**FM 004 - IAAC PEER EVALUATION PROGRAM TEMPLATE**

**ISO/IEC 17011:2017**

**Name of the Accreditation Body:**

**INITIAL EVALUATION**  **SCOPE EXTENSION EVALUATION**

**RE-EVALUATION**  **FOLLOW UP VISIT**

**SCOPE:**

**Accreditation of Calibration Laboratories**

**Accreditation of Testing Laboratories**   **ISO/IEC 17025-Medical Labs**  **ISO 15189**

**Accreditation of Proficiency Testing Providers**

**Accreditation of Reference Materials Producers**

**Accreditation of Inspection Bodies**

**Accreditation of Management Systems Certification Bodies**

**QMS**   **EMS**   **FSMS**   **ISMS**   **MDMS**   **EnMS**   **ABMS**

**Accreditation of Product Certification Bodies**

**GLOBAL G.A.P.**

**Accreditation of Persons Certification Bodies**

**Accreditation of Green House Gases Validation / Verification Bodies**

**Team Leader (TL):**

**Team member(s) (TM):**

**Evaluation date(s):**

**References**:

ISO/IEC 17011:2017

ISO/IEC 17025:2017; ISO 15189; ISO/IEC 17021-1; ISO/IEC 17020, ISO/IEC 17043;

ISO/IEC 17034; ISO/IEC 17065; ISO/IEC 17021-2 for EMS; ISO/IEC 17021-3 for QMS; ISO/IEC 17024; ISO 14065; ISO/TS 22003; ISO/IEC 27006; ISO 50001; ISO 37001.

IAAC MD 001, MD 002, MD 030.

IAF/ILAC A2, A3.

ILAC, P 5, P 8, P 9, P 10, P 13, P 14, P 15, R 7, G 21.

IAF MD 1, MD 2, MD 3, MD 4, MD 5, MD 6, MD 7, MD 8, MD 9, MD 10, MD 11, MD 12, MD 13, MD 14, MD 15, MD 16, MD 17, MD 19, MD 20, MD 23, ML 2, ML 4, PL 8.

(Delete non applicable references as appropriate.)

**Key**: L – Lead responsibility to evaluate requirements & write up findings

C – Contribute with relevant information

NA – Not applicable

**The team may add a column for the responsible person within the AB.**

| **ISO/IEC 17011:2017** | **Requirements** | **(TL)** | **(TM)** | **(TM)** | **Person in the AB** |
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| 4.1 | Legal entity |  |  |  |  |
| 4.2 | Accreditation agreement |  |  |  |  |
| 4.3 | Use of accreditation symbols and other claims of accreditation |  |  |  |  |
| 4.4 | Impartiality requirements |  |  |  |  |
| 4.5 | Financing and liability |  |  |  |  |
| 4.6 | Establishing accreditation schemes |  |  |  |  |
| 5 | Structural requirements |  |  |  |  |
| 6.1 | Competence of personnel |  |  |  |  |
| 6.1.1 | General |  |  |  |  |
| 6.1.2 | Determination of competence criteria |  |  |  |  |
| 6.1.3 | Competence management |  |  |  |  |
| 6.2 | Personnel involved in the accreditation process. |  |  |  |  |
| 6.3 | Personnel records |  |  |  |  |
| 6.4 | Outsourcing |  |  |  |  |
| 7.1 | Accreditation requirements |  |  |  |  |
| 7.2 | Application for accreditation |  |  |  |  |
| 7.3 | Resource review |  |  |  |  |
| 7.4 | Preparation for assessment |  |  |  |  |
| 7.5 | Review of documented information. |  |  |  |  |
| 7.6 | Assessment |  |  |  |  |
| 7.7 | Accreditation decision-making |  |  |  |  |
| 7.8 | Accreditation information. |  |  |  |  |
| 7.9 | Accreditation cycle |  |  |  |  |
| 7.10 | Extending accreditation |  |  |  |  |
| 7.11 | Suspending, withdrawing or reducing accreditation |  |  |  |  |
| 7.12 | Complaints |  |  |  |  |
| 7.13 | Appeals |  |  |  |  |
| 7.14 | Records on conformity assessment bodies |  |  |  |  |
| 8.1 | Confidential information |  |  |  |  |
| 8.2 | Publicly available information |  |  |  |  |
| 9.1 | General |  |  |  |  |
| 9.2 | Management system |  |  |  |  |
| 9.3 | Document control |  |  |  |  |
| 9.4 | Records control |  |  |  |  |
| 9.5 | Nonconformities and corrective actions |  |  |  |  |
| 9.6 | Improvement |  |  |  |  |
| 9.7 | Internal audits |  |  |  |  |
| 9.8 | Management reviews |  |  |  |  |

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| **IAAC MD 002 Clauses** | **Requirements** | **(TL)** | **(TM)** | **(TM)** | **Person in the AB** |
| 2.1 | Compliance with ISO/IEC 17011 |  |  |  |  |
| 2.2 | Compliance with IAF and ILAC mandatory documents and mandatory sector specific documents |  |  |  |  |
| 2.3 | Contribute to IAAC ILAC IAF MLA |  |  |  |  |
| 2.4 | Participation in IAAC and other regional groups’ PT |  |  |  |  |

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| **A2 Clauses** | **Requirements** | **(TL)** | **(TM)** | **(TM)** | **Person in the AB** |
| 2.2.1.1 | *Have demonstrated experience and have accredited at least one CAB. (for applicants for the MLA) .* |  |  |  |  |
| 2.2.1.2 | Have demonstrated experience and access to expertise., |  |  |  |  |
| 2.2.1.3 | Routes for traceability (see ILAC P10) |  |  |  |  |
| 2.2.1.4 | PT Requirements (see ILAC P9) |  |  |  |  |
| 2.2.1.5 | Applicable regional & int’l agreements  **(IAAC MD 001 , ILAC P 5, IAF ML 4)** |  |  |  |  |
| 2.2.1.6 | Program to promote MRA |  |  |  |  |
| 2.2.1.7 | Contribute fair share to peer evaluations |  |  |  |  |
| 2.2.1.8 | Cross frontier policy according to IAF documents or taking into account ILAC G 21 |  |  |  |  |

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| **IAAC Designation** | **IAAC Documents** | **(TL)** | **(TM)** | **(TM)** | **Person in the AB** |
| IAAC MD 001 | IAAC Multilateral Recognition Arrangement |  |  |  |  |
| IAAC MD 030 | IAAC, IAF & ILAC Resolutions Applicable to IAAC MLA Peer Evaluations |  |  |  |  |

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| **ILAC Designation** | **ILAC Documents** | **(TL)** | **TM)** | **(TM)** | **Person in the AB** |
| ILAC P5 | ILAC Mutual Recognition Arrangement |  |  |  |  |
| ILAC P 8 | Supplementary Requirements and Guidelines for the use of Accreditation Symbols and for Claims of Accreditation Status by Accredited Laboratories and Inspection Bodies. |  |  |  |  |
| ILAC P 9 | ILAC Policy for Participation in proficiency Testing |  |  |  |  |
| ILAC P 10 | ILAC Policy on Treaceability of Measurement Results |  |  |  |  |
| ILAC P13 | Application of ISO/IEC 17011 for the Accreditation of Proficiency Testing Providers |  |  |  |  |
| ILAC P 14 | ILAC Policy for Uncertainty in Calibration |  |  |  |  |
| ILAC P 15 | Application of ISO/IEC 17020:2012 for the Accreditation of Inspection Bodies |  |  |  |  |
| ILAC R 7 | Rules for the Use of ILAC MRA Mark |  |  |  |  |

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| **IAF**  **Designation** | **IAF Documents** | **TL** | **TM** | **TM** | **TM** |
| IAF MD 1 | Certification of Multiple Sites based on Sampling |  |  |  |  |
| IAF MD 2 | Transfer of Accredited Certification of Management Systems |  |  |  |  |
| IAF MD 3 | Advanced Surveillance & Recertification Procedures |  |  |  |  |
| IAF MD 4 | Computer Assisted Auditing Techniques for Accredited Certification of Management Systems |  |  |  |  |
| IAF MD 5 | Duration of QMS & EMS Audits |  |  |  |  |
| IAF MD 6 | **Application of ISO 14065** |  |  |  |  |
| IAF MD 7\* | IAF Mandatory Document for Harmonization of Sanctions to be applied to CABs |  |  |  |  |
| IAF MD 8\* | **Application of ISO/IEC 17011 in Medical Device Quality Management Systems (ISO 13485)** |  |  |  |  |
| IAF MD 9 | **Application of ISO/IEC 17021 in Medical Device Quality Management Systems (ISO 13485)** |  |  |  |  |
| IAF MD 10 | Assessment of Certification Body Management of Competence in Accordance with ISO/IEC 17021 |  |  |  |  |
| IAF MD 11 | Application of ISO/IEC 17021 for Audits of Integrated Management Systems (IMS). |  |  |  |  |
| IAF MD 12\* | Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries. |  |  |  |  |
| IAF MD 13\* | Knowledge Requirements for Accreditation Body Personnel for Information Security Management Systems (ISO/IEC 27001) |  |  |  |  |
| IAF MD 14\* | Application of ISO/IEC 17011 in Greenhouse Gas Validation and Verification (ISO 14065) |  |  |  |  |
| IAF MD 15 | IAF Mandatory Document for the Collection of Data to Provide Indicators of Management System Certification Bodies' Performance. |  |  |  |  |
| IAF MD 16\* | Application of ISO/IEC 17011 for the Accreditation of Food Safety Management Systems (FSMS) Certification Bodies. |  |  |  |  |
| IAF MD 17\* | Witnessing Activities for the Accreditation of Management Systems Certification Bodies. |  |  |  |  |
| IAF MD 20 | Generic Competence for AB Assessors: Application to ISO/IEC 17011 |  |  |  |  |
| IAF MD 23 | Control of Entities Operating on Behalf of Accredited Management Systems Certification Bodies |  |  |  |  |
| IAF ML 2\* | General principles on the use of the IAF MLA Mark |  |  |  |  |
| IAF ML 4\* | MLA Policies and Procedures for a Multilateral Recognition Arrangement on the Level of Single Accreditation Bodies and on the level of Regional Groups. |  |  |  |  |
| IAF PL 8 | Rules for the use of the IAF Logo |  |  |  |  |

**\*Although these MD’s reference ISO/IEC 17011:2004, the additional requirements shall apply to Accreditation Bodies that are being evaluated to the relevant Scope.**

**Schedule of activities during the evaluation**.

This schedule shall include: place, time, and details of activities such as, evaluation of requirements, witness of meetings, witness of assessments, evaluation team meetings, visit to the NMI, travelling, names of staff from the AB that will be involved in the activities. etc, The draft program may include the names of the CABs, however the final program shall not include CAB names and shall refer to assessments witnessed only as Witness 1, 2, 3, etc. together with an indication of the MLA scope and field of activity. If a surveillance visit is witnessed, please indicate if all requirements of the standard are to be assessed.

| **Date and Time** | **(TL)** | **(TM)** | **(TM)** | **(TM)** |
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