
International Accreditation Forum, Inc.

IAF Guidance Document

Guidance on Completing Peer Evaluation Reports

For the IAF Multilateral Recognition Arrangement

Issue 1

(FG_PER_1)

Accreditation reduces risk for business and its customers by assuring them that accredited bodies are competent to carry out the work they undertake. Accreditation bodies which are members of the International Accreditation Forum, Inc. (IAF) are required to operate at the highest standard and to require the bodies they accredit to comply with appropriate international standards and IAF Guidance to the application of those standards.

Accreditations granted by accreditation body members of the IAF Mutual Recognition Arrangement (MLA), based on regular surveillance to assure the equivalence of their accreditation programmes, allows companies with an accredited conformity assessment certificate in one part of the world to have that certificate recognised everywhere else in the world.

Therefore certificates in the fields of management systems, products, services, personnel and other similar programs of conformity assessment issued by bodies accredited by members of the IAF MLA are relied upon in international trade. Peer evaluation reports are an important part of the MLA process.

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Guidance on Completing Peer Evaluation Reports For the IAF Multilateral Recognition Arrangement

1 General

1.1 This document provides the guideline for peer evaluation teams to prepare peer evaluation reports.

2 References

The versions of the following documents current at the time of the peer evaluation should be referred to -

2.1 ISO/IEC Guide 61:1996 – General Requirements for Assessment and Accreditation of Certification/Registration Bodies

2.2 IAF MLA Policies and Procedures,

2.3 IAF Guidance on the application of ISO/IEC Guide 61

2.4 EA / ILAC / IAF Key Performance Indicators

3 Requirement of Descriptive Mention

3.1 The list as follows specifies, with a YES the clauses in ISO/IEC Guide 61 requiring a descriptive (“positive”) mention in the report of a peer evaluation. The peer evaluation report shall be prepared in accordance with the requirements specified in this list and relevant clauses of Policies and Procedures for a Multilateral Recognition Arrangement on the Level of Accreditation Bodies and on the Level of Regional Groups, Issue 3 version 3, (FP&P_3v3) (ref no IAF-PL-01-024).

3.2 The MLA Committee, which has been charged with the review of peer evaluation reports, has established an economical method of reporting, without compromising their understanding of the accreditation body under peer evaluation. The items identified as “Yes” have been selected on the basis of importance to the understanding of how the accreditation body addresses the issues of impartiality, independence, competence and reliability.

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.1.1	Non discrimination			
2.1.1.2	Free access			
2.1.1.3	Accreditation criteria			1,6
2.1.1.4	Activity limitations			
2.1.2a	Impartiality			
2.1.2 b	Power for decisions			
2.1.2.c)	Identification of the "management" 1) Performance of ass. and acc. 2) Formulation of policy 3) Decision 4) Supervision of policy implementation 5) Supervision of finances 6) Delegation to committees	Yes	Identify who has management responsibility. If applicable, describe how the functions are delegated and who has day to day responsibility of the 6 items. Provide an organization chart to provide an accurate perspective for the MLA MC. If the accreditation body is part of a larger organization describe the interrelationship.	6,8
2.1.2.d)	Legal status	Yes	Identify the accreditation body's legal status	

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.2e)	<ul style="list-style-type: none"> ● Participation of all concerned parties - in the general structure – principle ● Balance of interests 	Yes	<p>Identify how all parties significantly concerned in the development of policy and principle are enabled to participate.</p> <p>Identify whom the accreditation body has identified as major interests.</p> <p>Describe how the accreditation body ensures that no one party is able to unduly influence the accreditation body.</p> <p>Identify where the structure that safeguards impartiality is documented i.e. in a written constitution.</p> <p>Comment on the effectiveness of the organizational structure in providing impartiality (G.2.1.11).</p> <p>Identify if procedures ensure freedom from undue influence from government and from industrial/financial groupings in the operation of the accreditation body. Describe the effectiveness of the system.</p>	6
2.1.2.f)	Distinction assessment - accreditation			8
2.1.2g	General rights and responsibilities			
2.1.2 h	Liabilities coverage			

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.2 i	Financial stability – if any subsidy	Yes	Describe how the team judged that the accreditation body has appropriate financial stability. Identify the documents and records, which were reviewed.	
2.1.2 j	Sufficient staff (number and competence)			1
2.1.2k	Quality system			
2.1.2l	Distinction accreditation – other activities		Refer to 2.1.2o	6
2.1.2 m	Freedom from pressures	Yes	Describe the conflict of interest processes the accreditation body has in place. Concentrate on senior executive and staff other than those, which may be addressed under 2.2 and 2.3.	6
2.1.2 n	Committees	Yes	This only applies to committees involved in the accreditation process. Describe function and comment on the adequacy and effectiveness of procedures. Describe the conflict of interest processes the accreditation body has in place. Concentrate on staff other than those, which may be addressed under 2.2 and 2.3.	6

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.2o	<ul style="list-style-type: none"> ● Related bodies ● No services related to certification 	Yes	Describe the services provided by the accreditation body. Comment on whether the services have any impact on objectivity or impartiality of the accreditation programme(s) under evaluation.	
2.1.2o (cont)	<ul style="list-style-type: none"> ● Related bodies ● No services related to certification 	Yes	<p>Describe relationship with other bodies and how the relationships relate to accreditation activities. Identify where the relationship is documented. Comment on whether the accreditation body's analysis of the relationship has identified possible conflicts of interest with the accreditation programme(s) under evaluation. Comment on the measures put in place by the accreditation body to overcome any real or perceived conflicts of interest, and their effectiveness.</p> <p>Does the accreditation body provide value adding activities which do not impact on impartiality like: Non prescriptive advice on technical, managerial, quality improvement, promotion of specialized training services, submissions to the government, major client groups, standardization bodies, provision of information to clients i.e. newsletters, web-site, brochures etc,</p>	6
2.1.2p	Complaints, appeals and disputes			

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.3	Subcontracting (in general: e.g. audits) Subcontracting of assessment	Yes	Comment on whether the accreditation body employs subcontracting and the adequacy of the agreement, i.e. arrangements, conflict of interest and confidentiality.	3
2.1.3a	No subcontracting for acc. Decisions	Yes	Comment on whether the accreditation body retains responsibility for subcontracted.	
2.1.3b	Subcontracted body compliance	Yes	Describe the methods employed by the accreditation body to ensure the competency of the body and individuals and that there is no conflict of interest with auditee. Comment on the effectiveness of the process.	
2.1.3c	Consent of the applicant			
2.1.4.1	General management responsibility for quality			
2.1.4.2	Quality system and person in charge			9
2.1.4.3	Content of the Quality Management system and procedures		i) Refer to 2.2 n) Refer to 2.1.6.1	3,4,7,8,9
2.1.5.1 beg.	Conditions for granting, etc.			12
2.1.5.1 end	Request to be informed, by the accredited body, of any intended change			12

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.5.2	Procedures for accreditation etc.			1,
2.1.6.1	Internal audits	Yes	<p>Comment on the adequacy of the procedures in satisfying the requirements of ISO 10011-1.</p> <p>Comment on how the procedures address the following:</p> <ul style="list-style-type: none"> • independence of action and decisions of the (internal) auditor(s); • scope and effectiveness (does the audit system address the most important issues, is a feedback system in place, assessment of on-site activities?) • planing and frequency, covering all fields of activities; • documented results; • correct statement and follow-up of non-conformities raised at previous audits; • improvements due to audit results. <p>Describe if the procedures are effective and the basis for this judgment.</p>	9

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.6.2	Management reviews	Yes	<p>Identify whether the procedures cover the following in an adequate manner:</p> <ul style="list-style-type: none"> • handling of complaints and appropriateness of corrective actions taken • frequency • appropriateness of the system (e.g. identification of main risks; conformity with relevant standards as well as with regional and international guidance) • degree and level of management involvement in management review • commitment to continuous improvement, based on e.g. willingness to change, identification of needs of interested parties, undertaken preventive action, reaction in a constructive manner to criticism by clients or the peer team; <p>Describe if the procedures are effective and the basis for this judgment.</p>	9
2.1.7.1 beg.	External documentation			
2.1.7.1g	Directory of accredited bodies			
2.1.7.2	Documents control			
2.1.8	Records			

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.1.9	Confidentiality			
2.2.1.1	Staff: competence, qualification	Yes	<p>Explain how the body obtains sufficient “resources under its own control”. This should not be restricted to auditors but should also address all aspects of accreditation programme(s) subject to evaluation.</p> <p>There is a variety of ways to secure the necessary resources: full-time staff; part-time staff; external but trained and regularly engaged assessors; experts without formal assessor training; use of regional or international expertise/experts; professional associations or standardisation committees; sectoral committees or ad hoc working groups; volunteers. Address 2.1.3 and 2.2.4 here.</p> <p>Comment on the adequacy and effectiveness of the processes employed.</p>	1, 3
2.2.1.2	Staff: information and records			3
2.2.1.3	Staff: instructions to			3
2.2.2.1 + 2	Auditors qualification criteria	Yes	Describe the adequacy of the auditors competency criteria.	4,7
2.2.2.3	Experts			4,7
2.2.3.1a	Auditors: selection in general	Yes	<p>Describe the adequacy of the procedures.</p> <p>Comment on the adequacy and effectiveness of the processes employed.</p>	4,7

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.2.3.1b	Auditors: initial conduct Auditors: monitoring the performance	Yes	<p>Comment on the adequacy of the procedures for the recruitment and training of personnel (2.1.4.3 i).</p> <p>Comments on training should include both formal and on-the-job training initially and on an on-going basis. What is covered in the induction training.</p> <p>Describe how auditors and training programs are evaluated initially and on an on-going basis, i.e. formal observation, reviewing reports, collecting feedback from assessed entities and informal observations.</p> <p>Is there an on-site component of monitoring performance? How often are individuals monitored on-site?</p> <p>Describe how competency is brought to bear on the monitoring process.</p> <p>Describe the adequacy of the procedures and forms used for this activity and the auditors understanding of accreditation body documentation and international guidance documents.</p> <p>Describe the effectiveness of the process</p>	1, 4,7
2.2.3.2a to e	Auditors: selection for a specific ass.	Yes	Describe how the accreditation body ensures that the skills brought to an assignment are appropriate.	4, 5

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.2.3.2 f	Team members impartiality	Yes	Describe how the accreditation body ensures that there are no conflict of interests between the audit team and the client. Description should address broader issues (related bodies and other activities) when the individuals come from sub-contractors or are contractors. Describe the methods used to establish the effectiveness of the process.	4,6
2.2.4	Auditors: contracting	Yes		
2.2.5.1	Auditors: records			
2.2.5.2	Subcontracted audits: records			
2.2.6	Procedures to auditors			4

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.3.1	Decision	Yes	<p>Describe the decision making process within the accreditation body. In describing the process identify how appropriate competencies are introduced.</p> <p>Does the accreditation body accredit organizations before they can demonstrate that their internal audit and management review are effective and will be maintained (G.2.1.30).</p> <p>Are there procedures in place to stop accreditation from being granted until all nonconformities as defined by G.1.3.1 are closed.</p> <p>Describe how independence and impartiality are assured (G.2.1.13).</p>	
2.3.1 (cont)	Decision (cont)	Yes	Identify the number of files evaluated. Describe whether the process is consistent from client to client, records are clear and adequate to make the decision.	1, 8
2.3.2	Decision: no delegation			
2.3.3	Accreditation documents			
2.3.4	In case of an amendment to the scope Transfer of accreditation			
2.4	Reference to accredited status			

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
2.5	Change in accreditation requirements	Yes	Does the accreditation body make this an obligation on itself? Describe the process and its effectiveness. Give some examples.	
2.6	Appeals, complaints and disputes	Yes	Describe the process for the evaluation of A, C and D. In describing the process ensure to describe how independence is assured in A. Describe the effectiveness of corrective action associated with A, C and D.	
2.7	Records of appeals, etc., by applicant			
3.1.1.1	Information on the procedure			
3.1.1.2	Applicant duties Proficiency testing Certificates & reports			
3.1.1.3	Specific information			
3.1.1.4	Additional information			
3.1.2.1	Official application form			
3.1.2.2	Application content			
3.2.1.	Review of the request	Yes	Describe the process of contract review. Is the process effective and well documented.	

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
3.2.2	Plan			
3.2.3 to 3.2.5	Preparation for assessment Information on the assessors mandate			5
3.2.4	Appeal possibility against an assessor			6
3.3.1	Assessment	Yes	Are the procedures adequate for an effective audit? Were competent individuals used on the audit? Do records held by the accreditation body indicate that the assessments were effective. Does the outcome of the witness activity support the evaluation teams feelings from reviewing the records.	

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
3.3.1 (cont)	Assessment (cont)	Yes	<p>What is the approach/adequacy to multi-sited CBs?</p> <p>What is the approach to the allocation of time to accreditation audits?</p> <p><u>Peer evaluation witnessing</u></p> <p>Were the accreditation body rules applied appropriately and fairly</p> <p>Was the assessment team appropriate from a personal and technical level</p> <p>Was the team able to adequately evaluate the criticality of the findings.</p> <p>Were the nonconformities appropriate?</p> <p>Did records held by the accreditation body support the team selection</p> <p>Was the competence of the client assessed to sufficient level</p> <p>Was the assessment team able to evaluate criticality of findings. Were they appropriate?</p> <p>Did the audit report match the findings of the team</p> <p>Was there sufficient time allocated to the task</p>	5,

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
3.3.2	Witnessing	Yes	<p>Describe the accreditation body's approach to witnessing. Is witnessing undertaken before accreditation is granted.</p> <p>If surveillances are witnessed (because initial assessment or reassessment is not available) does the accreditation body require the CB's surveillance to cover the technical aspects eg. Process control or product realization or design and development, as appropriate?</p> <p>Is sufficient time allocated to the witnessing team to make judgment.</p> <p>How is a non-discriminatory approach assured.</p>	5,
3.4	Assessment report	Yes	<p>Do the assessment reports satisfy the requirements of 3.4.1, 3.4.2 and G.3.4.1?</p> <p>How does the accreditation body assure consistency from one auditor to another?</p> <p>Do the assessment reports provide sufficient information for a reliable decision to be made.</p>	

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Guide 61 Clause	Object	Report	Descriptive Answer – Issues to address when writing report	KPIs – Clause
3.5.1 to 3.5.2	Surveillance and reassessment	Yes	<p>Explain the accreditation body procedure on surveillance and reassessment. Are the periods between visits and the outcomes considered appropriate?</p> <p>Does the accreditation bodys approach to surveillance consider previous experiences, initiatives by the CBs and complexity of scope.</p> <p>Does the accreditation body involve witnessing in surveillance and reassessment.</p> <p>What is the approach to multi-site CBs.</p> <p>What is the approach to reviewing the assessment reports resulting from surveillance and reassessment.</p> <p>Are assessment reports resulting from surveillance and reassessment adequate? Do they provide sufficient traceability?</p> <p>Does surveillance activity address all of the items identified at G.3.5.3 and G.3.5.4?</p>	12
3.5.3	Notification of change			