RAAD VOOR ACCREDITATIE

PUBLIC REPORT 2014

Trust
on the move

Trust
on the move

RAAD VOOR ACCREDITATIE

Vision, mission and core values

Vision

The RvA services:

- are provided in a professional, transparent and independent way with integrity;
- by deploying competent, motivated employees and external networks of experts;
- and according to national and international set requirements.

In addition, the interests of the Dutch market, the authorities and the people are taken into account.

Mission

The core activity of the RvA is to provide accreditation services. As a national accreditation body the RvA ensures that the confidence all the interested parties have in the certificates of conformity and assessment reports issued under its supervision is justified.

Core values

The RvA adheres to the following core values:

- competency
- impartiality and independence
- market orientation
- people orientation
- integrity
- transparency

In Dutch the first letters of these words read as the acronym ‘commit’. This is an abbreviation which means commitment, or involvement. It is precisely this involvement based on the core values that offers our clients actual guaranteed trust.

What is accreditation?

Creating trust

Accrediting really means: creating trust. Nationally and internationally buyers want to be able to trust blindly the quality and safety of products and services provided. If these are guaranteed, it not only benefits the buyer but also the supplier. This strengthens his position in the market. In order to be able to give an objective guarantee, the supplier can have his product or service assessed by an accredited organisation. This also applies to every area imaginable: health, environment, construction, energy, food, transport, finance etc.

Chain of trust

If a supplier meets the requirements he will receive a certificate of conformity in the form of a certificate or report. Assessing bodies are therefore called conformity assessment bodies. This statement has most value if the assessment body is professional, impartial and independent. The RvA has been appointed by the government as the national accreditation body with the aim of checking the expertise, impartiality and independence of conformity assessment bodies. If the result is positive an accreditation mark will be issued. Thereby the RvA forms the final link in the chain of trust.

Contents

Introduction

This is the public report for 2014, a year in which the words 'trust' and 'supervision' were often in the media. It is our statutory duty to supervise conformity assessment bodies by way of accreditation based on international standards. This is in order that the trust in the statements issued by them is actually justified.

This was sometimes discussed in the media but the impression was much more often created that we can no longer trust nearly everything or anybody. Food producers and dealers, accountants, care homes, housing corporations, civil-law notaries, banks and many other institutes and organisations were pilloried to a greater or lesser extent. In some cases the work of accredited organisations was involved in this. The question then arose in the media: how is this possible? Weren't they certified? Or: was this not an accredited laboratory?

In first instance we experience this at the RvA as a negative message, as criticism of ourselves and our accredited organisations. This is of course so. But as with every half empty glass, this glass is also half full. The implicit message is that it is certainly assumed that laboratories, inspection, certification and accreditation produce reliable services and products. Drinking water, lifts, electrical appliances, blood tests, playground equipment, dairy produce: all are checked by accredited organisations. You hardly hear anything about them, because all is well, they can be trusted.

Naming and shaming can help to stimulate organisations and companies to get their 'house' in order and to accept their responsibility but it can go too far, in the sense that the good and justified trust is undermined. The standards can be so high that organisations publish every inspection result on their website, just in order to be transparent. The question is: does this provide insight? Does it really create trust? Or does this just lead to more incidents and will the focus be on looking for problems instead of working on improvement?

You could say that supervision is in transition. We are en route to a new balance in influencing the public, hard or soft enforcement, individual responsibility of businesses via internal and external supervision, risk assessments, exemplary conduct. The Netherlands Scientific Council for Government Policy (*Wetenschappelijke Raad voor het Regeringsbeleid:* 'WRR') already discussed this in 2013 in the 'Supervising public interests' report (*Toezien op publieke belangen*) and in 2014 published 'From a diptych to triangles' (*Van tweeluik naar driehoeken*). The Cabinet responded to both reports in September 2014, with not yet very concrete conclusions.

In this public report we highlight various views on these developments of the concept of trust, for instance via several interviews. After all for us as the RvA trust is vital; it is what our name stands for.

Looking back to 2014

Apart from all the work that is necessary for the annual assessment of over 600 RvA accreditations and 250 CCKL accreditations (accreditations by the Foundation for the Promotion of the Quality of Laboratory Testing and for the Accreditation of Laboratories in Health Care), in 2014 we paid close attention to the following matters.

New accreditation standards for medical laboratories, inspection institutions and certification institutions of products, services and persons caused a transition from old to new amongst our accredited organisations in 2014. There were also transition activities in the implementation of the European directives being adjusted to the New Legal Framework (765/2008 and 768/2008) and the transition from the Construction Products Directive to the Construction Products Regulation, whereby accreditation forms the basis for European notification. In the private as well as the public domain of our work 'transition' was the key word in 2014.

The peer evaluation by the European cooperation for Accreditation, which was wrapped up in January 2014, and after corrective measures were taken was completed in April with continued RvA membership of the MLA. We also became the co-signatory for the new MLA for emissions and verification. The study into independent governance bodies, on the instructions of the SG Consultations (consultation meetings of the Secretary Generals of various Dutch ministries), was concluded for the RvA with a re-affirmation of the current position and legal form. In 2014, where necessary the bye-laws have been adjusted to the currently applicable principles of good governance and supervision.

Internally a lot of attention has been paid to the development of a completely renovated website. We held surveys amongst various groups of employees and stakeholders, in order to find out what they consider important. This input played a big role in the development of our new site which was launched on 5 March 2015. In addition, in 2014 we completed a comprehensive SWOT analysis (strengths, weaknesses, opportunities, threats). In this connection we also included the input of the employees and external parties. The strategy for the coming years has been established on the basis of this analysis (see Annex 5).

Outlook for 2015

The transition period for the inspection standard ends on 28 February 2015. We will still have a lot of work to do on the transitions of the ISO/IEC 17065 and ISO/IEC 17024 standards. In 2015 the final accreditations according to the CCKL Practice Guidelines (the national standard) will be awarded to medical laboratories. The transition programme of the national to the international standard (ISO 15189) is coming on stream. In 2015 approx. sixty medical laboratories will be assessed against this new standard.

The implementation of adjusted European product directives in the Netherlands will require the attention of the RvA, with regard to giving input to the respective notifying authorities as well as in the sphere of assessments.

The communication with the policy departments of ministries and with inspections remains a major point of attention:

- Consultations with the Ministry of Social Affairs and Employment ('SZW') will be held regarding the way in which the SZW assessment system for European notification or Dutch designation of conformity assessment bodies can be converted into regular accreditation.
- In discussions with the Ministry of the Interior and Kingdom Relationships the detailing of the implementation of the Construction Product Regulation and the intended implementation of the Dutch Construction Quality Assurance Act (*Wet kwaliteitsborging voor het bouwen*) is high on the agenda.
- Information exchange is expected to take place at a generic level with the various official inspectorates – and in particular the Dutch Consumer Product Safety Authority (*Nederlandse Voedsel- en Warenautoriteit*), the Social Affairs and Employment Inspectorate (*Inspectie Sociale Zaken en Werkgelegenheid*) and the Living Environment and Transport Inspectorate (*Inspectie Leefomgeving en Transport*). The aim in this respect is to prevent unnecessary overlap in assessing the work of accredited organisations and the business sector they serve.

Last but not least a removal is planned for 2015. In the middle of September we will occupy a new office at Daalse Plein in Utrecht. This move gives us the opportunity to further modernise the work concept of the RvA, for instance in the form of knowledge and workplace sharing.

Structure of this public report

This public report consists of two parts. In the first part you can read how in 2014 the RvA contributed to the justified confidence of people, authorities, companies and organisations, by continuously considering how the internal organisation and the external service to clients can be further improved. We also share our ideas here about how we could even better focus and organise all the forms of supervision in the future. The second part includes the formal facts: it shows the figures for 2014 but also information about the primary process of the RvA, the composition of

the governing bodies and advisory committees, the strategic choices for the coming years, the scheme managers accepted by the RvA and the various accreditation marks which the conformity assessment bodies are allowed to carry.

Apart from these core subjects you will find six fascinating interviews in this public report: The following people have their say:

- Cordula Wagner, professor in patient safety;
- Jan Hommen, CEO of KPMG Nederland;
- Bart Jan Krouwel, Chairman of the core group for the Food Confidence Taskforce;
- Harry Nieman, quartermaster of private quality assurance at the Dutch Institute for Construction Quality.

These individual interviews alternate with dialogues between:

- Hans Scheffer, head of the Genome Diagnostics section in the Radboud UMC, and Angélique Visser, accreditations project manager at the RvA;
- Vera Dalm, Director of Milieu Centraal, and Maureen van den Wijngaart, policy assistant at the RvA.

They share their thoughts on the question of how the quality level in their work area can be further increased in order to strengthen social trust.

I hope you enjoy reading this report!

Jan van der Poel
Director/Chief Executive

Medical laboratories in transition

Towards international recognition

A talk with Hans Scheffer, head of the Genome Diagnostics section in the Radboud UMC, and Angélique Visser, accreditations project manager at RvA

There are over 250 medical laboratories in the Netherlands with accreditation according to the CCKL Code of Practice. In the coming period these laboratories are going to be faced with quite a challenge: in the middle of 2019 they must have completed their transition to the international ISO 15189 standard. In 2013 and 2014 four laboratories voluntarily completed a pilot process including the Genome Diagnostics laboratory of the Radboud UMC in Nijmegen. What are the pillars of a successful transition? Hans Scheffer and Angélique Visser give their view.

What does trust mean?

HS: As a client of a medical laboratory you should be able to assume that the necessary tests are carried out with the highest degree of reliability and service. So it is not only about the quality you provide but also the way in which you organise the process: Do you work efficiently enough? Are you not incurring unnecessary costs?

AV: There are for instance laboratories that use bodily materials and subsequently place these back, in those cases as a patient you want to know for sure that it is your material that is being placed back, and not that of another. This also involves trust.

HS: It is something many laboratories are struggling with. On the one hand it is about high-value technology and the expertise in order to be able to interpret complex cases properly but on the other hand you also need very simple measures in order to be able to provide good care. Because if two patient samples are switched, the consequences are obviously going to be dramatic. What I also consider difficult, and this probably applies to all laboratories offering patient care, is that the majority of the employees have no direct contact with the patient. How then can you still create involvement?

AV: This is certainly not simple. For instance attending conferences where patients can also tell their stories, comes to mind. Or traineeships come to mind where employees are shadowing the patient process. For that matter this distance is even greater for the RvA. For us too it is very healthy now and then to consider the question: why are we doing this? Why do we want a good report?

HS: This human factor is very important. That is why I think it so worrying that nowadays as a citizen you can order all kinds of tests via the internet which give genetic information. Often it is not even claimed that this involves medical problems. In such a case a commercial company offers a test, for instance for lifestyle factors, and determines what your genetic characteristics are. You will receive this data in the post. But as a layman you don't know how relevant this data is. For instance at a certain moment we received a call from a physician from Estonia. His patient had purchased a test online. She was pregnant of her second child and was highly concerned because her first child had a serious genetic disorder. At the request of the physician we studied the data of that online test, and there appeared indeed to be a serious genetic disorder. These are things which are still occurring incidentally but I think that we are going to receive questions like these more and more.

AV: This advisory role forms a particularly essential part of this work. An independent technical result sometimes says nothing at all. It is about an expert interpreting this result and then giving suitable advice. This is the added value.

International recognition

AV: As the RvA we assess the expertise, impartiality and independence of medical laboratories. In the coming years we will be faced with a large-scale transition. We are going to let go of the CCKL Code of Practice (the national standard) and we will switch in stages towards accreditation according to the international ISO 15189 standard. Thereby laboratories will acquire accreditation which will also be recognised internationally and which has more value.

HS: At the Radboud UMC we are very active in foreign laboratory diagnostics. It will be better to work with a standard which is also known abroad. In addition, I think that it is a good thing if more uniformity in quality and service is created at European level. This certainly applies to the discipline involving rare diseases when you sometimes have to search for a laboratory that has more experience with a certain disorder.

AV: ISO 15189 differs in some points from the CCKL Code of Practice. For instance the new standard pays more attention to risk prevention. What can go wrong if you are going to organise the process in this way? And how can you try to prevent this? But also: where would you absolutely not want to take a risk? And where do you take risks consciously because the chance of things going wrong is relatively small? It is impossible to tighten everything up. It is good to think about this in advance.

HS: For instance if we look again at bodily material, there is a risk that somewhere in the process from entry to result something will be switched. That is why some laboratories decide to do everything in duplicate. But this obviously means that it all becomes twice as expensive. We work with a sample tracking system, which means the chance of something being switched in our primary sample collection is minimised. We can also follow the material during the analysis process. This is a business-economic consideration. This then becomes a calculated risk.

AV: The transition to ISO 15189 can be considered as a professionalisation upgrade. The basis remains in actual fact the same but the process must be organised differently on certain points. This means for instance that you have to change internal documents,

that you have to train specialists to carry out assessments according to the new standard and that you have to formulate your reports differently. We also put a lot of energy into the definition of the flexible source scope. This is now a lot more detailed than it was in connection with the CCKL Code of Practice. For laboratories this has the advantage that they can show the outside world the exact performance packages for which they are accredited. In addition, it helps us to make an even better selection of specialists for assessments.

HS: The description of the new standard is less specific and less concrete. This creates some flexibility on the one hand but on the other hand you have to open up the discussion with each other in order to ascertain exactly what this means. This can differ for individual laboratories. But ultimately you want to make it measurable. This should be solved together.

Transition heroes: a pilot

AV: A large-scale transition such as this one means sound preparation. We started with a steering committee including representatives of the eight scientific associations. This steering committee set out the outlines. On this basis we organised nineteen sub-projects, for instance in the area of scope, research, documents and finance. This was followed in 2013 by the kick-off of the pilot process. In this way we could find out whether there were still things which we had not sufficiently taken into account. The Genome Diagnostics laboratory of the Radboud UMC was one of the four labs which volunteered to take part in this pilot.

HS: Our quality system was working well, so we took that as the starting point. We then made a strengths/weaknesses analysis. From this it emerged that we really did not miss so many elements. In order to asses whether our trust in the system was indeed justified, several employees of the quality system followed an ISO 15189 course. That course confirmed our suspicion that we had it largely in order. In other words: the hat stand was on its feet but we still had to hang some extra coats on it. In this way we once again had a good look at the processes in our laboratory in order to ascertain where the risks were. For us this upward change was all in all not so fundamental.

AV: This certainly does not apply to all medical laboratories. In 2014 laboratories could choose for themselves whether they wanted to make the move to ISO 15189. In the end nine laboratories did this. But from 2015 onwards the new standard has become mandatory for laboratories faced with a re-assessment. This means not only that you have to know this new standard but also that you must be able to demonstrate that all aspects of that new standard are embedded in your work. Various laboratories somewhat underestimated the attention this requires. Added to this is that some laboratories are in stormy weather and are thereby involved in forced mergers and change processes. In this case such a transition is quite a job, certainly when it comes to smaller laboratories.

HS: Our laboratory is indeed in a rather comfortable position. With its 120 employees it is a big lab. There are also labs which have to keep the same accreditation system going with a much smaller workforce. The effort needed is then relatively greater. We succeeded in 2014 as one of the first laboratories to make the transition to ISO 15189. In this connection in my view three crucial success factors can be pointed out. You must first be able to trust that your quality system works. Another important point is the internal communication: address each other if you are of the opinion that something is not running properly, and do this in a professional way. This is a continuous process. And moreover, internalising the new rules, which are just that much different, plays a major role. You must have time to gain experience with this.

Major opportunities for improvement

AV: By mid-2019 all medical laboratories must have made the transition to ISO 15189. This objective is not to be sneezed at. Laboratories will have to put their quality system under the magnifying glass and implement the necessary changes. They will also have to look ahead: what developments are coming and how are we going to deal with them? The laboratory management obviously plays a major role in this: it stands or falls with what the management wants. But if it is successful, it will in the end benefit the quality level.

HS: A point where in my opinion improvements could still be made is the expertise of professionals. This requires teamwork. This relates for instance to the

teamwork between the RvA and the professional associations which are responsible for the training of new laboratory specialists and for the professional review. The unique selling point of laboratories is not centred on the equipment or processes, but on the expertise of employees – at all levels of the laboratory. The attention is at present still too often focused on equipment. The European Commission is for instance busy with a new directive in the area of in-vitro diagnostics. The idea is: if all equipment just has a CE mark, everything will be all right. But soon everybody will be able to buy that equipment. Then you have it at your finger tips but without knowing what to do. This expertise is particularly relevant, i.e. that you know how to work with such equipment. I consider that realisation very important. It is still possible to make improvements in this area.

AV: That's right. And following on from this: it is very important that as the RvA we regularly open the discussion with the scientific associations. This also relates to the content. We can obviously say nothing about that content but we must ensure that our pool of auditors is a proper representation of the work inside the laboratories. For instance at the moment we have no specialists in the area of bioinformatics, a branch of genetics which within a short time has become more and more important.

HS: The discipline is indeed developing rapidly. We also sometimes experience ourselves that it is difficult to hire the right people. Then it is unavoidable that as the accrediting body you are 'lagging somewhat behind'. But at the same time that also makes it very challenging: to continue carrying out good assessments despite these rapid developments.

The Genome Diagnostics laboratory of the Radboud UMC belongs to the Genome Diagnostics section in the Genetics department. This section performs prenatal as well as postnatal genetic diagnostics. In this connection advanced analysis techniques are used. The laboratory offers molecular genetic and cytogenetic diagnostics to a large number of genetic and congenital conditions. The aim is to expand the diagnostics offer further by introducing new techniques and diagnostic approaches.

1 Safeguarding public interests

The Netherlands Scientific Council for Government Policy (WRR) issued a report in 2013 on supervising public interests. The cabinet responded to this in September 2014, in a rather highly abstract way for us.

The report of the Dutch Safety Board (Onderzoeksraad voor Veiligheid: 'OVV') on risks in the meat chain that appeared in 2014 offered us concrete connections for some ideas about safeguarding public interests in general and the particular question of whether private systems can contribute to this.

Accreditation and market supervision

Accreditation has been in existence as a voluntary private system since the early eighties of the last century. The RvA was created in 1995 by a merger of various parties. Since that time the RvA has supervised the expertise, independence and impartiality of laboratories, inspection bodies and certification bodies according to international accreditation standards. The aim of accreditation was initially to improve the quality image of Dutch industry and to create trust in quality marks such as KOMO or the quality mark of the Dutch Association of Housewives. This aim was soon widened to removing trade barriers by mutual recognition of certificates, inspection reports and other forms of declarations of conformity on the basis of accreditation. Following on from this accreditation obtained a function in acknowledging inspection agencies in connection with the New Approach Directives of the European Union (CE marking). Until 2010 the RvA was the party which, via an agreement under private law with the State, entered on behalf of the Netherlands into multilateral agreements with accreditation bodies in other countries for the mutual recognition of certificates and results of accredited organisations. Since the European Regulation 765/2008 for accreditation and market supervision came into force in 2010 pursuant to the Dutch Law on the appointment of the national accreditation body (*Wet aanwijzing nationale accreditatie-instantie*) the RvA has been charged with implementation of accreditation, a task with public authority. Since that time the RvA has been an autonomous administrative authority governed by private law. The work of the RvA is also nowadays based on private international – European harmonised – accreditation standards. The market supervision, or the supervision of products put onto the market, is placed nationally and sometimes at European level. In the Netherlands it is often placed with official inspectorates.

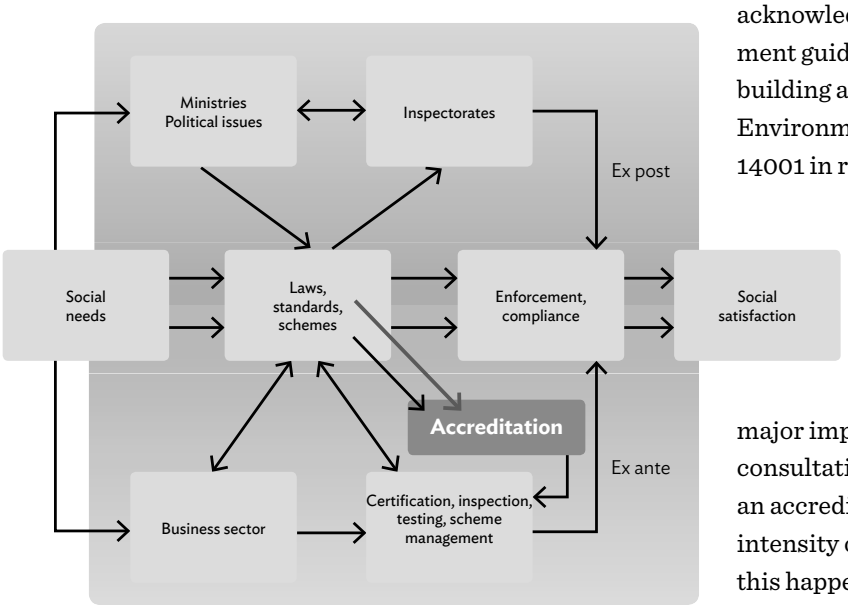
It has been laid down via the European Regulation that national accreditation bodies participate in mutual peer evaluations organised by the European umbrella organisation European Co-operation for Accreditation (EA). The EA is supervised by an Advisory Board on which serve representatives of the interested parties including the representatives of the Member States.

The current system: two parts

The European Regulation has been laid down to support optimum monitoring of health, safety and the environment and to harmonise the level of control of this Europe-wide. It is an international context which is becoming increasingly more determinant, as additionally indicated in the WRR and the OVV, also for safeguarding public interests in the Netherlands.

The system of conformity assessment based on the private standards system which is supervised by accreditation has a public interest role: justifying the trust in safe, healthy products, services and activities which do 'not' harm the environment. It is a type of voluntary supervision on the basis of the individual responsibility which organisations take for their acts or omissions. This applies to many with the aim of developing their activities in a reliable way within the laws and regulations of our country. It is quality assurance in which accredited laboratories, inspection and certification bodies play a role as an independent third party.

Without any counterforce in the form of market and compliance supervision by the authorities such a private system could become unstable. It can be compared with road users who would take liberties if there was no police force or speed cameras. The two-part systems, private individual responsibility and public frameworks and supervision should both optimally safeguard the public interests. This can be represented in a diagram as follows:



Properly regarded they form two parts of one single system whereby the 'wishes of society' also include the public interest. It is a system that in our opinion is insufficiently linked in practice that is more driven on the basis of images than on the basis of facts. Private conformity assessment is not developed for, nor aimed at, compliance and/or combating fraud. This is particularly the domain of market and compliance supervision by the public sector. But it can contribute to that supervision.

Admission, support, self-regulation

In the cabinet position on accreditation and certification three variants can be distinguished:

- the admission variant;
- the support variant;
- the market organisation or self-regulation variant.

In the admission variant the authorities determine the standard. Thereby they can determine the methods, audit intensity, transparency etc. Examples of this are activities in connection with soil management or testing lifts.

In the support variant the supervisor can decide to consider a certified business as less risk-bearing on the basis of knowledge of the standards and schemes formulated by private parties. Examples of this are OHSAS 18001 in relation to working conditions and the Social Affairs and Employment Inspectorate, the acknowledged system of quality statements of assessment guidelines in the building sector in relation to building and housing supervision and the Living Environment and Transport Inspectorate, and ISO 14001 in relation to environmental permits.

For legislation as well as for supervision insight into the standard determining the height of the bar, and often also the intensity and content of the supervision by certification and inspection bodies, is of major importance. In addition, the public sector in consultation with the RvA and the market can agree an accreditation scheme in order also to specify the intensity of the supervision of the RvA further than this happens in the private standard.

The input of ideas from the public sector to make the standards more suitable for admission or support is a good mechanism to get a mutual feel for risks and possible safeguarding mechanisms to reduce the risks for society. In the sphere of laboratories too the authorities can indicate which test methods produce the results they accept. This is being applied in the area of the environment but for instance it is not yet being applied with regard to provisions in connection with food safety.

Quality and compliance

Although there are many organisations intrinsically doing their best to do the right thing within the frameworks of legislation and regulations, there are also organisations which are less scrupulous with those frameworks. Therefore it is also important to have a counterforce in the form of market and compliance supervision. Spearheads such as the 'asbestos team' of the Social Affairs and Employment Inspectorate and the 'slaughter team' of the Dutch Food and

Consumer Product Safety Authority show that this can influence behaviour. This can be done with regard to big risks, but it will be at the expense of input elsewhere. The quantity of supervision that the national budget can bear is finite. From a psychological point of view the quantity of supervision we can manage is also finite.

Therefore it is important to make quality and compliance a 'top-level issue', where this is still not the case. Strong enforcement can give an impulse to this, but here also too much ought is good for nought. Nobody is waiting for a whistleblower culture or for behavioural and expertise characteristics determined by the authorities for managers of slaughterhouses, high-risk companies, hospitals etc. as is the case with regard to banks and insurers. Companies themselves can contribute to this by being transparent about objectives and risk analyses. This should at least be the case towards official inspectorates and certifiers and probably also towards the general public.

This is not so simple. In the meantime there are companies that publish all inspection and audit results. This appeared to be the case with the reports of private certifiers which were never formulated with that purpose, so it is initially not so simple. But where there is a will there is a way. The result is complete transparency but the question is whether a layman can deduce from this how well those companies are performing. However, the movement is important. What for instance will need to be apparent is whether the prospect of transparency affects the behaviour of the auditor, and if so, in what way. That can also only be determined with random checks via accreditation assessments.

Contributing to a safe society

We will return to the public interest: a safe society. What is safe? Every year we are informed of the number of traffic victims. This is seldom done with regard to food safety nor with regard to environmental cases. In order to be able to measure the effect of all this supervision on society, we think it would be a good thing to find a subject-related indicator that says something about it. The indicators could be derived from risk assessments carried out by official inspectorates. Seriousness and frequency of the shortcomings they establish are important to policy departments but also to the private system of quality assurance and standards, conformity assessment and accreditation. They can then work on improving the whole in the interest of the collective goal: the better safeguarding of public interests.

The question of whether private systems can contribute to safeguarding public interests is almost rhetorical. The answer is yes. As outlined above, closing the PDCA circle (plan, do, check, act) as this is customary in quality spheres, would make the total system of private systems and public laws and supervision more effective. In our opinion it is a wonderful and quality-oriented detailing of the reflective function propagated by the WRR, that supervision should have anyway. Supervision used for the public interest. If we would be able to get this off the ground in the Netherlands, we can then consider whether we could also realise this in the European and global context. Because in actual fact our open society means that we are playing chess on all those boards at the same time.

After the OVV with regard to risks in the meat chain was published, the Board and the Board of Supervisors of the RvA also shared a basic concept of these ideas with several sector organisations and ministries.

Accountants in transition

Towards recovery of trust

A talk with Jan Hommen, CEO of KPMG Nederland

'Trust is increasingly less given in advance. The politicians have been experiencing this for quite some time. Bankers, insurers and civil-law notaries have noticed this as well. Now it is accountants too.' This is the clear language of Minister Dijsselbloem during Accountants' Day 2014: the quality level of Dutch accountants' firms must be restored in the short-term. But how to regain the trust of a society? We asked Jan Hommen, CEO of KPMG Nederland about this.

What does trust mean?

Trust is something you receive. Someone has to place trust in you. This only happens when you provide good work. For an accountant this means that the audits follow a sound process and ultimately lead to a reliable audit opinion. That is to say: a statement which, when the accountant places his signature under it, guarantees that the annual accounts have been formulated with due care, are a faithful translation of the reality and give an accurate representation of the internal organisation.

Obviously things sometimes go wrong. When I was working in America, for instance the Enron scandal took place. The respective accountant belonged to one of the oldest and most renowned firms in the United States, but at the end of the story had apparently wrongly issued an unqualified audit opinion for the annual accounts and to have destroyed certain files. This entailed all the associated consequences, for the client as well as for the accountants' firm. This firm was unable to justify the trust of society. Many good auditors' opinions are obviously issued every year but they do not appear in the media.

Back to base: quality and integrity

How could all this have gone so wrong? That is the first question to ask. In the nineties there was gigantic

growth. This rattled the world somewhat. Organisations went beyond themselves, started to do more than they actually could. This led to all kinds of excesses. It is something that can be seen in many areas, even in accountancy. Accountants let go of the standards they always imposed upon themselves. They created expectations which they could not justify. And I think it also played a part that people became too lenient within organisations. That means sooner or later you will face problems.

'Sun King' behaviour is no longer tolerated in this society. We will have to adopt a modest attitude. That also better suits the role of an accountant. The art is to return back to base: who are you and what is your role in this society? Quality and integrity are the cornerstones in this respect. Firstly, it is obviously all about providing an excellent product as an organisation. This begins with formulating new frameworks and standards, with new quality requirements. And then you should keep each other strictly to this: and make sure that everybody in the organisation remains within the set frameworks and standards. Keep a straight back even if the client exerts pressure to approve certain things or if something has to be done very quickly. It's about integrity. Only in this way can the trust of society be regained.

Culture and behavioural change

The authorities tightened up legislation and regulations and supervision, and to a certain degree this is necessary, but the primary responsibility lies with the industry itself. I think that the accountants responded very well to this situation here in the Netherlands by taking themselves the initiative to change. The Netherlands Institute of Chartered Accountants submitted a proposal to the Minister which describes how we would want to and ought to operate. The politicians responded positively to that: almost all the recommendations have been accepted and will soon appear in legislation and regulations. In this way much more will be achieved than imposing rules from the outside.

It is now up to us to put these words into deeds. This also requires a change in culture and behaviour. Partners play a crucial role in this. They have to complement and support each other, even where it goes wrong. Because the moment you consider the problem of another as a joint problem and also want to take the responsibility for it, you transcend yourself. We are re-discovering this. In addition, it is important that partners in the organisation give the right example in all respects and that they also help the young and less experienced employees to achieve a higher level. This takes time. But if all this succeeds, you will have a great organisation!

Openness and transparency

Accredited organisations are actually in the same position as accountants: they are organisations that derive their licence from an assignment they receive from society. So they should also have a clear picture of what this license and assignment entails, and will have to move within this picture. My main advice? Make sure that you have excellent processes in place to carry out your task. Engage capable people and give them further training if there are shortcomings. Assess them in an objective, strict way and don't take it lightly. Because if you take it lightly, an organisation will see immediately that you are not serious. Invest continuously in innovation. And then deliver a product, or rather: a solution. Explain this product as well. Be transparent about your objectives, about the measurements you carried out and about the final result. And remain independent: do not compromise on the set standards and frameworks. This is the way to deliver quality. If you do this consistently, trust will grow. For that matter, this trust must be given again each time. So you must continue to prove that you are worthy of this trust.

If we extrapolate this further you could compare the role of the RvA with that of the Netherlands Institute of Chartered Accountants and the Netherlands Authority for the Financial Markets, with the difference that the RvA itself does not formulate the rules. Also as the 'guardian of the system' you must continuously ask yourself: are we sufficiently innovative? Measuring instruments get better all the time, measurements more and more refined. This leads to new insights and new standards. It is essential that you go along with this and pool your thoughts; that you continue to invest in people but also in technology and processes. And that from time to time you show what you are doing.

Major opportunities for improvement

The quality of our work must increase: this is the main focus for the coming period. The next review of the Netherlands Authority for the Financial Markets simply should no longer form any problems. We will obviously be faced with new legislation and regulations on the basis of recommendations from the sector itself but at KPMG we also consider how we can implement improvements in other areas. For instance we want to make our audit reports more transparent to give more insight into what plays within an organisation, and clearly communicate what is and what is not included in an audit, because often there are misunderstandings in this respect. We are examining also the ways in which we can put increasingly more added value into our services. Moreover, visibility is a major point of attention: apart from the team the respective partner should also be present at the client as much as possible.

Such measures help to create a better product. But at the same time: where people are working, mistakes can be made. I think this is normal. But it is all about not making the same mistake twice so that you learn from your mistakes. And as partners we should try to improve continuously, by quickly ascertaining problems and by jointly searching for a solution. Sometimes it can be very useful to show that you are struggling with something. Accountants kept quiet for almost twenty years. That does not work. The point is to have the courage to come forward, explain what you are doing and why you do it in that way. Openness and transparency: it always works!

Jan Hommen was appointed in 2014 as CEO of KPMG Nederland. He has over forty years of experience at the top of the Dutch business sector. Previously he has for instance been the CEO of the ING Group, CFO and Vice-Chairman of Philips and CFO of the Alcoa aluminium group in the United States. In 2013 he was appointed Commander in the Order of Oranje-Nassau due to his efforts in the financial sector after the crisis of 2008.

2 Supervision and advice: safeguarding trust

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

Supervision and advice contribute to a major extent to the trust the public sector, society and our customers have in the performance of our activities. Various bodies and committees are active in the RvA to this end. In the organisational chart in Annex 2 you can see their relation to each other and their composition. In this chapter we will outline the role and activities of the different bodies and committees.

Board of Supervisors

The Board of Supervisors of the RvA is comparable to the supervisory board of a commercial organisation. The Board of Supervisors ensures that the Board of Directors realises the objectives of the RvA. Selection of Members takes place on the basis of expertise and competencies. It is preferable for the following competence areas to be represented on the Board of Supervisors:

- business sector
- public sector
- research/technology
- healthcare/medical
- food and goods
- quality

It is important that the Members of the Board of Supervisors:

- have wide knowledge and experience of professional organisations;
- are properly able to advise and encourage;
- apply an objective, detached approach;
- have integrity and a sense of responsibility;
- have an independent and critical attitude;
- can formulate a balanced assessment.

The members of the Board of Supervisors are appointed for a period of three years and can be reappointed twice for the same period.

Accreditation Committee

The Accreditation Committee consists of four members. They are appointed by the Board of Supervisors on the basis of their expertise in accreditation, their integrity and independence. The Accreditation Committee meets once a month. Its duty is to advise the Director/Chief Executive about the granting of accreditations. In addition the committee has the power to advise on the suspension or withdrawal of accreditations. It receives information from the Board and the Executive Board and the management about measures and sanctions against organisations.

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

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 Board will appoint a Member of the Objection 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 Board of the RvA and do not carry out any activities under the responsibility of the Board. They are appointed by the Board of Supervisors. This guarantees impartial treatment of objections.

Board

The Director/Chief Executive is responsible for the realisation of the RvA's objectives, its strategy and policy, and the developments resulting from these. He accounts for this to the Board of Supervisors.

Executive Board

The Executive Board of the RvA consists of the Director/Chief Executive and the Director Operations. They take care of the proper policy and management of the organisation and they report on this to the Board of Supervisors.

Stakeholder advisory panel

The Stakeholder advisory panel of the RvA was established in 2013. In this advisory panel the interested parties in the work of the RvA are represented in the broadest sense: the public sector, direct clients of the RvA, direct clients of the conformity assessment bodies and scientific institutes. The panel operates at a strategic and tactical level. The aim of the panel is twofold:

- advising the Board and the Executive Board about general policy matters whether or not requested;
- guaranteeing the impartiality of the RvA in policy matters.

The Stakeholder advisory panel meets twice a year to discuss (for instance) relevant developments, the added value of the RvA and the long-term vision and once every two years organises a conference in which the support is consulted. The Board of Supervisors receives the minutes of the meetings and the decisions of the Panel are published on our website.

User Council

The User Council is an advisory panel laid down in the Articles. The Council consists of representatives of direct clients of the RvA and meets twice a year to advise the RvA about the budget and rates and about the service level of the RvA. The Board of Supervisors receives the minutes of the meetings, so that it can include the opinions of users in its deliberations.

EA Multilateral Agreement Committee

In order to remain a signatory of the Multilateral Agreement ('MLA') the RvA must satisfy the requirements of the European Regulation 765/2008 and the international ISO 17011 standard. Every four years the RvA is assessed by a team of about eight 'peers' in the form of a peer evaluation. Representatives of the Ministry of Economic Affairs are invited as standard in this connection.

Ministry of Economic Affairs

The RvA must comply with the relevant provisions of the Dutch Independent Executive Agencies Framework Act (*Kaderwet zelfstandige bestuursorganen*) and European Regulation 765/2008. The Ministry of Economic Affairs supervises this.

The forms of supervision and advice outlined in this chapter are a major contribution towards the RvA having confidence in the future. This confidence not only applies to our organisation, but also to our clients and the people. Therefore this is the place to thank all who are active in the bodies and committees referred to above for their input in 2014.

The food chain in transition

Towards more trust in safe products

A talk with Bart Jan Krouwel, Chairman of the core group for the Food Confidence Taskforce

There is increasing global concern about food safety and integrity. In recent years in our country there have also been various incidents in this area. These are reasons for the public sector and the business sector in the food and food chains to join forces under the motto 'Trusting food is taking responsibility'. In 2013 the Food Confidence Taskforce was established. The aim was: to take joint responsibility for actions to increase confidence in safe food products. We talked with Bart Jan Krouwel, Chairman of the core group of this Taskforce.

What does trust mean?

You must be able to assume 100%, so completely 'blindly', that what you are eating is safe and that it has not been tampered with. And I don't mean merely the end product but also the ingredients in it such as animal food. This gets to the core. It is not only about the final producer but the whole chain is involved. The question of whether the supplier's product is safe is crucial with regard to the trust of the final producer and the consumer. That was the objective of this Taskforce: restoring trust in the production chain.

A lot of people think that the food they buy comes from a factory. So that no cow or any animal whatsoever is involved. When our grandchildren are here they think it is great fun to see whether the chickens have laid eggs again. Or they wonder about the large sprouts which are growing just like that in the garden and they would love to take them to school. In other words, the trust of the consumer has also something to do with knowledge of the food chain. That is why it is so important that food producers indicate in a completely transparent way what has been processed into their product, how it was produced and which quality criteria it complies with. That determines trust.

The core of the problem

In every sector, including the food sector, there are always entrepreneurs who are looking at the limits of what is allowed and even going beyond it. Why is that? Pure monetary gain. For instance the dioxin scandal with eggs that took place in Germany a couple of years ago comes to mind. The whole world was in turmoil. In the end it turned out that a producer processed all kinds of oils into his animal feed products which he could collect free of charge from garages. These were technical oils drained from cars or tractors, so not the required vegetable oils. This created more mass, a greater quantity. And it did not cost anything. This is obviously criminal behaviour whereby someone stops at nothing endangering food safety and even people's lives.

The public sector would prefer to close off everything 100%. It aims at preventing these types of fraud cases and incidents. That never works completely. We often discussed this at length in the Taskforce. There will always be entrepreneurs, in any sector, who if ever they have the chance to cheat, will do this to benefit themselves. The point is that producers who are operating properly and who know what is happening in the sector, including where things are going wrong, often don't have the courage to speak out. Factors such as competition considerations or even fear from being threatened or blackmailed might play a role in this connection. It is a 'grey' area which is difficult to get hold of. I think another cause is that there are too many quality certification systems. If as a consumer you go to the supermarket you will come across all kinds of quality marks, quality labels and trademarks. What can you actually still trust?

You see the public sector taking all kinds of measures and creating institutions in its endeavour to restore trust. But they can often get in each other's way a lot. Take for instance the Netherlands Authority for Consumers and Markets. From the point of view of commercial competition it has to oversee that a lot is allowed or – rather – should be possible. The Taskforce was established after the incident with horse meat. But despite prosecution, such a company can start a business elsewhere in Europe almost without any problems. In those places other standards and rules apply. Malicious entrepreneurs will always find a way due to the differences existing between national and international legislation and regulations. All this precisely involves making good arrangements within the national but certainly also within the international chains. If you don't do this, you put the cart before the horse.

Better information exchange

If we really want to take steps to restore trust in the area of food safety, a proper information exchange between the supervisory bodies and the business sector is of great importance. But even more important is the information exchange within government agencies and within the private sector, and the communication between those parties. This is a crucial point. Two examples illustrate this.

The Dutch Food and Consumer Product Safety Authority *(Nederlandse Voedsel- en Warenautoriteit: 'NVWA')* raids businesses and then discovers things which are not in accordance with the quality certification. But the same NVWA cannot pass on these findings due to privacy legislation. In the Taskforce this subject has regularly come up for discussion. It then appeared for instance that the tax authorities raided a business due to suspected tax evasion but found abuses there in the area of food safety and subsequently did not pass this on to the NVWA. This was because, as the respective tax officer said, this did not come under the responsibility of the tax authorities. This lack of information exchange can also be seen in the private sector. There competition considerations in particular play a decisive role, together with the fear of exchanging information apparently associated with it. Can you and do you want to pass on to colleagues information that is at your disposal? What does this then mean for the business and for the competitive position? It is important that the entire chain communicates with complete openness. If that is not the case, it will lead to people losing their trust in food safety.

From advice to action

Soon the final report of the Taskforce will be published. The big question is obviously what the public sector and the business sector are going to do with it. There will be a report but will it also actually be converted into action? Do we really achieve assurance of the safety of the chain? Or will the thinking be: there is a report and thereby the case has been rounded off? In my view we are still at the beginning of assuring safety

in the food chain. Further steps are necessary. How do you get from advice to actual action and connection within the food provision chain?
In short: we can congratulate ourselves but how do we make the system watertight? The intentions are good, the arrangements are good, you are certified by an accepted system but gaps are left. It is not only about quality systems but also – and perhaps even much more – about information exchange. One of the most important arrangements which the Taskforce managed to generate is that we achieve improved information exchange. This has been laid down in the arrangements between the NVWA and the private parties, united in the Stichting Ketenborging foundation. This is positive. But the outcomes of the report of the Taskforce must be measured and evaluated at fixed moments. How many incidents took place after the final report of the Taskforce? I think this is a case in relation to which the Members of Parliament should question responsible cabinet ministers every year.

Major opportunities for improvement

Where are the opportunities for improvement, and what will we as the people notice in this area? Firstly you can expect fewer fraud cases to occur. There are sharp criteria for the quality certification systems but one condition is obviously that certification authorities operate properly. In those organisations the training and the associated quality of the employees play a decisive role. This means people should be able to trust the quality of certification authorities. In this connection the RvA fulfils a core function. Precisely bodies like these, in exactly the same way as for instance the Dutch Safety Board, are indispensable to the chain of quality assurance and for creating and maintaining trust in our society.

Bart Jan Krouwel is an independent supervisory director/supervisor, advisor and manager in the area of corporate social responsibility. In 2013 he was appointed as the chairman of the core group of the Food Confidence Taskforce. Previously he was for instance chairman of the *Productschap Pluimvee & Eieren* (Poultry and eggs marketing board), CSR Director at Rabobank Nederland and co-founder and first Director of Triodos Bank. In 2009 he was appointed an Officer in the Order of Oranje-Nassau due to his merits in the area of sustainability in the financial sector.

3 International confidence

The confidence in accreditation is legally extended to all countries of the European Union and the Member States of the European Free Trade Association via European Regulation 765/2008. This confidence applies to the public as well as the private domain.

Every Member State is obliged to appoint a national accreditation body or to outsource this activity to accreditation bodies of other Member States. The RvA has been appointed by the authorities to fulfil this role in the Netherlands.

Peer evaluations

By mutual recognition all test reports and certificates of conformity issued under European accreditation have the same status. Therefore, any accreditation issued in our country will also be accepted in other European countries. This promotes free trade. It prevents for instance suppliers of products and services having to apply for a certificate in every country. This mutual recognition is based on a peer evaluation by the private association: European co-operation for Accreditation (EA) which has been joined by all European accreditation bodies.

During a peer evaluation a team composed of colleagues from other European accreditation bodies reviews whether the organisation to be assessed meets the set criteria. The international ISO/IEC 17011 standard and the European Regulation apply to these as a guideline. These peer evaluations serve as a guarantee of the expertise, impartiality and independence of national accreditation bodies. At the end of 2013/beginning of 2014 the RvA itself again underwent a peer evaluation. You find the full report on our website. In addition, in 2014 we contributed to assessments in Macedonia, Kosovo, Slovakia, Norway and Greece.

International normalisation

The assessments of the RvA take place on the basis of accreditation standards. In order to harmonise these assessments internationally, a standards framework is required which has international force. In the meantime globally recognised ISO standards have been created for all our accreditation activities. The most recent one appeared in 2012: the accreditation standard for certification bodies of products, services or processes. These standards are updated once every five or ten years on average and can be considered as private laws for self-regulation.

We consider the legitimacy of these standards to be a point of concern. The intention is obviously that on balance all interested parties have a say in the criteria, or in other words: the height of the bar. But in the time-consuming process of normalisation it appears that it is increasingly the bigger parties that call the shots. This applies in any event to accreditation standards, where representatives of certification bodies have more resources to move the standards in a direction they prefer than most of the other stakeholders, while the users, such as the business sector and also increasingly the public sector, appear to be less willing to spend more on this. Certainly if there is increasingly more reliance on self-regulation it is important to keep a sharp eye on the height of the bar. After all, that height determines how justifying trust is given substance. Accreditation and conformity assessments have no geographic boundaries. That is why harmonisation is of major importance to an open economy such as the Dutch one, but then at a level that is in line with the expectations of the interested parties in our work.

European harmonisation

In the European accreditation regulation the EA has been appointed as the body which should not only organise the peer evaluations but also encourage the harmonisation between the members. The RvA is active in various EA Committees and in the EA Board.

There are many European guidelines in the areas of health, safety and the environment. It is left up to the Member States to decide what are the best accreditation standards for assessing inspection bodies and subsequently to notify them in Brussels. Because member States make different choices, the EA has the difficult task of agreeing on the most suitable accreditation standard and then obtaining approval of that position from the Member States who previously adhered to a different accreditation standard. This is illustrative of the split between legal rules and private standards. But Europe, nevertheless, is of the opinion that every body notified, the so-called 'notified body', should have the same market access in all Member States. The RvA does its best to include this competition factor in its advice to departments when it is asked about what are the most suitable standards for notification.

In 2014 this has been specifically important upon the implementation of the European Directives adjusted to the New Legal Framework (Regulation EU 765/2008 and EU decision EU 768/2008), also known as the Alignment Package. In the meantime a project has started at the EA as the united accreditation bodies to advise the European Commission and the Member States about the accreditation standard in our eyes most suitable for each directive. In the long run this should lead to more uniformity and thereby to a comparable playing field.

In the private sector we have noticed now and then the reverse effect. Because the globally agreed standards, which are by definition a compromise, sometimes don't go far enough according to users and customers, extra requirements are added to standards via certification schemes. In the Netherlands we have already had for quite some time the model of the accepted scheme manager (see also Annex 6). This means that the certification schemes are assessed by the RvA to be worthy of accreditation and that the accredited parties deploying these schemes all do it equivalently. In this way the national regulations and the nationally required level of trust can be better responded to. A good example of this is the Stichting Coördinatie Certificatie Milieu- en Arbomanagementsystemen. Sometimes Europe follows the scheme as an example. For instance the VCA schemes of the Stichting Samenwerken Voor Veiligheid have been copied in Germany and Belgium and the food safety schemes of a Dutch scheme manager (SCV) have already been applied in several European countries.

Global harmonisation

At international level there are two umbrella organisations promoting the harmonisation between countries and regions.

- International Laboratory Accreditation Cooperation (ILAC) for laboratories and inspection bodies;
- International Accreditation Forum (IAF) for certification bodies.

A national accreditation body can be a member of both umbrella organisations. The RvA is a co-signatory of the multilateral ILAC-MRA and IAF-MLA agreements.[1]

ILAC and IAF cooperate intensively in several areas. This applies to the organisation and the completion of the peer evaluations, to communication and to the assistance to countries just starting accreditation.

At ILAC and IAF a strategic discussion is going on about the relationship between both organisations: How much can we do together and how can we make the organisations more effective since accreditation has become a globally established concept? At least as important is the relationship between the global organisations, the regions and the separate countries. At the moment it often happens that the same work is first carried out regionally and then globally. Since accreditation is increasingly gaining a legal basis – such as in Europe, but also for instance in China – the global recognition rules should offer sufficient scope for regional or sometimes even national tailored work. This new reality has not yet been embraced by all countries, partly because not all countries are in such a logically economic region as is for instance the Netherlands in the European Union. At ILAC and IAF three acknowledged regions can be distinguished currently: EA, IAAC (Inter American Accreditation

1 For reasons of readability we will talk in this public report of MLA where MLA or MRA is meant.

Cooperation) and PAC/APLAC (Pacific Accreditation Cooperation/Asia Pacific Laboratory Accreditation Cooperation). In addition, the AFRAC (African Accreditation Cooperation) and ARAC (Arab Accreditation Cooperation) regions are in development. Countries can now still be a member of multiple regional cooperation structures or even be a direct member of ILAC and IAF without being a participant in a region.

The RvA is an advocate of a strong region sending regional representatives to make harmonisation and recognition agreements in a global context with representatives of other regions.

The status of the participation in mutual recognition as of January 2015 is:

- EA: 35 signatories in 35 countries (including several non-European countries who have a bilateral agreement with the EA);
- ILAC: 87 signatories in 72 economies;
- IAF: 70 signatories in 63 economies.

Of organisations accredited by the RvA, 33 laboratories and 32 certification bodies have taken out a license to be able to carry the ILAC-MRA mark or the IAF-MLA mark respectively on their reports or statements covered by the multilateral agreement.

Foreign policy

In accordance with the European Regulation, as from 2014 onwards the RvA is definitively no longer allowed to grant or maintain accreditations in European countries other than the Netherlands, except with the consent of the respective country. This is meant to make competition between national accreditation bodies impossible. The logical consequence of this is that Dutch branches of organisations accredited abroad are assessed by the RvA at the request of the foreign accreditation body, and the other way around. This is beneficial for both national and European harmonisation.

On the basis of these starting points the RvA also tightened its policy with regard to granting accreditation in countries outside Europe. We remain active with accreditations in countries in which no ILAC-MRA or IAF-MLA partner is yet established, but for the rest we restrict ourselves to those conformity assessment bodies which allow us to assess jointly with other local accreditation bodies. In countries with an ILAC-MRA or IAF-MLA partner, from the middle of 2017 onwards, we will offer only accreditation alongside the accreditation of the local accreditation body, whereby we will cooperate as much as possible with that body. The latter is to keep a finger on the pulse of the daily practice of accreditation in an international context, to encourage harmonisation and to learn from the methods and working methods of other accreditation bodies.

The building sector in transition

Towards private quality assurance

A talk with Harry Nieman, quartermaster of private quality assurance at the Dutch Institute for Construction Quality.

For many years the improvement of quality assurance in the building sector has been high on the political agenda. The aim is to abolish the building plan assessment and to impose the responsibility for the technical quality of the building performance on the market. You could say that this is an upheaval in the building sector... Quartermaster Harry Nieman is chairman of the Dutch Institute for Building Quality established in 2013. It is an institute that builds bridges between the various parties involved and makes sure that a properly operating system is being developed.

What does trust mean?

The image of the building sector has suffered a blow in recent years. But in times of crisis there will also be space for change. For instance, you see more and more good initiatives being created to regain the trust of the consumer; that was lost for a long time. Take the energy consumption in homes for instance. European regulations prescribe that all buildings should be almost energy-neutral by 2020. Now there are already parties in the Netherlands who dare to guarantee that the energy meter will be on zero at the end of the year if people behave in a certain way. In this respect they even take it a step further than the European regulations, by not only looking at building-related energy but also at white goods, brown goods, lighting etc. These trendsetters in the building sector inspire confidence in the consumer but the same applies the other way around: because the consumer allows himself to be assisted to use his home in the proper way. I think that this is a very good development.

Trust means particularly that as a customer you receive what you are entitled to. This is also the motive behind the new bill for quality assurance in the building sector. In this connection we distinguish three

components. In the first place building performance must meet the minimum quality requirements such as those laid down by the Dutch authorities in the Building Decree. That is the mandatory part. Instruments will be introduced to safeguard this quality. In addition, it is important for the consumer that the result meets his expectations, meets the contractual arrangements made and that good and sound work is carried out. These latter two components are a private matter. We are currently working on this in order to strengthen the position of the consumer. I expect that the market will incorporate this in these instruments for quality assurance, because you don't want to put three foremen on a building site.

Instruments for quality assurance

In the current situation the technical quality of buildings is checked in advance via the building plan assessment. In practice this means that at least eight weeks before the building activities commence a client (or his architect) submits a technical plan to the municipality, but that subsequently all kinds of things can still change, even during the execution. So a stamp will be put on something that does not correspond with the reality. In addition, many municipalities have insufficient substantive knowledge, flexibility, budget and manpower to study every plan in detail. Under this system building companies can relax as soon as the municipality has put a stamp on the plan. Moreover, the roles are unclear. The general public assumes that everything is in order because the municipality checked the plan, but that is not the municipality's responsibility. This has the result that in the end many buildings do not comply with the Building Decree.

It is not the case that we are poor builders in the Netherlands, but it could be better. That is why in recent years there has been hard work done on a bill for quality assurance in the building sector. Public scrutiny remains on what is being built and this should obviously be the case, but the responsibility for the technical quality is going to be placed more explicitly on the building companies. Upon completion the market must now demonstrate that a building meets the technical requirements, for instance with regard to fire safety, health or environmental friendliness. This will take place on the basis of an instrument for quality assurance. This can be certification, but also recognition. It is important that it is proportional: for complex buildings a heavier instrument is needed, for simple buildings a lighter instrument suffices. Who manages the instrument is left open. This can for instance be a foundation or a certification body. The authorities will establish an admission organisation monitoring whether the instruments meet the criteria and that they are applied in the right way. What can be done privately and what must be done publicly. I think this is a very good incentive. It will enable the market to arrange the quality assurance efficiently. This is in order to respond quickly to changes in the building process or to changes that a consumer or client wants to implement. The market remains responsible. This also safeguards the technique, but then via system supervision.

Adding value: three Ps

If you are involved in quality assurance you will be faced with three Ps: product, process, person. It is also described in this way in the explanatory memorandum to the bill. The process can be considerably improved. In the Stichting Kennisoverdracht, Onderzoek en Ontwikkeling Bouwprocesmanagement (foundation for knowledge transfer, research and development in building process management), a cooperation structure between the business sector, the installation sector and universities of applied sciences, we are studying how we can detail this. Via a postgraduate course we teach young persons aged between twenty and thirty and with several years of building experience to put content and process together, so that they are also aware of the regulations. Because only then will a good end product be achieved. Apart from this, personal quality plays a major role: there should be more 'stage directors' in the building sector. That is why we offer training courses so that young people obtain a better insight into themselves: what are my strengths and weaknesses? What do I want to work on? This personal quality forms the red thread in the building process management. After all, we want to work with professionals who know exactly what they can and what they cannot do.

In order to safeguard these three Ps, regulation is required. Rules protect, assure and monitor. This is the normative background. That is why it is also so important that the respective parties are aware of the regula-

tions. Otherwise everybody is doing his own thing and the law of the strongest would prevail. As a consumer you should be able to rely on the fact that building performance complies with regulations. Certification is an instrument to achieve efficient quality assurance. But this will obviously only work if all the links in the chain – the RvA, the certification bodies and the businesses – continue to look critically at themselves: what are we doing and does it really have added value? Therefore certification bodies themselves should also meet the three Ps. Monitoring whether they carry out their work with due care, with integrity and with the right people, will also remain a task for the RvA in the future. I think that by exchanging information and by cooperating with the new admission organisation, properly assured building quality will be created in the Netherlands.

Major opportunities for improvement

Potentially this is a very good system. It now comes down to the implementation. I am convinced that the market can deal with this. There have been so many pilot processes in recent years that proved this – and certainly no prodigies participated in these pilots. But certainly something has to be added on various fronts, especially with regard to building process management and professionalism. So trust in the market is the first step. The other way around we must be able to trust the authorities to tackle the bunglers hard. High trust, high penalty. Transparency plays a major role here: you must also have the courage to show it and to guarantee it.

People should be able to live, work or recreate satisfactorily in a building. That is the goal. It means that as a supplier you should have a razor-sharp focus on what the set requirements are and then realise these requirements in practice via a well thought out quality management system. But it also means that you continue to manage the expectations so that the client knows exactly what he will receive and if necessary adjust in the meantime. For instance, 3D housing visualisations whereby clients can walk through a virtual home, or innovation labs where work is done with clients on new concepts, processes and products in the area of housing improvement come to mind. Because in the end it is not about what the building sector is able to do, but about what the client expects from the sector. That is the standard.

Harry Nieman, quartermaster of private quality assurance at the Dutch Institute for Construction Quality. He holds various board positions in the building sector and works as a part-time lecturer at Windesheim university of applied sciences. Until 2014 he was the Director of the Nieman Raadgevende Ingenieurs engineering firm he established in 1988. In 2008 he was appointed as a Knight in the Order of Oranje-Nassau, because of his merits for instance in the area of quality care and construction physics.

4 The internal organisation: *operational excellence*

Justified confidence in all the certificates of conformity issued under the supervision of the RvA means also being able to trust the internal processes of our organisation. The changing market and the development of requirements imposed on accreditation bodies demand continuous attention to improvement of the internal organisation.

That is why we chose operational excellence as one of the strategic themes for the coming years. In 2014 too we have been working hard on excellent operations. Please find below several statements in this respect.

Annual Plan according to the A3 method

The annual plan according to the A3 method which we started in 2012 was also continued and refined in 2014. In this digital annual plan our objectives and points for action are directly related to our mission, vision and success factors. In 2014 department and unit plans were derived from this annual plan, which were consistently placed on the agenda of the various department and unit consultations. The annual plan was often discussed in the management consultations and served as a guideline for the various work meetings with the operational management team.

Quality project

By forming the Quality & Process Management department we continued our Q Project in 2014. This is a substantial quality project that we started in 2013. All primary business processes were mapped and defined via RvA-wide workshops. We also appointed process owners who are responsible for the quality of a process. We laid this down in so-called function flow diagrams (FSDs). These FSDs form the basis of an even better assurance of our PDCA cycle (plan, do, check, act) for continuous improvement. Since all primary processes are laid down in our document management system, it is important to follow and audit them as well. It is a good compass for our daily work. In 2015 we will complete the Q Project by recording important supporting processes. In addition, we will begin audits to assess whether we are actually adhering to the arrangements we ourselves made.

RvA employees

On 31 December 2014, 94 employees were in permanent employment with an average age of 48.3 years and an average of 8.4 service years. Seven employees entered employment and eight employees left employment. We welcomed three new lead assessors, one project manager, one account manager, one Quality & Process Management manager and one head of Controlling & ICT. We also celebrated a 12.5 year and a 25 year service anniversary this year.

Training, education and HR

At the RvA employees form the most important success factor and a lot of attention is paid to targeted courses, development and training; 2014 is no exception. Because the accreditation community and the associated standards continue to develop, training in these standards and their application has again been high on the agenda. In addition, various RvA employees improved their knowledge of the English language at Language Institute Regina Coeli and various intervision and coaching sessions took place. In 2014 a business-wide course on giving and receiving feedback has also been developed in cooperation with an external party. All employees are going to take this course in the first half of 2015. Apart from the coordination of training and education, the HRM department spent a lot of time on recruitment and selection, keeping the pension scheme up to date, the consequences of the work-related expense allowance scheme introduced in 2014 and managing absenteeism due to illness (that amounted to approx. 4% in 2014, a decrease of almost 1% compared with 2013).

New accommodation

A solid organisation also requires adequate accommodation. In connection with the approaching expiry of the lease of our office premises at Mariaplaats, in

2014 we worked on the recalibration of the accommodation requirements appropriate to knowledge organisations such as the RvA. This led to a longlist and subsequently to a shortlist with possible locations close to the central train station in Utrecht, because this was one of the requirements. Finally in 2014 we decided to move in 2015 to De Daalse Kwint, an office building at Daalse Plein in Utrecht. We are currently working hard on fitting these premises out, whereby the possibilities of knowledge and workplace sharing are major aspects.

Transition from CCKL Code of Practice to ISO 15189

In 2014 too we spent a lot of time and energy on the large-scale transition project whereby over 250 medical laboratories will make the transition in a time frame of four years from a nationally recognised accreditation standard (CCKL Code of Practice) to an internationally recognised accreditation standard (ISO 15189). This transition requires continuous effort: the training of specialists and lead assessors, writing explanatory documents and accreditation protocols and the harmonisation at (European) EA level. In 2014 a so-called source scope has been determined for each medical laboratory discipline, from which the individually tailored scope is determined for each laboratory. The pilot assessments carried out at the end of 2013 resulted in accreditation in mid 2014. The celebratory ceremony of the first accreditation declarations took place in November.

Deployment of expertise groups

The RvA has four operational units. In 2014 the so-called expertise groups are firmly anchored in the Unit Lead Assessors. Developments in the various professional areas are meticulously kept up to date and discussed in these expertise groups, which consist of RvA lead assessors and which are divided according to the various ISO standards for (medical) laboratories, inspection and certification. The expertise groups form a source of information for the RvA organisation in connection with assessments in practice. In the event of any disputes they also give verdicts on the correct interpretation of standards. In 2014 the expertise groups met with some regularity and they contributed substantially to the distribution of knowledge and experience in our organisation.

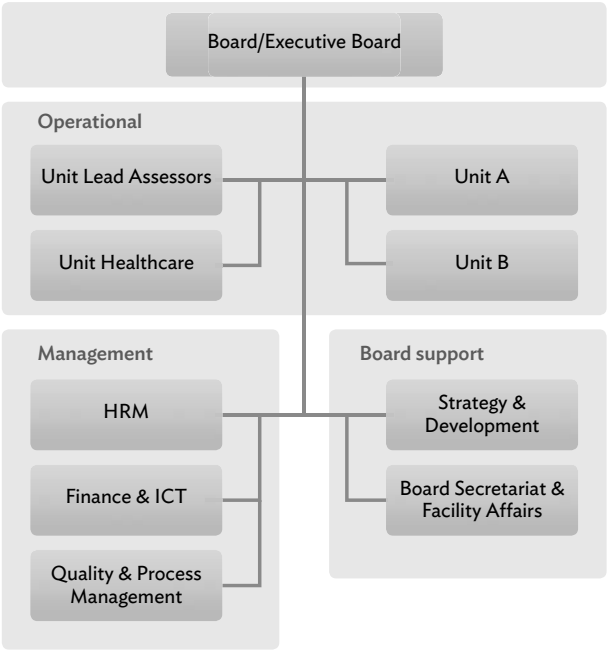
Further digitisation

In order to support our processes properly, we are continuously improving our digital means. For instance in 2014 there was a successful update of our ERP system and our document management system was further streamlined. In addition, we developed a new website that went live on 5 March 2015 after many months of intensive development.

Lead assessors capacity

The capacity of lead assessors was a major point of attention in 2014. The requirements imposed on qualified lead assessors are increasing, for instance in the area of specialisation and knowledge of the law. Moreover, soon we must say farewell to several of our most experienced lead assessors because they are retiring. That is why in 2014 we started a focussed search for professional lead assessors. One result of this was that the RvA was able to engage three new lead assessors in 2014. We also recruited a new lead assessor for the medical laboratories who is coming to strengthen the RvA team in the beginning of 2015.

With a view to the long term, the 'The assessment team for the future' project was started in 2014. Under the leadership of the Strategy & Development department we are investigating what the future assessment team for all accreditation areas should look like, with regard to quality as well as quantity. In answering this question, apart from our own employees, we are also involving our clients and other stakeholders.



Healthcare institutions in transition

Towards less regulation

A talk with Cordula Wagner, professor in patient safety

Dutch healthcare is highly regarded worldwide. In the annual survey of Health Consumer Powerhouse the healthcare in our country is consistently among the best in Europe. 'First come the Dutch, then nothing and only after that Switzerland and seven other countries,' according to the survey manager Arne Björnberg (2014). But there are regularly very critical noises in the media. Cordula Wagner, professor in patient safety, shares her thoughts about quality and safety in long-term care.

What does trust mean?

In the first place the people should be able to assume that care providers are properly trained and that they are motivated. Then, that they are enabled to do their work as a team in a professional environment with the right materials. But despite this type of precondition, sometimes things can go wrong. After all, it remains a work of man and people make mistakes. That is why it is also important that professionals work continuously with each other on quality improvement. That they regularly have discussions with each other in order to put on the table what goes and what does not go well, and that, if necessary, they have the courage to address each other on something. Basic quality and safety must be guaranteed everywhere. The people should be able to trust this blindly.

Dutch healthcare is of a high level, certainly in hospitals. Also the fact that in the Netherlands we provide for instance comprehensive long-term care – something that is not at all so matter of course in many countries – obviously says something. We are sometimes very critical. This is not wrong in itself because it prompts healthcare institutions to perform even better. But we should realise that we cannot make healthcare completely free of incidents. Even though we organise everything so well and even though healthcare provid-

ers do their utmost: mistakes will be made. It is important that this awareness is widely appreciated.

Shaping quality

In recent years in the healthcare sector a lot of attention has been paid to the development of quality systems. In the meantime those systems have proved their added value. Rules and protocols, for instance in the form of checklists, can offer good support to decision-making processes or carrying out certain acts. You should not go too far in doing this. Especially after incidents the call is often heard for more regulation. But at a certain moment you reach the boundary of what you can achieve via rules and protocols. It is important that you create sufficient scope for the human dimension: that healthcare providers obtain the opportunity to draw on their knowledge, experience and creativity. It is here that the right balance should be found.
In this way there is increasingly more attention to the question: how can we better respond to the requirements and needs of clients? Because apart from that task-oriented side particularly involving the medical and caring part, quality of life obviously plays a major role – and certainly in long-term care. This means that you are going to assess what each client needs and that you are accommodating this in the usual contact moments. This actual attention cannot be incorporated into rules and protocols. It requires flexibility and creativity, emotive choices. Would you not let someone with mobility problems go outside any longer because the risk of falling is greater? Or do you nevertheless grant him that walk through the garden because you know it contributes to his happiness? These are sometimes serious dilemmas, especially when you realise that society is watching critically. That is why Verpleegkundigen & Verzorgenden Nederland established the *Proeftuinen Ouderenzorg* (varied long-term care for the elderly). It is a project whereby healthcare providers gain insight via learning processes into the question of how they can compose their teams optimally so that they can offer their clients the best care. You notice that this creates new energy to search together for good solutions from different expertise levels and disciplines.

Measurable as well as noticeable quality

In recent years there has been too much emphasis on rules and protocols. We like being able to make matters demonstrable, being able to render account. This focuses our attention particularly on measurable quality: the hard figures. But noticeable quality, based on sensory perception is at least as important: what do we feel, see, hear or smell when we walk around in a healthcare institution? This noticeable quality cannot be measured. You rely on soft signals, which you obtain for instance via mirror talks between healthcare providers and clients. Luckily, initiatives are being taken more and more often to include this aspect of quality in the evaluation of care and thereby release the rules and protocols somewhat. In this way we slowly but surely shift from the red-tape phase to the proactive phase, in which we are searching specifically for ways to accommodate the requirements and needs of clients.

This development requires a different direction, a different way of working – for individuals, teams and organisations. High reliability organisations prove that it works very well to have the right to decide and discretionary power at a de-central level. Thereby healthcare providers are given the opportunity to operate under their own management based on their professional involvement with the client within the larger framework of the institution. And also to reflect periodically on this with each other: did we indeed succeed in achieving the highest attainable in every situation? Have we not overlooked anything? Once that process is running properly, it means continuously learning and improving.

Certification in healthcare

A certificate offers a type of basic guarantee that the organisation is internally in order. It means that the arrangement is properly thought out, also with regard to the question of how the processes can run optimally. We can be confident that work is carried out with due care because sufficient guarantees are incorporated. Contrary to what is often thought, a healthcare certificate does not say anything about the outcomes. So it does not guarantee that everything is going well. In this case a certificate is a means, not an end. It ensures that healthcare providers continue to think in practice about opportunities for improvement. This is the added value.

The danger of certification is that it ends up in over-regulation whereby too much emphasis is placed on rendering account. Therefore in the HKZ sphere too we are concerned with the question: how can we release measurable quality a little more and emphasise the noticeable quality a little more? If you incorporate this in your schemes, you send the organisations sooner into that direction. This is what we are now discussing. It also means that certification bodies have to implement a renovation effort whereby they will look for soft signals more. You don't get a feel for this right away. But if you visit many healthcare institutions, at a certain stage you will get a feel for it. Many years ago an instrument was developed in America on the basis of talks with experienced inspectors of nursing and residential care homes. In their assessment they also appeared to pay attention to things like: are the corridors tidy, does it smell of urine, is the contact between a healthcare provider and a client personal, is a room cosy? Such elements can give a good image of the noticeable quality in a healthcare institution. But obviously you have to consider whether this can be standardised in a certain way.

Major opportunities for improvement

I think that at the moment there is really an overkill of rules and protocols. It can be seen everywhere in our society, in forms, checklists, guidelines etc. Ten years ago it was quite different. We have become used to nailing everything down tight. Together we created a false sense of security. The challenge is now to break it open again. This applies to all links in the chain, from the top to the bottom. Because if tighter requirements are not continuously imposed via indicators, this is reflected in the quality system of an organisation and in the translation of that system into the workplace. Healthcare providers will be given more scope to act autonomously on the basis of their involvement with the client. To put time and energy into accommodating requirements and needs: this is noticeable quality. Because in the end this is what the healthcare institution is intended for.

Cordula Wagner works as professor in patient safety for the VU MC and the EMGO Institute for Health and Care Research. She works as a Quality and Organisation programme manager for the Netherlands Institute for Health Services Research ('NIVEL'). Since 2014 she has been chairman of the HKZ Central College of Experts. Due to her leading role in the area of patient safety in hospitals she recently received the NVZ medal.

5 Quality leads to trust

The RvA has its own management system in order to guarantee the execution of its mission and objectives. To monitor and optimise the proper operation of this system we for instance use observations during internal audits, complaints received and feedback provided by users of accredited services.

Every year a management assessment will determine whether the management system ensures that we continuously meet our own requirements, the requirements of ISO/IEC 17011, the European Regulation 765/2008, the Dutch National Accreditation Body Appointment Act and the Dutch Independent Executive Agencies Framework Act *(Kaderwet zelfstandige bestuursorganen)*.

Internal quality care

In 2014 the emphasis of the internal control system was on the implementation of improvement measures in connection with previous audits and peer evaluation. The re-description of our primary processes in function flow diagrams, which we started in 2013, has been largely completed. The process descriptions can now be viewed online and thereby provide more insight to the employees. Moreover, we started to introduce a new software tool supporting employees in adhering to the procedures and regulations.

The management assessment was discussed with the Board of Supervisors. The processing of complaints, objections and appeals is a permanent agenda item in the meetings of the Board of Supervisors and in the Executives meetings.

Peer evaluation

At the end of 2013 and beginning of 2014 the RvA again underwent a peer evaluation whereby a team of assessors from other accreditation bodies reviewed whether the organisation meets the international ISO/IEC 17011 standard. In Europe, there are also evaluations of accreditation and market supervision with regard to the additional requirements for national accreditation bodies laid down in Regulation 765/2008. Such a peer evaluation, which takes place once every four years, is a safeguard for the expertise, impartiality and independence of the respective accreditation body and promotes harmonisation between the various accreditation bodies.

Processing complaints

In accordance with the Dutch General Administrative Law Act (*Algemene bestuurswet*) the RvA has a complaints scheme in place for any complaints about the RvA as an administrative body. This scheme has been published as Policy Rule BR-008 and is directly accessible via our website.

The processing period of six weeks was achieved in 28% of cases in 2014. This is an improvement of 14% compared with 2013. The target for 2014 to process all complaints at least within ten weeks was achieved in 64% of the cases. The fact that the target percentages have not been reached has mainly to do with the fact that complainants have the opportunity to explain their complaint orally. Before a meeting with all the respective parties can be organised, a significant part of the required processing period has already elapsed.

The complaints about the RvA in 2014 related particularly to:

- the communication between the RvA and the accredited organisation;
- the project management of assessments;
- the planning of assessments.

In order to gain a better insight into what exactly motivates people complaining about communication and project management, the decision has been taken to send an evaluation form to the assessed organisation after each assessment.

Interpretation of standard texts particularly at certification bodies sometimes leads to an almost legal discussion. In some cases 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 specific difference of

opinion about the interpretation of the standard, the assessed establishments can submit this to the RvA by reporting an interpretation dispute.

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

Accreditation category	2014	2013	2012
Laboratories	3	8	4
Inspection	1	5	8
Certification	11	8	6
CCKL Code of Practice	0	1	1
Miscellaneous	10	12	7
Total	**25**	**34**	**26**

In 2014 all the complaints about the performance of the RvA were declared admissible. From the processed complaints 48% were considered justified, 32% partly justified and 20% unjustified.

Processing notices of objection

In 2014 objections to a decision by the RvA were lodged eleven times. The decisions against which objections were lodged related in particular to:

- the withdrawal of (a part of) a scope;
- the rejection of an accreditation application;
- the amount of the annual accreditation contribution;
- applications pursuant to the Dutch Government Information (Public Access) Act (*Wet openbaarheid van bestuur: 'Wob'*).

Two notices of objection were withdrawn after consultation with the submitter. Three notices of objection were upheld by the RvA after which the decisions were revised. Four notices of objection were declared unfounded of which three submitters appealed. Two notices of objection are still pending. In 2014 two notices of objection were processed by a committee for objection, headed by an independent chairman from the Objection Chairmen Committee.

In 2014 the Council of State ruled on an appeal brought in 2013 against a decision by the RvA on an objection. The position of the RvA not to disclose the name of a specialist acting in the complaints procedure was not honoured in this specific case. The RvA acted in accordance with the decision.

The number of Wob applications increased in 2014. In 2013 two applications were submitted, in 2014 nine. The nature of a number of the applications appears to indicate that they are submitted with a view to possible cost awards after an objection or appeal has been upheld, or with regard to forfeiting penalties when overdue decisions were made.

All notices of objection in 2014 were declared admissible and all objection proceedings have been completed within the statutory period.

Notifications and signs of dissatisfaction with accredited organisations

In the event of dissatisfaction or doubts about the work of an accredited organisation a notification or a sign can be given to the RvA. The RvA will investigate the notification or the sign. The notifier will receive feedback on the notification. No feedback will be given on a sign.

In 2014 a relatively large number of notifications and signs were received about certification and inspection bodies. The most important subjects of these notifications and signs were alleged defects with regard to:

- the quality and the actions of auditors and inspectors;
- the quality of the complaints handling;
- unjustified accreditation claims;
- impartiality.

Attention due to enforcement by authorities led to a large number of notifications and signs in particular about the inaccuracy of final audits after asbestos cleanups. The increase in the number of notifications and signs in this area runs in sync with the tougher deployment of the Social Affairs and Employment Inspectorate in this area. Notifications and signs such as these, but also those in connection with the public

debate, gave reason in many cases to conduct extra investigations by the RvA itself. If a notification or the sign appears to be unjustified – and thereby the extra investigation of the RvA – the RvA will bear the costs.

Recorded notifications and signs about the performance of accredited organisations by category

Accreditation category	2014	2013	2012
Laboratories	11	6	7
Inspection	28	18	12
Certification	23	17	15
CCKL Code of Practice	0	0	0
Other	2	2	0
Total	**64**	**43**	**34**

Quality marks in transition

Towards more transparency

A talk with Vera Dalm, Director of Milieu Centraal *(in the photograph on the right)*, and Maureen van den Wijngaart, policy officer at the RvA *(in the photograph on the left)*

A quality mark says something about the invisible qualities of a product and gives guarantees in this respect. It enables consumers to compare products with each other, for instance in the area of animal or environmental friendliness, and to make an informed choice on this basis. But because the continuous increase in the number of quality marks it is becoming more and more difficult to asses how reliable such a quality mark really is. How is more transparency created? Vera Dalm and Maureen van den Wijngaart give their views.

What does trust mean?

VD: It appears from surveys that consumers trust quality marks quite quickly. But if a lot of quality marks are involved, this creates inflation. You can see this for instance with regard to eggs. There are no less than twenty different quality marks for eggs in the Netherlands! The eggs all look the same, but when you are in the supermarket you can buy corn-fed chicken eggs, barn eggs, free-range eggs.... How can you make your choice?

MW: Yes, I also find this difficult. As a consumer you don't generally know what the quality mark means, what statements it includes and what not. For instance the term 'free-range egg' can evoke the image of chickens that can happily range freely all day on site, while in practice this is not the case. This type of background information is absent when you stand in front of the supermarket shelves. You will only find out if you really go into it.

VD: There are only few people who do this. Take for instance the *Beter Leven* quality mark of Animal Welfare, with three stars. These three stars are always on it but depending on the animal friendliness one, two or three stars are coloured in. The consumer does not see this. He only thinks: it is the quality mark of Animal Welfare, it should be all right. Although there is a big difference between the number of stars.

MW: In the end it is obviously about being able as a consumer to trust the product you buy, without knowing the properties of that product in detail. Also that this product also meets the expectations you have. Because in the end this is the intention of a quality mark. This means that you should increase the transparency in the market.

VD: I think it is a good thing to reduce the number of quality marks per product group. This is not because fewer quality marks is the objective, but because with fewer quality marks you increase the recognizability and thereby the trust of the consumer. The most well-known quality marks are FSC, EKO and Max Havelaar: everybody can list them spontaneously. But that is all. This familiarity particularly inspires trust in consumers, even though they don't know exactly what the quality mark stands for.

MW: Fewer quality marks is certainly desirable. The question is, how do you tackle this? Many different products of many different manufacturers are involved. So you cannot set a maximum just like that or determine that a quality mark should entail more. This should be sorted out in some way.

Quality marks: meaning and audit

VD: In the area of sustainability alone we already have over one hundred quality marks and even more manufacturer logos in the Netherlands. The latter group includes the logos invented by the manufacturers themselves and which have not been verified by an independent third party. To give consumers more insight into sustainability quality marks and logos we developed the *KeurmerkenWijzer* (quality marks indicator). Via the website and the associated app we provide current information about the meaning of a quality mark or logo. In this way we show what the environmental impact, animal welfare and honest trade requirements are. In addition, we indicate how the audit is faring. In this connection we distinguish five different grades, ranging from no audit whatsoever (the producer himself is also the quality mark owner and no other party is involved) to very reliable audit (the certifying or verifying party is accredited).

MW: You obviously have to check whether a quality mark is rightly granted. At the same time the fact that a quality mark is not accredited does not automatically say anything about the value of that quality mark for the user. As the RvA we don't know the value because we have not assessed the respective quality mark. A good example is Ecover, a producer of ecological washing and cleaning products. As far as I know they don't have any certificate but nevertheless succeeded in marketing a very strong brand by which other parties know exactly who they are and what they stand for. But if every time you have to explain and prove again what standards your product meets, that is obviously a different story. Then a quality mark can help.

VD: A quality mark guarantees that a product meets certain requirements, but that does not mean that a product without a certified quality mark is necessarily worse. It can for instance be the case that a manufacturer decides for financial reasons not to apply for a quality mark whereas his product does meet the requirements. It also happens that producers don't want to bind themselves to a quality mark because they consider the set requirements below par. Or that a quality mark is so unknown that it does not yield higher sales figures and therefore has hardly any added value.

MW: I talk regularly with parties who expect that they need a quality mark, but had not liaised on this with their clients or buyers. Often such a talk then ends with the question: is accreditation really necessary in this case? It only has the added value if the parties relevant to you consider it important that you have your accredited quality mark. So the first question to ask yourself is: who am I doing this for? This is because it makes everything a lot more complex and certainly if you are in the start-up phase. Many parties want to develop something new and accredit it straight away. Our advice is then to first develop it and gain experience with it in practice and only come and talk about

accreditation at a later stage, if there appears to be a need for it.

The height of the bar

VD: In the KeurmerkenWijzer we assume that a three-party system leads to the most objective audit. There is the party marketing the quality mark and who formulates the requirements which a product should meet in order to be allowed to bear the quality mark, the party who wants to apply for the quality mark for its product and the party who checks whether the quality mark has been rightly granted. The more circles in the KeurmerkenWijzer are coloured orange, the greater the distance between those three parties and the more reliable the assessment.

MW: This is a somewhat different reasoning than we apply at the RvA. In principle we don't object to a certifying body developing its own certification scheme, its own quality mark. In practice you often do see that a scheme, once it has grown a bit, is still placed with an independent foundation. The assessment runs largely in the same way. At a management foundation we consider whether all the relevant market parties are involved in the development and maintenance and whether balanced decisions are made. This also means that competing quality marks can exist adjacent to each other for as long as the respective parties can demonstrate that a large part of the market is behind them. Because ultimately it is not up to us to say that the one party is better than the other. And we don't determine the height of the bar either: the respective market parties do this. In this connection one of my colleagues often uses the metaphor of the broomstick. When market parties suggest a scheme stipulating that broomsticks should be 3 metres long, and they support it with a well thought out story, we will not be the ones to say that they should be 1.5 metres.

VD: But sometimes this is very difficult. Take for instance the *Kip van Morgen* (chicken of tomorrow), a joint initiative by the poultry sector and the supermarkets. They made a transparent arrangement about the sustainability of poultry meat, with the aim of increasing the standard slightly, but were then slapped on the wrist by the Netherlands Authority for Consumers and Markets because that arrangement apparently violated anti-competition law. It does surprise me that this is considered to be a cartel agreement.

Major opportunities for improvement

MW: How do we achieve more transparency? In the first place we must ensure that the trust of the consumer is confirmed by carrying out good audits, and by managing the expectations in this respect. People often say that a certifying or auditing party is accredited. That is usually correct but it does not have to mean that this party is also accredited for the part which the quality mark covers. Ultimately for the RvA accreditation is an assignment from the body to be accredited. That party determines the scope of accreditation and if the quality mark is not included in this scope, the accreditation issued will not cover that part. Wrong expectations regularly exist in this respect, even amongst the parties who develop a quality mark themselves.

VD: This is indeed a major aspect. As far as I am concerned there should be more clarity in the system. Is a quality mark accredited or not and what exactly does it mean? Do you take a two- or a three-party system as a starting point? You can make arrangements about it with each other. Moreover, we should continue to consider critically how we can improve the information provision to consumers. It is important that this information is manageable – an infographic comes to mind showing at a glance the living conditions of chickens – and that this information is provided at a location where customer contact takes place, for instance in a supermarket. This has, as we noticed with our KeurmerkenWijzer, an immediate valuable added effect: producers like to score as high as possible and will therefore improve their performance. You will then see a type of benchmark effect.

MW: I also see in this a role for the sector organisations. Because it is obviously preferable that a sector concentrates on the development of a quality mark and agrees that we are going to do it this way. This will drive the quality level further upwards.

VD: The point is that sector organisations don't generally lead the troops. So I think that they will not so soon busy themselves with the development of a quality

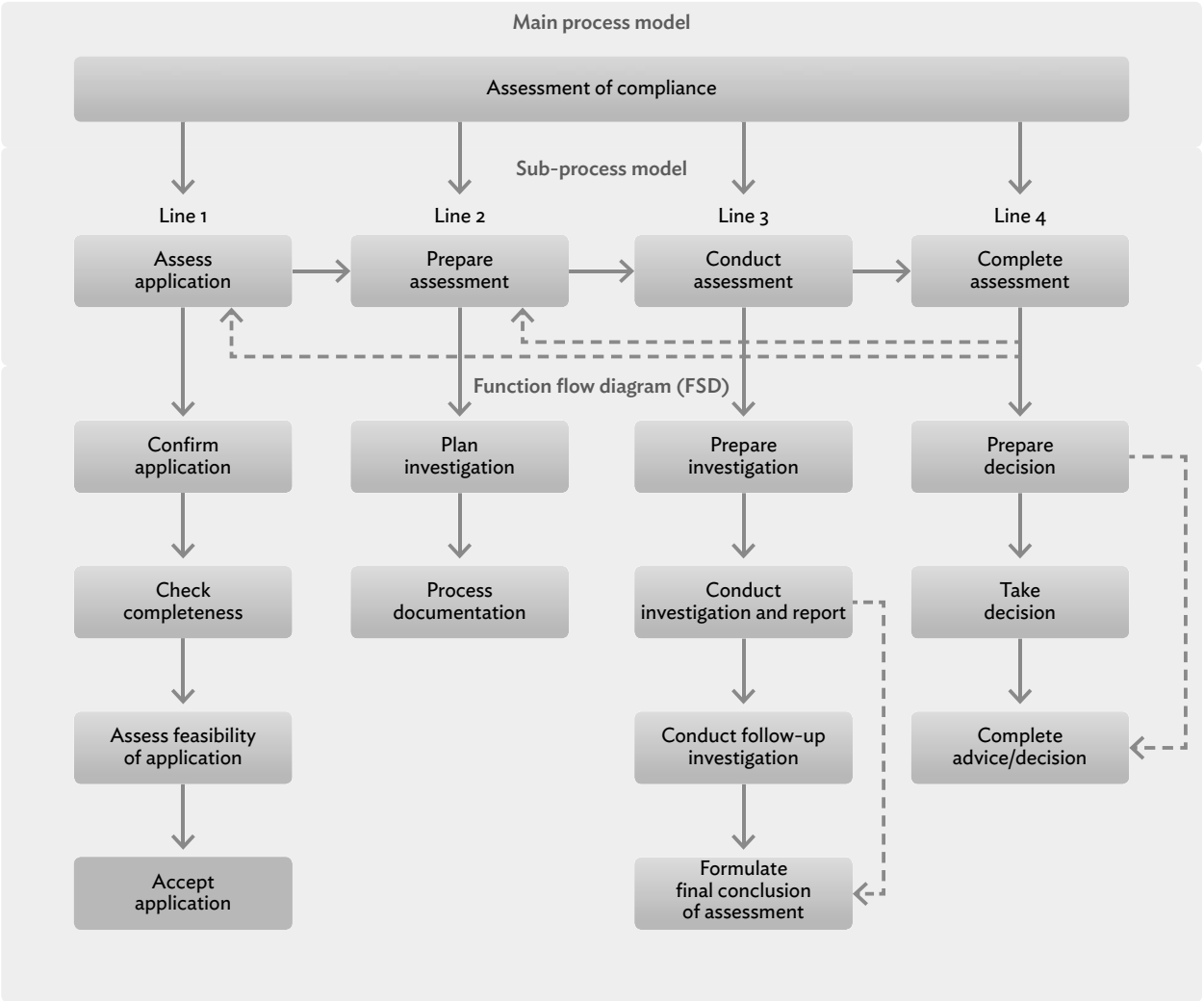
mark. At the same time the same sector organisations will benefit from keeping the trust of the consumer at a high level. Because on the one hand the fact is that consumers quickly trust a green leaf and manufacturers make good use of it to increase brand trust. But on the other hand the entire sector will suffer if at a certain stage that same green leaf leads to an incident because it is not a real quality mark.

MW: The incidents which took place recently in the food sector are good examples of this. Trust comes on foot and goes on horseback. This applies equally to quality marks!

Milieu Centraal is an independent information organization offering consumers practical information about the environment and energy in daily life; from solar panels to waste. All the tips and recommendations are based on scientific research. An external scientific advisory council forms part of the quality assurance. Milieu Centraal cooperates with social organisations, companies, the public sector and media, and informs roughly five thousand consumers per day via milieucentraal.nl and other websites.

Annex 1

Primary process of the RvA



Annex 2

Governance bodies and advisory committees

This overview contains the composition of the administrative bodies and advisory committees as of 15 March 2015.

Board of Supervisors

- Drs. E.H.T.M. Nijpels (Chairman)
  3rd term until 22 June 2016
- Dr. A.G.M. Buiting
  3rd term until 1 January 2017
- Dr. S.A. Hertzberger
  3rd term until 22 June 2015
- Ing. J. Visser
  3rd term until 27 March 2017
- Ir. L. Visser
  2nd term until 26 October 2017

For the report of the Board of Supervisors for 2014 we refer to the annual accounts for 2014, which you can download via our website. You can find more information there about the members of the Board of Supervisors and their additional functions.

Board and Executive Board

- Ir. J.C. van der Poel (Director/Chief Executive)
- Mr. J.A.W.M. de Haas (Director Operations)

Accreditation Committee

- Dr. W. Huisman (Chairman)
- K.J. van Schalm
- Prof. dr. ir. O.A.M. Fisscher
- Ir. C.K. Pasmooij

Objection Chairmen Committee

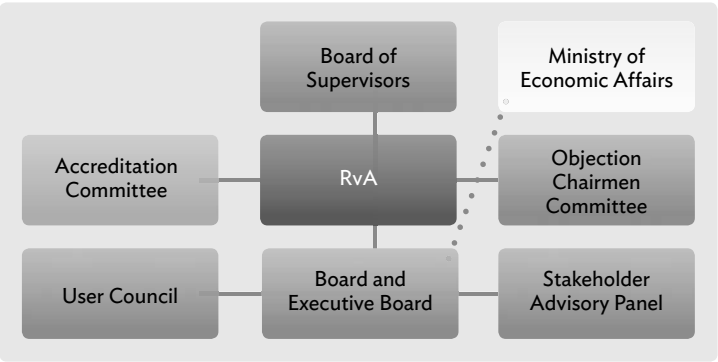
- Mr. L.A.F.M. Kerklaan
- Mr. M.N. van Zijl
- Mr. A. Pahladsingh

Stakeholder advisory panel

- Prof. dr. Ph. Eijlander (scientific institutes, Chairman)
- Prof. dr. D.M.J. Delnoij (scientific institutes)
- Dr. P.H.W.M. Daverveldt (NEN)
- Ir. A.J. Dalhuijsen (VSL)
- Mr. drs. A.J.I. van den Ende (Ministries)
- Mr. J.A. van den Bos (inspectorates)
- Ir. N.F.J. Hendriks (certification and inspection bodies)
- Ir. G.H. Tolman (laboratories and inspection bodies)
- Dr. A. van 't Veen (medical laboratories)
- Ir. M.P. Cuijpers (primary sector)
- Ir. F.W. Stuyt (scheme managers)
- Ir. J.J.N.M. Hogeling (industry)
- Prof. dr. J. Klein (healthcare)
- Dr. J. de Ridder (public sector regulators)

User Council

- Ir. J.C. van der Poel (RvA, Chairman)
- P. Cornelissen (VOC)
- Ing. B. Meekma (VOC)
- Ir. H. Tolman (Fenelab)
- Drs. J.H.F. van der Wart (Fenelab)
- Ing. R.P. Veerman (VEROCOG)
- Dr. J. Spaargaren (medical labs)
- Prof. dr. H. Hooijkaas (medical labs)
- Mr. J.A.W.M. de Haas (RvA)



Annex 3
Brief financial overview

As an independent foundation and independent administrative body the RvA is a non-profit organisation. Our independence is guaranteed via the Dutch National Accreditation Body Appointment Act (*Wet aanwijzing nationale accreditatie-instantie*') and by a modern governance structure with the Board of Supervisors, the Accreditation Committee and the Stakeholder advisory panel. We also guarantee our independence by a healthy but limited amount of equity capital. This makes us resilient against financial risks which might occur when conformity assessing organisations decide to discontinue accreditation because the RvA has taken a decision which is disagreeable to them.

The amount of equity capital was evaluated in 2014. Partly considering the changed status of the RvA in 2010, it has been decided to maximise the objective for the equity capital at 4 million euros. The required amount of the equity capital is evaluated every five years.

The figures in this Annex have been taken as a summary from the adopted annual accounts for 2014. No rights can be derived from them. From our website you can download the full annual accounts as prepared and adopted after approval by the Board of Supervisors and the Minister of Economic Affairs and provided with an unqualified report. You can obviously also approach us to request that a copy be sent. We can be contacted via telephone number +31 (0)30 239 45 00.

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

Assets	2014	2013
Fixed assets	76	135
Receivables and transitory assets	3,429	3,699
Liquid resources	3,223	2,670
Total	**6,728**	**6,504**

Liabilities	2014	2013
Equity capital	3,622	3,490
Short-term debts and transitory liabilities	3,106	3,014
Total	**6,728**	**6,504**

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 Board of Supervisors and the Minister of Economic Affairs.

The activities level in 2014 was approx. 2.4% higher than estimated. This was particularly the consequence of:

- extra assessments in connection with the Construction Products Regulation (they have been completed in the meantime);
- new accreditations according to the CCKL Code of Practice (in 2014 this was allowed for the last time).

Although this involved having to hire an extra number of external assessors, nevertheless a higher positive result was able to be achieved. The result is added to the reserves.

The (foreseen) decrease in turnover is caused by completing a big assessment assignment for the Ministry of Social Affairs and Employment. This meant a 3% decrease in turnover.

Profit and loss account (x €1,000)

Results	2014	2013
Net turnover	13,065	13,327
Costs of turnover	4,306	4,215
Gross margin	**8,759**	**9,112**
Direct personnel costs	6,400	6,266
Other costs	2,273	2,410
Sum total of costs	**8,673**	**8,676**
Operational result	86	436
Interest income	45	45
Result	**131**	**481**

The starting point – subject to special circumstances – is that the rates increase by not more than the index of Statistics Netherlands (CBS) for business services. Special circumstances apply to the coming years.

Many lead assessors are taking retirement. Their successors must be settled in within due time. That is why the rates in 2013 increased additionally. In 2014 the rates were adjusted as follows:

Rates	2014	2013
Index	0.7%	1.4%
Rate (lead) assessor	+0.7%	+2.15%
Rate specialists	+0.7%	+2.15%
Other rates	+0.7%	+2% to +2.2%

In 2014 the RvA appointed KPMG as the auditor for the financial years of 2014 up to and including 2016.

This was based on a comprehensive selection process involving four accountancy firms.

Annex 4
Our work in figures

Trust also requires that audits are possible. In this Annex you will find a summary in figures of our activities in 2014. As a comparison we also added previous figures in several cases.

Accreditations granted as at 1 January 2015

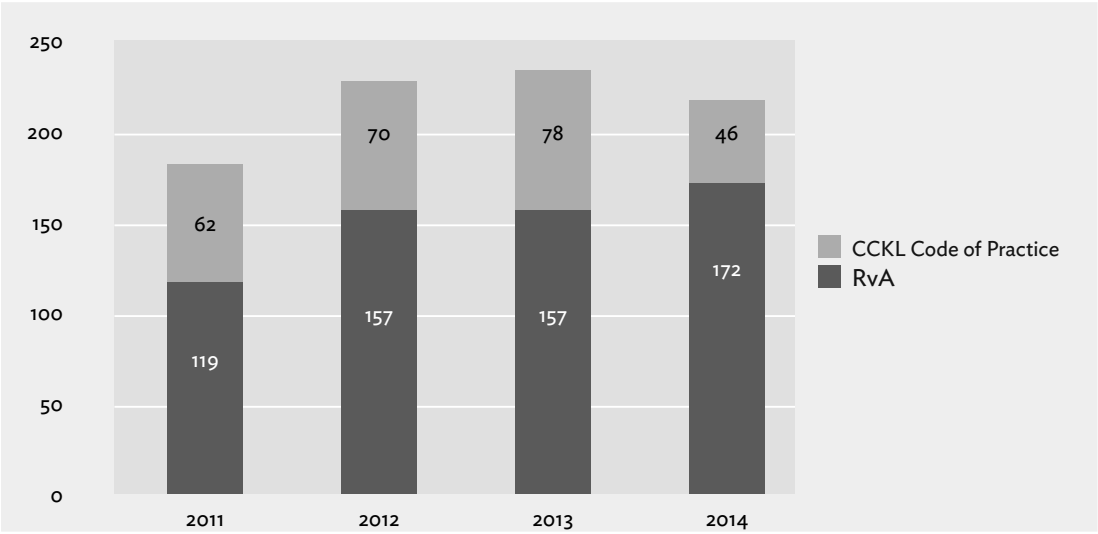
Standard	Explanation	Nether-lands 2014	Abroad 2014	Total 2014	Nether-lands 2013	Abroad 2013	Total 2013
Certification							
EN 45011	Products and services	31	2	33	45	6	51
ISO/IEC 17065	Products and services	10	1	11			
ISO/IEC 17021	Management systems	43	28	71	44	31	75
ISO/IEC 17024	Persons	5	1	6	6	1	7
Subtotal certification		**89**	**32**	**121**	**95**	**38**	**133**
Inspection							
ISO/IEC 17020	Inspectorate	122	2	124	127	4	131
Subtotal inspection		**122**	**2**	**124**	**127**	**4**	**131**
Laboratories RvA mark							
ISO/IEC 17025	Calibration	53	1	54	56	2	58
ISO/IEC 17025	Testing	231	10	241	231	12	243
ISO/IEC 17043	Proficiency tests	13	2	15	13	2	15
ISO Guide 34	Reference materials	2	0	2	2	0	2
ISO 15189	Medical laboratories in Multilateral Agreement	15	3	18	9	2	11
Subtotal laboratories		**314**	**16**	**330**	**311**	**18**	**329**
Regulation (EC) no. 1221/2009 (EMAS)	EMAS verification	1	0	1	1	0	1
ISO 14065	EMAS/Emission	6	0	6	6	0	6
Total RvA mark		**532**	**50**	**582**	**540**	**60**	**600**
Laboratories Healthcare							
CCKL Code of Practice*	Medical laboratories	242	0	242	249	0	249
Total number of accreditations granted		**774**	**50**	**824**	**789**	**60**	**849**

* These accreditations fall beyond the scope of the autonomous administrative authority's powers (ZBO).

Geographical spread of the accreditations granted as at 1 January 2015 (RvA mark)

Country	2014	2013	2012
The Netherlands (autonomous administrative authority (ZBO)	532	540	540
Rest of Europe	4	5	23
Rest of the world	46	55	51
Total	**582**	**600**	**614**

Number of reports submitted to the Accreditations Committee



Recommendations given by Accreditations Committee per report

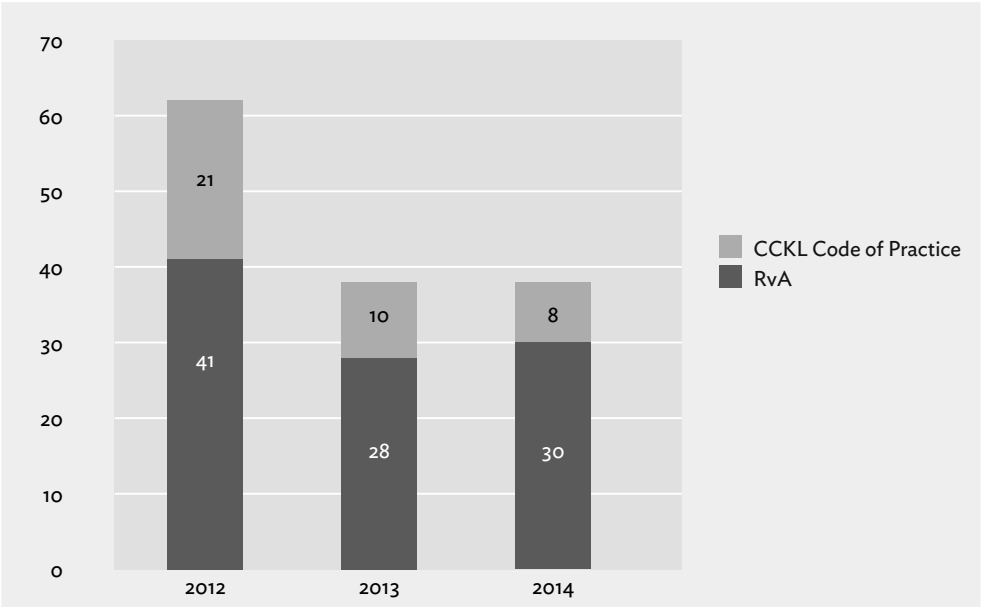
	RvA mark 2014	Health-care 2014	Total 2014	RvA mark 2013	Health-care 2013	Total 2013
Initial assessment positive recommendation	13%	20%	14%	17%	13%	16%
Re-assessment positive recommendation	86%	80%	85%	80%	81%	80%
Postponed reports	1%	0%	1%	1%	6%	3%
Negative recommendation	0%	0%	0%	2%	0%	1%
Total	**100%**	**100%**	**100%**	**100%**	**100%**	**100%**

In 2014 all recommendations given by the Accreditations Committee were adopted by the Director.

Total number of applications received for new accreditations per annum

	2014	2013	2012
Initial RvA mark	48	36	29
Extended RvA mark	251	160	163
CCKL Code of Practice	0	11	9
Total	**299**	**207**	**201**

Number of new requests per annum



New and extended accreditations per type with lead times in calendar days (RvA mark)

	New accreditations	Average lead time in calendar days	Extensions	Average lead time in calendar days
Certification	0	0	68	256
Inspection	10	268	17	251
Calibration laboratory	0	0	6	125
Test laboratory	13	269	117	136
Medical laboratory	7	259	7	135
EMAS/Emission	0	0	0	0
Other	0	0	3	113
Total	**30**		**218**	

Distribution of billed time over type of investigation (RvA mark)

Assessment type	2014 in %	2013 in %	2012 in %
Initial assessment	4%	6%	8%
Extension	15%	11%	11%
Re-assessment	21%	32%	25%
Audit assessment	57%	51%	56%
Transition	3%		
Total	**100%**	**100%**	**100%**

Distribution of billed time over the type of investigation, broken down into role in the assessment team (RvA mark)

Role	2014 in %	2013 in %	2012 in %
Lead assessor	48%	48%	51%
Assessor	8%	10%	10%
Specialist	44%	42%	39%
Total	**100%**	**100%**	**100%**

Number of assessments according to the CCKL Code of Practice

Assessment type	2014	2013	2012
Initial assessment	13	14	12
Audit assessment	89	100	72
Document audit	4	0	3
Re-assessment	44	43	67
Total	**150**	**157**	**154**

Disputes, suspensions and withdrawals

A dispute is a difference of opinion between the assessed party and the RvA assessor about the interpretation of the standard requirements. Organisations can temporarily lose their accreditation if it turns out that they no longer meet the set standards. This entails a suspension. In that case they are given six months to implement the required improvements and to have them assessed. It can also be the case that organisations lose their accreditation permanently. This entails a withdrawal: the accreditation agreement will be dissolved. Suspensions and withdrawals are voluntary or imposed. In both cases an organisation can no longer use the accreditation mark for the respective activities.

Disputes

	2014	2013	2012
Total number of disputes	25	32	23
Deviation is maintained unchanged	32%	41%	11%
Deviation is maintained but reformulated	4%	9%	67%
Deviation withdrawn	20%	16%	13%
Other outcome of dispute	12%	18%	9%
Pending	8%	16%	0%
Not admissible	24%	0%	0%
Total	**100%**	**100%**	**100%**

Suspended accreditations

Accreditation category	Voluntary 2014	Imposed 2014	Total 2014	Voluntary 2013	Imposed 2013	Total 2013
Certification	7***	4*	11	1	9	10
Inspection	1	2**	3	2*	2	4
Calibration laboratories	1	0	1	1*	0	1
Test laboratories	3**	3	6	0	3	3
Other	0	0	0	0	1	1
Total RvA mark	**12**	**9**	**21**	**4**	**15**	**19**
CCKL Code of Practice	0	0	0	2**	2**	4
Total	**12**	**9**	**21**	**6**	**17**	**23**

* Of which one partial suspension ** Of which two partial suspensions *** Of which six partial suspensions

Withdrawn accreditations

Accreditation category	Voluntary 2014	Imposed 2014	Total 2014	Voluntary 2013	Imposed 2013	Total 2013
Certification	17****	1	18	11*	7**	18
Inspection	18**	1	19	6	1	7
Calibration laboratories	5**	0	5	1	0	1
Test laboratories	14*	0	14	9**	1	10
Medical laboratories	1	0	1			
Other	2*	0	2	2	0	2
Total RvA mark	**57**	**2**	**59**	**29**	**9**	**38**
CCKL Code of Practice	20***	0	20	**8****	0	8
Total	**77**	**2**	**79**	**37**	**9**	**46**

* Of which one partial withdrawal ** Of which two partial withdrawals
*** Of which five partial withdrawals **** Of which nine partial withdrawals

A part of the withdrawals with regard to the CCKL Code of Practice set out above are a result of the transition to the international ISO 15189 standard.

Annex 5
Strategic choices

In 2013 and 2014 we conducted a comprehensive SWOT analysis (strengths, weaknesses, opportunities, threats). On the basis of this analysis the management of the RvA has made several strategic choices, which will determine the policy of the RvA from 2015 until 2020. We distinguish four main themes.

1 Human resources

It is important that the need for and the availability of internal and external assessors are properly coordinated. In the coming years we want to optimise this coordination further so that we can better respond to the needs of market parties – and manage to safeguard this for the future. This theme includes the activities by which we can further strengthen our professional networks. The aim of this is to gain better access to the experts necessary for the development of our services and methods.

2 Operational excellence

We want to professionalize our services further so that our client- and market-orientation increase. This not only applies to our assessments at clients but also to our procedures and communication. Part of this theme is also the learning capacity of the RvA: whatever does not go well must be demonstrably improved. By making use of the motivation and involvement of our employees, apart from formulating frameworks for behaviour and professionalism, this theme will become a major pillar.

3 Harmonisation

A level playing field for our clients and for the clients of our clients requires internal, European and international harmonisation of procedures and the use of standards. First, internal harmonisation is a condition. This relates to the assessment processes as well as the interpretation of requirements. In addition, the harmonisation between national accreditation bodies is important. By benchmarking we obtain more insight into mutual differences. In this way we can avoid the Dutch market experiencing adverse competition as a result of choices made by the RvA. Active influence on the decision-making processes in the EA (European co-operation for Accreditation), ILAC (International Laboratory Accreditation Cooperation) and IAF (International Accreditation Forum), and in the European Union via our Ministry of Social Affairs, also forms part of the activities in this theme.

4 Accreditation as an instrument

In the next few years the RvA will further detail the role which accreditation plays in public supervision and in private audit systems. The public and the business sector each have their own responsibility to protect the people. Accreditation can have a function in public supervision as well as in private audit systems, and we notice more and more often that accreditation can also play a connecting role between both supervision systems. A major element in this theme is spreading knowledge about accreditation and conformity assessments through training and information.

Annex 6
Accepted scheme managers

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 if the supplier meets the quality and safety requirements laid down in the scheme will the assessment body issue a certificate or quality mark. Thus a scheme manager is not an assessment body but formulates the standards and manages them.

The first duty of scheme managers is aimed at structurally preventing high-risk situations, in consultation with all the relevant interested parties via the schemes developed, and to describe measures that can reduce risks. Thereby they provide a major contribution to the chain which should bring about the trust of the buyers in the quality and safety of products and services.

Scheme managers must comply with the rules laid down in regulations by the RvA in close consultation with the stakeholders. These regulations include rules applicable to the formal cooperation between the scheme managers and the RvA. In practice the legal form of a scheme manager is always a foundation. That is why the RvA can enter into a so-called acceptance agreement with these organisations for one or more schemes. This acceptance is not an accreditation because accreditation applies exclusively to the assessment bodies.

In cooperation with the scheme managers the RvA has laid down in a document the criteria by 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. You can find more information about this on our website

The following list offers a summary of accepted scheme managers on 15 March 2015:

Scheme manager's areas of attention	Manager	Website
Contractors (working safely)	SSVV	www.vca.nl
Working conditions and safety management (Occupational Health and Safety Assessment Series: OHSAS 18001) Environmental Management (ISO 14001)	SCCM	www.sccm.nl
Car damage	KZS	www.focwa.nl
Installation Protection systems*	VbV	www.stichtingvbv.nl
Soil, water and archaeology	SIKB	www.sikb.nl
Contract catering	Cercat	www.cercat.nl
Criminality prevention and fire safety	CCV	www.hetccv.nl
Animal feed sector	GMP+	www.gmpplus.org
Digital certificates	ECP	www.ecp.nl
Distribution of pesticides	CDG	www.stichtingcdg.nl
Egg sector	OVONED	www.avined.nl
Healthcare, welfare and social services	HKZ	www.hkz.nl
Green areas	Groenkeur	www.groenkeur.nl
HACCP systems Food safety (management) systems	SCV	www.foodsafetymanagement.info www.fssc22000.com
Wooden packaging	SMHV	www.smhv.nl
Inspection and maintenance of heating installations	SCIOS	www.scios.nl
Cable infrastructure and pipe laying companies	CKB	www.ckb.nl
Climate-friendly enterprising	SKAO	www.skao.nl
Leadership*	SNL	www.normeringleiderschap.nl
Milieukeur agro/food en non-food, Barometers, Groen Label Kas, Maatlat Duurzame Veehouderij en Aquacultuur (agricultural/food, non-food environmental quality mark, barometers, green label for greenhouses, sustainable cattle farming measuring rule and aquaculture)	SMK	www.smk.nl
Poultry sector	PLUIMNED	www.avined.nl
Potting soil and substrate	RHP	www.rhp.nl
Debt counselling	NEN	www.nen.nl
Demolition work	SVMS	www.veiligslopen.nl
Taxi industry	TX-Keur	www.tx-keur.nl
Technical installation sector	KvINL	www.kvinl.nl
Temporary employment sector and (sub)contracting for work*	SNA	www.normeringarbeid.nl
Pig sector	CoMore	www.ikbvarken.nl
Working safely in electrical engineering	Stipel	www.stipel.nl
Vertical transport	TCVT	www.tcvt.nl
Vehicle dismantling	KZD	www.kzd.info
Healthcare and social welfare sector*	BIM	www.stichtingbim.nl

* New scheme in 2014

Annex 7
Marks of the RvA

How do you know whether an accredited service provision is taking place? You can see it by means of the following marks on certificates or in reports. Every accredited organisation has the right to use a mark with a unique number.

Marks covered by the multilateral agreements with EA (European) and ILAC and IAF (global)

Calibration Mark RvA K 000
The accreditation mark for accredited calibration laboratories. Laboratories are allowed to display this mark if they have demonstrated that they are able to provide valid results in a technically competent manner and that they work according to a management system safeguarding the traceability to international standards. Calibration is essential for production processes and forms the basis for activities of 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 mark if they have demonstrated that they are able to provide valid results in a technically competent manner and that they work according to a management system. Accreditations are carried out according to ISO/IEC 17025.

Medical laboratory diagnostics Mark RvA M 000
The accreditation mark for accredited medical laboratories. Laboratories are allowed to display this mark if they have demonstrated that they are able to provide valid results in a technically competent manner and that they work according to a management system. In comparison with ISO/IEC 17025, extra attention is given to the pre-analytical phase (advising, sampling), the post-analytical phase (interpretation, diagnosis) and the contribution to patient care. Accreditations are carried out according to ISO 15189.

Inspection Mark RvA I 000
The accreditation mark for accredited inspection bodies. Inspection bodies are allowed to display this mark if they have demonstrated that they are able to conduct inspections in a competent, consistent and independent manner. Inspection determines whether a design, a product or batch meets the requirements for each individual object or for each batch. For supervision by the RvA the ISO/IEC 17020 standard is applied to inspection bodies.

Products Mark RvA C 000
The accreditation mark for accredited certification bodies for product certification. For product certification purposes certification bodies are evaluated against EN 45011 for product certification (including services and processes). Certification bodies assess product designs and products in the new build, production or preparation phases. Under certain conditions the end products can be provided with a quality mark linked to this. 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 evaluated against ISO/IEC 17021 for them to certify organisations for example on the basis of ISO 9001, ISO 14001, ISO 18001 and VCA.

Persons Mark RvA C 000

The accreditation mark for accredited certification bodies for the certification of persons. The certification bodies are evaluated on the basis of ISO/IEC 17024. The certification bodies are then allowed to issue certificates under accreditation indicating that persons have a certain professional skill. Such a certificate is distinguished from a diploma by the limited period of validity of the certificate of professional skill. So this will have to be periodically re-demonstrated.

Emission mark RvA V 000

The accreditation mark for accredited greenhouse gas verification establishments (ISO 14065).

Marks not covered by the multilateral agreements with EA (European) and ILAC and IAF (global)

EMAS Mark NL V 000

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

Proficiency Testing Mark RvA R 000

The accreditation mark for accredited organisers of inter-laboratory investigations. Laboratory tests 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 evaluated against ISO/IEC 17043.

Reference Materials Producers Mark RvA P 000

The accreditation mark for accredited producers of reference materials. Laboratories which produce reference materials and also assign the values themselves, can have themselves accredited for these activities according to ISO Guide 34.

CCKL Mark

The accreditation mark for accredited medical laboratories according to the CCKL Code of Practice. This mark can be displayed if medical laboratories have demonstrated that they can carry out medically-diagnostic laboratory 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, diagnosis) and the contribution to patient care.[2]

2 The CCKL mark is not covered by the ZBO (autonomous administrative authority) activities of the RvA.

Annex 8
List of abbreviations

AFRAC	African Accreditation Cooperation
APLAC	Asia Pacific Laboratory Accreditation Cooperation
ARAC	Arab Accreditation Cooperation
BIM	Beheer Improvement Model (Improvement Model Management)
BRZO	Besluit Risico's Zware Ongevallen (Major Accidents (Risk) Decree)
CBS	Centraal Bureau voor de Statistiek (Statistics Netherlands)
CCKL	Stichting voor de bevordering van de kwaliteit van het laboratoriumonderzoek en voor de accreditatie van laboratoria in de gezondheidszorg (Institute for the promotion of quality in laboratory research and for the accreditation of laboratories in the health care sector)
CCV	Centrum voor Criminaliteitspreventie en Veiligheid (Dutch Centre for crime prevention and safety)
CDG	Certification of distribution in crop protection agents
CEO	Chief Executive Officer
Cercat	Certification of contract catering
CFO	Chief Financial Officer
CKB	Stichting Certificatieregeling Kabelinfrastructuur en Buizenlegbedrijven (Foundation for a cable infrastructure and pipe-laying companies certification scheme)
EA	European co-operation for Accreditation
ECP	Dutch foundation for Electronic Commerce Platform
EKO	Quality mark for organic foods
EMAS	Eco Management and Audit Scheme
EN	Europese Norm (European Standard)
ERP	Enterprise Resource Planning (software)
EU	European Union
FSC	Forest Stewardship Council
FSD	Functiestroomdiagram (function flow diagram)
GMP	Good Manufacturing Practice
HKZ	Harmonisation of quality assessment in the healthcare sector
HRM	Human Resource Management
IAAC	Inter American Accreditation Cooperation
IAF	International Accreditation Forum
IEC	International Electrotechnical Commission
ILAC	International Laboratory Accreditation Cooperation
ISO	International Organization for Standardization
KvINL	Stichting Kwaliteit voor Installaties Nederland (Foundation for installations Netherlands)
KZD	KwaliteitsZorg Demontage (quality management disassembly)
KZS	Stichting Kwaliteitszorg Autoschadeherstelbranche (Foundation for quality management in the motor repair sector)

MLA	Multi Lateral Agreement
MRA	Mutual Recognition Arrangement
MVO	Maatschappelijk verantwoord ondernemen (CSR: Corporate social responsibility)
NEN	Nederlands Normalisatie Instituut (Netherlands Standardisation Institute)
NVWA	Nederlandse Voedsel- en Warenautoriteit (Dutch Consumer Product Safety Authority)
NVZ	Nederlandse Vereniging van Ziekenhuizen (Netherlands Association of Hospitals)
OHSAS	Occupational Health And Safety Assessment Series
OVV	Onderzoeksraad voor Veiligheid (Dutch Safety Board)
PAC	Pacific Accreditation Cooperation
PDCA	Plan, do, check, act
RHP	Regeling Handels Potgronden (Netherlands control system for commercial potting composts)
RvA	Raad voor Accreditatie (Dutch Accreditation Council)
SCCM	Stichting Coördinatie Certificatie Milieuzorgsystemen foundation
SCIOS	Stichting Certificatie Inspectie en Onderhoud aan Stookinstallaties foundation
SCV	Stichting Certificatie Voedselveiligheid foundation
SIKB	Stichting Infrastructuur Kwaliteitsborging Bodembeheer foundation
SKAO	Stichting Klimaatvriendelijk Aanbesteden & Ondernemen foundation
SMHV	Stichting Markering Houten Verpakkingen foundation
SMK	Stichting Milieukeur foundation
SNA	Stichting Normering Arbeid foundation
SNL	Stichting Normering Leiderschap foundation
SSVV	Stichting Samenwerken Voor Veiligheid foundation
STIPEL	Stichting Persoonscertificatie Elektrotechniek foundation
SVMS	Stichting Veilig en Milieukundig Slopen foundation
SWOT	Strenghts, weaknesses, opportunities, threats
SZW	Ministry of Social Affairs and Employment
TCVT	Stichting Toezicht Certificatie Verticaal Transport foundation
TX-Keur	TX-keur Quality mark for taxi services
VbV	Verzekeringsbureau Voertuigcriminaliteit (Foundation for the insurance of vehicle crimes)
VCA	Veiligheids Checklist Aannemers (Safety checklist for contractors)
Wob	Wet openbaarheid van bestuur (The Dutch Government Information (Public Access) Act)
WRR	Wetenschappelijke Raad voor het Regeringsbeleid (Netherlands Scientific Council for Government Policy)
ZBO	Zelfstandig bestuursorgaan (Autonomous administrative authority)

Colophon

Text
Raad voor Accreditatie, Utrecht

Editorial staff and interviews
Eefje Gerits, 's-Hertogenbosch, with cooperation of
Ron Plattel, Vorden

Design
Mangrove, Rotterdam

Styling
Villa Y, The Hague

Photography
Astrid van Loo, Deventer

Printed matter
Impressed, Pijnacker

Print run
500

Dutch Accreditation Council (RvA)
Mariaplaats 21 D, 3511 LK Utrecht
P.O. Box 2768, 3500 GT Utrecht
Telephone: +31 (0)30 239 45 00
Website: www.rva.nl

On September 14th 2015 we are moving to:
Daalseplein 101, 3511 SX Utrecht

Utrecht, May 2015

RAAD VOOR ACCREDITATIE

We ensure that your confidence in products and services is justified.