



## POLICY FOR THE INTEGRATED ACCREDITATION OF A CONFORMITY ASSESSMENT BODY HAVING MULTI-SITE ACTIVITIES IN MULTIPLE LOCATIONS

### 1. INTRODUCTION

- 1.1 This policy provides the process for the accreditation of multiple sites in multiple locations of a single organization with International Accreditation Service (IAS). The scope of this policy is defined by the requirements based on the relevant standards and where applicable, other normative publications as listed in section 3 of this policy.

### 2. SCOPE

- 2.1 The purpose of this document is to establish a policy on providing accreditation to a facility having multiple sites where same conformity assessment activities are conducted and operating within the same structure, management system and principles. This policy outlines the requirements for eligibility of organizations to benefit from the implementation of this policy. This policy is applicable to only to Calibration Laboratory, Inspections Agency, Medical Laboratory and Testing Laboratory accreditation programs.

### 3. REFERENCES

- 3.1 ISO/IEC 17011:2017, Conformity assessment — Requirements for accreditation bodies accrediting conformity assessment bodies.

### 4. DEFINITIONS

- 4.1 **Conformity Assessment Body:** Body that performs conformity assessment activities and that can be the object of accreditation.

*Note: Whenever the term “conformity assessment body” is used in the text, it applies to both the applicant and accredited conformity assessment bodies, unless otherwise specified (ISO/IEC 17011:2017)*

- 4.2 **Multi-site Organization:** An organization covered by a single management system comprising an identified central function (not necessarily the headquarters of the organization) at which certain processes/activities are planned and controlled, and a number of sites (permanent or temporary) at which such processes/activities are fully or partially carried out.
- 4.3 **Scope of accreditation:** Specific conformity assessment activities for which accreditation is sought or has been granted (ISO/IEC 17011:2017).
- 4.4 **Main facility:** The permanent premises where activities are performed and/or managed by the CAB in relation to its other sites under the same structure.
- 4.5 **Permanent Site:** Site where a client organization performs work or from which a service is provided on a continuing basis.

- 4.6 **Temporary Site:** Site where a client organization performs specific work or from which a service is provided for a finite period, and which is not intended to become a permanent site.
- 4.7 **Satellite Laboratory:** A laboratory(ies) owned (or under contract with) and operated by the same organization as the Main Facility, utilizing the same management system under its accreditation activities, and is managed by the same management as the Main Laboratory

## 5. ELLIGIBILITY REQUIREMENTS

- 5.1 In order to qualify for multi-site accreditation, the main facility and its associated sites must be under the umbrella of a single management system.
- 5.2 A Main facility shall be identified as the 'Main' location that has oversight over the associated sites. The IAS listing for this Main facility (e.g., TL-YYY, CL-YYY, AA-YYY), shall be used as the organization's integrated Accreditation Certificate. The main and associated sites will be issued with separate accreditation numbers to cover all sites.
- 5.3 Each site must be under the direct supervision of the main facility and this relationship must be documented by the CAB, e.g., within the management system manual, or other types of internal documents such as organizational charts, etc.
- 5.4 Each associated site shall be listed on the Main facility's certificate and scope of accreditation. The scope of accreditation for each approved site shall be presented as an annex to the main certificate which is periodically updated as changes occur within the multi-site facilities.
- 5.5 Each site must participate in suitable proficiency testing activities as applicable to its accreditation scope.
- 5.6 Each site shall be issued with a unique accreditation number and information (e.g., TL-YYY, CL-YYY, AA-YYY) as required under ISO/IEC 17011, clause 7.8.

*Note: The Main facility may or may not be conducting technical work with regards to conformity assessment activities (such as testing, inspection, calibration etc.).*

- 5.7 The key items that must be centrally managed by the Main facility across all other Satellite locations are as follows:
- a) Internal Audits.
  - b) Management Reviews.
  - c) Complaints Handling.
  - d) Corrective Actions arising internal improvement processes.
  - e) Basic Operational Processes/Procedures (e.g., Calibration/Maintenance of equipment, Training of Personnel, Risk Assessments, Document Control, Record Control).
  - f) Other operations as deemed appropriate.

*Note: It is understandable that although a single management system is applicable to all sites, there may be site specific processes and regulatory requirements which could vary to reflect the*

*activities performed at each site.*

- 5.8 This organization shall appoint a contact person(s) to be responsible for the integrated accreditation for these following activities, but not limited to:
- a) implementation of the Management system across all locations/sites.
  - b) coordination of the assessments.
  - c) scope expansion requests.
  - d) communication with each location/site.
  - e) financial issues related to accreditation activities.
  - f) maintenance of relevant records to ensure the system is consistent with the Main facility's management processes.
- 5.9 Each site at all locations shall provide IAS with a representative Technical Contact. This must be included in the application form for Integrated Accreditation.

## **6. ASSESSMENT REQUIREMENTS**

6.1 The initial assessment of a main facility will include an assessment of the main facility and all associated sites requested for accreditation. The assessment shall include all the integrated processes, supervision, and management of the other sites' services.

*Note: For the main facility and satellite locations that are already accredited by IAS, the next assessments will be planned and in consultation with the Main facility and due date of next assessment.*

- 6.2 The Main facility's capability and compliance will be reviewed at every reassessment to ensure compliance.
- 6.3 Each site is separately assessed to verify compliance and implementation of:
- a) IAS accreditation requirements and associated policies.
  - b) Organization's internal procedures.
  - c) Regulatory requirements
- 6.4 Technical assessments are performed for each site based on the site's scope of accreditation as approved for that site. A unique report is issued after every assessment of each site.
- 6.5 Any issues identified during the assessment of a Main facility may affect the accreditation status of the satellite locations and vice -versa.

## **7. OBLIGATIONS OF THE CAB AND IAS**

- 7.1 IAS shall be informed within 30 days of any changes affecting the corporate structure, procedures, or processes, for all or any of the sites and/or locations under its accreditation.
- 7.2 Main facility and each of the associated sites shall apply separately to IAS for accreditation for a specific accreditation program, providing relevant information as requested in the application form upon request to IAS.

- 7.3 Application and renewal fees are applicable to each location/site included in the Integrated Accreditation certificate as per the IAS current fee schedule for each Accreditation Program.
- 7.4 IAS shall inform the Main applicant and its sites on the acceptance of their application after all requirements are met in accordance with this policy.
- 7.5 Existing accreditations can be transferred and integrated by sending IAS a written request to the appropriate Program Manager (PM) along with all the relevant applications.
- 7.6 IAS PM reviews each request separately and decides on the eligibility for the organization to have Integrated accreditation.
- 7.7 A CAB having separate accreditations may also apply to transfer these accreditations into an integrated accreditation approach.
- 7.8 Site specific assessment will be scheduled based on current assessment timeframes for existing accredited Conformity Assessment Bodies.
- 7.9 Additional locations/sites can be added at any given point after an application is submitted and successful completion of an assessment activity.
- 7.10 Depending on the request details (refer to section 5 of this policy), a decision shall be taken by IAS, to include (or not) the additional site(s)/location(s) and applicable scopes in the same certificate as the main facility. In such cases, the assessment plan shall follow the current assessment plan of the entity already accredited.

**8. APPLICATION**

The relevant application form can be obtained upon request through the [IASinfo@iasonline.org](mailto:IASinfo@iasonline.org).

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