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CAB/1068A/R

2012-06-07

INTERNATIONAL ELECTROTECHNICAL COMMISSION

CONFORMITY ASSESSMENT BOARD (CAB)

Meeting 31, Boston, 2012-06-11

SUBJECT

Agenda item 10.2.1

Accepted Minutes and Resolutions of the second IEC-ILAC-IAF Steering Committee meeting held in Frankfurt am Main, Germany on 1 May 2012

BACKGROUND

This document replaces and supersedes document CAB/1068/R.

Further to the establishment of a high level tripartite Committee, the parties (IEC-ILAC-IAF) decided to set up a Steering Committee to cover the following Terms of Reference:

- develop a cooperation strategy
- establish working parties to deal with specific issues
- approve changes to the agreed projects and their supporting documentation
- monitor and review agreed projects
- provide assistance to the projects when required
- resolve project conflicts
- make decisions on formal acceptance of project deliverables

One of the best achievements of the tripartite Memorandum of Understanding (CAB/921/DV) was the development of the "Guidance for the Conduct of Unified Assessments in the Electrotechnical Sector". This Guide has been prepared to provide the Assessment Teams conducting Unified Assessment with the basic background on how such Assessments shall be prepared, conducted and completed with the understanding that the Guidance is intended to be flexible. The aim of this document is not to change the rules of procedure of the relevant accreditation body. It is focused on the role of the IECEE technical experts acting as members of the assessment team led by the accreditation body.

The Guide provides guidance on the management of the on-site assessment of Certification Bodies and Testing Laboratories against ISO/IEC 17065 (currently at the FDIS stage, see CABPUB/66/FDIS) and ISO/IEC 17025, respectively. The Guide emphasizes the importance of assessment as a management tool for monitoring and verifying the effective competence and capability in the relevant elements of Conformity Assessments for testing and certification of equipment and components.

As previously noted and as indicated at various points in the text, the use of this Guide may differ according to the size, nature and complexity of the organizations to be assessed, as well as the objectives and scopes of the assessments to be conducted.

This version encloses the "IECEE-ILAC-IAF Guidance for the Conduct of Unified Assessments in the Electrotechnical Sector", currently under review by the IEC-ILAC-ILAF Steering Committee.

ACTION

CAB members are invited to endorse the resolutions.



MINUTES IEC(CAB)-ILAC-IAF STEERING COMMITTEE

SUBJECT

Draft Minutes of the 2nd Meeting of the IEC(CAB)-ILAC-IAF Steering Committee held in Frankfurt am Main, Germany on 1 May 2012.

BACKGROUND

Comments on the minutes can be provided in writing within one month of their circulation. After this time, the minutes will be considered approved, posted on the tripartite web site www.iec-ilac-iaf.org, and circulated to the respective Boards, Committees and the relevant Communities.

ACTION

The Steering Committee is invited to approve the Draft Minutes of the 2nd Meeting by 2012-06-22.



ATTENDANCE LIST

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1. Opening of the Meeting

The Chairman of the Steering Committee, Pierre de Ruvo, welcomed all attendees. He also acknowledged the assistance of the Secretary of the Steering Committee, Regina Robertson and the ILAC Secretary, Annette Dever, in the preparations for the meeting.

The members of the Steering Committee introduced themselves and provided details on their affiliations in regard to the Steering Committee.

The Chairman reaffirmed that the role of the Steering Committee is to take responsibility for approving strategies, identifying new tasks according to relevant inputs, monitoring risks, and ensuring efficiency and timeliness in regard to completion of tasks.

2. Approval of the Agenda

The Steering Committee approved the Agenda. An additional item was requested for inclusion under “other business” by David Smith, IECQ. This related to the adequacy of information available on some accreditation body (AB) websites regarding the accreditation status and scopes of accredited certification bodies.

3. Confirmation of Minutes of the Last Meeting and Action on Matters Arising

The minutes of the last meeting (1st Meeting of the Steering Committee) were accepted as a true record of that meeting. Matters arising from the minutes were noted as having been addressed or included in the agenda for this meeting.

4. To Review the Content of the Tripartite MoU between IEC, ILAC and IAF

It was noted that the work of Task Force 1 in the drafting of guidance on the conduct of unified assessments, has necessitated the making of some minor changes to the MoU signed in 2010.

The reason for this is that Task Force 1 considers that the unified assessment approach can also be extended without major difficulty to scope extensions, surveillance activities and possibly initial assessments. This would further enhance the value of the unified approach to clients.



The MoU currently restricts the work of the Steering Committee to “unified reassessments”. Minor amendments will therefore need to be made to the MoU at section 2, parts c) and d) to incorporate reference to “unified assessments conducted for the purposes of reassessment, surveillance, scope extension and initial assessments”.

It was noted that some other changes to the MOU may also be necessary e.g. to reflect changes in leadership etc.

Resolution1/2012: The MoU will be reviewed to expand the coverage of the unified assessment approach. It will also be reviewed and “refreshed”.

Note: This will be undertaken by the Editing Group composed of Joe Gryn and Regina Robertson.

The revised MoU will be forwarded to the Steering Committee for a brief review period and then sent to the members of IEC, ILAC and IAF for information and comment according to the respective procedures of each organisation.

The aim is to sign the MoU at the ILAC/IAF General Assembly in Rio de Janeiro in October 2012.

5. To Review the Report of TASK FORCE 1 and Approval Process for the Proposed Guidance for Conducting Unified Assessments

Task Force 1 met on Monday 30 April 2012 and considered the draft document “guidance on the conduct of unified assessments”. There was a generally positive response to the first draft but it was agreed that since few comments had been received from ILAC/IAF additional inputs would need to be sought from these two bodies.

A new title was agreed. The new title is “**IECEE-ILAC-IAF Guidance for the Conduct of Unified Assessments in the Electrotechnical Sector.**”

The title uses the generic term “assessments” and thereby allows the application of the document to assessment activities such as scope extensions, surveillance, reassessment, re-location and initial assessment. It also clarifies its coverage to the electrotechnical sector only.

Other significant matters relating to the guidance document include:



- a clear listing of the respective roles of the different bodies involved in the unified assessment process i.e. IECEE provision of technical assessors, the accreditation body role as the lead assessor, the role of the assessment team, the role of the certification body/testing laboratory as initiator of the unified assessment process;
- a statement that the document does not aim to change the rules of procedure of the relevant accreditation body but is focussed on the role of the IECEE technical experts acting as members of the assessment team led by the accreditation body;
- a reference to the upcoming ISO/IEC 17065 replacing ISO/IEC Guide 65, Conformity Assessment - *Requirements for bodies certifying products, processes and services*;
- guidance on preparation of assessment plans to cover both IECEE and AB issues as relevant, allocation of tasks and identification of testing required for witnessing;
- guidance on the preparation of a single report relating to the “unified assessment scope” using the IECEE reporting format.

Resolution 2/2012: The revised document is to be edited and formatted by the end of May 2012, and then sent to the Steering Committee for review and approval for distribution by 2012-06-04.

It was agreed that the document could be offered for voluntary use in its draft form while IECEE, ILAC and IAF go through the process of approval. IECEE will publish the document as an Operational Document, ILAC as Guidance, and IAF as an Informative document.

6. To Review the Report of TASK FORCE 2

Resolution 3/2012: It was agreed that the work of the task force had been completed and that Task Force 2 should be disbanded.

It was also agreed that there needed to be ongoing oversight and maintenance of the website. This would be undertaken through the nomination of webmasters from each organisation. They would be identified on the homepage of the new Website hosted on the IEC Website but administered by the IECEE System.



7. Potential New tasks for the Steering Committee

During the First Meeting of the Steering Committee, a number of possible “second priority” tasks were identified for future consideration for action. These were:

- Procedures for improving “common understanding” and other required documents
- Procedure for handling of unified assessment feedback
- Review of product consultancy and independence document
- How to deal with scope extension assessments in conjunction with the reassessment
- Proposal for common reassessment cycle

These were discussed and it was agreed that three new task forces would be formed to address specific elements of the above list.

Resolution 4/2012: It was agreed that a new **Task Force 3** be formed to consider how to process scope extension assessments in conjunction with re-assessments and how to synchronize the assessment cycles when the cycles are different between the IECEE and AB Members of ILAC-IAF.

The Task Force is also assigned to consider how to optimise contact between IECEE, ABs and laboratories and certification bodies under assessment, with a view to facilitating the possibility of undertaking IECEE and AB activities in such a way as to maximise the possibility of working together.

Note: In the field of the Unified Assessments concerning the IECEx and IECQ the same principles apply.

IEC (CAB), ILAC and IAF are requested to provide nominations by the end of May 2012 to represent their interest in this Task Force 3. Joe Gryn has offered to contribute in this Task Force.

Resolution 5/2012: It was agreed that a new **Task Force 4** be formed to consider the preparation of a document relating to “product consultancy and independence”. This task force would consider the impact of ISO/IEC 17065 on this topic.

IEC (CAB), ILAC and IAF are requested to provide nominations by the end of May 2012 to represent their interest in this Task Force 3.



8. To Review the Results of the Trial Experience of the Unified Assessment During 2010-2011

The Chairman reported that the feedback of participants in the unified assessment approach trial had generally provided positive feedback. The most common issue that was raised though was that the “lead assessor” did not clearly undertake this role as under some circumstances the IECEE technical assessor also occasionally undertook some lead assessor tasks. Comments were also received on the lack of guidance available for the unified assessment and that an assessment plan was not always provided and hence testing was not always available as requested for witnessing.

It was generally agreed that those who had participated in the unified assessment trial should be approached to participate in task forces

9. To decide on the appropriate tools for a common Data Base for Lead and Technical Assessors

The Chairman provided information on the database tool available at IECEE for administering technical assessors. The committee noted that the tool was useful and very professional but that there was no clear need at this time to add Accreditation Bodies lead assessor information or information regarding other IEC C.A. Systems for the purpose of a common Database.

10. To determine the conditions for use of the Accreditation Mark on Test Reports & Certificates

Resolution 6/2012: Due to concerns raised about lack of clarity on the need to use the accreditation mark it was agreed that this matter should be referred to ILAC and IAF to discuss and offer solutions.

Resolution 7/2012: Task Force 5 was formed to address concerns about the lack of clarity and consistency around the use of the accreditation mark when the report or certificate may cover subcontracted work. In many cases a CB may be using an unaccredited, but IEC peer reviewed sub contractor. IEC (CAB), ILAC and IAF are requested to provide nominations by the end of May 2012 to represent their interest in this Task Force 3. Mike LAWSON offered to contribute to this Task Force.



11. To determine the conditions for the endorsement by ABs of the IECEE Proficiency Testing Programmes

The Chairman informed the committee that he had received feedback from one of the IEC proficiency testing providers that some ABs were seeking additional participation in Proficiency Testing programs even when the PT coverage was adequate under the IECEE PT Program.

The committee advised that details of such concerns should first be raised directly with the AB involved and if necessary the regional cooperation of which the AB is a member or ILAC for investigation if justified.

12. Appointment of the Chairman of the Steering Committee

It was agreed that the term of office of the Secretary and the Chairman should be “de-synchronized” to prevent disruption and to allow for continuity.

It was therefore agreed that:

- The Chairman of the Steering Committee be appointed for a period of three years by the Steering Committee, on nomination by IEC(CAB) and/or ILAC and/or IAF.
- The Secretary of the Steering Committee be appointed for a period of five years by the Steering Committee, on nomination by IEC(CAB) and/or ILAC and/or IAF.

It was further agreed that;

If at the conclusion of his term, there are no new candidates nominated for election to the position, the Steering Committee may by specific resolution, outlining the circumstances, decide that the incumbent Chairman and/or the incumbent Secretary be appointed to a further term in that position, and that the Chairman of the Steering Committee shall be an employee or officer of the IEC and/or ILAC and/or IAF or an employee of any IEC C.A. System Member or an employee of any Accreditation Body Member of ILAC and/or IAF.



The position of the Chairman and Secretary should also ideally rotate between IEC (CAB) and ILAC-IAF.

Resolution 8/2012:

The Steering Committee unanimously resolved to appoint the present Chairman, Pierre de RUVO, for another 3 years, this period ending in December 2015.

13. Appointment of the Secretary of the Steering Committee

As noted under Agenda Item 12, the Secretary of the Steering Committee is appointed for a period of five years by the Steering Committee, on nomination by IEC(CAB) and/or ILAC and/or IAF and is eligible for re-appointment once if no other nomination is submitted.

The Secretary of the Steering Committee shall also be an employee or officer of the IEC and/or ILAC and/or IAF or an officer of any IEC C.A. System Member or an officer of any Accreditation Body Member of ILAC and/or IAF.

The position of the Secretary and Chairman should ideally rotate between IEC (CAB) and ILAC-IAF.

Resolution 9/2012:

The Steering Committee unanimously resolved to implement the resolution as quoted under Resolution 9/2012 and to appoint the present Secretary, Regina ROBERTSON, for another 2 years, this period ending in December 2014.

14. Any other business

• **Accreditation Status and Scopes of Accreditation of Certification Bodies**

This topic was raised as a matter of “other business” by David Smith, Chairman IECQ. The concern was that it was not always easy to establish the accreditation status or scope of accreditation of some certification bodies as information available from the accreditation bodies was variable and did not always allow interested parties to establish if certificates issued by CBs were valid.

Resolution 10/2012: IAF will address this matter by reminding ABs of the importance of providing clear, transparent and accessible information on the identities and scopes of their accredited certification bodies.



15. Report from the IEC-ILAC-IAF Steering Committee to the Joint ILAC /IAF Executive (JEC)

The Chairman informed the committee that the major resolutions of the Steering Committee would be reported to the Joint IAF/ILAC Executive Committee (JEC) on 3 May 2012 in Frankfurt am Main.

Secretariat Note: The (JEC) received the Report from the IEC(CAB)-ILAC-IAF Steering Committee with great appreciation and agreed on all Resolutions.

16. Future meetings

It was also confirmed during the JEC meeting that the next meeting of the IEC-ILAC-IAF Steering Committee is scheduled to take place on Saturday 20th October 2012 during the IAF/ILAC General Assembly & Conference in Rio de Janeiro, Brazil.

Note: The IEC (CAB) Delegation is requested to meet on Friday 19th October 2012 for the preparation of the meeting of the Steering Committee, the next day, at the same Conference's center from 12:00 to 17:00. Further details will be provided by Pierre de RUVO in due time.

Outgoing IECEE Chairman, Gosta Fredriksson, announced that he was attending the Steering Committee meeting for the last time and Ron COLLIS, Rockwell Automation as IECEE Chairman elect and future appointed IECEE Chairman, would succeed him in the role of the Steering Committee at the next meeting in Rio de Janeiro. Mr Fredriksson expressed his gratitude for the opportunity to work closely with members of the ILAC-IAF-IEC(CAB) Steering Committee in the crucial stages of its launch. He was pleased to see the progress made in fostering collaboration and expressed his confidence that the Steering Committee would be able to deliver on its vision of strengthening collaboration across global markets, and that future plans were in good hands especially with the current experience, commitment and passion of Committee members. Mr Fredriksson has been instrumental in the Steering Committee's progress thus far and the Committee would like to thank him for his invaluable contribution and wish him all the best in his future endeavours.

17. Close of the meeting

The meeting closed at 3pm.



IECEE-ILAC-IAF Guidance for the Conduct of Unified Assessments in the Electrotechnical Sector

2012-06-05

Guidance for Unified Assessments IECEE-ILAC-IAF Ed.1.0



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About the IEC

The International Electrotechnical Commission (IEC) is the leading global organization that prepares and publishes International Standards for all electrical, electronic and related technologies.
www.iec.ch

About the IECEE

IECEE – Worldwide System for Conformity Testing and Certification of Electrotechnical Equipment and Components.

The IECEE System is a multilateral, international agreement, for the acceptance of test results on electrical products tested to IEC standards and any other standards as approved by the CAB when no IEC standard exists.

IECEE Facilitates Access to Market

A CB Test Certificate is a global passport that allows products to be accepted in all IECEE member countries. It is so well known that global acceptance is a reality, even in countries that are not part of the IECEE community. “One test, one international certificate” opens the doors of the global market.

CB Scheme

The IECEE CB Scheme provides the assurance that tested and certified products meet the strictest levels of safety, reliability and performance in compliance with the relevant IEC International Standards. It helps reduce costs and time to market, eliminates duplicate or multiple testing and offers a high level of confidence for manufacturers, retailers and consumers alike.

CB-FCS

The CB-FCS Scheme for Mutual Recognition of Conformity Assessment Certificates for Electrotechnical Equipment and Components is an extension of the IECEE CB Scheme in that it also includes factory audits and inspections. It goes far beyond product testing and includes a complete quality system and surveillance methods at the factory that manufactures a certified product. This is of interest to manufacturers who need to provide proof that products manufactured in a given factory offer a consistent level of quality over time.

www.iecee.org

About ILAC

ILAC – International Laboratory Accreditation Cooperation

ILAC is the international cooperation of laboratory and inspection accreditation bodies formed more than 30 years ago to help remove technical barriers to trade.

ILAC provides the global perspective and infrastructure that supports the world-wide demonstration of competence and equivalence of testing and calibration laboratories, inspection bodies and other types of bodies serving or supporting such laboratories and inspection bodies through accreditation. Accreditation of laboratories and inspection bodies supports activities within and between economies including trade, protection of health, safety and the environment for the public benefit. Its fundamental purpose is to provide confidence in the competence of bodies supporting these activities.

The ILAC Arrangement is an international, multilateral mutual recognition arrangement for accreditation bodies. The aim of the ILAC Arrangement is to develop a global network of accredited testing, calibration and inspection facilities that can be relied on to provide accurate data. Each accreditation body undergoes peer evaluation according to ILAC rules and procedures prior to becoming a signatory to the ILAC Arrangement. The ILAC Arrangement provides technical underpinning to international trade by promoting cross-border stakeholder confidence and acceptance of accredited laboratory data.

www.ilac.org

About IAF

IAF – International Accreditation Forum

The International Accreditation Forum, Inc. (IAF) operates programs for the accreditation of bodies that provide conformity assessment services. Such accreditation facilitates trade and reduce demands for multiple certifications.

Accreditation reduces risk for businesses and their customers by assuring them that accredited Conformity Assessment Bodies (CABs) are competent to carry out the work they undertake within their scope of accreditation. Accreditation Bodies (ABs) which are Members of IAF and their accredited CABs are required to comply with appropriate international standards and IAF mandatory documents for the consistent application of those standards.

AB signatories of the IAF Multilateral Recognition Arrangement (MLA) conduct regular evaluations of each other to assure the equivalence of their accreditation programs. The IAF MLAs operate at two levels:

- A MLA for the accreditation of CABs to standards – including ISO/IEC 17021 for management systems CABs, ISO/IEC 17024 for personnel CABs, and ISO/IEC Guide 65 for product CABs – is considered a framework MLA. A framework MLA provides confidence that accredited CABs are equally reliable in the performance of conformity assessment activities.

- A MLA for the accreditation of CABs that also includes the specific conformity assessment standard or scheme as a scope of accreditation provides confidence in the equivalence of certification.

The IAF MLA delivers the confidence needed for market acceptance of certification. An organization or person with certification to a specific standard or scheme, which is accredited by an IAF MLA signatory AB, can be recognized worldwide, thereby facilitating international trade.

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IECEE–ILAC–IAF Guidance for Unified Assessments in the Electrotechnical Sector

INTRODUCTION

This Guidance document has been prepared to provide Assessment Teams conducting Unified Assessment with the basic background on how such assessments are to be prepared, conducted and completed - with the understanding that the guidance is intended to be flexible. The aim of this document is not to change the Accreditation Bodies' rules of procedure. It is focused on the role of the IECEE technical experts acting as members of the assessment team led by the accreditation body.

This document provides guidance on the management of the on-site assessment of Certification Bodies and Testing Laboratories against ISO/IEC 17065* and ISO/IEC 17025, respectively. It emphasizes the importance of assessment as a management tool for monitoring and verifying the effective competence and capability in the relevant Elements of Conformity Assessment in testing and certification of electrotechnical equipment and components.

As previously noted and as indicated at various points in the text, the use of this Guidance may differ according to the size, nature and complexity of the organizations to be assessed, as well as the objectives and scopes of the assessments to be conducted.

*Currently at the FDIS Stage



1 Scope

This document provides guidance on the conduct of unified assessments of certification bodies and testing laboratories against ISO/IEC 17065* and ISO/IEC 17025, respectively.

This Guidance was developed considering some elements set in ISO 19011 “Guidelines for quality and/or environmental management systems auditing”, taking into account that for on-site assessments of testing laboratories and certification bodies there are common principles.

2 Reference documents

ISO/IEC 17065	Conformity Assessment - Requirements for bodies certifying products, processes and services*
ISO/IEC 17025	General requirements for the competence of testing and calibration laboratories
IECEE 02-3	Particular Rules of Procedure - Peer Assessment Programme
IECEE OD-2004	Assessment Report for Certification Bodies
IECEE OD-G-2004	Guidance for filling in the NCB Assessment Report
IECEE OD-2005	Assessment Report for Testing Laboratories
IECEE OD-G-2005	Guidance for filling in the CBTL Assessment Report
IECEE OD-2006	Guidelines and information for IECEE Assessors
IECEE OD-2016	Checklist for NCBs
IECEE OD-2017	Checklist for CBTLs
IECEE OD-2040	Common understanding of ISO/IEC 17025
IECEE OD-2044	Guidelines for assessing Risk Management of Medical Equipment
IECEE OD-2045	Guidelines for the evaluation of the Software in Household Appliances
IEC Guide 115	Application of uncertainty of measurement ... in the electrotechnical sector
ISO/IEC 17011	General requirements for accreditation bodies accrediting conformity assessment bodies
ISO 19011	Guidelines for quality and/or environmental management systems auditing

*Currently at the FDIS Stage

3 Preamble and History of the Cooperation

“Unified Assessments” are the cornerstone of the Tripartite Memorandum of Understanding between IEC, ILAC and IAF. The MoU was signed in 2010, with the aim of enhancing the collaboration between these bodies and optimizing the assessments of testing laboratories and certification bodies operating in the electrotechnical sector.

Unified Assessments are intended to benefit common clients of Accreditation Bodies and the IEC Conformity Assessment Systems -- to avoid unnecessary duplication of on-site assessments of testing laboratories and certification bodies, and to provide cost effective services for the benefit of the electrotechnical industry.



- Cooperation between ILAC and the IEC started in the early 2000's. This included a period of witnessing assessments and then joint assessments.
- A Memorandum of Understanding between ILAC and IEC was signed in 2005.
- A Memorandum of Understanding between ILAC and IAF was signed in 2008
- The “New Concept of Collaboration” was launched in 2009.
- The Tripartite Memorandum of Understanding between IEC, ILAC and IAF was signed at the ILAC/IAF General Assembly in Shanghai, People's Republic of China, in October 2010.
- A Steering Committee, including representatives from relevant stakeholder groups was formed; and two small task forces (Task Force 1 and Task Force 2) comprised of relevant members from IEC, ILAC and IAF were also established in 2010.

4 Principal elements of the New Concept of Collaboration and Unified Assessments

4.1 Role of the Accreditation Body

- Appointing the Lead Assessor for the assessment team;
- Selecting technical assessors from the IECEE pool of technical assessors, based on a list provided by the IECEE, to address the objectives of the accreditation body and the IECEE.

4.2 Role of the IECEE

- Providing to the accreditation body a list of technical assessors, according to the IECEE scope;
- Ensuring that the assessment covers the ‘IECEE particular points to be assessed’.

4.3 Role of the Assessment Team

- Conducting a unified assessment in accordance with this guidance document;



- Preparing a single assessment report for the unified assessment scope, utilising the IECEE assessment report format (OD 2004 and OD 2005);
- Ensuring that each party takes responsibility for preparing a report on additional elements outside the unified assessment scope;
- Ensuring that the requirements of both the accreditation body and the IECEE are covered.

4.4 Role of Certification Body and Testing Laboratory

- Taking the initiative to request a unified assessment;
- Notifying both the IECEE Secretariat and the relevant Accreditation Body that they have chosen to have a Unified Assessment. (For example, this may occur as a result of receiving notification of the next IECEE re-assessment or the accreditation body assessment.)

5 Unified Assessment Process

5.1 Appointment of Assessment Team

- The IECEE Secretariat will make a pre-selection of multiple IECEE Registered Technical Experts per category, based on the specified assessment scope, and will provide a list of potential technical assessors together with details of their expertise (OD 2048 - covering education, qualification, experience and training) to the relevant accreditation body.
- The IECEE Secretariat will send a Peer Order Confirmation to the selected technical experts. This should be completed and returned in the normal manner to confirm the acceptance of the assignment. The IECEE Secretariat will also provide a copy of the signed Peer Order Confirmation to the accreditation body.
- The accreditation body will:
 - select from the list of technical experts provided by the IECEE Secretariat those assessors that suit the unified assessment scope;
 - appoint a lead assessor and provide this information to the IECEE Secretariat.
- The IECEE Secretariat will post the usual assessment documentation on the IECEE website and provide the access passwords to the lead assessor and the technical assessors selected by the accreditation body.



- The accreditation body and the IECEE will provide to the appointed lead assessor and technical assessors all information pertaining to their specific rules and procedures, including any other points to be assessed.
- Once this procedure is completed, it is time for the lead assessor to provide other relevant documentation and begin the preparation of the assessment plan in consultation with the technical experts, for final approval by the accreditation body and the IECEE.

5.2 Size of a Typical Assessment Team

The IECEE has specific guidelines for the size of the assessment team, and these are provided here for reference. However, it is understood that accreditation bodies will utilize their own procedures and judgment in deciding on the required number of members on any assessment team.

In general, initial or first-time assessments require a sufficient number of technical assessors, in addition to the lead assessor, with a combined expertise to fully cover the product categories within the assessment scope.

With the understanding that IECEE re-assessments are carried out through a sampling of major testing activities and other selected testing that is indicative of competence, the standard size of the assessment teams for IECEE re-assessments is one lead assessor and one technical assessor.

For a scope extensions requiring an on-site assessment, the assessment team may need to be expanded to include additional technical assessor(s) with appropriate expertise to cover the requested scope.

In case where a new product category within the IECEE System has been provisionally granted, the subsequent assessment may also require additional specialized expertise and the inclusion of an additional technical assessor.

5.3 Length of the Re-assessment

With the understanding that re-assessments are a sampling exercise, and by decision of the IECEE Management Committee, the minimum time required for the IECEE re-assessment is as follows:

- Certification Body: 1 day
- Testing Laboratory: 2 days

For Unified Assessment, the re-assessment time may vary depending on the breadth of the scope to be assessed, and particularly where the scope of accreditation of the testing laboratory extends beyond the IECEE scope and the electrotechnical field.



5.4 Preparing Assessment Plan

5.4.1 Principles

The lead assessor is responsible for the preparation of the draft Assessment Plan on behalf of the accreditation body and the IECEE. This should be provided to the relevant CB/TL in due time before the assessment takes place and have it accepted.

The assessment plan must cover the date(s) and scope of the assessment, the respective roles of each of the assessment team members, and the activities to be witnessed during the assessment. In order to prepare the most appropriate and effective assessment plan the lead assessor should seek assistance from the appointed technical assessor(s).

5.4.2 Preparing for On-site assessment Activities

The assessment plan should be agreed upon between the laboratory or certification body under assessment, the accreditation body, the IECEE and the assessment team. The assessment plan should be prepared with due consideration being given to the current working program of the laboratory or certification body so as to minimize disruption and maximize the capacity of the team to witness the testing or certification competence. The assessment plan should also address the need for coordination of assessment activities between the assessment team and staff of the organization under assessment.

The amount of detail provided in the assessment plan should reflect the scope and complexity of the assessment. The details may differ, for example, between initial and subsequent assessment and should be sufficiently flexible to permit changes depending on e.g. the availability of samples undergoing testing and/or measuring, power supply distribution, functions, sites, areas or activities. Such assignments should take into account the need for the independence and competence of assessors and the effective use of resources, as well as different roles and responsibilities of the lead and technical experts.

The assessment plan should cover the following:

- a) the assessment objectives;
- b) the assessment criteria and any reference documents;
- c) the assessment scope, including identification of the organizational and functional units and processes to be assessed;
- d) the dates and places where the on-site assessment activities are to be conducted;
- e) the expected time and duration of on-site assessment activities, including meetings with the management of the assessed organization and assessment team meetings;
- f) the roles and responsibilities of the assessment team members and accompanying persons (if any);
- g) the allocation of appropriate resources to critical areas of the assessment.
- h) identification of the certification body's representative for the assessment of the laboratory; and if applicable;
- i) the assessment report topics;
- k) logistic arrangements (travel, on-site facilities, etc.);
- l) matters related to confidentiality;
- m) any assessment follow-up actions.



The plan should be reviewed and accepted by the assessed organization, and presented not less than one month before the on-site assessment activities begin. Any objections raised by the assessed organization about the assessment plan should be resolved between the lead assessor and the assessed organization. If necessary the arbitration will be made by the accreditation body and the IECEE. Any revised assessment plan should be agreed among the parties concerned before continuing the assessment preparations.

5.5 Assigning Work to Assessment Team

The lead assessor, in consultation with the assessment team, should assign to each team member responsibility for assessing specific product categories, testing methodologies, witnessing testing & measuring, power supply distribution, functions, sites, areas or activities. Such assignments should take into account the need for the independence and competence of assessors and the effective use of resources, as well as different roles and responsibilities of the lead and technical experts.

Changes to the work assignments may be made as the assessment progresses to ensure the achievement of the assessment objectives.

5.6 Preparing Work Documents

The assessment team members should review the information relevant to their assessment assignments and prepare work documents as necessary for reference and for recording assessment proceedings. Such work documents may include:

- a) checklists and assessment sampling plans; and
- b) forms for recording information, such as supporting evidence, non-conformity reports and records of meetings.

The use of checklists and assessment forms should not restrict the extent of assessment activities, which can change as a result of information collected during the assessment.

Work documents, including records resulting from their use, should be retained at least until assessment completion. Retention of documents after assessment completion is normally three years or between the cycle of two assessment. Those documents involving confidential or proprietary information should be suitably safeguarded at all times by the assessment team members.

The assessment team must be aware that accreditation bodies may have additional requirements for document retention.

5.7 Conducting On-site Assessment Activities

5.7.1 Conducting Opening Meeting

An opening meeting should be held with the management of the assessed organization and those responsible for the functions or processes to be assessed. The purpose of an opening meeting is:

- a) to confirm the assessment plan;
- b) to provide a short summary of how the assessment activities will be undertaken;
- c) to confirm communication channels; and
- d) to provide an opportunity for the assessed organization to ask questions.

The meeting should be chaired by the lead assessor, and the following items should be considered, as appropriate:

- a) introduction of the participants, including an outline of their roles;
- b) confirmation of the assessment objectives, scope and criteria;
- c) confirmation of the assessment timetable and other relevant arrangements with the assessed organization, such as the date and time for the closing meeting, any interim meetings between the assessment team and the management of the assessed organization, and any late changes;
- d) methods and procedures to be used to conduct the assessment, including advising the assessed organization that the assessment evidence will only be based on a sampling exercise.
- e) confirmation of formal communication channels between the assessment team and the assessed organization;
- f) confirmation of the communication and reporting language to be used during the assessment;
- g) confirmation that, during the assessment, the assessed organization will be kept informed of assessment progress;
- h) confirmation that the resources and facilities needed by the assessment team are available;
- i) confirmation of matters relating to confidentiality;
- j) confirmation of relevant work safety, emergency and security procedures for the assessment team;
- k) confirmation of the availability, roles and identities of any guides;
- l) the method of reporting, including any grading of the final recommendations;
- m) information about conditions under which the assessment may be terminated;
- n) information about any appeal system on the conduct or conclusions of the assessment.

5.7.2 Communication During Assessment

Depending upon the scope and complexity of the assessment, it may be necessary to make formal arrangements for communication within the assessment team and with the assessed organization during the assessment.

The assessment team should confer periodically to exchange information, assess assessment progress, and to reassign work between the assessment team members as needed.

During the assessment, the lead assessor should periodically communicate the progress of the assessment and any concerns to the assessed organization and assessment client, as appropriate. Evidence collected during the assessment that suggests an immediate and significant risk (e.g. safety, environmental or quality) should be reported without delay to the assessed organization.



Any concern about an issue outside the assessment scope should be noted and reported to the lead assessor, for possible communication to the assessment client and assessed organization.

Where the available assessment evidence indicates that the assessment objectives are unattainable, the lead assessor should report the reasons to the assessed organization, to the relevant accreditation body and to the IECEE Secretariat to determine appropriate action. Such action may include reconfirmation or modification of the assessment plan, changes to the assessment objectives or assessment scope, or termination of the assessment.

Any need for changes to the assessment scope which can become apparent as on-site assessed organization activities progress should be reviewed with and approved by to the relevant accreditation body and the IECEE Secretariat.

5.7.3 Roles and Responsibilities of Guides and Observers

Guides and observers may on some occasions accompany the assessment team but they are not a part of the team and should not be allowed to influence or interfere with the conduct of the assessment.

When guides are appointed by the assessed organization, they should assist the assessment team and act on the request of the lead assessor. Their responsibilities may include the following:

- a) establishing contacts and timing for interviews;
- b) arranging visits to specific parts of the site or organization;
- c) ensuring that rules concerning site safety and security procedures are known and respected by the assessment team members;
- d) witnessing the assessment on behalf of the assessed organization;
- e) providing clarification or assisting in collecting information;
- f) providing translation into English should the assessment team not be able to understand the language of some individuals of the assessed organization.

5.7.4 Collecting and Verifying Information

During the assessment, information relevant to the assessment objectives, scope and criteria, including information relating to interfaces between functions, activities and processes should be collected by appropriate sampling and should be verified. Only information that is verifiable may be assessment evidence. Assessment evidence should also be clearly recorded.

The assessment evidence is based on samples of the overall available information. Therefore, information obtained at assessment may not be fully representative of the whole picture, so there is an element of uncertainty in the assessment findings. Those acting upon the assessment conclusions should be aware of this uncertainty.

Figure 1 provides an overview of the process, from collecting information to reaching assessment conclusions.

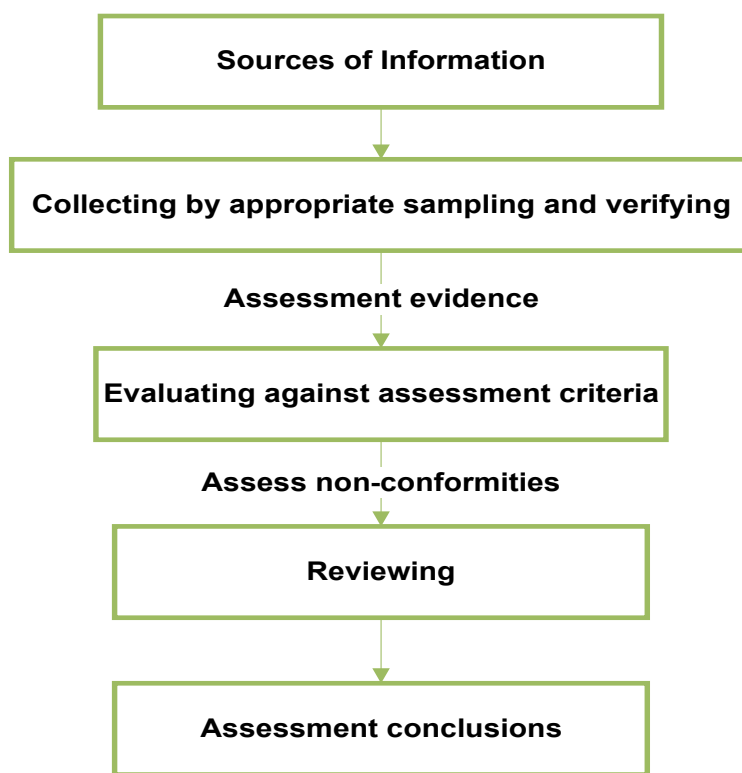


Figure 1 – Overview of the process from collecting information to reaching assessment conclusions

Methods to collect information include interviews, observation of activities, and review of documents. The sources of information chosen may vary according to the scope and complexity of the assessment and may include the following:

- a) interviews with laboratory and/or certification employees;
- b) observations of activities and the surrounding work environment and conditions;
- c) documents, such as policy, objectives, plans, test procedures, standards, instructions, specifications, drawings, contracts and orders;
- d) records, such as measurement and testing records, minutes of meetings, assessment reports, records of monitoring programmes and the results of measurements;
- e) data summaries, analyses and performance indicators;
- f) information on the sampling programmes and on procedures for the control of sampling and measurement processes;
- g) reports from other sources, for example, customer feedback, other relevant information from external parties and supplier ratings;
- h) computerized databases and websites.



6 Practical help

6.1 Conducting interviews

Interviews are one of the important means of collecting information and should be carried out in a manner adapted to the situation and the person interviewed. However, the assessors should consider the following:

- a) interviews should be held with persons from appropriate levels and functions performing activities or tasks within the scope of the assessment;
- b) interviews should be conducted during the normal working hours and, where practical, at the normal workplace of the person being interviewed;
- c) every attempt should be made to put the person being interviewed at ease prior to and during the interview;
- d) the reason for the interview and any note taking should be explained;
- e) interviews can be initiated by asking the persons to describe their work;
- f) questions that bias the answers (i.e. leading questions) should be avoided;
- g) the results from the interview should be summarized and reviewed with the interviewed person;
- h) the interviewed persons should be thanked for their participation and cooperation.

6.2 Documenting non-conformities

Assessment evidence should be evaluated against the assessment criteria to identify possible non-conformities. Non-conformities shall relate only to findings against assessment criteria and shall be documented. When specified by the assessment objectives, such as a requirement of a product standard, non-conformities may also be seen as an opportunity for improvement.

The assessment team should meet and confer as needed to review the non-conformities at appropriate stages during the assessment. If necessary, conformity with assessment criteria should be summarized to indicate locations, functions or processes that were assessed. If included in the assessment plan, individual elements of conformity and their supporting evidence should also be recorded.

Non-conformities and their supporting assessment evidence must be recorded. Non-conformities may be graded in accordance with the accreditation body rules, however it is a professional judgment by the assessment team to determine whether a particular non-conformity may lead to suspension of the relevant Testing Laboratory and/or the certification body.

Non-conformities should be reviewed with the assessed organization to obtain acknowledgement that the assessment evidence is accurate, and that the non-conformities are understood. Every attempt should be made to resolve any diverging opinions concerning the assessment evidence and/or findings, and unresolved points should be recorded.

6.3 Preparing Assessment conclusions

The assessment team should meet and confer prior to the closing meeting

- a) to review the non-conformities, and any other appropriate information/findings collected during the assessment, against the assessment objectives;
- b) to agree on the assessment conclusions, taking into account the uncertainty inherent in the assessment process;
- c) to prepare recommendations, if specified by the assessment objectives; and
- d) to discuss assessment follow-up, if part of the assessment team's recommendations.

6.4 Assessment conclusions

It is the responsibility of the assessment team to make the assessment conclusions and recommendation by using the four different levels as per OD 2004 for certification bodies and OD 2005 for testing laboratories. Accreditation bodies may use different terminology to indicate "acceptance".

1) The Assessment Team recommends <u>acceptance</u> of the assessed organization for the scope(s) as reported in Annex 1A/B of this Assessment Report as appropriate.	<input type="checkbox"/>
2) The Assessment Team recommends <u>acceptance</u> of the assessed organization for the scope(s) as reported in Annex 1A/B of this Assessment Report <u>subject to clearance</u> of the outstanding Non-conformity Reports as appropriate.	<input type="checkbox"/>
3) The Assessment Team recommends that the acceptance of the assessed organization is <u>postponed</u> until a further <u>follow-up assessment</u> is carried out and is found satisfactory.	<input type="checkbox"/>
4) Other, please specify using similar terminology.	<input type="checkbox"/>

6.5 Conducting the closing meeting

A closing meeting, chaired by the lead assessor, should be held to present the non-conformities and conclusions/recommendations in such a manner that they are understood and acknowledged by the assessed organization, and to agree, if appropriate, on the timeframe for the assessed organization to present a root cause and corrective and preventive action plan. Participants in the closing meeting should include the assessed organization and the certification body representative when the assessment is related to a testing laboratory. If necessary, the lead assessor should advise the assessed organization of situations encountered during the assessment that may decrease the reliance that can be placed on the assessment conclusions.

Any diverging opinions regarding the non-conformities and/or conclusions between the assessment team and the assessed organization should be discussed and if possible resolved. If not resolved, all opinions should be recorded in the relevant part of OD 2004 or OD 2005.

If specified by the assessment objectives, recommendations for improvements should be presented. It should be emphasized that recommendations are not binding.



7 Preparing, Approving and Distributing the Assessment Report

7.1 Preparing the Assessment Report (OD 2004 and/or OD 2005)

The lead assessor should be responsible for the preparation and contents of the assessment report.

The assessment report should provide a complete, accurate, concise and clear record of the assessment, and should include or refer to the following:

- a) the standards and rules used for the assessment;
- b) the assessment scope, particularly identification of the product categories and standards;
- c) identification of the assessed organization and, in case of a testing laboratory, the responsible certification body;
- d) identification of lead assessor and technical expert(s) who are part of the team;
- e) the dates and places where the on-site assessment activities were conducted;
- f) the assessment criteria;
- g) the non-conformities;
- h) the assessment conclusions;
- i) a list of the principal staff involved in testing or certification activities;
- j) a summary of the assessment process, including the uncertainty and/or any obstacles encountered that could decrease the reliability of the assessment conclusions;
- k) confirmation that the assessment objectives have been accomplished within the assessment scope in accordance with the assessment plan;
- l) any areas not covered, although within the assessment scope, and the reasons;
- m) any unresolved diverging opinions between the assessment team and the assessed organization;
- n) recommendations for improvement, if specified in the assessment objectives;
- o) agreed follow-up action plans, if any;
- p) a statement of the confidential nature of the contents;
- q) the distribution list for the assessment report.

7.2 Approving and Distributing the Assessment Report

The assessment report should be issued within the agreed time period. If this is not possible, the reasons for the delay should be communicated to the assessed organization and a new issue date should be agreed.



The assessment report should be dated, reviewed and approved in accordance with assessment programme procedures. The approved assessment report, issued by the accreditation body, should then be distributed to:

- a) the IECEE Secretariat;
- b) the assessed organization.

The assessment team members and all report recipients should respect and maintain the confidentiality of the report.

7.3 Completing the Assessment

The assessment is completed when all activities described in the assessment plan have been carried out and the approved assessment report has been distributed.

Documents pertaining to the assessment shall be retained or destroyed by agreement between the participating parties and in accordance with assessment programme procedures and applicable statutory, regulatory and contractual requirements.

Unless required by law or other regulatory measures the assessment team and those responsible for managing the assessment programme (ABs and IECEE System) should not disclose the contents of documents, any other information obtained during the assessment, or the assessment report, to any other party without the explicit approval of the assessed organization. If disclosure of the contents of an assessment document is required, the assessed organization should be informed as soon as possible

In the IECEE System, the assessment report is posted on the restricted area of the IECEE website and available only to the IECEE Member Bodies and all participating National Certification Bodies.

7.4 Conducting Assessment Follow-up

The conclusions of the assessment may indicate the need for corrective, preventive or improvement actions, as applicable. Such actions are usually decided and undertaken by the assessed organization within an agreed timeframe. The completion and effectiveness of the root causes and corrective action should be verified. This verification may be part of a subsequent on-site assessment or may be performed by a video assessment. For the IECEE System, such a determination is made by the IECEE Secretariat.

The assessment programme may specify follow-up by members of the assessment team, which adds value by using their expertise. In such cases, care should be taken to maintain independence in subsequent assessment activities

8 Finances

The fees applicable to the IECEE Technical Assessors are detailed in OD 2026. The accreditation body fees are covered by the relevant accreditation body procedures.