APPENDIX B Policy on Group Accreditation

1 Introduction

- 1.1 This publication documents the PALCAN policy for the application of the requirements of CAN-P-4 (i.e., ISO/IEC 17025) *General Requirements for the Competence of Testing and Calibration Laboratories* (The Standard) to laboratories operating from multiple locations. Without adding to the general requirements of the Standard, it describes how SCC operates group accreditation.
- **1.2** PALCAN is able to grant group accreditation to a legal entity operating from more than one location. To facilitate customer management, the Group will typically consist of five or fewer locations, depending upon the similarity of activities at each location.
- **1.3** Laboratories seeking group accreditation must specifically apply for it.
- 1.4 In general, organisations best suited for group accreditation carry out the same or similar testing and/or calibration activities at all locations. Other organisations should consider implications of Paragraphs 4.7, 4.10, 4.11, 5.1 and 6.1, in particular, before seeking Group accreditation.

2 <u>Prerequisites</u>

2.1 Organisations must:

- a) demonstrate that all locations within or seeking group accreditation (the Group) are part of the same legal entity;
- b) demonstrate that all these locations operate under the same management system (as defined in CAN-P-4) with a central office;
- c) identify to PALCAN:
 - a central contact person having overall responsibility for the technical operations and the provision of the resources needed to ensure the required quality of laboratory operations; and
 - a central contact person having defined responsibility and authority for ensuring that the management system related to quality is implemented and followed at all times: and
 - a central contact person for the purpose of billing by PALCAN;
- d) document fully the relationships between the locations and the extent of interaction (e.g. allocation of testing and/or calibration work, transfer of samples between locations, movement of technical staff and/or equipment and centralised or otherwise rationalised arrangements for reporting of results);
- e) have mechanisms in place to track progress of work throughout the locations of the Group, regardless of any transfer of work between locations;
- f) ensure that customers are aware and agree with any transfer of work between locations; and
- g) identify clearly the scope of tests and/or calibrations which can be carried out at each location for which accreditation is maintained or sought.

2.2 A location may not hold more than one PALCAN accreditation; therefore SCC will terminate the individual PALCAN accreditation when a laboratory holding an individual PALCAN accreditation is brought into a group accreditation

3 Scopes and certificates of group accreditation

- **3.1** Separate scopes and separate certificates of accreditation are issued by the SCC, with unique identification numbers, for each location in the Group.
- 3.2 Scopes and certificates state clearly that a group accreditation is involved.
- 3.3 An organisation holding group accreditation is held responsible for maintaining an up-todate matrix, list, or other means of identifying precisely which tests and calibrations are carried out where, by whom, and exactly what support functions are operated from each location.

4 <u>Assessment and accreditation processes</u>

- **4.1** The normal assessment and accreditation processes for laboratory accreditation apply to group accreditation.
- 4.2 Before a new location can be brought into an existing group accreditation, the SCC must conduct a full assessment of the location and all required actions must be resolved and approved as per Clause 4.1, above. In addition, there shall be no outstanding required actions from previous assessments of the other locations in the Group.
- 4.3 As a general rule, on-site assessment and reassessment of each location involved in the Group are required. These activities throughout the Group will be covered during every reassessment exercise to the extent necessary to form a reliable judgement about collective compliance with the Standard. It is expected that all locations would be visited at least every two years.
- 4.4 All locations will cooperate so that the on-site assessments can be conducted within approximately the same time period; ideally within 6 months of each other.
- 4.5 These visits will be led by the same PALCAN Team Leader wherever possible. The same technical assessors and/or technical experts may be used at the different locations when the same or similar type of testing and/or calibration activity is performed.
- 4.6 For initial accreditation, all locations where key activities (as defined in ISO/IEC 17011) are performed will be assessed for all applicable requirements of accreditation. Conversely, it may not be necessary to visit satellite offices which largely do not carry out such activities. Such satellite offices could include call centres and remote points of dispatch for the delivery of on-site services under the direct control of a named location within the Group. The services delivered from such satellite offices could instead be assessed at the location to which they report and which manages the key activities.
- **4.7** For reassessment visits, the entire management system will be reassessed over the Group. Some locations may have an abbreviated reassessment provided that: 1) the

entire scope of tests and calibrations are reassessed across the Group; 2) the reassessment is thorough enough to allow a reliable determination of the collective conformity of the Group; 3) the reassessment plan takes into account such factors as past performance and complexity of tests or calibrations; and 4) the activities sampled for reassessment vary between locations and from one visit to the next.

- **4.8** Organisational structures and inter-relations can differ considerably between organisations. Assessments and reassessments will take these into consideration while ensuring that the principles outlined in this document are respected.
- 4.9 Reports prepared by assessment teams will identify clearly the findings applicable to specific locations including applicable findings from assessments to other locations in the Group. These reports will be provided to the named central management system contact person. The assessment teams will also inform each location of the findings related specifically there; usually in the form of a summary report provided at the conclusion of the visit.
- **4.10** Recommendations for accreditation and continued accreditation may be presented to the SCC by the assessment team in a single aggregate report covering the visits to all locations in the Group, provided that these reports describe the scope of assessment activities carried out at each location and provided that they identify the location(s) to which each Requirement applies.
- **4.11** Whether the findings relate to a specific location or not, the Group will investigate the extent to which the findings apply to all other locations. The central management system contact person will report the outcome of these investigations and will coordinate all responses to the assessment team leader.

5 Suspension, reduction and withdrawal of accreditation

- 5.1 Suspensions, reductions, and withdrawals in scope at one location will automatically involve a full consideration by PALCAN of the implications for the Group. Where associated activities at other locations are affected or where distinction between affected and unaffected activities at different locations is not feasible, the suspension, reduction, or withdrawal in scope would apply across the Group. The Group may request suspension or withdrawal of specific locations from the group accreditation.
- In the event of withdrawal or resignation of the group accreditation, any location included in the Group that wishes to remain accredited will need to apply for individual accreditation, and to pay an application fee. The SCC will apply its full accreditation processes to such applications.

6 Fees

6.1 Each location in the Group will be assessed fees as per SCC fee schedule or SCC Partner fee schedules as applicable. They will be determined in advance on a case-by-case basis and will take into account savings from any eliminated duplication of efforts. Reduction of collective fees may not always be possible when potential complexities of

managing a group accreditation are considered. This can also be the case when activities differ greatly between locations within the Group.