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PART A

INTRODUCTION

The AMERICAN ASSOCIATION FOR LABORATORY ACCREDITATION (A2LA) is a non-profit, nongovernmental, public service, membership organization dedicated to operating a nationwide, broad spectrum laboratory accreditation system. Accreditation is also available to any type of inspection body following the same principles and process as used to accredit laboratories (see *R101 - General Requirements: Accreditation of ISO/IEC 17025 Laboratories*).


A2LA was formed in 1978, as a practical and efficient organization to develop and manage a system to verify and recognize competent testing laboratories. Accreditation is available for virtually all types of tests, calibrations, measurements, inspections and observations which are reproducible and properly documented.

A2LA recognizes the very close relationship between inspection, sampling, testing and measurement yet understands that inspection includes a variety of activities not covered in testing laboratory accreditation. Inspection includes the examination of materials, products, components, assemblies, cargoes and consignments, usually for compliance with specified criteria. It includes visual examination and associated work, and may be more directly focused on products. A2LA staff can advise potential applicants of the appropriate field of inspection for the accreditation of their inspection activities. An inspection body which is engaged in testing, measurement or sampling work may apply for accreditation for this work concurrently with its application for accreditation for inspection.

Accreditation is based on the assessment of performance of an inspection body including procedures, staff competence and reporting. It is available to all inspection bodies including in-house services. A2LA welcomes applications for the accreditation of all types of inspection work. The following are just a few examples of work for which accreditation may be sought:

- Agricultural products
- Bulk cargoes (e.g. coal, iron ore, petroleum)
- Cargoes in containers and packages
- Cast products
- Cranes
- Electrical equipment
- Foods
- Forged products
- Mechanical equipment
- Pipelines
- Protective coatings
- Rolled products
- Structures (e.g. concrete, steel, timber)
- Textiles
- Welding

Users of accredited inspection bodies should review the Scope(s) of Accreditation from any accredited inspection

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body when making decisions about using the inspection body. The Scope(s) of Accreditation identifies the specific inspections or types of inspections for which the body is accredited. A2LA acknowledges that some user organizations may choose to accept only inspections conducted by Type A (third party or independent) bodies. It is up to such organizations to decide which accredited inspection bodies they will accept.

The general criteria used by A2LA for accreditation of inspection bodies are *ISO/IEC 17020:1998, General Criteria for the Operation of Various Types of Bodies Performing Inspection*. A2LA's official application of the Standard is consistent with the current version of *IAF/ILAC-A4 Guidance on the Application of ISO/IEC 17020*. (*IAF/ILAC-A4 Guidance on the Application of ISO/IEC 17020* may be obtained free of charge in the documents section of the ILAC web site WWW.ILAC.ORG or by contacting A2LA headquarters). Additional criteria needed to clarify proficiency testing requirements for inspection bodies have been added. When tests and measurements are involved as part of the inspection process and measurement traceability is required, *P102 - A2LA Policy on Measurement Traceability* applies.


In effect, A2LA accreditation attests that an inspection body has demonstrated that:

- a) it is competent to perform specific inspections or specific types of inspections; and
- b) its quality system is documented, fully operational and addresses and conforms to all elements of ISO/IEC 17020-1998, IAF/ILAC A4:2004 and A2LA official applications of these standards;
- c) it is operating in accordance its quality system; and
- d) it conforms to any additional requirements of A2LA or specific fields or programs necessary to meet particular user needs.

It is A2LA policy not to accredit or renew accreditation of an inspection body that fails to meet the above criteria (see Part B, Conditions for Accreditation and Part C, Accreditation Process, sections on deficiencies, accreditation decisions and suspension or withdrawal of accreditation.)



President

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PART B
CONDITIONS FOR ACCREDITATION
 (Based on ISO/IEC TR 17010)

CONDITIONS FOR ACCREDITATION

In order to attain and maintain accreditation, inspection bodies must comply with the Conditions for Accreditation (R102) published by A2LA. This document is available on the A2LA website, www.A2LA.org, or from A2LA Headquarters.

In order to apply, the applicant inspection body's Authorized Representative, must agree to the conditions for accreditation and must attest that all statements made on the application are correct to the best of his/her knowledge and understanding. The Authorized Representative and a deputy sign a statement that the Conditions for Accreditation will be upheld. An accredited inspection body's Authorized Representative is responsible for ensuring that all of the relevant conditions for accreditation are met. During the on-site assessment, the assessor will determine that the Authorized Representative and a deputy are knowledgeable about the accreditation requirements.

PART C

A2LA ACCREDITATION PROCESS


I. Application

An inspection body applies for accreditation by obtaining the application package (available from A2LA headquarters or the A2LA website www.A2LA.org) and completing appropriate application sheets and checklist(s). All applicants must agree to the conditions for accreditation (see Part B of this document), pay the appropriate fees and provide detailed supporting information including:

- Scope of inspections, methods, and relevant standards;
- Quality Manual; and
- Organization structure.

All documentation must be provided in English and the assessment conducted in English. An appropriate English translation of pertinent documentation must be provided as well as a translator, if needed, to facilitate the assessment.

Accreditation is available for any type of inspection body. For standard-type inspections, the scope of accreditation is normally identified in terms of standard inspection methods prepared by national, international, and professional standards writing bodies. When an inspection body requests accreditation only for a superseded version of a standard method, the date of the version to be used is identified in its scope of accreditation. When the date is not identified in their scope of accreditation, inspection bodies are expected to be competent in the use of the current version within one year of the date of publication of the standard method revision. In some cases, an inspection body's capability will be described in terms of types of inspections, inspection technologies, or other descriptive text

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when it is not appropriate or practical to identify specific inspection methods.

Accreditation of non-standard inspection methods may be granted and shall be referenced in the scope. A2LA reserves the right to refuse to consider accreditation for proprietary and/or non-standard inspections, without prejudice, if the inspection body does not provide sufficient access to personnel, methods, records, equipment and/or facilities to enable determination of competence.

If an inspection body wishes accreditation for the use of its own methods, then it must provide the information required in ISO/IEC 17020 sections 10.1 through 10.3 and applicable sections of IAF/ILAC A4.

II. Assessment Process

The purpose of an accreditation assessment is to establish whether or not an inspection body complies with the A2LA requirements for accreditation and can competently perform the types of inspections for which accreditation is sought. When accreditation is required to demonstrate compliance with additional criteria which may be imposed by other authorities, the A2LA assessment will include such additional criteria. The assessors may respond to questions associated with their observations that facilitate inspection body management system improvement.


Pre-Site Visit

Once the application information is completed and the appropriate fees are paid, A2LA headquarters staff identifies and assigns one or more assessors to conduct an on-site assessment. Assessors are selected on the basis of their inspection expertise to ensure effective assessments. They do not represent their employers (if so affiliated) while conducting assessments for A2LA. The inspection body has the right to ask for another assessor if it objects to any assessor assignment. A2LA assessors are drawn from industry, academia, government agencies, consultants, and from the inspection body community. Assessors work under contract to A2LA. Assessments may last from one to several days depending on the extent of the desired scope and the size of the inspection body. More than one assessor may be required.

Trained assessors document their findings on standardized checklists during the assessment. The training, along with these documents, are intended to ensure that assessments are conducted as uniformly and completely as possible among the assessors and from inspection body to inspection body.

In preparation for the assessment, the assessor team requests copies of quality documentation and selected technical SOPs. The quality manual and related documentation are reviewed by the assessor team before the on-site assessment begins. This review is ideally completed before the assessment is scheduled. Upon review of submitted documentation, the assessor(s) provide the document review results to the inspection body in writing; and may ask the inspection body to implement corrective action to fill any documentation gaps required by the general criteria before scheduling the assessment. A pre-assessment visit may be requested by the inspection body or suggested by the assessor as an option at this point to enhance the success of the full assessment.

Prior to scheduling the full assessment, the assessor reviews the draft scope(s) to determine the inspections to be witnessed and verifies the availability of the technical personnel who perform the inspections. The assessor of the inspection body also provides an assessment agenda.

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On-Site Assessment

The full assessment involves:

- An entry briefing with inspection body management;
- Interviews with technical staff;
- Demonstration of inspections for which accreditation is sought;
- Examination of equipment and calibration records;
- Audit of the quality system to verify that it is fully operational, conforms to all sections of ISO/IEC 17020 (including IAF/ILAC A4), and contains all the required documentation;
- A written report of assessor findings; and
- An exit briefing including the specific written identification of any deficiencies.

An on-site assessment will be conducted at the main inspection body facility. Other inspection body locations may also need to be visited depending on the number and nature of key activities performed at those locations. Key activities are considered activities which have an influence on the outcome of the inspections and may include:


- *policy formulation;*
- *process and/or procedure development;*
- *process of initial selection of inspectors and, as appropriate;*
- *contract review;*
- *planning conformity assessments;*
- *review and approval of conformity assessments.*

A decision regarding the on-site assessment of inspection body facilities other than the main facility will be made on a case by case bases.

The most critical contribution to inspection decisions is the inspector; as such it follows that some inspectors must also be witnessed performing inspections. The witnessing of inspectors needs to be such that the effectiveness of systems can be verified, and the competence of individual inspectors can be confirmed. Some of the considerations in determining the amount of witnessing include:

- *Scope of accreditation requested;*
- *The extent to which inspectors are required to exercise professional judgment;*
- *Total number of inspectors;*
- *Frequency of each type of inspection;*
- *Number of locations of the inspection body;*
- *Past history of performance during (re)assessment;*
- *Personnel certification or other formal qualifications held by inspectors;*
- *The training system of the inspection body;*
- *Effectiveness of internal monitoring of inspectors;*
- *Organizational stability and risk awareness of the inspection body;*
- *Any statutory requirements.*

The decision on the sampling of inspectors as well as those inspections which must be witnessed will be determined by the applicable Accreditation Services Officer in consultation with the assigned assessor and communicated to the

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inspection body. Every effort will be made to witness inspections at the client's location. If this cannot be accommodated, arrangements must be made to witness mock inspections that adequately replicate an actual inspection environment.

During the full assessment, the assessor has the authority to stop the process at any time and consult with A2LA staff and the inspection body's management to determine if the assessment should proceed. In cases where the number of significant nonconformances affects the ability to successfully complete a full assessment, the visit may be converted to a pre-assessment. The full assessment is then rescheduled when the inspection body and assessor determine it is appropriate to proceed.

III. Deficiencies

During the assessment, assessors may observe deficiencies. A deficiency is any nonconformity to accreditation requirements including:


- an inspection body's inability to perform an inspection for which it seeks accreditation;
- an inspection body's quality system does not conform to a clause or section of ISO/IEC 17020 (including IAF/ILAC A4:2004 and A2LA official applications of these standards), is not adequately documented, or is not completely implemented in accordance with that documentation ; or
- an inspection body does not conform to any additional requirements of A2LA necessary to meet particular needs.

At the conclusion of an assessment, the assessor prepares a report of findings, identifying deficiencies, which, in the assessor's judgment, the inspection body must resolve in order to be accredited. The assessor then holds an exit briefing with all interested inspection body personnel to describe the findings, review the list of deficiencies (deficiency report), and describe the deficiency resolution process. The authorized representative of the inspection body (or designee) is asked to sign the deficiency report to attest that the deficiency report has been reviewed with the assessor. The signature by the authorized representative does not imply concurrence with the findings, only that the inspection body had reviewed and received a copy of the report.

IV. Corrective Action Process

The inspection body is requested to respond, in writing, within one month after the date of the exit briefing detailing either its corrective action or why it does not believe that a deficiency exists. The corrective action response must include a copy of any objective evidence (e.g., calibration certificates, procedures, paid invoices, packaging slips and/or training records) to indicate that the corrective actions have been implemented/completed. If the assessor's review of the corrective action response is needed, the inspection body may be billed (at the prevailing assessor rate) by A2LA for time exceeding one hour. The assessor will discuss the possibility of this review with the inspection body during the exit briefing and obtain the inspection body's concurrence.

If the inspection body disagrees with the findings that one or more items are deficient the inspection body must explain in its response why it disagrees with the assessor.

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If a new applicant inspection body fails to respond in writing within four months after the date of the exit briefing, it may be treated as a new applicant subject to new fees and reassessment should it wish to pursue accreditation after that time. A new applicant inspection body that fails to resolve all its deficiencies within six months of being assessed may be required to be reassessed at its expense. Even if the inspection body responds within six months, A2LA staff in agreement with the lead assessor has the option to ask for reassessment of an inspection body before an initial accreditation vote is taken based on the amount, extent and nature of the deficiencies. Renewal inspection bodies must respond in writing within 30 days of the exit briefing, and resolve all deficiencies within 60 days of the exit briefing. Failure to meet these deadlines may result in adverse accreditation action (e.g. reassessment or suspension of accreditation). The Accreditation Council panel also has the option to require a follow-up assessment of any inspection body (new or renewal) before an affirmative accreditation decision can be rendered.

V. Accreditation Anniversary Date

The anniversary date of the inspection body's accreditation is established 105 to 135 days after the last day of the final on-site assessment before an initial accreditation decision, regardless of the length of time required to correct deficiencies. This anniversary date normally remains the same throughout the inspection body's enrollment.


If an inspection body is in their renewal process and is in good standing with A2LA when approaching their accreditation anniversary date, A2LA may extend their accreditation for an additional 90 days to complete the renewal of accreditation process. When fundamental nonconformances are identified during an assessment, extensions of accreditation are not considered until the inspection body submits objective evidence demonstrating that the nonconformances have been addressed. Likewise, extensions are not granted when delays are due to the inspection body's failure to respond to requests within established deadlines and thus not in good standing. Some examples include:

- receipt of complete renewal application after imposed due date;
- assessment not performed within assessor availability;
- receipt of response to assessor deficiency report beyond 30 days of assessment exit briefing;
- closure of all deficiencies beyond 60 days of assessment exit briefing.

When an inspection body is granted an extension, a revised Certificate and Scope of Accreditation will be posted to the A2LA website reflecting the extended anniversary date. Hard copies of these documents are made available only upon request. Upon completion of the renewal process, both documents are reissued, reflecting the renewed anniversary date.

If an extension of accreditation is not granted and the current accreditation expires, the inspection body's Certificate and Scope of Accreditation will be removed from the A2LA Accredited list on the A2LA website and placed on a separate website list called "Renewal in Process". Inspection bodies placed in this status are no longer accredited but are classified as being in the renewal process.

VI. Proficiency Testing


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Proficiency testing is typically associated with laboratory accreditation and is defined as a process for checking actual laboratory testing performance, usually by means of interlaboratory test data comparisons. For many tests and calibrations, results from proficiency testing are very good indicators of competence. However in some instances proficiency testing may be relevant to inspection bodies. If relevant and available PT programs exist, all accredited inspection bodies must enroll and participate at least once per year and ensure that all major sub-disciplines and materials/matrices/product types on the scope of accreditation (for which PT programs are available) are covered over a four year period, unless otherwise mandated by government or industry specific requirements. Records of these activities shall be available at the inspection body's facility.

Inspection bodies are expected to document their analysis of all results, and to submit the results, and the subsequent analysis, of all relevant proficiency testing participation to A2LA at least annually. Detailed corrective action responses for any outlying or unacceptable results related to inspections on their Scope of Accreditation must also be submitted.

Failure to participate, patterns of erratic results, successive failures, or other poor performance in required proficiency testing programs may result in revocation of accreditation for affected parameters and/or a required on-site surveillance visit by an A2LA assessor. The inspection body's scope of accreditation found on the A2LA web site will be revised to reflect any revocations. Failure to meet minimum participation requirements or to respond to A2LA requests for information may result in an adverse accreditation action.

A2LA considers a test result outside of three standard deviations of the mean of test results to be an outlying result and requires a corrective action response. Any test or measurement results that are evaluated as "unacceptable" by the PT scheme provider, using its stated evaluation protocol, also require a corrective action response.

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Remedial Actions: If unacceptable results are received on a formal proficiency testing program (e.g., CTS), the inspection body must enroll for the same analysis in the next available proficiency-testing round and demonstrate acceptable performance. Failure to successfully analyze the sample in this “remedial” round will result in immediate revocation of the testing concerned from the inspection body’s Scope of Accreditation. Accreditation will be reinstated only upon demonstration of acceptable performance on a future proficiency testing round.

It is understood that proficiency-testing samples are occasionally not completely compatible with the materials and methods used by an inspection body. In these cases, an inspection body can decline to participate in a specific round of proficiency testing and justify their decision to A2LA.

VII. Witnessing of Inspectors

IAF/ILAC A4 sections 6.4d and 6.4e stipulate the following requirements for accredited inspection bodies:

“6.4d Monitoring of performance of inspections should include on-site witnessing of inspections. On-site witnessing of inspections should be carried out by technically competent personnel, who are sufficiently independent to carry out the witnessing of inspections objectively.

6.4e The inspection body’s program for witnessing inspectors should be designed so that a representative sample of inspectors is witnessed. As a minimum, every inspector should be witnessed at least once during the normal accreditation cycle (typically 3 – 4 years) performing each field of inspection for which they are authorized by the inspection body. Records of observed inspections shall be kept.”


A2LA’s official application of these sections further clarifies:

“(A4) 6.4d Monitoring of performance of inspections shall include witnessing of inspections. The witnessing shall be conducted on-site, unless the inspection environment/activity can be replicated elsewhere (at the inspection body’s facility for example). When possible, the witnessing of inspections should be carried out by technically competent and independent personnel.

(A4) 6.4e As a minimum, every inspector shall be witnessed at least once every 4 years performing each field of inspection for which they are authorized. Records of observed inspections shall be maintained.”

To further ensure these requirements are met, A2LA requires that all applicant and accredited inspection bodies document their plan for meeting these requirements within their document control system.

Therefore, A2LA requires that Inspection Bodies have suitably implemented these requirements and ***have a documented plan of how they intend to witness all inspectors performing all major types of inspections on their scope of accreditation (for which they are authorized) over a four year period (IB1). The plan must detail the frequency of witnessing, and detail how all inspectors will be witnessed performing each type of inspection (and if necessary on specific types of products). The documented witnessing plan along with the documented results of the witnessing will be reviewed at each on-site assessment and during annual review submissions to A2LA.***

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VIII. Accreditation Decisions

Before an accreditation decision ballot is sent to Accreditation Council members, staff shall review the deficiency response, including objective evidence of completed corrective action, for adequacy and completeness. If staff is uncertain about the adequacy or completeness of the deficiency response, the response is submitted to the assessor(s) for review and comment. Since all deficiencies must be resolved before accreditation can be extended, staff shall ask the inspection body for further written response in those cases where staff recognizes that an affirmative vote is not likely because of incomplete corrective action or obvious lack of supporting objective evidence that corrective action has been completely implemented.

Staff selects a panel of at least three Accreditation Council members for voting. The panel is chosen so that the full range of the inspection body’s capabilities is adequately covered by the Accreditation Council review. Especially in the case of those inspection bodies seeking (re)accreditation for multiple areas, it may be necessary to select more than three AC members to accomplish this. The inspection body is consulted about any potential conflicts of interest with the Accreditation Council membership prior to sending their package to the Accreditation Council. Generally, at least two affirmative ballots (with no unresolved negative ballots) of the three ballots distributed must be received before accreditation can be granted. If three or more AC members are required in order to ensure a full review of the inspection body’s activities, (re)accreditation may not be granted until all of these votes have been received and any negative votes resolved.


It is the primary responsibility of assessors to determine whether the observed evidence is serious enough to warrant a deficiency. However, the AC panel members that are asked to vote on an accreditation decision are required to make a judgment whether or not deficiencies still exist based on information contained in the ballot package. When there is disagreement regarding criteria interpretation or the meaning of objective evidence, A2LA staff assists in obtaining additional information to facilitate the AC panel member in making their decisions.

Staff shall notify the inspection body asking for further written response based on the specific justification for any negative votes received from the AC panel. If further written response still does not satisfy the negative voter(s), a follow-up assessment may be proposed or required. If two or more voters request a follow-up assessment, the inspection body is asked to either accept the follow-up or appeal the decision. If the inspection body refuses the proposed follow-up, an Accreditation Council appeals group is balloted (see sections on XIV. Accreditation Status and Adverse Accreditation Decisions and XVII. Appeals Procedures below).

If accreditation is granted, the A2LA staff prepares and forwards a certificate and scope of accreditation to the inspection body for each enrolled field of inspection (and special program if appropriate). The inspection body should keep its scope of accreditation available to show clients or potential clients the types of inspections for which it is accredited. A2LA staff also uses the scopes of accreditation to respond to inquiries and to prepare the A2LA online directory.

IX. Annual Review

Accreditation is for two years. However, after the initial year of accreditation, each inspection body must pay annual fees and assessor fees and undergo a one-day surveillance visit by an assessor. This surveillance visit is performed to confirm that the inspection body’s quality system and technical capabilities remain in compliance with the accreditation requirements. For subsequent annual reviews occurring after the renewal of accreditation (see Section

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X) each inspection body must pay annual fees and submit updating information on its organization, facilities, key personnel and (if applicable) results of any proficiency testing. Objective evidence of completion of the internal audit and management review is also required. If the renewal inspection body does not promptly provide complete annual review documentation, or significant changes to the facility or organization have occurred, a one-day surveillance visit and payment of the associated assessor fees may be required.

X. Reassessment and Renewal of Accreditation

A2LA conducts a full on-site reassessment of all accredited inspection bodies at least every two years. Reassessments are also conducted when evaluations and submissions from the inspection body or its clients indicate significant technical changes in the capability of the inspection body have occurred.

Each accredited inspection body is sent a renewal questionnaire, six months in advance of the expiration date of its accreditation, to allow sufficient time to complete the renewal process. A successful on-site reassessment must be completed before accreditation is renewed for another two years.


If deficiencies are noted during the renewal assessment, the inspection body is asked to write to A2LA within 30 days after the assessment stating the corrective action taken. All deficiencies must be resolved before accreditation is renewed for another two years.

The renewal decision process is similar to the initial decision process (see section VII. Accreditation Decisions), except as follows:

- 1) If there are no deficiencies, the renewal is automatically processed without an Accreditation Council panel vote.
- 2) If there are only a few deficiencies of a minor nature (i.e., the non-compliances do not directly affect the integrity of inspection results) and there is sufficient objective evidence that the deficiencies have been resolved, the President may elect to renew accreditation without an Accreditation Council panel vote.
- 3) If there are significant deficiencies (either in number or nature, i.e., the non-compliances directly affect the integrity of inspection results), the staff advises the inspection body of the required time-frame (normally 30 days) in which to resolve all deficiencies or be subject to further actions leading to suspension or withdrawal of accreditation (see sections XIV. Accreditation Status Adverse Accreditation Decisions, XV. Suspension of Accreditation, and XVI. Withdrawal of Accreditation). Several related deficiencies or repeat deficiencies from previous assessments may also be considered a significant deficiency. In these cases, a ballot of the Accreditation Council panel is conducted using the same voting procedure as for initial accreditation decisions.

XI. Unscheduled Assessments

Although rare, A2LA may require inspection bodies to undergo an extraordinary assessment as a result of complaints or significant changes to the inspection body's management system. Pursuant to the severity of the complaint, this 'for cause' assessment may be performed with little or no advance warning.

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XII. Adding to the Scope of Accreditation

An inspection body may request additions to its scope of accreditation at any time. Such a request must be submitted in writing to A2LA headquarters. Each request is handled on a case-by-case basis. Unless the previous assessor can verify the competence of the inspection body to perform the additional inspections, another on-site assessment is normally required. The assessor may (based on a review of the supporting objective evidence provided) be able to recommend a scope addition without an on-site assessment. However, if the assessor's time spent is more than one hour, the inspection body may be billed by A2LA at the prevailing assessor rate. If the additional inspection methods require are significantly different from those that are on the currently accredited scope, an on-site assessment is mandatory. The need for an on-site assessment will be determined in consultation with the technical assessor.

XIII. Inspection Body Reference to A2LA Accredited Status

For rules on the use of the "A2LA Accredited" symbol, please see the document titled *PI01 - Reference to A2LA Accredited Status – A2LA Advertising Policy*.

XIV. Accreditation Status and Adverse Accreditation Decisions

There are various levels of status that may be assigned to inspection bodies that cannot uphold the requirements for initial or continued accreditation:


Voluntary Withdrawal – An applicant inspection body not yet accredited, or a renewal inspection body, can decide to terminate further accreditation action and voluntarily withdraw from the accreditation program. The inspection body contact must inform A2LA in writing of this request. A2LA does not publicize the fact that a new inspection body had applied and then withdrawn.

Inactive - An inspection body is designated as inactive when it has requested in writing that its accreditation be allowed to temporarily expire due to unforeseen circumstances that prevent it from adhering to the A2LA Conditions for Accreditation. To regain accredited status, the Inactive inspection body must notify A2LA in writing of this desire, agree to undergo a full reassessment (if necessary, as determined by A2LA), and pay all renewal fees and reassessment costs.

The Inactive status can be given to an inspection body for no longer than one year, after which time the inspection body is removed from A2LA records and designated as withdrawn.

XV. Suspension of Accreditation

Suspension of all or part of an inspection body's accreditation may be a decision made by either the President or Accreditation Council panel. The accreditation applicable to a specific inspection body may be suspended upon adequate evidence of:

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- non-compliance with the requirements of a nature not requiring immediate withdrawal (e.g. identification of significant deficiencies during an assessment);
- improper use of the accreditation symbol (e.g., misleading prints or advertisements are not solved by suitable retractions and appropriate remedial measures by the inspection body);
- other deviations from the requirements of the A2LA accreditation program (e.g., failure to pay the required fee or to submit annual review information within 60 calendar days after it is due).


When an accredited inspection body is suspended, A2LA shall confirm an official suspension in a certified letter, return receipt requested, (or equivalent means) to the inspection body's authorized representative, stating:

- the cause;
- the conditions under which the suspension will be lifted;
- that the suspension will be publicized on the A2LA website;
- that the suspension is for a temporary period to be determined by the time needed to take corrective action;
- that, within thirty (30) days of receipt of the notice, the inspection body may submit in person, or in writing, information in opposition to the suspension, including any additional information that raises a genuine dispute over material facts;
- that a further review will be conducted to consider such information and a further written notification will be sent to the inspection body by certified mail, return receipt requested, indicating whether the suspension has been terminated, modified, left in force or converted to a withdrawal of accreditation.

XVI. Withdrawal of Accreditation

A2LA shall withdraw accreditation for any of the following causes:

- under the relevant provisions for suspension of accreditation;
- if surveillance or reassessment indicate that deficiencies are of a serious nature as judged by the Accreditation Council panel;
- when complaints are received relating to one or more of the inspection body's inspection reports and investigation reveals serious deficiencies in the quality system and/or competence in conducting the specific inspections;
- if the system rules are changed and the inspection body either will not or cannot ensure conformance to the new requirements;
- on any other grounds specifically provided for under these program requirements or formally agreed between A2LA and the inspection body;

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- when such action is necessary to protect the reputation of A2LA; and
- at the formal request of the inspection body.

When it is proposed to withdraw accreditation, A2LA shall issue a written notice by certified mail, return receipt requested:

- that withdrawal is being considered;
- of the reasons for the proposed withdrawal sufficient to put the inspection body on notice of the cause;
- that within thirty (30) days of receipt of the notice, the inspection body may submit in person, or in writing, information in opposition to the withdrawal, including any additional information that raises a genuine dispute over material facts; and
- of the effect of proposed withdrawal, including removing the inspection body's name from the A2LA Directory and publicizing the action in the A2LA Newsletter and on the Worldwide Web.

An inspection body may appeal to A2LA against a decision to withdraw or not to award accreditation.

XVII. Appeals Procedure

There are two possible levels that an appeal can reach before being resolved:


- 1) Accreditation Council (nine-member appeals panel);
- 2) Board of Directors.

The A2LA staff shall advise the applicant in writing of its right to challenge an adverse accreditation decision by the President or initial Accreditation Council panel (see section VII). The appeals policy, including an applicant's right to a hearing, is contained in the A2LA Bylaws.

An appeal shall be lodged no later than thirty (30) days after notification of the decision by forwarding a certified letter to A2LA for timely consideration by the nine-member appeals panel of the Accreditation Council. The decision of the Accreditation Council's appeals group is communicated in writing to the appellant.

If the decision is not favorable to the appellant, the appellant may lodge a further appeal within thirty (30) days of notification by forwarding a certified letter to A2LA for timely consideration by the Board of Directors. This letter shall include appropriate substantiation for the appeal. This letter will be promptly transmitted to the members of the Board of Directors appeals group, the composition of which to be determined taking into account any conflict-of-interest considerations.

The decision of the Board of Directors shall be final and is communicated in writing to the appellant.

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XVIII. Confidentiality Policy

All information provided by applicants in connection with a request for an application package, an application for accreditation, an assessment or proficiency test is confidential. Such information is examined by a small group of A2LA staff, assessors, and Accreditation Council members and external bodies as needed for recognition of the program, all of whom are made aware of its confidentiality. Such information shall not be released to others unless the applicant provides A2LA permission in writing to do so.

Documents needed to convey information about accredited inspection bodies and their scopes of accreditation are not confidential.


In response to a question about whether or not a particular inspection body has applied for accreditation, A2LA simply responds by saying that the inspection body is not accredited. Staff neither confirms nor denies whether an inspection body has ever applied for accreditation. If the inspection body itself is saying that it has applied for accreditation, it is the inspection body's responsibility to release the information regarding its applicant status. If the caller says that the inspection body claims it applied, staff shall take the name, address and phone number of the inspection body to check to see if the inspection body is misleading the client but staff still will not verify the inspection body's application. Should the inspection body insist that staff verify for a potential client that it has applied to A2LA, staff shall indicate that it has applied only if the inspection body makes such a request to A2LA in writing or designates on the application for accreditation that A2LA is authorized to release information regarding the applicant's status.

If an inquiry is made about an inspection body whose accreditation has lapsed but is in the renewal process, staff can indicate that the inspection body is not now accredited but is in the process of renewal, if that is the case. If the renewal inspection body's accreditation has lapsed with no indication (return of renewal forms or payment) of pursuit of renewal, staff indicates simply that the inspection body is not accredited.

XIX. Conflict of Interest Policy

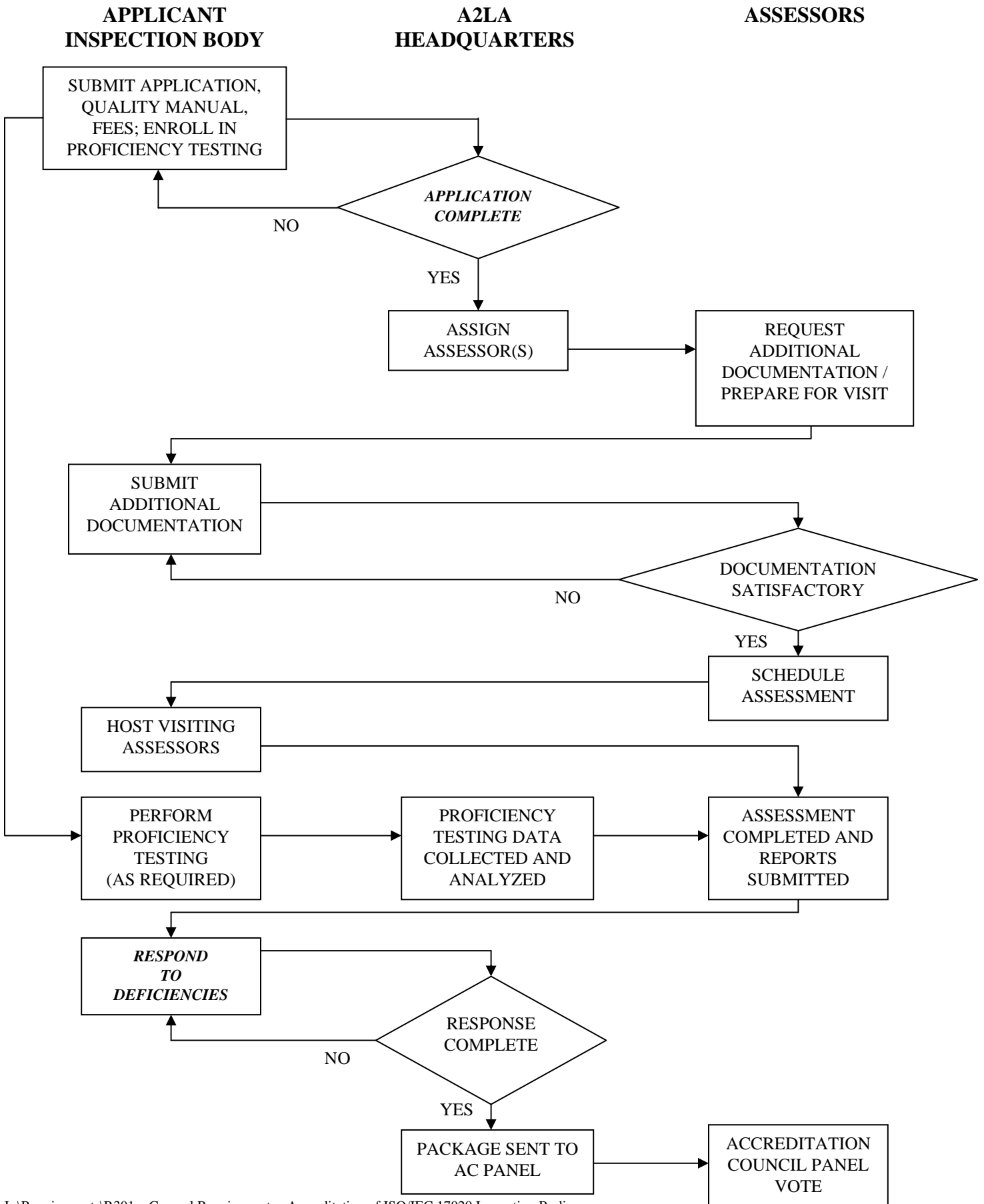
Since its inception, A2LA has had a policy that actual or apparent conflicts of interest must be avoided as mandated by normal business ethics. A2LA believes that it is vital that its accreditation services be impartial and objective, uninfluenced by the private interests of individuals acting for A2LA. Accordingly, any person directly involved in actions relating to the A2LA accreditation process shall avoid direct participation in actions which may involve an actual or apparent conflict of interest.

The Chairman of the Board and the President shall, as promptly as possible, take all possible means to prevent or overcome any such actions that may conceivably be in violation of this policy.

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DATE	CHANGES MADE
August 2009	Clarifications made to align with A2LA policies contained in other documents; Reference to ILAC/IAF A4 added; Sections II and VII expanded upon to describe minimum requirements for observation of inspections and inspectors during on-site assessments. Deleted delinquent status
April 2010	Added language regarding on-site witnessing of inspections and inspectors

A2LA ACCREDITATION PROCESS DIAGRAM



A2LA APPEALS PROCESS DIAGRAM

