



المجلس العالمي للاعتماد
Global Accreditation Bureau



Accreditation Procedure for Inspection Bodies

Issue 01 – Apr 2021



Accreditation Procedure

for Inspection Bodies

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1. Introduction

This document defines the procedure that must be followed by the organizations seeking accreditation or are accredited by GAB based on ISO 17020 for offering inspection services to its clients. The general information of accreditation process is contained in this procedure. GAB, on request, will provide any specific information required by the organizations seeking accreditation.

The other applicable procedures and information that are mandatory for the new applicant and the accredited organizations like Use of Logo, Appeals procedures, Fee schedule etc. are also to be considered. These documents can be referred or downloaded from GAB website www.gab.qa.

2. Criteria for Accreditation

2.1 Adoption of Criteria

2.1.1 GAB shall adopt and document the accreditation criteria for Inspection Bodies (IBs) undertaking third party inspection based on international standards and guidelines, supported by the mandatory/any other relevant documents prescribed by the International Laboratory Accreditation Cooperation (ILAC)/Asia Pacific Accreditation Cooperation (APAC).

2.1.2 Accreditation Criteria documents, ISO 17020, and other related policy documents of ILAC and APAC have been adopted directly from international standards or the policy and guidance documents of ILAC/APAC. The international standards are covered by copyright laws. Therefore, these are not available as part of the application pack. For such documents, only the reference number and issue level are given. The applicant/accredited bodies need to procure such documents either from the national standards body or the International Organization for Standardization (ISO) directly or through their authorized sources. The policy and guidance documents of ILAC/APAC are available on the website of ILAC <https://ilac.org/>

2.2 Amendment to the Criteria

The Criteria for accreditation and the related documents may be amended and shall be taken up for amendment based on following conditions individually or severally:

- Any change in the International standards and guidelines,
- Any change in the ILAC/APAC documents for implementation of international standards and guidelines,
- Feedback from the Peer Review assessment team that warrants amendment,
- Feedback from the implementation of the criteria,

- Any other reason as deemed fit by GAB,
- GAB shall approve the amended criteria after completion of any one or more of the consultative processes,
- Seek the advice of the appropriate Committee and/or personnel, if any,
- Views of the Inspection Bodies undertaking inspection activities before approval of the amendment, and,
- Seek public comments on the proposed changes through the Members of Advisory Board of GAB and other representative bodies as GAB may deem fit.

The issue status of the Criteria documents shall be identified by month and/or year of the issue.

2.3 Communication of changes to the Criteria

2.3.1 Any change in the accreditation criteria shall be notified to the accredited/applicant IBs within a suitable time frame for implementing the modified criteria. Any transition policy announced by ILAC/APAC would be adopted by GAB and communicated to the IBs. The accredited IBs shall communicate their objection, if any, in writing within (30) thirty days of the receipt of the amended criteria. If the communication is not received within (30) thirty days, it will be presumed that the accredited IBs are willing to adopt the changed criteria.

2.3.2 The implementation of the changed criteria shall be verified during the subsequent onsite assessment of each IB. In the event of any major change in the criteria, GAB reserves the right to carry out an additional assessment or add additional man-days with the scheduled onsite assessment and the fee of such assessment visit/additional man-days as per published rates shall be borne by IBs.

2.3.3 If an accredited IB is not willing to adopt the changed criteria, it can opt out of the accreditation scheme and the accreditation is withdrawn with effect from the date of the implementation of revised criteria. The accredited IB in such cases shall forfeit their right to get the refund of the paid fees and shall clear all its outstanding payment before opting for withdrawal of accreditation.

3. Accreditation Process

3.1 General

GAB has decided to provide accreditation services to Inspection Bodies (IBs) established as legal entities and providing inspection services in accordance with the international standards. It is expected that the bodies applying for accreditation would be registered legal entities as per applicable laws within their economies and can be sued in their own names. Any exception made regarding legal status would be only by a specific decision of GAB, keeping in view the legal provisions in the economy in which the IB is established as a legal entity.

3.2 Scope of accreditation

3.2.1 The scope of accreditation for the IBs followed by GAB are adopted as defined in *Annex 1*.

3.2.2 To apply for accreditation as per ISO 17020, applicant IB shall demonstrate competence and knowledge of carrying out and witnessing the specific inspection activity for all items applied under each scope sector. Applicant IB shall ensure that the competence requirements and other specific requirements are built in its management system standard in line with ISO 17020, applicable standards, and ILAC/APAC documents.

3.2.3 Any additional explanation needed by the applicant is provided by the Director, GAB, or nominated person on behalf of GAB, on receipt of a specific request for the same, including necessary explanations on the specific inspection scopes of accreditation, Type and range of inspection, method, and standards for inspection.

3.3 Application for Accreditation

3.3.1 IBs interested in getting accredited by GAB for the inspection activities performed can apply for accreditation in the prescribed application form for the specific scopes that can be downloaded, from GAB website.

3.3.2 The following documents that form part of the application package are available on the website of GAB:

- Application Form
- Fee Schedule
- Accreditation Criteria
- Accreditation Procedure
- Use of Accreditation Symbol by IBs
- Copy of the accreditation agreement
- Blank copy of the Cross-Reference Matrix

3.3.3 Before applying for accreditation, the applicant body must have met the following conditions:

- Has operated the inspection services for at least (6) six months as a minimum,
- Has completed one Internal Audit against the applicable criteria for accreditation,
- Has completed one Management Review, and,
- Has performed inspection related to all scopes requested for accreditation.

3.3.4 The completed application form for accreditation must be duly signed by the authorized representative/s of the organization seeking accreditation and forwarded to GAB along with the following,

- a. Application fee (refer to section 10),
- b. A completed Cross Reference matrix for clearly indicating the clause numbers and the reference number/name of the document that addresses the requirement of the applicable standard,
- c. Complete documented management system for which accreditation is being sought. The documented system must include all documents that have been referred by IB in the Cross-Reference Matrix. (The documents may include quality manual, procedures, work instructions, guidance documents, formats etc.), and,
- d. Evidence of the documents and records relating to the completion of internal audit and Management review (submitted along with the application package or are made available electronically).

GAB reserves the right to seek information on the antecedents of the owners/those managing aGAB reserves the right to seek information on the antecedents of the owners/those managing activities of IB before deciding to accept the application for further processing.

If any adverse decision is made on the acceptance of application, GAB will communicate the reason for the adverse decision of non-acceptance of the application. The applicant can appeal against such decision.

The application fee is non-refundable except when the application is rejected by GAB. Once the application is accepted the application fee is non-refundable. Normally, the acknowledgement of the receipt of the application would be communicated within a week of receipt.

3.3.5 The applicant must also enclose the required information and documents as specified in the application form and submit the same with its application.

3.3.6 The application is reviewed by GAB secretariat for completeness, clarity of accreditation requirements and the capability of GAB to provide the services. Any mismatch is clarified, and the outcome of the review is communicated to the applicant regarding acceptance of the application for further processing, or to complete any further requirements identified during the review.

3.3.7 In case the application is accepted for further processing, a formal quotation is sent for carrying out the assessment of the applicant body based on the fee schedule. GAB would publish on its website, information about new applications for accreditation, for information and feedback from the industry/other stakeholders. In case any feedback from industry/individuals or stakeholders calls for a review by GAB, the required formalities shall be completed before further processing of the application.

Note: At the request of the IB, applying for initial accreditation, that has been accredited for the same scheme by another accreditation body (AB), MRA member of APAC or ILAC, Director, GAB, may consider the accreditation granted by other AB and reduce the extent of assessment subject to the following conditions:

- a. The HCB shall pay the application fee;
- b. The HCB shall submit its complete documented system;
- c. The HCB shall submit the previous assessment reports of the last accreditation cycle that consist of Document review, initial accreditation/reaccreditation, surveillance assessment (if any), and witness assessments (if any) and;
- d. Record the justification of reduction in the assessment in the contract review and reflect the reduced assessment in the assessment plan.

The decision of extent of reduction in assessment by GAB shall be final.

3.3.8 Further processing of application shall be taken up on receipt of acceptance of quotation and confirmation by the applicant IB that the “agreement for accreditation” is acceptable.

3.3.9 If a preliminary visit is requested by the applicant IB or deemed necessary to effectively ascertain the readiness of the applicant, GAB organizes the same after obtaining the acceptance of the preliminary visit fee by the applicant IB. Such a visit would solely be for the purpose of gaining a better understanding of the operations of the IB and for the IB to better understand the accreditation process and clarify the expectations of GAB as regards the requirements of the standard. The visit may result in communication of findings to the IB. Such a visit would not result in any decrease in the man-days for the initial assessment.

Any scopes that are added following the start of initial assessment process can be included in the assessment, depending upon the stage of initial assessment process and scope applied. Additional assessment time beyond the normal assessment time (*refer Annex 2*) may be required in such situations. For assessment at foreign locations, GAB shall reserve the right to take the assistance of local ILAC/APAC members, preferably MRA members, for assessments at foreign locations. The fee for such assessments shall depend on the fee structure of the local accreditation body. The applicant/accredited IB shall have the opportunity to object to inclusion of specific assessor in the GAB assessment team (GAB-AT) for reasons of conflict of interest. If the inspection body does not prefer to involve such local accreditation body, then the reasons for the same would have to be clearly indicated in writing. GAB reserves the right to share such information with the concerned accreditation body/APAC/ILAC.

4. Preparation for Assessment

4.1 Assessment Programme:

GAB prepares a draft assessment programme for the Initial Assessment as below:

- • Review of the documented system of the IB offsite;

- Assessment of office of the applicant including any critical location/other branch offices/ sub-contractors as per its policy based on risk, and,
- Witnessing of on-site inspections being carried out by the applicant IB for the applied scopes. (Refer *Annex 1* for details)

4.2 Assessment Time:

The normal assessment time for each stage of assessment is given in the *Annex 2*. The draft assessment programme may be prepared in stages as mentioned above depending on the information supplied and number of scopes applied. The clarifications regarding the scopes applied for, competence of IB inspectors available with applicant, etc. shall be provided in advance for finalizing assessment programme; if necessary, the same shall be further verified and confirmed as part of the office assessment.

4.3 Assessment of Branch/Subcontractor:

The central office and some of the branch/sub-contractor's offices shall be covered for the initial assessment based on risk analysis by GAB. These may include all or some of the offices/ sub contractor's offices from where critical activities are performed.

Critical activities shall include:

- Policy formulation and approval,
- Inspection process and/or procedure development necessary for operations,
- Pre-engagement activities, including contract review and approval of the inspection request received,
- Initial approval of inspection personnel or control of their training and personnel records which would also include their selection and appointment for specific inspection,
- On-going monitoring of inspectors and follow-up,
- Application review, and approval of the contract,
- Final inspection report review prior to the issue of inspection report to client,
- Development of policies and procedures, and,
- Resolution of appeals and complaints received by IB.

The inputs for the assessment programme shall be discussed with the authorized personnel of the applicant IB to ensure an effective assessment plan at each stage.

4.4 Appointment of the GAB assessment team (GAB-AT)

4.4.1 The GAB-AT, consisting of a Team Leader, member(s), and technical expert(s), if needed, is identified by the Director, GAB, from the pool of assessors and technical experts maintained by GAB. The GAB-AT for each stage of the initial assessment normally consists of two members. The additional members will depend on the different scopes applied by the applicant. The team for Witness Assessment will normally have as many members in the team as the number of inspectors of the applicant IB. GAB-ATs may include Observers and/or Trainee Assessors.

4.4.2 The names of the members of GAB-AT, along with their CVs and details of any past/current affiliations/relationships, shall be communicated to the applicant IB giving them enough time, to raise any objection against the appointment of any of the team members. Any objection by the applicant IB against any of the team members must be accompanied in writing with adequate grounds for the objection. The Director, GAB, will evaluate the objection and decide whether to change the team member or to overrule the objection raised by the applicant body.

4.4.3 The decision of GAB on the team members and the number of team members for any stage of accreditation assessment shall be final.

4.4.4 After acceptance of the GAB-AT by the applicant IB, the GAB-AT is formally appointed.

4.4.5 Efforts are made to ensure that the team leader is not changed throughout the initial assessment process. If there is any change in the composition of the team members, the same shall be communicated to the applicant IB for their acceptance.

4.4.6 The assessors/experts of GAB are bound by confidentiality and declared absence of conflict of interest with the IB.

4.5 Assessment Plan

4.5.1 An Assessment Plan for the onsite office assessment shall be prepared by the Team Leader of the GAB-AT based on the draft assessment programme agreed by the Director, GAB, and the applicant/IB.

4.5.2 For initial accreditation of IB, the minimum number of witness assessments required to be undertaken shall be in accordance with the *Annex 1* on Witness assessments.

4.5.3 For witness of IB personnel, the Team Leader of the GAB-AT may identify the applicant IB's inspectors that GAB-AT would wish to observe during the witness of inspection being performed by inspectors of applicant IB, as per *Annex 1*.

4.6 Document Review

4.6.1 The applicant IB's documents shall be reviewed by the GAB-AT for compliance to the accreditation criteria including the specific requirements of the management system for which the IB has applied. GAB may advise the applicant IB to submit the required set of documentation for the assessors, in electronic form. The documentation includes manual, procedures, formats, checklists, guidance/guides, instructions, or any other documentation which demonstrates compliance to the accreditation requirements.

4.6.2 A Document Review Report (DRR) in the Cross-reference matrix indicating the level of compliance and deficiencies in the documentation against the accreditation criteria is forwarded by the Team Leader to the applicant IB for its comments and corrective actions to achieve compliance. If substantial changes in IB's documentation are required based on the first review, a decision regarding a 'second review' of documents shall be taken by the Director, GAB.

4.6.3 The applicant IB shall be informed if a 'second review' is needed in view of the substantial changes and the time period for submission of documents for the second review. The second review shall be charged to the IB.

4.6.4 GAB secretariat may decide to conduct preliminary visit in case the need is felt instead of conducting a second review.

4.6.5 After document review, GAB would decide about the onsite visit and total time required in terms of man-days which would also include time required to review the outstanding documentation issues. Alternately, where required a preliminary visit would be planned as referred in Clause 3.3.9.

4.6.6 The Applicant IB shall ensure that the corrective actions for deviations observed during document review exercise are completed in a maximum time of (90) ninety days. Any extension of this time limit would need a justification and be approved by the Director, GAB.

4.6.7 In case the above condition is not met with, the application shall be liable to be rejected.

4.6.8 Applicant IB shall pay for document review charges.

4.7 Onsite Office Assessment

4.7.1 The assessment plan for the onsite office assessment shall be agreed to between GAB-AT and applicant IB.

4.7.2 The head office of the IB shall be assessed by GAB. In addition, assessments shall be conducted at other office sites/sub-contractors and any other locations based on risk analysis conducted by GAB.

4.7.3 During the office assessment, GAB-AT shall evaluate the implementation of IB's management system as per requirements of ISO 17020 along with the related standards and documents as mentioned in the accreditation criteria.

4.7.4 In cases where the IB seeks accreditation to specific scopes, requirements and regulation, these requirements shall be additional to accreditation requirements as specified in 4.7.3 above.

4.7.5 Wherever needed, to demonstrate the competence of the applicant IB, the applicant IB may submit documents and records of inspections conducted by the applicant IB with accreditation from other accreditation bodies who are ILAC or any regional MRA signatories.

4.7.6 During the office assessment, the Team leader shall confirm that applicant IB's declarations are correct including their declared branch offices and sub-contractors for confirming critical activities involved. In case information collected during the office assessment requires inclusion of other locations in the assessment programme, including any foreign location, the applicant shall be informed, and the assessment programme shall be modified to cover such locations. Subsequent monitoring at these offices/new locations shall depend on the nature of activities carried out by them and the extent of control demonstrated by the applicant IB.

4.7.7 During the assessment or on demand at any time, the applicant/IB shall provide unrestricted access to the locations and documents that pertain and/or relate to the inspection process and the scope applied for.

4.7.8 GAB-AT shall explain the non-conformities/concerns observed during the office assessment at the end of assessment in the closing meeting. The non-conformities/concerns shall be provided electronically, in the prescribed format in writing, to the applicant IB for corrective action plan and further action. The applicant IB shall respond within stipulated timeline with the root cause analysis, and corrective action plan in response to the NCs. The time required for the closure of the non-conformities and concerns would be as per requirement as specified in this procedure. GAB-AT also provides an opportunity for the applicant IB to ask any question about the findings and its basis during the closing meeting.

4.7.9 In case of any disagreement on the non-conformities/concerns, the IB may escalate the matter to Director, GAB. The decision by Director, GAB, in such a case shall be final.

4.7.10 The Team leader shall send a draft report to the applicant IB, including details of the recommended witness assessments, as per the guidelines of GAB.

4.7.11 Based on the Office Assessment report and the nature and type of non-conformities/concerns issued, GAB shall advise, at this stage, whether to await completion of the corrective actions to the non-conformities/concerns or to proceed with the witness assessment of inspections scheduled to be carried out by the applicant.

4.8 Onsite Witness Assessment

4.8.1 Witness assessment selection and planning shall be as per *Annex 1* for each scope. The number of required witness assessments is determined by the scope of the accreditation applied. The witness assessment team, nominated by GAB, shall carry out the witness assessment of the inspection as per the IB's plan.

4.8.2 Witness Assessments are required for scopes applied for accreditation as defined in *Annex-1*.

Note 1: For all witness assessments, the applicant IB shall provide, before proceeding for the inspection, as a minimum, details of client and inspection team that will include, a) Application from client, b) Review of the application, contract review, inspection time allocated c) Inspection team nomination, d) Evidence of evaluation and approval competence of the inspectors in the team, including a copy of the CV of inspectors, e) inspection plan, f) inspection procedure and g) applicable standards, Inspection standard (ITP or QAP), Drawings etc. h) any other document requested by GAB-AT.

Note 2: GAB-AT may request for additional documents for review on case-to-case basis, for offsite review.

Note 3: In addition, applicant IB shall provide details of the location and means of reaching the site(s) for effective planning and preparation of witnessing of inspection activity.

4.8.3 All witness related documentations should be received by GAB-AT at least a week before the scheduled onsite dates, to enable GAB-AT to do the offsite review and prepare itself. Specific scope related competence of the inspectors shall be assessed by GAB-AT during witness assessment(s).

4.8.4 The applicant/IB shall include all inspection activities related to the scope of inspection call in the inspection plan. All the witness assessments, collectively, shall demonstrate the ability of the applicant/IB to carry out inspection under different scopes to ensure that the requirements of the applicable standard of accreditation and the regulatory requirement of the specific scope for which the witness assessment is planned/conducted, are met.

4.8.5 A physical or virtual closing meeting may be held on completion of witness assessments where the applicant/IB shall be explained and communicated the non-conformities/concerns observed in writing for corrective action as per the guidelines established by GAB. The team also provides an opportunity for IB to ask any question about the findings and its basis during the meeting.

In case of any disagreement on the non-conformities/concerns, the IB may escalate the matter to the Director, GAB. The decision of Director, GAB, in such a case shall be final. Applicant/IB shall submit its inspection report along with the inspection team's observations within (7) seven days to GAB-AT.

4.8.6 GAB-AT shall finalize the witness assessment report and non-conformities/concerns based on the onsite visit/offsite observations, and the IB's inspection report. GAB-AT reserves the right to issue additional non-conformity or escalate the concern to non-conformity, based on the inspection report. Such changes shall be reported to the applicant IB as well as mentioned in the Witness assessment report. GAB shall base its overall decision on the witnessed inspection according to its assessment.

4.9 Assessment Report

The GAB-AT shall prepare a report at each stage of the assessment – document review, office assessment, branch office assessment, and witness assessments. Non-conformities and concerns, if any, shall be communicated to the IB representative(s) at the end of each assessment, in writing.

The draft assessment report for each assessment shall be sent by GAB-AT within 10 days of the assessment to the IB. If no comments are received within (7) seven days of sending the report, then the report is considered as acceptable to the IB and is deemed final. For any comments received on the report, GAB-AT shall try to resolve them within (10) ten days. GAB-AT shall submit the report at the end of this period along with unresolved comments from IB to GAB, who would review and/or coordinate, as needed.

4.9.1 For initial accreditation, after completion of various stages of assessments, GAB-AT Leader shall prepare Final Assessment Report based on the Document Review report, Office Assessment(s), and Witness assessment(s) with the recommendations to GAB.

4.9.2 The assessment report shall be prepared and include the following:

- details indicating the level of conformity of the inspection body's management system against GAB accreditation requirements,
- the non-conformities observed during various stages of the assessment and actions taken by the inspection body on the non-conformities,
- Recommendations of GAB-AT, and,
- The scope of accreditation recommended based on the assessments.

4.9.3 The report shall be prepared as per the laid down guidelines and criteria by the team leader/team members in the prescribed formats.

4.9.4 This draft report would be sent to IB for review and comments. In case the report sent to the applicant IB contains any difference from the information presented to the applicant IB by the GAB-AT at the closing meeting (of each stage of assessment), the same is highlighted and the explanation of the differences shall be provided.

4.9.5 The final assessment report would be reviewed by GAB in cases of initial assessment, reassessment, and scope extension. The objective of review of assessment reports is to

ensure that the report is as per laid down criteria and guidelines and changes are made where necessary. The modified report, if any, is shared with IB.

4.9.6 Applicant IB may support its case with the assessments undertaken on the applicant by other accreditation bodies especially ILAC MRA Members. Director, GAB, shall ensure a detailed review, on a case-to-case basis, and place a report on the same to the Accreditation Committee. The *Annex 3* provides norms for using other Accreditation Body's reports for the grant of scopes based on such reports.

4.9.7 In the event of delay in getting witness assessment scheduled for different scope sectors applied for, the applicant IB may apply in writing to the Director, GAB, for "Partial Assessment of available scopes". The Director, GAB, shall have the right to accept or reject the request.

4.10 Time Period for Assessment Process

4.10.1 A typical assessment time for various assessments of the accreditation process is given in *Annex 2*. Accreditation process for initial assessment should be completed within one year from the date of acceptance of application failing which the application is liable to be rejected.

4.10.2 In the event that the process is not completed within one year, due to delays/deficiencies on the part of the applicant, an extension of one year may be given depending on the results of past assessments and/or applicant body's assessment experience in other inspection schemes and/or if the applicant/IB is accredited by other accreditation body.

4.10.3 The process of closing the non-conformities/concerns and verification of corrective actions shall be completed in the specified time. If the applicant IB delays the process of satisfactory submission of corrective actions beyond the limits specified, GAB shall have the right to reject the application. The fees paid by such applicant is non-refundable.

4.10.4 Applications pending over 2 years shall be reviewed by GAB for appropriate action including closure. Any extension of time shall be an exception.

4.11 Accreditation Decision

4.11.1 GAB shall submit a summary of assessments and its recommendation for each applicant IB to the Accreditation Committee. The conclusions shall be based on the final assessment report including closed status of non-conformities and concerns as well as any unresolved issues.

4.11.2 The Accreditation Committee is responsible for taking decisions on granting, maintaining, suspending, reducing, or withdrawing of Accreditation.

4.11.3 The decisions of the Accreditation Committee shall be based on the assessment report and other relevant information placed before it. The Accreditation Committee in its capacity shall have the right to ask for any further clarifications on the report and information submitted on the applicant's system and the applicant shall not refuse to provide such information.

4.11.4 Based on the available competence and/or the recommendation of the GAB-AT/secretariat, the Accreditation Committee may decide to restrict grant of accreditation to a part of the scopes applied for by the applicant.

5. Conditions for Accreditation

5.1 Granting of Accreditation

5.1.1 The accreditation is granted to an applicant after the following conditions have been met by the applicant body:

- a. The applicant meets the criteria of accreditation and all non-conformities/concerns found against the criteria of accreditation during assessment have been closed to the satisfaction of GAB-AT,
- b. There are no adverse reports/information/complaints with GAB about the applicant regarding the quality and effectiveness of implementation of inspection system as per the criteria of GAB, and,
- c. The clients of the applicant/IB are satisfied by the conduct of the applicant body and its inspection system.

Note: GAB, on regular basis, may obtain through appropriate mechanism, feedback from a few of the clients of the IBs and other stakeholders to assess the integrity and compliance aspects of the IBs.

- d. The applicant IB has paid all the outstanding dues.

5.1.2 The accreditation shall be granted for a period of 4 years and will be subject to continued satisfactory operation of accredited IB services.

5.1.3 In the event of any adverse issue arising from the reasons specified at points b), c) and d) of clause 5.1.1 above, the applicant body will be given an opportunity to explain its position in writing to GAB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of granting of accreditation based on facts and the results of such presentation.

5.1.4 GAB would publish on its website, the list of accredited IBs with details of address, scope of accreditation etc., for information and feedback from the industry/stakeholders.

6. Accreditation Documents

6.1 Accreditation Agreement:

On being informed about the grant of accreditation, the accreditation agreement shall be signed by the applicant and the applicant shall ensure that the relevant fees are paid.

6.2 Accreditation Documents:

On receipt of the signed agreement and the fee as per the invoice, a set of accreditation documents shall be issued to the applicant body along with the accreditation symbol of GAB.

6.3 Accreditation Certificate:

The accreditation certificate in the standard template shall include GAB logo, the name of IB, address of the premises of IB, unique identification as an accreditation number, the scope of accreditation, and statement of conformity & reference to the accreditation standard.

6.4 Validity of Accreditation Certificate:

The accreditation certificate shall be valid for (4) four years from the date of accreditation decision and the date of granting. The validity of accreditation will be indicated on the certificate.

6.5 Maintaining Accreditation

6.5.1 The accreditation granted to an IB shall be maintained for (4) four years under the following conditions:

- a. The accredited body continues to meet the criteria of accreditation and all non-conformities/ concerns found against the criteria of accreditation during annual surveillance assessment have been closed to the satisfaction of GAB-AT as per this procedure,
- b. There are no adverse reports/information/complaint with GAB about the IB regarding the inspection system as per the accreditation criteria,
- c. The organizations who have received inspection services of the accredited IB are satisfied by the conduct of the IB and its inspection activities, and,
- d. The accredited IB has paid all the outstanding dues.

6.5.2 In the event of any adverse issue arising from the reasons specified at clause 6.5.1 b) c) and d) above, during its accreditation period, the accredited IB shall be given an opportunity to explain its position in writing to GAB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of maintenance of the accreditation based on facts and the results of such presentation.

6.6 Surveillance Assessment

6.6.1 To ensure that each of the IB accredited by GAB continues to comply with the accreditation requirements, a surveillance assessment (at the office) shall be carried out annually.

6.6.2 The surveillance assessment shall be consistent with the initial assessment and includes office assessment at head office every year and some of the locations performing critical activities based on risk analysis.

6.6.3 All the branch offices/sub-contractors performing critical activities will generally be covered under assessment during one accreditation cycle as per the assessment programme but may be reduced based on risk analysis. Offices other than those performing critical activities may also be assessed.

6.6.4 All scopes for which the IB has been accredited shall be witnessed during each accreditation cycle. IB shall provide GAB with complete information on its forthcoming inspection activities, to enable GAB to choose and plan witness assessments. Witness assessment planning shall be based on complexity, number of inspections carried out per scope, amongst other things as described in *Annex 1*.

6.6.5 Assessment programme for the IBs shall be updated annually based on risk analysis, surveillances and witness assessments planned, and scopes witnessed.

6.6.6 The request of other accreditation bodies for Cross-frontier assessments may be clubbed with GAB assessments as requested as per given scope of activities. Assessment plan shall be made accordingly.

6.6.7 Witness assessments, as part of the surveillance, shall be conducted separately based on (6) six-monthly data on number of inspections performed by IB.

6.6.8 The witness assessment programme shall be based on:

- resources available with the accredited IB,
- number of inspections carried out by IB with GAB accreditation for every scope,
- spread of locations,
- single or group facility/projects, complexity and risks involved,
- stakeholders concern and the extent of control demonstrated by the IB and observations of the office assessment,
- Complexity of the scope (refer to *Annex 1*), and,
- specific client organizations or inspectors may be chosen for witnessing..

6.6.9 A plan for witness assessments shall be communicated to the accredited IB. The decision of GAB related to number of witness assessments shall be binding.

6.6.10 The number of GAB assessors/experts in the witness assessment team would be generally same as in IB inspection team but decided on case-to-case basis by GAB.

6.6.11 In selection of the client of IB to be witnessed, besides *Annex 1*, GAB will consider the following:

- e. Will normally not witness the same inspectors that have been witnessed earlier for the given standard and type, and,
- f. Will normally not witness a client facility under inspection, which has been witnessed earlier.

6.6.12 The first surveillance assessment shall be conducted within (9) nine months from the date of initial accreditation. However, the accredited IB, for valid reasons, may seek a postponement of the assessment for a maximum period of (3) three months. Further surveillance assessments would be carried out every (12) twelve months.

6.6.13 For deferring the surveillance, the accredited IB shall give a written justification and obtain the approval of Director, GAB. It shall be ensured that the gap between two consecutive assessments shall not, normally, exceed (15) fifteen months.

6.6.14 The Surveillance Assessment Report and non-conformity reports of each of the surveillance assessment shall be forwarded to the accredited IB by GAB-AT for taking corrective action as per the laid down criteria for the maintenance of accreditation.

6.6.15 In the event of any critical and or major non-conformity that can affect the IB process, the Director, GAB, shall inform the accredited IB and shall call for a time bound corrective action plan. IB shall be liable to suspension of accreditation keeping in view the seriousness of the non-conformities. The decision for an additional follow up visit to verify the implementation of the corrective action plan as committed by the accredited IB shall be taken by the Director, GAB, in consultation with the Team leader of the GAB-AT. Such decision shall be binding on the accredited IB. The cost of the additional visit shall be borne by the accredited IB. If the accredited IB has not demonstrated evidence of completion of the corrective action agreed as per committed time period, Director, GAB, shall prepare a status report and submit it along with the summary of the assessment report to the Accreditation Committee for further decision on suspension or reduction or withdrawal of accreditation.

6.6.16 If no critical or major non-conformity is observed during surveillance assessment, the surveillance assessment report shall be reviewed at GAB secretariat and decision of continuation of accreditation shall be communicated to IB as part of the surveillance assessment report.

6.6.17 The frequency of surveillance assessments may be increased based on the type and nature of non-conformities observed, complaints received, market feedback etc. The accredited IB shall be informed of the reasons for any change in the frequency.

6.7 Other Surveillance Activities

6.7.1 GAB Secretariat may call for information on accredited inspection reports issued on a quarterly basis. The GAB Secretariat would have review some of the reports as a sample and seek clarification, if any. If a clear deviation from the requirement of the standard is established, then such findings would be raised as non-conformities requiring the accredited IB to respond. IB would bear the cost of such reviews.

6.7.2 If the surveillance assessment indicates satisfactory operation of accredited IB, then a reduction in normal witnessing could be considered. If, however, the surveillance assessment reveals unsatisfactory operation of the accredited inspection activities, then GAB Secretariat

would advise actions to be taken which could include a special office assessment, intensified witnessing, witnessing at specific organization which revealed unsatisfactory operation etc.

6.8 Extension / Reduction of the scope

6.8.1 Extension of the scope shall be allowed as explained in *Annex-1*.

6.8.2 Where scope extension is requested during the initial/re-accreditation stage, the request should be made well in advance of the office assessment. Alternatively, GAB may advise the applicant IB to undertake the assessment separately. GAB will undertake the Scope Extension Assessment off-site/on-site review, as decided on case-to-case basis.

6.8.3 Scope Extension assessment quotation shall be agreed prior to undertaking the assessment and shall be charged as per prevailing fee structure. The invoice for Scope Extension assessments is sent to the accredited IB. Further action related to fresh certificate of accreditation, website update, etc. shall be initiated only on timely payment of fee for the extension visit. The procedure followed for the assessment and decision for extension of the scope is similar to the initial assessment as described in this document.

6.8.4 GAB will undertake the reduction of the scopes based on following situations,

- The accredited IB may like to reduce their scope of accreditation voluntarily,
- In case of inadequate resources and competence as observed during assessments or otherwise,
- In case accredited IB is placed under partial suspension on account of inadequate resources or due to inadequate competence, and,
- The cases for extension and reduction of scope shall be submitted to the Accreditation Committee for decision.

6.8.5 GAB would publish information about any extension or reduction in the scope and sector of accreditation on its website for information of the industry/other stakeholders.

6.9 Re-accreditation

6.9.1 The accredited IB shall apply for re-accreditation (6) six months prior to expiry of accreditation.

6.9.2 The re-accreditation process followed shall be as per Initial Assessment including Document Review in accordance with the relevant sections described in this procedure.

6.9.3 The office assessment should be organized at least (3) months prior to expiry of accreditation. If the assessment is not organized by the accredited IB timely to be able to resolve the non-conformities/concerns, it could result in withholding re-accreditation.

6.9.4 The accredited IB shall also be required to complete the minimum witness assessments as per GAB guidelines and scope during the previous accreditation cycle.

6.9.5 On completion of the re-assessment, the accredited IB shall initiate the root cause analysis and take corrective actions on the identified non-conformities and concerns, if any, and complete all actions within defined timeline as per GAB criteria to ensure closure of all such non-conformities and concerns. The GAB-AT shall prepare a report of all the aspects of the assessment of the office and witness assessments with recommendations. The assessment report is made in the following parts stating:

- Changes in the accredited IB and its system,
- Non-conformities/concerns observed during various stages of the assessment, including witness assessments including the information on closing of the NCs and Concerns, and,
- Level of conformity as assessed for the IB's management system against accreditation requirement.

6.9.6 The re-accreditation assessment report shall be prepared by the team leader as per accreditation criteria in the requisite format. The Director, GAB, presents the report of the reaccreditation assessment with the corrective actions proposed and taken by the accredited IB to the Accreditation Committee for a decision. In case of minor NCs, acceptance of the proposed corrective action shall be adequate for making a recommendation for maintaining accreditation by GAB-AT.

6.9.7 If the decision by the Accreditation Committee is to grant re-accreditation, a fresh set of accreditation documents shall be issued to the accredited IB.

6.9.8 The renewal shall be for a period of (4) four years subject to satisfactory operation of accredited inspection activities by the body and reasonable number of GAB accredited inspection reports issued by the IB.

6.9.9 If the decision of the Accreditation Committee is not favorable, it shall be communicated to the accredited IB for initiating appropriate actions including any corrective action. GAB reserves the right to suspend/withdraw accreditation based on the decision of the Accreditation Committee.

6.9.10 All reassessment activities shall be completed prior to the expiry of accreditation. In case there is a delay in decision-making, the accreditation may be continued, if the report of the GAB-AT is satisfactory. The decision of the Accreditation Committee shall be binding on the accredited IB in such cases.

6.9.11 The re-accreditation may be withheld if there are unresolved issues from the re-accreditation assessments and especially if implementation of corrective actions for major/critical non-conformities are incomplete. The withholding of reaccreditation will generally not be for more than (6) six months. If issues are not resolved by IB within this timeline, the

accreditation would be allowed to expire. In such case if IB wants accreditation from GAB after the lapse of (6) six months period, IB shall apply as a fresh applicant. If, however, re-accreditation is granted within (6) six months of expiry, the re-accreditation shall be from the due date and the period from the expiry date to the decision for reaccreditation shall be treated as suspension.

7. Suspension and Withdrawal of Accreditation

7.1 Decision on Suspension and Withdrawal of Accreditation

Accreditation Committee is authorized for taking decisions on suspension, withdrawal of accreditation or revocation of decision of suspension.

7.2 Suspension of Accreditation (Partial or Full)

7.2.1 The IB shall be subject to suspension either fully or partially based on the following conditions (individually or severally):

- a. No/ineffective corrective action in response to the major/critical non-conformities observed during surveillance assessment or reassessment,
- b. Non-payment of outstanding dues,
- c. Any major change has taken place in the legal status, ownership, impartiality etc. without information to GAB,
- d. Any willful misuse of the logo of GAB,
- e. Any willful mis-declaration in the application form,
- f. Any willful non-compliance with the accreditation agreement,
- g. Any non-compliance with the terms and conditions of accreditation including not undergoing GAB assessments within timelines prescribed,
- h. Inability or unwillingness of accredited IB, to ensure compliance to the applicable accreditation standards and inspection methods,
- i. Excessive and/or serious complaints against the inspection activities of the accredited IB,
- j. Evidence of lack of control over the inspection process and or willful non-compliance of its inspection procedures,
- k. Evidence of unethical inspection practices including providing incorrect information to GAB, faking of inspection records,
- l. Non-availability of resources in some of the scopes/technical areas covered under accreditation,
- m. Non-compliance to the revised requirements of the standards before deadline set as per GAB policy and,
- n. Any other situation deemed inappropriate by the Accreditation Committee.

7.2.2 A notice citing reasons and intention to suspend shall be sent to the IB inviting response within (15) fifteen days.

7.2.3 The accredited IB shall be given an opportunity to explain its position in writing to GAB and present its case in person to the Accreditation Committee. The final decision by accreditation committee shall be taken in respect of suspension of accreditation (Partial or full) on the basis of facts and the results of such presentation.

7.2.4 Notwithstanding the above provision for a representation by the IB, the Accreditation Committee may decide to suspend accreditation without any notice if there is sufficient evidence of willful misrepresentation of facts or willful non-compliance to accreditation criteria. The period of suspension shall be formally communicated as per the criteria laid down by GAB.

7.2.5 The information about suspension of the accreditation of the inspection body (partially or full); would be published on GAB website for information of industry/other stakeholders.

7.2.6 IB may seek suspension citing its own reasons on voluntary basis.

7.2.7 The suspension would normally not exceed (6) six months. GAB shall have the right to withdraw the accreditation if the accredited IB does not take suitable corrective action to the satisfaction of GAB-AT appointed to verify the corrective actions, within (6) six months.

7.2.8 For revoking suspension, the accredited IB shall formally communicate to GAB regarding the corrective actions implemented. The suspension shall be revoked after an assessment has been carried out by GAB-AT to verify that the corrective action has been implemented and is effective in eliminating the reasons for suspension.

7.2.9 In the event of part/full suspension of the accreditation, the accredited IB shall be informed and shall be barred from issuing accredited inspection reports for the scopes for which the accreditation has been suspended.

7.3 **Withdrawal of Accreditation**

7.3.1 IB shall be subject to withdrawal of accreditation based on the following conditions individually or severally:

- a. If an accredited body voluntarily relinquishes its accredited status,
- b. If the non-conformities are not appropriately addressed despite suspension for a period of (6) six months,
- c. If no action is taken by the accredited body in response to the suspension on any other grounds,
- d. Complaints are received about the inspection process from its clients and established to be based on facts,
- e. If there is any evidence of unethical conduct or fraudulent behavior, and,
- f. Any situation which is serious enough to warrant withdrawal.

7.3.2 A notice of the intention to withdraw accreditation and citing reasons shall be sent to IB. The IB shall respond within (15) fifteen days.

7.3.3 The accredited IB shall be given an opportunity to explain its position in writing to GAB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of withdrawal of accreditation based on facts and the results of such presentation.

7.3.4 The withdrawal of accreditation shall be formally communicated to IB by GAB.

7.3.5 GAB would publish information about withdrawal of accreditation on its website for information of the industry/other stakeholders.

7.3.6 In the event of decision to withdraw accreditation, IB shall return the original of accreditation certificate and the enclosure of scopes to GAB and to stop using the accreditation symbol of GAB forthwith. The Director, GAB, shall also notify the legal course for initiating any penalty of such misuse if it is reported and found supported by facts and evidence.

7.3.7 Withdrawal of accreditation may have consequences for clients of IB having valid inspection reports. IB shall inform all its clients appropriately regarding the consequences on the accredited inspection reports issued by the IB.

7.3.8 Following withdrawal of accreditation, IB would be eligible to seek fresh accreditation as a new applicant only after a lay off period of minimum (1) one year.

7.4 **Public Information of Suspension or Withdrawal of Accreditation or Withholding of re-accreditation or reduction of scope.**

7.4.1 The information about reduction of scope, suspension (partial or full), withdrawal or withholding of re-accreditation shall be placed on GAB website in the list of accredited bodies. GAB may also make a public declaration by other means, like newspapers, if required. The charges for making the information public through newspapers shall be recovered from IB involved before revoking the suspension or renewal of accreditation.

7.4.2 The information so published in public media will be open for the feedback from the industry/other stakeholders. Any feedback so obtained at any stage of accreditation, shall be addressed by GAB appropriately.

8. **Non-Conformities and Corrective Actions**

8.1 **The Non-conformities observed shall be classified in three categories:**

8.1.1 Critical:

- Any evidence that indicates that the inspection reports issued by the IB may not be based on sound judgment, objective evidence and may not be a true reflection of the compliance with inspection methods and standards.

- Any failure of implementation of inspection activities as per accreditation criteria and raises doubts on the operation and practice of inspection and the results of inspection process being operated by the IB.
- Any evidence that indicates possibility of fraudulent/irregular behavior by the IB, such as issuance of accredited inspection reports without verifying the objective evidence, violation of impartiality requirements indicating an unacceptable threat to impartiality, issuance of inspection reports based on inadequate evidence, or willful overlooking of objective evidence, etc.
- Critical non-conformities shall call for immediate correction and corrective actions by IB based on appropriate root cause analysis. Such actions shall be completed, and non-conformities addressed within (30) thirty days of the date these have been raised by GAB-AT. Critical NC shall be brought to the immediate notice of Director, GAB, by the Team Leader of GAB-AT. IB may be liable for suspension/withdrawal of accreditation with due notice if such NCs are raised even as it takes action to address them. In case the corrective action is not completed within the stipulated time frame, the accreditation may be liable for suspension partially or completely or withdrawal based on the nature of non-conformity.

8.1.2 Major Non-conformities:

- Any evidence that casts doubt on the inspection process and is less severe than in case of the critical (which bring into question the validity of inspection reports issued) and is evident in failure of certain elements of the criteria individually (e.g., absence of liability insurance or internal audit system not working). It may have less direct impact on the inspection system and its results or any minor non-conformities that have not been acted upon within the stipulated time frame. Several minor non-conformities associated with the same requirements or issue may be considered as major non-conformity if it indicates a systemic failure.
- Major non-conformities shall call for the early correction and corrective actions based on appropriate root cause analysis. Such actions shall be completed, and non-conformities addressed within (60) sixty days of the date these have been raised by GAB-AT. In case the non-conformity is not addressed within the stipulated time frame, the accreditation may be liable for suspension partially or completely based on the nature of the non-conformity.

8.1.3 Minor Non-conformities:

- Any evidence that indicates a non-compliance to the accreditation criteria and the application documents, which has limited or negligible impact on the inspection process and its results.
- Minor non-conformities shall be addressed and corrected as early as possible but not later than (3) three months (90 days) from the date these have been raised by GAB-AT.

In case of NCs (Critical, Major & Minor), IBs are required to undertake appropriate root cause analysis before deciding the corrective action.

Note 1: Multiple Minor NCs with related impact on the system of IB shall result in a Major non-conformity based on the judgement of the GAB-AT.

Note 2: NCs remaining unresolved after the prescribed timelines are liable to be upgraded to the next higher category.

8.1.4 Concerns:

GAB-ATs may also raise concerns under the following circumstances:

- Minor gaps/inadequacies observed, in IB documented system or practices, which do not directly amount to non-compliance. However, if no action is taken, they are likely to result in non-conformities,
- Issues observed during witness assessments, which may require further review and assessment of the systems of the IB in the office,
- Findings of minor nature where, in the judgement of the GAB-AT, root cause analysis is not required,
- Issues from documentation review, minor in nature, which have remained unresolved subsequent to office assessment, where the practice of the IB was observed to be complying with the requirements of the standard, and,
- Concerns are findings which do not require the IB to carry out any root cause analysis. It can directly inform the correction/corrective actions it has taken or intends to take (where it would take time). In certain cases, where these are unresolved issues from documentation review, GAB AT may ask the IB to submit the evidence of Corrective actions for the resolution of the concerns. The HCB shall be given two chances/iterations each for review of corrective actions at proposal stage and implementation stage, for closure of non-conformities/concerns. From third chance/iteration onwards, every iteration would be charged for the additional review accordingly (minimum 0.5 man-day as decided on case-to-case basis).

8.1.5 The IB shall be given two chances/iterations each for review of corrective actions at proposal stage and implementation stage, for closure of non-conformities/concerns. From third chance/iteration onwards, every iteration would be charged for the additional review accordingly (minimum 0.5 man-day as decided on case-to-case basis).

8.1.6 The time for addressing the NCs/Concerns shall be reckoned from the day the non-conformities are handed over to the IB.

8.1.7 Non-conformities of critical or major nature shall normally call for a follow up visit either to the office or on-site as per recommendation of the GAB-AT. Such a follow up visit shall be charged as per prevailing fee structure.

8.1.8 During the onsite office assessment, if it is observed that the corrective actions in response to any previous minor non-conformity or concerns, is not effective, the same issue will be raised again by upgrading concern to minor non-conformity and minor non-conformity to major non-conformity.

Note: GAB-AT may also identify opportunities for improvement and include the same in the assessment report for the benefit of IB.

9. Changes in the Accredited HCB

9.1 As part of application for accreditation applicant/accredited IB undertakes to inform GAB within (30) thirty days if any change takes place in its status or operation that affects its:

- a. Legal, commercial, or organizational status,
- b. Organization and management, for example key managerial staff,
- c. Policies or procedures, where appropriate,
- d. Premises,
- e. Personnel, equipment, facilities, working environment or other resources, where significant,
- f. Capability to undertake inspection activities,
- g. Scope/sectors of accredited activities,
- h. Conformance with the requirements of the accreditation criteria,
- i. Addition/Closure/Cancellation of any new branches/sub-contractors, in local or foreign locations where clients are located, or operations related to inspection are performed,
- j. Any complaint/feedback of serious nature received from intended user/ stakeholders on its performance as an IB, and,
- k. Any other force majeure condition rendering accredited IB incapable and unable to discharge its normal functioning.

9.2 On receipt of the information of change in any of the above parameters, the Director, GAB, decides whether a special assessment is necessary, or the change will not affect the operation of the management system for inspection within the accredited scope and sector. If the Director, GAB, recommends a special assessment, such special assessment shall be charged as per prevailing fee structure. The invoice for such special assessment is sent to the accredited IB. The procedure of surveillance assessment is followed for such assessments.

9.3 During regular surveillance the accredited IB shall be required to confirm if there are any changes in its status or operation as mentioned in clause 9.1 above or any other aspect that will affect the ability and capability of IB to perform its inspection activities, since the last assessment. This shall be verified by GAB-AT and included in the surveillance report.

- 9.4 In case an accredited IB is found to have given willful wrong/incomplete declaration, GAB shall initiate suitable action and shall reserve the right to suspend/withdraw accreditation.

10. Fee Payable for the Accreditation Process

- 10.1 The approved fee structure of GAB shall apply for IB accreditation programme. The current approved fee structure is available on the website of GAB.
- 10.2 The total fee shall depend on the actual assessment days and other parameters as specified in the fee schedule. Appropriate invoices with payment terms shall be raised by GAB.
- 10.3 Each accredited IB shall pay annual fee as identified in the current approved schedule. Appropriate invoices will be generated by GAB at the beginning of the financial year.
- 10.4 GAB shall have the comprehensive rights to revise the fee schedule at the end of every financial year.
- 10.5 Travel expenses and local travel shall be paid/arranged by the IB directly. If GAB incurs the travel and local travel costs, a service charge of 10% shall be included as indicated in fee schedule.
- 10.6 GAB shall take the following actions if any applicant or accredited IB fails to pay the fee and charges as invoiced.
- Stop further processing of the application,
 - Does not offer accreditation,
 - Suspend and/or withdraw the accreditation, and,
 - Initiate legal action as appropriate to recover the outstanding dues.
- 10.7 If the applicant IB fails to pay the invoiced fee within (30) thirty days, the application for accreditation will be rejected. In the event of the rejection of the application on account of non-payment of fee, any partial fee paid till date shall not be refunded.
- 10.8 Fees for any assessment on foreign locations carried out by the local accreditation body shall be charged at the current rates of the local accreditation body.
- 10.9 Additional charges may be levied on the applicant IB on account of following and as described in their relevant sections:
- Corrective Actions Review resulting from Document Review,
 - Corrective Actions and Implementation Review resulting from non-conformities beyond two attempts,

- Scope Extension Reviews and Assessments,
- Providing GAB accreditation application documents for the accreditation programme for inspection bodies on specific request, where they are available on GAB's website as well,
- Unscheduled visits or assessments resulting from changes in the accredited system of IB,
- Market surveillance/feedback or complaint/dispute/appeal analysis,
- Foreign location assessment of the client or office of accredited IB, and,
- Any other reason upon the discretion of GAB after consultation with the applicant/IB.

11. Complaints

- 11.1 Any person or body has the right to send a complaint on the activities and actions of GAB and its procedures.
- 11.2 The complaint must be made in writing to GAB with complete details of the complainant and description of the complaint. The complaint shall be handled as per the Complaints procedure.
- 11.3 If the complaint has no details of the complainant or the description is not adequate, GAB shall have the right of dealing with such complaint as deemed appropriate.
- 11.4 If the complaint is against the non-compliance of accreditation criteria by any applicant/IB, then GAB shall encourage the complainant to utilize the procedure for complaints of the respective applicant/IB. GAB may carry out an investigation in accordance with the procedure. If the complaint is resolved without undertaking any travel or additional assessment, no financing shall be needed for such resolutions. If the resolution calls for undertaking travel and assessment, the cost shall be borne by the defaulting party.
- 11.5 The report of the analysis is sent to both the parties along with the invoice as applicable to recover the cost of such complaint analysis.
- 11.6 The Director, GAB, or nominated person shall follow each complaint to conclusion and initiate possible corrective actions.
- 11.7 The Director, GAB, shall maintain record of complaints and corrective actions taken.

12. Appeals

- 12.7.1 The applicant/IB may file an appeal against the decision of GAB to the President of GAB through the Director. The appeal will be handled as per the appeals procedure.

Appeals procedure is made available to the applicant/IB on request.

12.7.2 The Director, GAB, shall keep all the records pertaining to appeals and corrective actions taken by GAB.

13. Public Information & Availability

- 13.1 GAB shall make public announcement of the accreditation scheme, criteria of accreditation, application for accreditation, fee schedule, cross-reference matrix and other related documents on its website and make them available on specific request on chargeable basis.
- 13.2 GAB shall maintain a list of the accredited IB and the applicants on its website. It also makes this information available on request.
- 13.3 This accreditation scheme is open to all applicants within the capability and scope of GAB.
- 13.4 GAB shall make public information about suspension and withdrawal of accreditation.

14. Confidentiality and Disclosure

- 14.1 The information obtained regarding the IB system of the applicant bodies and accredited bodies that are not of the nature of public information shall be kept confidential by all the staff, members of GAB, panel of assessors, experts, and the committee members.
- 14.2 If GAB has to share any confidential information due to the law of the land, the concerned IB body shall be informed (if not prohibited by law) of the extent of disclosure and the body to whom the disclosure has been made.

15. Obligation of Applicant/Accredited IB and GAB

- 15.1 The obligations of the applicant/accredited IBs and GAB are specified in detail in *Annex 4*.

ANNEX 1

ACCREDITATION SCOPES AND WITNESS ASSESSMENTS

1. OBJECTIVE:

To provide guidance on the Scope of accreditation Sectors for the purpose of accreditation and planning for witness assessments.

2 SCOPE:

This Annex applies to the Accreditation of IBs by GAB.

3 RESPONSIBILITY:

Director, GAB, or the nominated person is responsible for ensuring compliance.

4 DESCRIPTION:

4.1 Scope Classification

GAB shall accredit the Inspection Bodies based on the scope sectors for QMS as listed in the document IAF ID-1. However, the scope statement (please refer to the scope of accreditation format for the IBs) will include the following information under every scope,

- Inspection Category,
- Type and range of inspection,
- Inspection standard (shall include number of international standard and year of issue, and or Clients Quality Assurance Plan (QAP) or Inspection and Test Plan (ITP)),
- Location of office from where the inspection is managed.

Note: Please refer to ILAC-G28 for the terms used above.

4.2 Witness assessment for initial accreditation

4.4.1 A minimum of two inspection activities will be witnessed and the witnessing of inspection shall be indicated by GAB after receipt of the proposed scope statement by the applicant. Alternatively, at-least one witnessing of inspection per scope applied will be witnessed.

4.4.2 In case there are no inspection activity available for a particular scope, the scope(s) may still be considered for accreditation based on the available competence with the IB. In such cases, GAB reserves the option to witness the inspection performed for the first client in that scope. It would be the responsibility of the IB to keep GAB informed prior to undertaking inspection in such scopes.

4.2.3 Two witness assessments shall be required as minimum for being accredited as an IB.

4.3 Restrictions in Scopes

Based on the available competence and/or the recommendation of GAB-AT, the Accreditation Committee may decide to restrict grant of accreditation to a part of the scope requested by IB.

4.4 Witness assessments for surveillance

4.4.1 Witnessing is a part of the surveillance and shall be conducted for each of the scope accredited.

4.4.2 GAB may demand to witness a specific inspection activity and/or specific inspector of the IB.

4.5 Other Witness assessment requirements

4.5.1 The GAB-AT may include technical experts, on chargeable basis.

4.5.2 Minimum man-days required for witness assessment shall be decided by Director, GAB, or the nominated person on case-to-case basis.

4.5.5 Documentations supporting inspection activities, competence of personnel with approvals, and basis for approval, procedures, etc. should be sent for offsite review prior to conducting witness assessment.

4.5.6 GAB-AT shall assess IBs process of qualifying and approval of its inspectors involved in the inspection activities.

4.5.7 Where witness assessment is considered unsatisfactory, during any stage of assessment, additional witness assessment shall be conducted in addition to the evidencing closure of findings, where applicable.

ANNEX 2

ASSESSMENT DURATION AND MAN-DAYS

The normal assessment duration would be as follows:

- Document review (Manuals, procedures, other documents as needed) – (3) three man-days,
- Review of corrective actions and revised documents – to be estimated by GAB Secretariat,
- Office assessment – Minimum (4) four man-days, plus additional man-days for different scopes. Need for additional man-days for specific situations would be estimated by GAB Secretariat and informed to IB in advance,
- Witness assessments – depending on the time required for inspection, Minimum one man-day,
- Follow up assessments – To be estimated by GAB secretariat,
- In case of initial accreditation assessment, the preparation of final report by team leader - 1.5 man-day,
- Review of response to NCs – as per document on iterations of responses
- Surveillance assessments – At least (2) two man-days plus additional man-day added for different scope of accreditation,
- Any extension of scope assessment – May require both office assessment and witnessing an estimation of which would be informed by GAB secretariat,
- Branch office/sub-contractor assessment – generally (1) one man-day depending on the activities carried out in the branch.

ANNEX 3**NORMS FOR USING REPORTS FROM OTHER ACCREDITATION BODIES**

a) Background:

GAB, as a member of APAC & ILAC, is obliged to recognize accreditations issued by other MRA signatory accreditation bodies. A provision exists in the MRA procedures of APAC & ILAC for exchange of documents among ABs and to recognize the work done by each other. GAB procedure for accreditation also includes a provision for using reports issued by other accreditation bodies.

Therefore, GAB would consider reports of other ABs who are signatory to ILAC/APAC MRA for the applicable standard.

b) Framework for use of reports from other ABs for initial assessments:

1. GAB would consider use of reports of Document review, onsite office assessment or onsite witness assessment from other ABs.
2. At the contract review stage, GAB would decide whether to carry out only review of the reports or carry out the assessment process like document review and/or, limited office assessment and/or witness assessments to confirm the IB process for inspection before granting provisional accreditation on the basis of the review of the reports provided by the accredited IB of other accreditation bodies who are MRA signatories.
3. GAB would consider witness assessment reports by other ABs and shall treat them at par with GAB witness assessments.
4. Reports of witness assessments should be reasonably current – not older than 2 years on the date of GAB assessment. The scope of the witness assessment should be the same as applied by IB.
5. GAB would follow the ILAC Guidance on exchange of documents among ILAC MRA signatories. The reports would be sought from the AB directly, where necessary, based on the information provided by the IB. It shall be the responsibility of the IB to ensure that the AB concerned releases the reports.
6. The IB shall also confirm that there had been no issues raised by the other accreditation body on inspector competency requirements during their previous assessment.
7. GAB/Accreditation Committee may decide not to use such reports citing clear reasons.

ANNEX 4

OBLIGATIONS OF THE APPLICANT/ACCREDITED IBs

The obligations of the applicant/accredited inspection body are:

- a. The IB shall commit to fulfil continually the requirements for accreditation set by GAB for the scopes for which accreditation is sought or granted including adapting to changes in the requirements for accreditation as and when communicated and shall also commit to provide evidence of fulfilment.
- b. When requested, the IB shall provide such access and cooperation as is necessary to enable the accreditation body to verify fulfilment of requirements for accreditation. This applies to all locations where the activities of IB take place.
- c. The IB shall provide access to its personnel, locations, equipment, information, documents, and records as necessary to verify fulfilment of requirements for accreditation.
- d. The IB shall provide access to those documents that provide insight into the level of independence and impartiality of the IB from its related bodies, where applicable.
- e. The IB shall arrange the witnessing of their activities when requested by GAB.
- f. The IB shall have, where applicable, legally enforceable arrangements with their clients that commit the clients to provide, on request, access to GAB-ATs, with the IB representative, to assess the IB's performance when carrying out inspection activities at the client's site.
- g. The IB shall claim accreditation only with respect to the scope for which it has been granted accreditation.
- h. The IB shall commit to follow GAB's policy for the use of the accreditation symbol.
- i. The IB shall not use its accreditation in such a manner as to bring GAB into disrepute.
- j. The IB shall pay fees by the due dates as determined by GAB and.
- k. The IB shall inform without delay, any significant changes relevant to its accreditation, in any aspect of its status or operation relating to:
 - Its legal, commercial, ownership or organizational status.
 - The organization, top management, and key personnel.
 - Main policies.
 - Resources and locations.
 - Scope of accreditation and.
 - Other such matters that can affect the ability of the IB to fulfil requirements for accreditation.

- l. The IB shall assist in the investigation and resolution of any accreditation related complaints about itself, referred to it by GAB.

Obligations of GAB

- a. GAB shall provide information on accreditation certificate to the accredited IB that shall identify the following:
 - i. the identity of GAB and where relevant, GAB logo
 - ii. the names of the accredited IB and the name of the legal entity, if different
 - iii. scope statement of accreditation
 - iv. locations of the accredited IB and as applicable the inspection activities performed at each location and covered by the scope of accreditation
 - v. the unique accreditation identification of the accredited IB
 - vi. the effective date of accreditation and, if applicable, its expiry or renewal date, and.
 - vii. a statement of conformity and a reference to the international standard(s) and or other normative document(s) including issue or revision used for assessment of the IB

GAB shall make all the above information publicly available. GAB shall also make publicly available, where applicable, information on withholding of re-accreditation, extension of validity of accreditation and suspension or withdrawal of accreditation, including dates and scopes.

- b. GAB shall, where applicable, provide information about international arrangements in which it is involved.
- c. GAB shall give due notice of any changes to its requirements for accreditation. It shall take account of views expressed by interested parties before deciding on the precise form and effective date of the changes. Following a decision on, and publication of, the changed requirements, it shall verify that each accredited body conforms to the changed requirements.



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