | 0 | 14 | 10 | 0 | 10 |
| Other | 0 | 0 | 0 | 1 | 0 | 1 |
| Total RvA mark | 25 | 0 | 25 | 29 | 3 | 32 |
| | | | | | | |
| CCKL Code of Practice | 3 ³ | 0 | 3 ³ | 0 | 2 | 2 |
| Total | 28 | 0 | 28 | 29 | 5 | 34 |

¹ this standard is the successor of the ILAC Guide 13.

² partial suspension

³ of which one partial withdrawal.

Six of the withdrawals referred to above were caused by the transition to the accreditation body of the home country, in connection with Directive EC 765.

Accepted scheme managers

Appendix 4

Scheme managers are organisations developing and managing schemes used by laboratories and certification or inspection bodies in performing their assessment task. These schemes set a standard for suppliers who want to obtain a certificate or other form of approval. Only when the supplier meets the quality and safety requirements laid down in the scheme will the assessment body issue a certificate or quality mark. So a scheme manager is not an assessment body but formulates the standards and manages them.

You can read more about the safety policy on the safety & crisis control website ‘Veiligheid & Crisisbeheersing (www.veiligheid.org). The first phase of the safety chain described there is aimed at risk control: structurally preventing high-risk situations and indicating measures to reduce risks. In that sense schedule managers provide an important contribution to preventing risks and to safety problems.

The scheme managers themselves must also meet the rules laid down in regulations by the RvA in close consultation with the stakeholders. These regulations include rules applicable to the formal co-operation between the scheme managers and the RvA. The legal form of a scheme manager is in practice always a foundation. This enables the RvA to enter into a so-called

‘acceptance agreement’ with these organisations. This acceptance is not an accreditation because this applies exclusively to the assessment bodies. It can apply to one or more schemes developed by the scheme manager and managed by him.

In co-operation with the scheme managers the RvA collected into a document the criteria on which the schemes are assessed. This document makes a connection with the requirements of the accreditation standards and indicates how these can be used in formulating the schemes. More information in this connection can be found on our website.

Who are the accepted scheme managers? The following list offers you an overview. This list represents the state of affairs as at 1 April 2012.

| Area of activity of scheme manager | Foundation | Website |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----------------------------------------------------|
| <ul style="list-style-type: none">ContractorsGeneral management and improvement of effectiveness and efficiency of organisation | SSVV | www.vca.nl |
| <ul style="list-style-type: none">Working conditions and safety management (Occupational Health and Safety Assessment Series: OHSAS 18001)Environmental Management (ISO 14001)Occupational health and safety servicesAsbestosCar damageSoil, water and archaeologyContract cateringCriminality prevention and fire safetyAnimal feed sectorDigital certificatesDistribution of pesticidesHealthcare, welfare and social servicesGreen areasHACCP systemsFood safety (management) systems | Continue verbeteren in het MKB | www.continuverbeterenmkb.nl |
| | SCCM | www.sccm.nl |
| | SBCA | www.sbca.nl |
| | Ascert | www.ascert.nl |
| | KZS | www.focwa.nl |
| | SIKB | www.sikb.nl |
| | Cercat | www.cercat.nl |
| | CCV | www.hetccv.nl |
| | GMP+ | www.gmpplus.org |
| | ECP | www.ecp.nl |
| | CDG | www.stichtingcdg.nl |
| | HKZ | www.hkz.nl |
| | Stichting Groenkeur | www.groenkeur.nl |
| | SCV | www.foodsafetymanagement.info www.fssc22000.com |
| <ul style="list-style-type: none">Wooden packagingInspection and maintenance of heating installationsCable infrastructure and pipe laying companiesArgicultural /food, non-food environmental quality mark, barometers, greenhouses green label, sustainable cattle farming measuring rule and aquaculturePoultry sector (integral chain control)Potting soil and substrateDebt counsellingDemolition workTaxi industryTechnical installation sectorMotor coach businessPig sector (integral chain control)Working safely in electrical engineeringVertical transportVehicle dismantling | SMHV | www.smhv.nl |
| | SCIOS | www.scios.nl |
| | CKB | www.ckb.nl |
| | SMK | www.smk.nl |
| | PPE | www.pve.nl |
| | Stichting RHP | www.rhp.nl |
| | NEN | www.nen.nl |
| | SVMS | www.veiligsglopen.nl |
| | TX-KEUR | www.tx-keur.nl |
| | KBI | www.kbi.nl |
| | SKTB | www.sktb.nl |
| | CBD | www.cbd.info |
| | STIPEL | www.stipel.nl |
| | TCVT | www.tcvl.nl |
| | KZD | www.kzd.info |



Marks of the Dutch Accreditation Council

Appendix 5

How do you recognise whether an accredited service provision is taking place? You can see it by means of the following marks on certificates or reports.

Calibration Mark K 000

The accreditation mark for accredited calibration laboratories. Laboratories are allowed to display this accreditation mark if they have demonstrated their ability to perform the calibrations with a high degree of reliability and certainty in accordance with the relevant standards, traceability to international standards being safeguarded. Calibration is essential for production processes and forms the basis for testing laboratories and many inspection activities. Accreditations are carried out according to ISO/IEC 17025.

Testing Mark RvA L 000

The accreditation mark for accredited testing laboratories. Laboratories are allowed to display this accreditation mark if they have demonstrated their ability to perform tests with a high degree of reliability and certainty in accordance with the relevant standards. Accreditations are carried out according to the ISO/IEC 17025 standard.

Testing Mark RvA M 000

The accreditation mark for accredited medical laboratories. Medical laboratories are allowed to display this accreditation mark if they have demonstrated their ability to perform tests with a high degree of reliability and certainty in accordance with the relevant standards. In addition, in comparison with ISO/IEC 17025, extra attention is given to the pre-analytical phase (advising, sampling), the post-analytical phase (interpretation, diagnosing) and the contribution to patient care. Accreditations are carried out according to the ISO 15189 standard.

Inspection Mark RvA I 000

The accreditation mark for accredited inspection bodies. Inspection determines whether a design, a product or batch meets the requirements for each individual object or for each batch. For its supervision of inspection bodies the RvA uses the ISO/IEC 17020 standard for products in the new build and use phases.

Products Mark RvA C 000

The accreditation mark for accredited certification bodies for product certification. For product certification purposes certification bodies are reviewed against EN 45011 for product certification. Certification bodies assess product designs and products in the new build, production or preparation phases. These (in series) produced products may be provided with an appropriate quality mark. This system is regularly used in European Directives.

Management Systems Mark RvA C 000

The accreditation mark for accredited certification bodies for the certification of management systems. Certification bodies are reviewed against ISO/IEC 17021 for the assessment of institutions according to, for example, ISO 14000, ISO 18001, ISO 900 and VCA.

Personnel Mark RvA C 000

The accreditation mark for accredited certification bodies for the certification of personnel. The certification bodies are assessed on the basis of ISO/IEC 17024. The certification bodies are then allowed to issue certificates under accreditation indicating that personnel continuously have a certain professional skill.



Proficiency Testing Mark RvA R 000

The accreditation mark for accredited organisers of inter-laboratory investigations. Laboratory investigations are conducted to compare the outcomes of tests and calibrations of individual laboratories. These investigations are set up to demonstrate the equivalence of (accredited) laboratories. Accredited organisers of inter-laboratory investigations are reviewed against the ILAC-G13-document.

Reference Materials Producers Mark RvA P 000

The accreditation mark for accredited producers of reference materials. Since 1 May 2008 laboratories producing reference materials that also award the values themselves can have these activities accredited according to a combination of ISO Guide 34 and ISO/IEC 17025

EMAS Mark NL V 000

The accreditation mark for accredited EMAS verification bodies. In connection with EMAS verification, certification bodies are reviewed according to EMAS criteria (Regulation, (EC) No. 1221/2009). Accredited certification bodies assess annual environmental reports.

Outside the ILAC and the EA-MLA

CCKL Mark

The accreditation mark for accredited medical laboratories according to the CCKL Code of Practice. This accreditation mark can be used if medical laboratories have demonstrated that they can carry out tests with a high degree of reliability and certainty in accordance with the relevant standards. Extra attention is given to the pre-analytical phase (advising, sampling), the post-analytical phase (interpretation, diagnosing) and the contribution to patient care. This accreditation is not covered by the MLA.

List of abbreviations

Appendix 6

| | |
|---------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ADL | Algemene Dagelijkse Levensverrichtingen (Activities of Daily Living) |
| ADR | Alternative Dispute Resolution |
| BMWT | Bouwmachines, Magazijninrichting, Wegenbouwmachines en Transportmaterieel (construction machines, warehouse lay-out, road construction machinery and transport material) |
| CBD | CoMore Bedrijfsdiensten (business services) |
| CCKL | Stichting voor de bevordering van de kwaliteit van het laboratoriumonderzoek en voor de accreditatie van laboratoria in de gezondheidszorg (Foundation for the Promotion of the Quality of Laboratory Testing and for the Accreditation of Laboratories in Health Care) |
| CCV | Centrum voor Criminaliteitspreventie en Veiligheid (Centre for Criminality Prevention and Safety) |
| CDG | Certificatie Distributie in Gewasbeschermingsmiddelen (certification of pesticides distribution) |
| Cercat | Certificatie Contractcatering (certification of contract catering) |
| CKB | Stichting Certificatieregeling Kabelinfrastructuur en Buizenlegbedrijven (Foundation for the Certification Scheme for Cable Infrastructure and Pipelaying Companies) |
| EA | European co-operation for Accreditation |

| | |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ECP | Stichting Electronic Commerce Platform Nederland foundation |
| EL&I | Ministerie van Economische Zaken, Landbouw en Innovatie (Ministry of Economic Affairs, Agriculture and Innovation) |
| EMAS | Eco Management and audit System |
| EN | Europese Norm (European Standard) |
| ERP | Enterprise Resource Planning |
| EurepGAP | European Good Agricultural Practice |
| EU | European Union |
| FeNeLab | Federatie van de Nederlandse verenigingen van Laboratoria en Inspectie-instellingen (Federation of the Dutch Associations of Laboratories and Inspection Institutions) |
| FIA | Fédération Internationale de l'Automobile |
| FMLS | Federatie Medische Laboratorium Specialisten (Federation of Medical Laboratory Specialists) |
| GMP | Good Manufacturing Practice |
| HACCP | Hazard Analysis Critical Control Points |
| HKZ | Stichting Harmonisatie Kwaliteitsbeoordeling in de Zorgsector (Foundation for the Harmonisation of Quality Assessment in the Health Care Sector) |
| HRM | Human Resource management |
| IAF | International Accreditation Forum |
| ICT | Information and Communication Technology |
| IEC | International Electrotechnical Committee |
| IGZ | Inspectie voor de Gezondheidszorg (Health Care Inspectorate) |
| ILAC | International Laboratory Accreditation Co-operation |
| ISO | International Organization for Standardization |
| KBI | Stichting Kwaliteitsborging Installatiesector (Foundation for Quality Assurance in the Installation Sector) |
| KICI | Stichting Kleding Inzameling Charitatieve Instellingen (Foundation for the collection of clothing for charity) |
| KZD | Stichting Kwaliteitszorg Demontage (Foundation for Quality Management in Vehicle Dismantling) |
| KZS | Stichting Kwaliteitszorg Autoschadeherstelbranche (Foundation for Quality Management in the Motor Repair Sector) |
| LoReT | Logistics Re-engineering Tool |
| LoRIET | Logistics Risk Assessment and Evaluation tool |
| MKB | Midden- en Kleinbedrijf (small and medium-sized enterprises: SMEs) |
| MLA | Multilateral Agreement |
| MRA | Multilateral Recognition Arrangement |
| NEN | Nederlands Normalisatie Instituut (Netherlands Standardisation Institute) |
| NIAZ | Nederlands Instituut voor Accreditatie in de Zorg (Netherlands Institute for Accreditation in Health Care) |
| NTA | Nederlandse Technische Afspraak (Netherlands Technical Agreement) |
| OECI | Organisation of European Cancer Institutes |
| OHSAS | Occupational Health and Safety Assessment Series |
| PIN | Persoonlijk Identificatie Nummer (personal identification number) |
| RHP | Regeling Handels Potgronden (Regulation of trade in potting soil) |
| RI&E | Risico Inventarisatie en Evaluatie (Risk Assessment & Evaluation) |

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|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| RvA | Raad voor Accreditatie (Dutch Accreditation Council) |
| SBCA | Stichting Beheer Certificatieregeling Arbodiensten (Foundation for Certification Management Regulation of Occupational Health and Safety Services) |
| SBPP | Stuurgroep Beheer Primair Proces (primary process management steering committee) |
| SCCM | Stichting Coördinatie Certificatie Milieuzorgsystemen (Foundation for Coordination of Certification of Environmental Management Systems) |
| SCIOS | Stichting Certificatie Inspectie en Onderhoud aan Stookinstallaties (Foundation for Certification Inspection and Maintenance of Heating Installations) |
| SCV | Stichting Certificatie Voedselveiligheid (Foundation for Certification of Food Safety) |
| SIKB | Stichting Infrastructuur Kwaliteitsborging Bodembeheer (Foundation for Infrastructure of Quality Assurance in Soil Management) |
| SKTB | Stichting Keurmerk Touringcarbedrijf (Foundation for Motor Coach Company Quality Mark) |
| SMHV | Stichting Markering Houten Verpakkingen (Foundation for Wooden Packaging Marking) |
| SMK | Stichting Milieukeur (Foundation for Environmental Seal of Approval) |
| SSV | Stichting Samenwerken Voor Veiligheid (Foundation for Cooperation for Safety) |
| STIPEL | Stichting Persoonscertificatie Elektrotechniek (Foundation for Person Certification in Electrical Engineering) |
| SVMS | Stichting Veilig en Milieukundig Slopen (Foundation for Safe and Ecological Demolition) |
| SWOV | Stichting Wetenschappelijk Onderzoek Verkeersveiligheid (Foundation for scientific research into traffic safety) |
| TCVT | Stichting Toezicht Certificatie Verticaal Transport (Foundation for Supervisory Certification of Vertical Transport) |
| TX-Keur | Taxi quality mark |
| VCA | VeiligheidsChecklist Aannemers (contractors safety checklist) |
| VEROCOG | Vereniging van Onafhankelijke Controlebedrijven en Graanfactoren (Association of Independent Superintending Companies and Grain Factors) |
| VMS | Veiligheids Management Systeem (safety management system) |
| VOC | Vereniging Overleg Certificatie-instellingen (Association for Certification Institution Consultation) |
| ZBO | Zelfstandig Bestuursorgaan (autonomous administrative authority) |

Colophon

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