

**Dutch Accreditation Council
(RvA)**

**Specific Accreditation
Protocol for Accreditation
of Certification of
Management Systems
(general, based on EN ISO/IEC 17021-1)**

Document code:

RvA-SAP-C000-UK

Version 5.1, 11-09-2024

A Specific Accreditation Protocol (SAP) describes the assessment service for a specific accreditation. It should be read in conjunction with the generic RvA regulations and policy documents. A current version of the SAP is available through the website of the RvA. (www.rva.nl).

Content

Introduction	4
1 Relevant documents	4
1.1 Accreditation standard	4
1.2 Additional standards	4
1.3 Additional documents	4
1.4 Additional documents (indirectly applicable)	5
1.5 Specific requirements from legislation and regulations	5
2 Scope of accreditation	6
3 Accreditation assessments	6
3.1 Documents to be submitted	6
3.2 The nature and content of the assessments	6
4 Specific issues for the RvA assessment	8
5 Changes with regard to the previous version	8
Annex A: Table for determining the sample size for certification dossier assessment	9
Annex B: Explanation regarding IAF MD1:2018	10

Introduction

This is the Specific Accreditation Protocol (SAP) that addresses the application of the standard for certification of management systems used for accreditation. In addition to this SAP, there may be a SAP for a particular field of activity, which elaborates on aspects to that field of activity.

1 Relevant documents

1.1 Standard used for accreditation

EN ISO/IEC 17021-1, Conformity assessment - Requirements for bodies providing audit and certification of management systems.

1.2 Additional standards

A number of additional standards have been drawn up for the application of EN ISO/IEC 17021-1 (for example ISO/IEC 17021-2, -3, etc.). These standards are not cited in this general SAP because they specifically belong to a type of management system (EMS, QMS, see relevant SAPs).

1.3 Additional documents

The documents below apply to bodies accredited to EN ISO/IEC 17021-1. They shall apply these documents in certification activities:

- RvA-T033; Explanation of the requirements for Conformity Assessment Schemes;
- RvA-T040; Shadow assessments;
- IAF MD 1; Audit and Certification of a Management System
Operated by a Multi-Site Organization;
- IAF MD 2; Transfer of Accredited Certification of Management Systems;
- IAF MD 4; Use of Information and Communication Technology (ICT) for
Auditing/Assessment Purposes;
- IAF MD 5; Determination of audit time of quality and environmental and occupational health
and safety management systems
- IAF MD 11; Application of ISO/IEC 17021 for Audits of
Integrated Management Systems;
- IAF MD23; Control of Entities Operating on Behalf of Accredited Management Systems
Certification Bodies;
- IAF ID1; QMS and EMS Scopes of Accreditation;
- IAF ID3; Management of Extraordinary Events or Circumstances affecting ABs, CBs and
Certified Organizations.
- IAF ID14; Guidance on the determination of audit time for integrated audit of multisite
management systems
- IAF ID15; Dealing with Fraudulent Behaviour

The current version of these documents can be obtained from the website of the relevant organisation: IAF (www.iaf.nu), RvA (www.rva.nl).

The following additional remarks can be made with regard to the scope of EA and IAF documents:

- A number of other documents are written in principle for one or two schemes (for example IAF MD5 and ID 1). The basic principles however, provided they are not related directly to a scheme, can be used more widely. For example, the tables in this guideline are specific to QMS and EMS, however the basic principles (1.1 up to and including 1.9, 2 up to and including 7, 8.i and 8.iv, 9 up to and including 11) are also applicable to other schemes unless this is specified differently in those other schemes (as in ISO 50003 or ISO/TS 22003 for example).
- The RvA supports voluntary use of the IAF CertSearch Database. Therefore, the RvA places information on the accreditations for ISO/IEC 17021-1 of certification bodies (CBs) in the IAF Database CertSearch. However, there is no legal basis for the RvA to make participation by CBs in the IAF Database CertSearch a condition of accreditation. When a CB participates in the database on a voluntary basis (for all standards and schemes in its scope of accreditation or for a part of the standards and schemes in its scope of accreditation), the RvA assesses the CB against the applicable requirements from the IAF MD 28 on uploading and managing data in the IAF Database. Where necessary, the RvA writes a non-conformity against Article 8.1.2 of ISO/IEC 17021-1 for not sufficiently applying the requirements from the IAF MD 28. The CB shall mention the standards and schemes for which it participates in CertSearch in the report Part A.

1.4 Additional documents (indirectly applicable)

EA and IAF have adopted various guidelines that contain requirements for the RvA and its assessments (and which are therefore also important for the certification body).

- IAF MD 7; Harmonization of Sanctions and Dealing with Fraudulent Behaviour;
- IAF MD 12; Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries;
- IAF MD 15; Collection of Data to Provide Indicators of Management System Certification Bodies' Performance;
- IAF MD 17; Witnessing Activities for the Accreditation of Management System Certification Bodies.
- IAF MD 25; Criteria for Evaluation of Conformity Assessment Schemes;
- EA-1/22; EA Procedure and Criteria for the Evaluation of Conformity Assessment Schemes by EA Accreditation Body Members

1.5 Specific requirements from legislation and regulations

If applicable, these are linked to specific schemes. The RvA has set out in RvA-T033 how schemes are to be assessed against requirements arising under legislation and regulations.

2 Scope of accreditation

The generic rules for defining scopes have been defined by the RvA in Policy rule RvA-BR003. Within the various schemes the scopes (technical sectors) shall be stated for which technical areas (technical sectors) the accreditation is valid. In principle this shall be related to the IAF codes from IAF ID1 (potentially linked to a NACE code, for example to indicate limitations in scope), unless alternative arrangements have been made for this in the scheme or internationally.

3 Accreditation assessments

3.1 Documents to be submitted

For the purpose of RvA assessments, assessors shall be provided with relevant documents as specified in the application tool (for initial assessment and extension assessments) and listed in the annex of RvA-BR005 (for other assessments).

3.2 The nature and content of the assessments

In addition to the generic regulations for the nature and content of RvA assessments as defined in RvA-BR002 and RvA-BR005, for this accreditation the requirements from the following table apply. The type and size of the assessment depend on the requested scope of accreditation, other accreditations possibly existing and the functioning of the CB in the past (where relevant) and risks.

Assessment method	Initial assessment	Regular assessments during the accreditation cycle ⁽¹⁾	Scope extension ⁽²⁾
Pre-assessment	√		√
Document assessment	√		√
On-site assessment	Random sample: at least 1 certification and personnel file ⁽³⁾ per cluster ⁽⁴⁾ per scheme.	Annual for 17021-1 Per scheme: at least once per cycle. Random sample: at least 1 certification and personnel file per cluster per scheme per accreditation cycle.	Random sample: at least 1 certification and personnel file per cluster.
	Total number of certification files to be inspected: see Annex B , unless the random sample above specifies a larger number. Any higher frequencies of on-site assessments will be specified further in a specific SAP.		
Witness assessment ⁽⁵⁾	√	√	√

(1) An accreditation cycle refers to a period of four years, starting after a decision concerning an initial assessment or reassessment has been taken; the cycle includes therefor the surveillance assessments and the reassessment in this period

(2) On the basis of the request, the RvA shall determine how the assessment of the extension is to be conducted.

(3) An assessment of certification or personnel files will take between 1 and 2 hours.

(4) The clusters are specified per scheme in a SAP

(5) See also [3.2.3](#).

3.2.1 Initial assessments and extension of scope

During the initial assessment, the implementation of the policies and procedures of the CB are assessed at their office (or offices, where applicable).

The application of IAF MD documents shall be verified where applicable.

The Chairman of the Committee safeguarding impartiality (or representative for any other mechanism chosen to safeguard impartiality) shall be interviewed or a meeting of this Committee shall be witnessed. This happens in consultation between the RvA Lead Assessor and the CB

3.2.2 Surveillances and reassessments

The application of IAF-MD1 (multisite) and IAF-MD4 will be assessed at least once during the accreditation cycle, if applicable.

The functioning of the impartiality Committee of the CB (or other mechanism) will be assessed in depth at least once during the accreditation cycle. The RvA Lead Assessor determines the method, that may consist of an interview (e.g. in person or by phone), with a non-CB representative of this Committee, or by witnessing (a part of) one of their meetings.

3.2.3 Witness assessments

For witnessed assessments, the following generic rules apply:

- If related to an initial accreditation or an extension of an accreditation a witness assessment has to be carried out, the preliminary assessment may demonstrate that essential requirements are not met. In that case the witness assessment will not be carried out till the applicable non-conformities of the preliminary assessment have been removed. This, among others, will be the case with non-conformities regarding the competence management or the system of audit time calculation.
- Normally, the full on-site audit will be witnessed, unless objectives for a particular activity can be satisfied with partial witnessing (e.g. in the case of multi-person or multi-day audits). In principle, opening and closing meetings are always witnessed.
- In case an audit cannot be witnessed completely, the RvA reserves the right to carry out additional investigations, whereby the activities carried out by the CB are verified by means of discussing the results of the activities with the person(s) who carried out the activities. Almost the same information that was available to the person(s) who carried out the activities therewith has to be available.
- For an initial accreditation, RvA shall per scheme witness both stage 1 and stage 2 audits, for at least one of the CB's clients. Prior to witnessing the stage 2 of the same audit, the applicant CB shall submit the completed report and / or conclusions from the stage 1 audit to RvA's assessment team. If the CB does not have any new clients, it is possible to witness one renewal or two surveillances which cover the key processes.
- In principle, some of the witness assessments (at least 1 per cycle, never more than 50%) will be replaced by a shadow assessment afterwards (see RvA-T040).
- The assessment of the audit report is part of the witnessing of the audit. This audit report must be uploaded in Prisma within ten working days after the audit.

Besides the abovementioned considerations for selection of audits to be witnessed, RvA will *consider* the following:

- The RvA will normally not witness the same auditors that have been witnessed in the same scheme before;
- The RvA will normally not witness an audit at the same organization;
- If possible, during an accreditation cycle at least one third (with a minimum of 1) of the audits to be witnessed should be initial or recertification audits.

Witnessing of audits also includes the review of the audit report.

To be able to select the audits to be witnessed, the CB shall on request of the RvA provide a planning for the audits to be conducted in a certain period. The information on these audits shall include as a minimum:

- type of audit (initial, recertification or surveillance);
- name and address of auditee;
- audit standard(s);
- scope of certification;
- name(s) of auditors(s) and expert(s);
- date(s) of the audit.

For further specifications, see the SAP's per scheme.

4 Specific issues for the RvA assessment

In addition to the system aspects (complaints/appeals, internal audits and management review), which will always be reviewed, for an EN ISO/IEC 17021-1 assessment the following topics/processes will also always be assessed:

- management of impartiality (can be omitted in the event of limited extension without new impartiality risks; the lead assessor will state this in the assessment plan);
- the result of the consultation process with "suitable interested parties" (in the case of initial or extension) (EN ISO/IEC 17021-1; 5.2.3);
- management of competency;
- certification process.

In addition, a part vertical assessment will be conducted annually by reviewing the practical implementation of a number of personnel and certification dossiers.

5 Changes with regard to the previous version

In comparison with version 5, dated October 2019, the following significant changes have been made in this document:

- paragraph 1.3, added: IAF MD28 and explanation about IAF CertSearch;
- paragraph 1.3, added: IAF ID 14 and ID 15;
- paragraph 1.4, added: IAF MD 25 and EA-1/22
- Appendix B, removed: Clause about transition IAF MD 1
- Added general introduction and removed references to SAPs and additional documents for a specific field of activity in Chapter 1 and Appendix A

Annex A: Table for determining the sample size for certification dossier assessment

The total number of certification dossiers per technical area of a scheme, that should be assessed during assessments is determined by the number of valid certificates under RvA accreditation, and is determined by the formula: one fifth of the square root of the number of valid certificates under accreditation with a maximum of 15 dossiers:

Number accredited certification dossiers	< 25	< 100	< 225	< 400	< 625	< 900	<1225	<1600
Number dossiers to be assessed	1	2	3	4	5	6	7	8

Number accredited certification dossiers	<2000	<2500	<3000	<3600	<4200	<4900	>4900
Number dossiers to be assessed	9	10	11	12	13	14	15

The number of valid certificates under RvA accreditation is determined as defined by IAF MD15. For an initial assessment or scope extension the guideline is the number of certificates issued up to that point (with regard to which it can be reasonably expected that they will be issued under accreditation in due course). For surveillance assessments these quantities apply across the accreditation cycle.

Annex B: Explanation regarding IAF MD1:2018

On 29 January 2018 IAF published a revision of IAF MD1; IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization.

At first no significant changes compared with the previous version were noted in the new version.

Thereafter the RvA and the Dutch Association for Certification bodies NVCi however observed an impact which had not been anticipated at first. This concerns the last paragraph of section 1, Scope, which reads:

“This document shall not be used for situations where independent organizations are collected together by another independent organization (e.g. consulting company or an artificial organization) under the umbrella of a single management system.”

Also because of a number of other changes, the RvA came to the conclusion that the previous version of MD1 has been applied in situations for which it was not intended to be used. The rationale for this conclusion is based on the following:

- The use of the phrase “independent organizations are collected together” implies the assumption that when the situation occurs where organizations that were not dependent before the centralised management system was established, the document does not apply. Although one could argue that the umbrella of the single management system makes the organization dependent, the RvA considers that the dependency should already exist before the umbrella was established.
- Also the RvA assumes that the other “consulting company or an artificial organization”, that serves as the umbrella, was an independent organization before the single management system to collect the organizations was established.
- The new version of MD1 introduces new and modified definitions that emphasize that the multi-site organization is an organization which has more in common than a management system. The change in definition of ‘Organization’ (2.1) indicates that the organization shall have responsibilities and authorities to achieve its objectives. In the old definition the emphasis was on owning a management system.
- In the new version the concepts of ‘top management’ and ‘operational control’ are introduced and it is explained that the so-called ‘central function’ exercises operational control and authority from the top management of the organization.
- MD1:2018; 5.2 states that the central function shall not be subcontracted to an external organization.

Based on the above, the RvA concludes that IAF has changed the document to explain that it shall only be applied in situations where an organization has sites that are not independent organizations and have top management that exercise operational control, and in addition to this have a single management system. So it should not only be because of the management system that the organizations are considered to be dependent.