DUTCH ACCREDITATION COUNCIL

Accreditation specification RvA

Accreditation of certification bodies for management systems (EN-ISO/IEC 17021-1)

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Introduction

This is the accreditation specification RvA that addresses the accreditation of certification bodies for management systems according to the standard EN-ISO/IEC 17021-1. In addition to this ASR, there may be an ASR for a particular field of activity – as mentioned in Annex B, which details aspects relevant 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 – Part 1: Requirements

1.2 Additional documents

- ASR001 Overzicht documenten RvA, EA, ILAC en IAF

Current versions of these documents can be downloaded from the website of the relevant organisation(s): IAF (www.iaf.nu), ILAC (www.ilac.org), EA (www.european-accreditation.org), ISO (www.iso.org), 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 MD 5 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.

1.3 Additional documents (informative)

For this standard no informative documents apply other than the documents mentioned in ASR001.

1.4 Documents relating to the conformity assessments to be carried out

Documents relating to conformity assessments to be performed are listed in the specific ASR.

1.5 Specific legislation and regulations

Specific legislation and regulations that make the relevant conformity assessment and/or accreditation mandatory for the subject of a specific ASR are mentioned here.

2 Scope of accreditation

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), unless alternative arrangements have been made for this in the scheme or internationally.

3 Accreditation Assessments

3.1 Documents to be provided

For the purpose of RvA assessments, assessors shall be provided with relevant documents as specified in Annex A.

3.2 The nature and content of the assessments

In addition to the general rules for the nature and content of the RvA assessments as laid down in RvA-BR001, the rules from the table below apply to this specific accreditation.

The nature and content of the assessments depend on the requested scope of accreditation, any pre-existing accreditation, the past performance of the organization (if applicable) and risks.

Method of assessment	Initial assessment	Regular assessment in the cycle [1]	Scope extension [2]
Pre-assessment	√		√
Document assessment	√		√
Office assessment (3)(4)(5)	Random sample: at least 1 certification and personnel file per technical area per scheme.	Annual for 17021-1 For each scheme: at least once per cycle. Random sample: at least 1 certification and personnel file per technical area per accreditation cycle.	Random sample: at least 1 certification and personnel file per technical area.
	Total number of certification files to be inspected for a initial assessment, regular assessments during the accreditation cycle and an assessment of a scope extension: see Annex D, unless the random sample above specifies a larger number. Any higher frequencies of on-site assessments will be specified further in a specific SAP.		
Witnessing of activities[6]	√	√	√

(1) A(n) (accreditation) cycle covers a period of four years, starting after a decision on an initial assessment or reassessment has been taken; the cycle therefore includes surveillance assessments and reassessments during this period.

(2) Based on the application, the RvA will determine how the assessments of the extension will be carried out.

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

(4) The technical areas are specified per scheme in a SAP.

(5) For a specific subject, it may either concern a certification file or a personnel file. When applicable, this is stated in the SAP for this specific subject.

(6) 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 MD 1 (multisite) and IAF MD 4 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 subject.

4 Specific assessment issues

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 files.

5 Changes compared to the previous version of this document

In comparison with version 1.0, effective date 15-09-2025, the following changes have been made in this document:

- Applying the ASR-template: adding 1.3 and 1.4
- Annex A, 10: checking the box Witnessing

Annex A: Documents to be provided for an initial assessment, assessment of an extension, surveillance assessment, reassessments and witnessing

Documents to be provided EN-ISO/IEC 17021-1	Initial assessment	Extension	Surveillance	Reassessment	Witnessing
1. Completed RvA application form for accreditation (F001a)	√				
2. Completed RvA application form for scope extensions and/or scope adjustments (F105)		√			
3. Completed RvA supplementary application form certification management systems (F006-2)	√	√			
4. Proof of registration with the Chamber of Commerce (not older than 6 months);	√	√		√	
5. An organisational chart and description of your organisational structure;	√	√			
6. Quality manual and general management system procedures;	√	√	√	√	
7. A cross-reference table establishing the relationship between the requirements of EN-ISO/IEC 17021-1 and your quality system;	√	√	√	√	
8. Report(s) of recent internal audit(s) (not older than 6 months)	√	√			
9. Report of the most recent management review (not older than 6 months)	√	√			
10. Internal operating procedures and regulations used in certification;	√	√	√	√	√
11. General procedures developed or adapted (and not included in manual)	√	√	√	√	
12. Competence requirements and qualification procedure	√	√			
13. A sample certificate;	√	√			
14. Own review of the certification scheme, as explained in ASR007 if applicable for the new activity(ies). If not considered applicable, please explain why.	√	√			
15. In the case of an external schema manager: Self-assessment of the scheme, as explained in ASR007 in combination with an application for scheme evaluation (F207) If the specific version of the scheme for which accreditation is requested is included in the list of schemes for which the RvA can grant accreditation (see RvA-BR010 list), a new application for schema evaluation is not necessary.	√	√			
16. If applicable, relevant (local) legislation and regulations.	√	√			
17. Amended Chapter 1 and relevant Annexes of the Part A Report for this accreditation			√	√	

Documents to be provided EN-ISO/IEC 17021-1	Initial assessment	Extension	Surveillance	Reassessment	Witnessing
18. Any addition documentation in accordance with SAP of the parts of the relevant scope			√	√	√
19. Certification scheme (normative documents)					√
20. Audit assignment, including location, duration and contact name (auditee)					√
21. Audit forms					√
22. Audit team qualifications					√
23. Previous report					√
24. Accountability fort he calculation of audit time					√
25. Use of marks and/or logos					√

Annex B: Areas of work RvA

Conformity assessment activities for which accreditation can be requested from the RvA.

Activities marked with (NL) are only accredited by bodies established in the Netherlands.

If the RvA no longer has active accreditations in a field of activity, the field of activity is considered inactive.

- Quality management systems;
- Environmental management systems;
- Food safety management systems;
- Safety and occupational health and safety management systems;
- Information security systems, including privacy information management system;
- IT service systems, including systems for electronic signatures;
- AI management systems;
- Energy management systems(NL);
- Business continuity systems(NL);
- Asset management systems(NL)
- Explosive Remnants of War Location management system
- European Directives and Regulations, as stipulated in Annex 2 of ASR006 (NL)

Annex C: Examples of non conformities of type A

- The body cannot demonstrate that the auditor is competent.
- The team's observations raise doubts about the impartiality or independence of the body (for example, in the case of demonstrable mixing of certification and consultancy or demonstrable dependence on a consultancy organization).
- Inconsistencies are observed in audits or decisions, et cetera.
- The body has wrongly provided a certificate; there were still some non-conformities not yet closed.
- During an audit essential observations (systemic, that is relating to key points of the standard, such as the hazard analysis in the case of FSMS or the inventory of customer requirements in the case of a QMS) are missed or observations are rated incorrectly, in such a way that the CAB has made or would make an incorrect decision.
- In one or more files so many of the records required are lacking that it is no longer possible to see that a reliable certification decision has been made at this client or these clients.
- The accreditation mark (or other communication) is used in a way that suggests that the body is accredited for an activity where this is not the case.

Annex D: Table for determining the sample size for certification file assessment

The total number of valid certificates issued under RvA accreditation determines the sample in the office assessment by the RvA.

For each technical area of a schema (equal to the IAF codes, when applicable for the subject), the number of valid certificates issues is looked at. On this basis, the RvA determines how many files shall assessed for this technical area of this scheme during the office assessment.

Number of valid certificates issued under RvA accreditation	< 25	< 100	< 225	< 400	< 625	< 900	<1225	<1600
Number of certification files to be assessed	1	2	3	4	5	6	7	8

Number of valid certificates issued under RvA accreditation	<2000	<2500	<3000	<3600	<4200	<4900	>4900
Number of certification files 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.