GENERAL PRINCIPLES FOR THE ASSESSMENT OF MANAGEMENT SYSTEMS/ PRODUCT/PERSONS CERTIFICATION BODIES

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1. PURPOSE AND SCOPE

The purpose of this document is to outline how SADCAS plans and conducts the assessment of the certification bodies (CBs) to the requirements of the relevant international standard, the applicable International Accreditation Forum (IAF) document and SADCAS requirements. This document is applicable to all applicant and accredited certification bodies providing services under ISO/IEC 17021-1, ISO/IEC 17024 and ISO/IEC 17065.

Certification Bodies are accredited to certify organizations according to the economic sector/activity given in Appendix 1 and, for product certification bodies, detailed specifications or standards. An accredited CB cannot certify outside these classifications unless written permission is granted by SADCAS. It is SADCAS' policy to define the scope of an organization's accreditation as precisely as possible. The scope will be agreed upon before the assessment in order to determine the extent of the assessment activities. Following successful assessment, the scope including applicable ISO standards and guides will be identified on the accreditation schedule.

Note: IAF Mandatory, informative and guidance documents are available on the IAF website www.iaf.nu

2. GENERAL

2.1 SADCAS function is to assess and recognize the competence of conformity assessment bodies and to ensure through monitoring that accreditation scheme requirements are maintained.

2.2 An authorized representative of each applicant CB provides basic information to SADCAS on its activities on SADCAS F 43 (d)/ SADCAS F 43 (e)/ SADCAS F 43 (g), personnel in SADCAS F 43 (f): Application for approval of personnel of the nominated representative together with the CB's quality manual. Assessment of the competence of a CB is carried out through a review of documentation, visits to the CB's central administrative office and other locations and witnessing of activities.

2.3 Relevant documents, procedures and application forms are available on the SADCAS website www.sadcas.org.

2.4 Accreditation of a CB is a voluntary activity. CBs from the public/private sector that want to recognize the competence of their organization to carry out specific tasks can submit an application for accreditation to SADCAS.

2.5 SADCAS uses Assessors/Technical Experts with the relevant specialist knowledge to evaluate the competence of the CBs to perform the activities for which accreditation is sought. The assessment team is required by SADCAS to maintain confidentiality, and to sign SADCAS F 45 (a): Nondisclosure/confidentiality statement specifying the need to declare any potential conflict of interest. Their activities will be confined to assess the CB's activities for compliance with the respective requirements and reporting their findings to the CB and to SADCAS.

2.6 A five-year accreditation cycle is applicable to all CBs which have applied for accreditation to SADCAS.

2.7 Assessment of the competence of CBs is carried out using various assessment techniques, which includes but are not limited to:

Assessment techniques	**Purpose**	**When is this done**
Document reviews	To evaluate whether the CBs' system conforms to the relevant standard(s) and other SADCAS accreditation requirements.	On receipt of an initial application for accreditation
On-site visits to the CBs and other sites where the CB performs audits	To determine, through the gathering of objective evidence, whether the CB is competent and conforms to the relevant standard(s) and accreditation requirements, and where applicable regulatory and legal requirements.	During on-site assessments
Remote Assessments	Assessment of the physical location or virtual site of a conformity assessment body, using electronic means this include assessments conducted via electronic means such as online access, video links, web conferencing, telephone interviews, desktop assessment of documents/records, etc. Note 1: A virtual site is an online environment allowing persons to execute processes, e.g. in a cloud environment.	During extraordinary events or circumstances; - Travel to a CAB or specific location not permitted or possible (i.e. for safety reasons, travel restrictions, etc.); - Periodic on-site assessments or reassessments; - Extensions to a non-critical scope;
Witnessing	To determine whether: • Documented procedures are being followed; • Staff have the skills required to perform scope of accredited work or for which accreditation is sought;	As part of on-site assessment process

Assessment techniques	Purpose	When is this done
	• The training and supervision provided is effective; • The resources available are adequate; • The audits are performed competently; and • Answers to questions asked can be supported.	
Review of performance of CB activities	To confirm that the CB monitors the performance through evaluation of audits in different locations, detection of trends and implementation of appropriate corrective actions.	1) Prior to an on-site initial assessment and re-assessment 2) As a sampling exercise during the periodic on-site assessment
Interviewing	**CB personnel** To confirm that personnel are knowledgeable and competent in the performance of their duties.	As part of on-site assessment process

Assessment techniques	Purpose	When is this done
	Nominated Representative (NR): To confirm that the NR: • is familiar with and fully understands the requirements of the relevant standard or principles applicable to the CB's scope of accreditation; • Irrespective of other duties and responsibilities, has a defined responsibility and the authority to ensure that the management system is implemented and followed at all times to support their proposed/current accreditation scope; • has direct access to the highest level of management at which decisions regarding policy or resources are made; • has an in-depth knowledge of all SADCAS accreditation requirements applicable to the scope of accreditation; particularly as defined in the SADCAS F 44, the relevant SADCAS technical requirements documents; and • keeps SADCAS informed of changes as required by SADCAS TR 03.	1) As part of on-site assessment process 2) Can be a telephonic interview at any time during the accreditation process on application of a new NR
Desktop Reviews	• At the discretion of the Scheme Coordinator, where an extension of an existing scope is applied for, however it does not change the technique and principle	At any time during the accreditation cycle
Extraordinary visits	• To follow up on the investigation and resolution of a complaint against a CB; • To follow up on significant changes in relation to a CB which may have an effect on the CB's accreditation/compliance status;	Refer to SADCAS AP 18

Assessment techniques	Purpose	When is this done
	or • For any other reason that SADCAS may deem necessary to confirm on-going compliance to accreditation requirements.	

3. APPLICATION AND RESOURCE REVIEW

3.1 An authorized representative of a CB wishing to be accredited submits directly to SADCAS duly completed SADCAS F 43 (d): Application for accreditation of certification bodies for management systems/ SADCAS F 43 (e): Application for accreditation of certification bodies - Products/ SADCAS F 43 (g): Application for accreditation of certification bodies for personnel together with the certification body's quality manual and relevant scheme checklists demonstrating that accreditation requirements are addressed, duly completed SADCAS F 43 (f): Application for approval of personnel i.e. nominated representative in the case of certification bodies and duly completed and signed SADCAS F 44: SADCAS accreditation agreement.

3.2 Upon receipt of the above documents, SADCAS Scheme Coordinator will undertake the following:

(i) Review the application form for completeness and verify that the required information and documentation has been received;

(ii) Review the acceptability of technical information provided such as but not limited to:
- Procedures
- Scopes applied for by the CB are contained in Appendix 1;
- Detailed information available on the spread of its customer base relevant to the scope of application;
- Wording used by the CB for the scope description for a certified organization must be an accurate description of the activity certified and should not be opened to misinterpretations by others.
- For product certification the specifications are to be detailed.
- For the sector specific schemes, the detail must be as required by the scheme.
- Confirm that the CB has performed at least one certification.
- Confirm the different locations from which the organization's service is managed and the activities which are carried out at each of these.

(iii) Determine the suitability of the application and verify whether SADCAS is able to carry out the assessment in the scope applied for, in terms of its competence and availability of personnel suitable for the assessment activities and decision making;

(iv) Assign an assessment team and, before engagement, confirm that they possess the required competence in the scope applied for or area of accreditation, and request the team to sign SADCAS F 45 (a) Nondisclosure/Confidentiality Statement – Assessors/ Technical Experts;

(v) Verify whether SADCAS will be able to carry out the assessment within one year of receipt of application, and where this is not possible, the reason shall be communicated to the applicant;

(vi) Verify that the accreditation agreement signed by the authorized representative of the CB has been received;

(vii) Confirm the scope of activities for which the organization is seeking accreditation;

(viii) Should a CB require accreditation for a scope not listed in Appendix 1, this shall be reviewed by the TM/SC and if required the Certification Advisory Committee for a recommendation.

(ix) In the case of multi-standard accreditation (refer to clause 6.4), confirm the multi-standard accreditation for which the organization is seeking accreditation;

(x) Confirm the different locations from which the certification service is managed and the activities which are carried out at each of these locations;

(xi) Seek agreement with the applicant to the appointment of a specified Team Leader (TL) and the Technical Assessors (TA)/Technical Experts (TE) required to cover the scope(s) of the application and assessment dates. SADCAS will send notification of the date(s) of the assessment and the names of the proposed assessment team members, including the organization they work for to the CB for acceptance.

(xii) The CB may object to the appointment of the assessment team. Objection however will only be considered if there is a conflict of interest. In this case the CB shall provide SADCAS with clear and valid reasons of objection in writing within seven (7) working days of receipt of the notification, and proving that conflict of interests exist. The SADCAS Technical Manager will decide whether a change of assessor/TE is warranted or not.

If the CB has good reason to object to an assessor/TE and no other assessor/TE is available from the SADC region to carry out the assessment, SADCAS may opt to use competent assessors/TEs from other accreditation bodies outside the region that are signatories to the IAF MLA. These assessors shall be classified as TE, therefore shall be accompanied by a SADCAS qualified assessor. In this case the CB will be liable for the full costs covering assessor fees, travel and subsistence (accommodation meals and incidental).

(xiii) If an application is received with scopes that the Scheme Coordinator has no technical competence to determine suitability and acceptability of technical information received, an Assessor/ Technical Expert or other SADCAS personnel with the required competence in the scope shall be engaged to complement the Scheme Coordinator during the review.

3.3 At any point in the application or initial assessment process, if there is evidence of fraudulent behaviour, if the CB intentionally provides false information or if the CB conceals information, SADCAS will reject the application or terminate the assessment process.

3.4 Prior to any work being carried out, SADCAS will provide the organization with a quotation detailing the cost of the application and/or pre-assessment and initial assessment. If acceptable, the applicant signs and returns duly signed quotation to SADCAS. Acceptance of the quotation is required in order to proceed to the next stage of the assessment process. Annual accreditation fees will also be quoted and invoiced on a pro-rata basis.

3.5 The SADCAS Policy Manual (SADCAS PM 01) and all other SADCAS accreditation documents applicable to the CBs are available on the SADCAS website www.sadcas.org.

4. MINIMUM SUITABILITY ELEMENTS FOR PRODUCT, PROCESS AND SERVICES SCHEMES

The following explanations are relevant for a product/service/process certification scheme (the criteria from the standard ISO/IEC 17065 are shown in **bold print**):

4.1 The certificate of conformity issued by the certification body must relate to a clearly identified product, process or service (criterion **7.7.1**).

4.2 The certification body must employ a scheme in which the certification activities have been laid down (criterion **7.1.1**). The requirements against which the product, the service or the process are assessed must be clearly specified (criterion **7.1.2**). This is possible by referring to other documents such as legislation, standards or technical specifications. SADCAS will make use of ISO/IEC 17007, Appendices A, B, C and D as a guide in assessing the specified requirements, where applicable. The way in which the requirements are described must make objective determination of conformity possible. Annex B of ISO/IEC 17065 applies specifically to the certification of services and processes.

4.3 If requirements are also made of the (quality) management system within the scheme such as ISO 9001, these must be regarded as supporting requirements and may not lead to the issuance of a certificate of conformity for this management system (criteria **4.4.4, 7.7**).

4.4 The evaluation activities of the certification body used to establish conformity (criterion 7.4) may consist of, for example, testing, inspection and the performance of audits or combinations of these activities. The methods employed for this must be demonstrably suitable for the intended purpose. The method must also describe whether and how spot checks are carried out (and for example samples are taken). The scheme must guarantee that these activities are carried out on a harmonised basis and that account is taken of the relevant testing, inspection and audit requirements (criterion 6.2). It is also important that the method of conformity assessment be clearly specified in line terminology from ISO/IEC 17065:2012 (Criteria **6.2.1** & **2.2.2**, i.e. testing, inspection and audit). On this note, SADCAS will also cover compliance with the relevant requirements of accreditation standards ISO/IEC 17021, ISO/IEC 17025 and ISO/IEC 17020, where applicable.

4.5 A scheme must describe the way in which the evaluation results are to be interpreted and what the consequences are (criteria **7.4, 7.5, 7.6, 7.10, 7.11**). This also means that it must be laid down which non-conformities prevent certification or are reason for suspending or withdrawing a certificate. If legal requirements have been included in the scheme, the nonfulfillment of such requirements must always prevent certification or be reason for suspending or withdrawing a certificate.

4.6 Requirements to be made of the competences for personnel involved in the certification process must be laid down in the scheme (criterion **6.1**).

4.7 The scheme must describe the way in which supervision is implemented (criterion **7.9**). If supervision exists, the type of product certification scheme under ISO/IEC 17067 must be taken into consideration in this regard.

4.8 The certificate of conformity (criterion **7.7**) issued on the basis of the certification evaluation must be in accordance with the assessment carried out. A scheme describes the way in which the scope of certification (criterion **7.7**) is defined if relevant.

4.9 Where the certification gives entitlement to the use of a certification mark (criterion **4.1.3**), the general requirements under ISO/IEC 17030 apply.

4.10 The criteria stipulated above also applies to certification bodies that are already accredited that possibly seek to extend their accreditation on new product certification schemes.

4.11 SADCAS will make use of the document review process to verify that schemes do comply with the criteria above and assessors that are competent will be involved with this verification.

5. DOCUMENT REVIEW

5.1 The CBs' quality manual and procedures will be reviewed for compliance with the applicable standard(s), SADCAS technical requirements and guidance documents.

5.2 Document reviews are conducted on initial application for accreditation.

5.3 The process to be followed for a document review is as follows:

5.3.1 The CB conducts a review of their documentation and completes the requirements checklists for the relevant accreditation standard, detailing where in their documents the accreditation requirements are addressed.

Comments on HOW the requirements of the standard have been implemented, Clause no., sub-clause no., procedure numbers MUST be captured.

5.3.2 The CB submits the completed application forms, checklists, management system manual and where required, procedures to SADCAS.

5.3.3 SADCAS records the date of receipt and forwards the information submitted to the appointed Team Leader.

5.3.4 The Team Leader will identify the relevant technical information to be reviewed by the technical assessor/technical expert prior to the assessment. Selection of Technical Assessors/Experts who will conduct document review shall be based on their knowledge of specific IAF Codes applied for.

5.3.5 The Assessment Team confirms from the information submitted by the CB whether the requirements of the relevant standard, regulatory requirements and any other requirements for accreditation are addressed in the management system manual.

5.3.6 On completion of the document review, a report on the relevant document review checklists for CBs i.e., Checklists: SADCAS F 40 (a): Checklist ISO IEC 17021-1-2015 Conformity Assessment - Requirements for Bodies Providing Audit and Cert MS , SADCAS 130 - SADCAS F 130 - Evaluation of Conformity Assessment Schemes Checklist, SADCAS F 40 (b): Checklist ISO IEC 17065-2012 Conformity assessment - Requirements for bodies certifying products processes & Services and SADCAS F 61 (a-6): Document review for CBs – ISO/IEC 17024 will be issued to the CB. The report will contain comments on any nonconformity, areas which are not addressed, areas where actions are needed, areas where there are concerns or weaknesses and a recommendation on the way forward. A maximum period of six (6) months is allowed for applicant organization to address the findings. Failure to address the findings within the 6-months' period may lead to a repeat of the entire process should the applicant decide to continue seeking accreditation. The Team Leader shall use the appropriate checklist as a guide in reviewing the quality documentation.

5.3.7 For Product, Process and Services Certification Schemes, the SADCAS Scheme Coordinator shall review the *SADCAS F 40 (b*) checklist and SADCAS F 130 - Evaluation of Conformity Assessment Schemes Checklist to determine the suitability of the scheme or standard(s) for accreditation, following which the CB is notified of the acceptance or rejection of the certification scheme to proceed to the next accreditation process step.

5.4 The initial assessment of the CB shall be arranged within three (3) months after the facility has addressed the issues raised in the document review report and advised SADCAS of their readiness for initial assessment. The Assessment Team in collaboration with Scheme Coordinator shall review additional information/documents submitted by facility as part of addressing document review report findings and confirm adequacy prior to arranging initial assessment.

5.5 In case of transition or migration to a new standard the CB shall submit to SADCAS prior to the assessment, completed relevant revised SADCAS checklists and any revised CB documented information. The duly completed checklists shall be submitted to the assessment team 2 weeks prior to the assessment.

6. PRE-ASSESSMENT

6.1 Pre-assessment is an optional stage conducted with the agreement of the CB. The CB that seeks accreditation may voluntarily request SADCAS to conduct a pre-assessment to assess their readiness for accreditation. Pre-assessment is carried out on-site by the Team Leader/Technical Assessor.

6.2 The pre-assessment can be carried out at a specified location (generally the central office) of the CBs to:

(i) discuss any findings related to the documentation;
(ii) seek further information on the management system;
(iii) briefly examine the systems which have been established and implemented;
(iv) discuss any arrangements which have been made to include multiple locations, sub-contracted activities, etc. within the management system;
(v) agree the proposed scope(s) of accreditation;
(vi) determine whether any further assessors/TE will be required.

Note: Due care shall be exercised to avoid consultancy during a pre-assessment.

6.3 The pre-assessment visit will normally be completed within one (1) day.

Note: No technical assessment of the CB's technical capabilities of competencies will be conducted during the pre-assessment.

6.4 The CB may need to make changes to its policies, procedures and practices in order that the organizations documented system complies with the requirements of the relevant standard.

6.5 Once all the findings raised during the pre-assessment have been satisfactorily addressed by the facility, SADCAS will arrange the initial on-site assessment of the CB within 3 months.

7. ASSESSMENTS

7.1 Prior to Assessment

7.1.1 Prior to assessment, the CB will provide SADCAS with a list of current personnel, the opportunity of witnessing for at least one certified organization in the specific scope and the locations (however named) at which they are currently operating. The Scheme Coordinator (SC) will determine, in conjunction with the organization, when and which locations and personnel will be subject to on-site assessment (see 8.4) as part of the planning process.

7.1.2 An assessment schedule and a quotation will be forwarded to the CB in advance of the assessment; written acceptance of the quotation will be required before a visit can be undertaken.

7.1.3 The time required for initial assessment, periodic assessment (on-site or remote assessment) and re-assessment will be dependent on the complexity of the CB, the geographical spread of its activities, the structure of the quality system, the proposed scope(s) of accreditation and where relevant, the combination of multi-standards for accreditation.

7.1.3.1 In determining the assessment duration (initial assessment, periodic on-site assessment, re-assessment, reinstatement) the following information shall be requested from the CB and reviewed by the Scheme Coordinator:

a) Effective number of personnel involved within the scope of certification;
b) Confirmed and planned audits schedule and locations;
c) Audit time determination and justification to the client's organization as part of the CB contract with its clients;
d) List of qualified auditors (internal and external); and
e) List of certified companies.

7.1.3.2 The office assessment of CB (File Reviews) shall be undertaken for a duration of a minimum of one day, applicable to a single sub-scope assessed by the equivalent of one assessor unit. The number of days for the office assessment shall be increased by a minimum of one day for each additional sub-scope to be assessed for the CB.

7.1.3.3 The minimum number of days for witnessing a particular critical code or food chain category, for a given CB's client and sub-scope, shall be the same as the man days determined by the CB in compliance with IAF MD 5 or ISO 22003-1 and verified and confirmed by the Scheme Coordinator.

7.1.3.4 The assessment duration shall comprise of the total number of days for office assessment and witnessing.

7.1.3.5 For each accredited CB, the Scheme Coordinator shall compile an assessment programme that contains the assessment team, assessment durations, witnessing and locations, and indicative dates of the assessments and witnessing as defined in the annual confirmed planned audits schedule submitted by the CB.

7.1.4 SADCAS shall ensure that the appointed assessment team as a whole has the appropriate knowledge of the specific scope(s) of the accreditation and understanding to make a reliable assessment of the competence of the CB to operate within the scope(s) of the accreditation sought.

7.2 Initial Assessment

7.2.1 The nature of the initial assessment will depend on the scope(s) of accreditation required by the CB and the complexity of the management system that is being operated. However, the following elements will be covered:

(i) Central office assessment;
(ii) Assessment of multiple locations (however named and where applicable); and
(iii) Assessments of CB's activities (onsite or remote).

Refer to SADCAS AP 20 which defines SADCAS procedures and specific requirements for sampling of locations, personnel and the scope(s) of accreditation within an accreditation cycle to determine the competence of the CB to perform the activities covered by the scope(s) of accreditation.

7.2.2 At least 2 weeks prior to an assessment the Team Leader shall develop and send to the CB an assessment plan indicating the date(s) of the assessment, assessment team members, activities to be assessed, locations at which activities will be assessed and personnel to be assessed where applicable.

7.2.3 If the CB should not be able to accommodate any of the planned activities, this should be communicated to the team Leader as soon as possible, in order for the assessment plan to be adjusted, as far as possible and within the constraints of the SADCAS AP 20.

7.2.4 Prior to the assessment, the assessment team members will each be provided with an assessment pack containing the relevant assessment documents including the checklist completed by the CB and the document review report.

7.2.5 The SADCAS assessment team will start the assessment with an opening meeting with the CB at which the purpose of the assessment and accreditation requirements are clearly defined, and the assessment plan as well as the scope for the assessment are confirmed. Refer to SADCAS F 46(a).

7.2.6 The SADCAS assessment team shall conduct assessment based on the assessment plan, and shall analyse all relevant information and objective evidence gathered prior to and during the assessment to determine the competence of the CB as determined through its conformity with the requirements for accreditation.

7.2.7 Various assessment techniques will be used to establish whether

(i) The management system support competence against their scope of accreditation, is appropriate to the CB's needs, organizational arrangements and methods of operation, including multiple location activities and number of personnel;
(ii) The CB conforms with all of the requirements for accreditation;
(iii) The CB has implemented all the requirements of the management system effectively;
(iv) The operational, administrative and technical procedures used to support the management system are complete, technically valid and appropriate.

7.2.8 The following techniques will be employed to establish that procedures are being correctly and fully implemented:

(i) Questioning of management and staff who have an involvement in the CB's activities;
(ii) Review of a file of at least one certified organization in the specific scope;
(iii) Examination of records;
(iv) Witnessing of at least one certified organization in the specific scope;
(v) Witnessing of each critical scope; and
(vi) Examination of the arrangements for exercising control over the CB's auditors.

7.2.9 All fields and types of CB's activities will be subject to an office assessment and technical review. The team will assess the technical competence of personnel related to the type of certification covered by the scope(s). This will be done through:

(i) The examination of the records outlined above;
(ii) Discussions with staff supervisors and manager;
(iii) Assessment of the performance of the staff/auditors whilst conducting scheduled activities; and
(iv) Assessment of certification reports issued by the CB.

The review of the files is done with the intention of verifying that the files contain sufficient evidence that the CB performs the certifications in accordance with accreditation criteria. The files are assessed using the appropriate sections of the relevant SADCAS checklists.

In the case of dormant scopes where the CB does not have active files or clients accredited scopes, the Technical Assessor will inform the Team Leader and assess if the CB has the required competency to maintain the scope. The SADCAS assessor will also verify that the CB's auditors have a contract and that the auditors were witnessed and/or deemed competent according to the CB's procedure. The competency of the auditors will be assessed in accordance with the relevant international standard.

7.2.10 If the CB cannot provide at least one witnessing and/or sufficient supporting evidence in order for a vertical assessment to be conducted on the day of the assessment, the assessor has the right to terminate the assessment, and reschedule for another day at full cost to the CB.

7.2.11 The Assessor shall record all the information gathered during the assessment on the relevant SADCAS forms provided for this purpose. The records shall be sufficiently comprehensive as to allow for an independent expert serving on the Accreditation Approvals Committee to reach the same conclusion.

7.2.12 The team will report the findings raised during the on-site assessment on the nonconformity, corrective action and clearance report form SADCAS F 61 (b) and will need to agree on the nature and classification of the nonconformity. Each form shall be signed by the Assessor and the organization's representative. If the team could not reach a decision about a finding, the matter shall be referred to SADCAS for clarification.

7.2.13 After each member of the assessment team has completed the respective assignment in accordance with the assessment plan, they shall hold a private meeting to summarize their conclusions and contribute to a coordinated view on the status of the applicant CB's system.

7.2.14 The team, together with the CB's representative will agree on the draft scope of accreditation during the closing meeting.

7.2.15 At the end of an assessment, whether performed on-site or remotely, a meeting shall be held between the assessment team and the CB. Refer to SADCAS F 46 (b). At this meeting, the assessment team shall report on the findings identified during the assessment and detail in writing any nonconformities. The Team Leader will provide the CB with an opportunity to seek clarification on the findings including any nonconformities and their basis.

7.2.16 A summary of the assessment report [SADCAS F 61 (c)] shall be provided to the CB in writing without undue delay. If the written report on the outcome of the assessment differs from the outcome delivered at the close of the assessment (see 6.2.15 above), SADCAS shall provide an explanation to the assessed conformity assessment body, in writing. Where corrective action by the CB is required [SADCAS F 61 (b)], the applicant organization shall be requested to analyse the extend and root cause of the nonconformities, and identify and propose corrective actions to address the raised nonconformities within one (1) month after the assessment and have corrective action cleared within three (3) months after the assessment. In most cases evidence can be provided by post/fax/e-mail although there may be situations where additional visits to the CB will be required. If an additional visit for clearing of findings is recommended by the assessment team, it will be at cost to the organization. SADCAS will review the evidence provided and decide upon its acceptability.

7.2.17 The corrective actions provided by the CB will be reviewed by the relevant assessor, to determine whether the actions are appropriate and sufficiently address the nonconformities. Where the CB root cause analysis and/or corrective actions are found not to be sufficient, further information will be requested from the CB, or a follow up assessment may be carried out to verify the effective implementation of corrective actions at the cost of the CB.

7.2.18 When all corrective actions have been approved by the assessment team, the SADCAS Accreditation Approvals Committee (AAC) will review the assessment documentation and decide whether to support the recommendation made by the team. If the AAC is satisfied, accreditation will be granted and a SADCAS certificate and scope of accreditation will be issued. The AAC meetings shall be held as necessary without undue delay to the accreditation decision making process. The AAC should be held within two (2) weeks after the review of the file.

Note: The Certificate and schedule(s) of accreditation shall not be issued if there are any outstanding fees.

7.3 Multi-Location Certification Bodies

7.3.1 An applicant that operates from a central CB through a number of locations may seek a single accreditation provided that the conditions specified in the relevant standard are fulfilled.

Groups of CBs operating under the same quality system are allocated individual accreditation numbers, and each satellite CB shall be individually assessed.

Where CBs have branch offices in other countries, these branch offices shall be subject to assessment visits provided they are not just a sales office. Where locations can be classified as a foreign critical location and falls within the IAF Policy on Cross Frontier, then the SADCAS AP 19 comes into effect.

Any branch office conducting the following activities shall be visited:

a) Arrange certifications;
b) Maintain the files of CBs;
c) Appoint auditors;
d) Maintain a different quality system;
e) Maintain a quality system similar to the main office but manage it themselves.

7.3.2 CBs shall under no circumstances franchise their accredited activities to other CBs/ organizations.

7.3.3 On application, the CB must indicate the number and range of locations being operated. All locations will be visited during the initial assessment, thereafter, SADCAS will visit selected locations taking into account:

(i) The results of internal audits from central CB and locations;
(ii) The results of management reviews;
(iii) Variations in the size of locations;
(iv) Complexity of the quality system;
(v) Complexity of the locations;
(vi) Variations in activities undertaken e.g. types of certifications activities.

7.3.4 It will normally not be necessary to witness the full range of scopes for each selected location once accredited.

7.3.5 SADCAS will seek to establish through objective evidence and by using various techniques that:

(i) All locations are operating under the same quality system;
(ii) All locations are included in the internal audit programme and central review process.

7.3.6 All locations must be working to the same requirements and may be subject to assessment on a sampling basis as part of the accreditation process to provide evidence of the operation and effectiveness of the system.

7.3.7 During the central CB assessment SADCAS may need to see records of activities, which are being carried out at different locations.

7.3.8 If SADCAS observes non-compliance at the central CB or at any one of the locations of a CB with multiple locations, the corrective action procedure shall apply to all locations where applicable. In the event that the results of any of the assessments of 'sample locations' reveal that there is a significant weakness or inconsistency in the application of the quality system, SADCAS will review the assessment programme and may increase the number of locations to be assessed.

7.3.9 Failure by one location to comply with SADCAS requirements may lead to removal of the location from the scope of accreditation. If the cause of non-compliance is the lack of central control then the corporate accreditation will be subject to be reviewed by SADCAS and may lead to suspension or withdrawal of accreditation from all locations.

7.3.10 Generally, each location from which a CB is operating will be visited at least once during the assessment cycle.

7.3.11 SADCAS must be advised of any changes to location addresses and activities, see SADCAS F 44. The establishment of any new locations from which the CB proposes to offer an accredited service must be notified to SADCAS before these can be included in the scope of accreditation. The need for assessment of the new location will be reviewed, the scope of accreditation will be amended as appropriate and the location will be included in the programme of periodic on-site assessments and re-assessment.

7.4 Multi-Standard Assessment

7.4.1 A CB who wishes to be assessed to two (2) or more accreditation standards may be assessed to multiple standards at the same assessment, using one Team Leader knowledgeable in the multi-standards for which accreditation is sought, together with the required technical assessors/technical experts.

7.4.2 Where the scope applied for falls under different schemes and/or sub schemes (e.g. Certification of management systems in accordance with ISO/IEC 17021-1 and Inspection in accordance with ISO/IEC 17020, or certification of management systems in accordance with ISO/IEC 17021-1 and

certification of products in accordance with ISO/IEC 17065 the accreditation application forms and approval of personnel forms of the different schemes must be completed in full, although only one copy of all the information required must be submitted to SADCAS. Each applicant organization also provides completed SADCAS checklists appropriate to its scope of application and Multi-Standard combination indicating where the requirements are addressed in their system.

7.4.3 The application forms are forwarded to the Scheme Coordinator who will process the application form as described in Clause 3 of this document.

7.4.4 It is important for the organization to ensure that the applicable Multi-Standards are fully addressed in their documented system to ensure that all the requirements are fully addressed. If the documented system does not address the applicable Multi-Standards fully additional time may be required for the document review and assessment. An integrated management system is preferred.

7.4.5 The normal application and assessment process is followed, as described in Clauses 3 to 6, with a pre-assessment which may be mandatory for a multi-standard assessment.

7.5 Witnessing of Scopes

7.5.1 The aim of the witnessing performed by SADCAS is to verify that the CB has implemented the procedures on site. It is also to verify that the CB covers all the necessary certification requirements and that they use appropriately qualified auditors. All observations made during the witnessing shall be recorded on SADCAS F 61 (h-1)/SADCAS F 61 (h-2)/ SADCAS F 61 (h-3). The witnessing report summary shall be completed on SADCAS F 81. It may be necessary for the SADCAS assessor to witness more than one auditor during the witnessing assessment. It is not necessary that the same auditor be witnessed throughout the activity. Separate witnessing report forms shall be completed for each auditor witnessed.

7.5.2 It is preferable that witnessed audits planned by the CB are for initial or re-certification audits in order that the full process can be evaluated by the SADCAS assessor. The witnessing for initial accreditation shall cover stage 1 and stage 2 audits for at least one of the CB's clients.

7.5.3 SADCAS is responsible for developing a 5-year assessment programme to allow for the appropriate sampling of scopes to be assessed through either witnessing and/or file review. The sampling shall be based on the number of critical scopes included in the application and volume of certifications in the scopes and shall be such that SADCAS gains evidence in order to make a fair decision on the competence of the CB to perform certifications.

7.5.4 Where the application for an initial assessment contains critical scopes, SADCAS shall discuss the witnessing aspect of the accreditation process with the customer. The witnessing of critical codes/categories shall take into consideration the economic sector/activity and requirements outlined in IAF MD 17/16.

7.5.5 Where the number of critical scopes applied for is greater than 4, then SADCAS may, based on various factors, increase the number of witnessing. Preferably only one witnessing shall be performed in a critical scope at each assessment. SADCAS may reduce the number of witnessing for a CB based on various factors (history of competence, previous competence of the CB, etc.). The reason for the reduction is to be filed within the company file. It is normal practice to replace some on-site witnessing with an additional office visit to review a larger number of files.

7.5.6 Where the application for an initial assessment contains more than 4 non-critical scopes, SADCAS shall witness a minimum of 2 certifications. SADCAS will sample the rest of files for review before accreditation. If the application contains 4 or less than 4 non-critical scopes, SADCAS will witness a minimum of 1 scope.

7.5.7 Where the application for an initial and/or extension of scope contains scopes in the food sector, SADCAS shall discuss the witnessing aspect of the accreditation process with the customer. It shall be explained to the applicant that food scopes are regarded as critical and SADCAS will witness critical scopes before granting accreditation.

7.5.8 The witnessing rules as defined in IAF MD17/16 apply for the granting and extension of accreditation of each management scheme which can be complemented with other assessment activities to guarantee the appropriate coverage of the applicant scope for each technical cluster. After the initial assessment and the CB having been accredited SADCAS disperses the witnessing throughout the 5-year cycle.

7.5.9. The assessment program shall ensure that competence is assessed throughout the accreditation cycle using office assessment activities including file reviews and/or witnessing activities and taking into consideration criteria such as CB's overall performance, number of certificates issued, number of auditors, countries where the CB perform its activities and any other criteria that may be defined as per the activities of the CB.

7.5.10 For every 500 certifications done in a particular critical scope at least one witnessing shall be done. When the number exceeds 500 but less than 1000, a minimum of two witnessing shall be done. When the number of certifications exceeds 1000 in a specific critical scope SADCAS shall determine the number of witnessing to be done but they shall not be less than three. This applies for the initial assessment. Thereafter the number of witnessing may be reduced in accordance with this procedure.

7.5.11 Either the Team Leader or, in the case of EMS, HACCP witnessing, the TA/TE shall perform the witness activity.

7.5.12 Once a witness audit has been agreed upon between SADCAS and a CB, the following applies:

a) The CB is to ensure that SADCAS receives an audit plan including location(s) and contact details of the CB auditor two (2) weeks prior the audit date;
b) The CB is to ensure that SADCAS receives information on any special requirements such as safety, dress code, security clearance, etc. at least two (2) weeks prior to the audit date;

c) The CB is to ensure that SADCAS receives a copy of the selected auditor's CV and a competency assessment report two (2) weeks prior the audit;
d) The CB is to ensure that its team leader communicates SADCAS' role to the facility at the opening meeting and reaffirms confidentiality;
e) The CB is to ensure that its auditor allows the SADCAS assessor to review any documentation that the CBs auditor sampled at the facility being audited;
f) In order to make an informed decision at the end of the witnessed audit process, the SADCAS assessor needs to witness as much as possible the audit process and therefore the requirement to witness any meetings and discussions between the team as well as the organization as possible;
g) No opening nor closing meeting is held by SADCAS with witness audit activities;
h) SADCAS will arrange travel and accommodation for their assessors;
i) The Scheme Coordinator shall ensure that the CB provides a copy of the CB's audit report which is subject of the witnessing within one month of completion of the audit. Failure to do so within this timeline may result in the witness activity being declared "null and void" and a new witness activity will have to be arranged;
j) On receipt of the final report from the CB, it is forwarded to the SADCAS Assessor who shall finalize the witnessing report SADCAS F 61 (h-1)/SADCASF 61 (h-2)/SADCAS F 61 (h-3) stating whether the CB and the audit team performed a competent audit of the organization and highlight areas of concerns by completing SADCAS F 81 Witness summary within fifteen (15) days;
k) The final report from the assessor may undergo an Accreditation Approval Committee (AAC) as outlined in SADCAS AP 14. Should a problem be identified which affects the competence of the CB to perform certifications, SADCAS shall communicate the feedback to the CB for appropriate action. The reports will be followed up at the next assessment.

7.5.13 An additional witness activity may be required as part of the clearance for such a nonconformity.

7.5.14 All annual witnessing for maintenance of accreditation shall preferably be conducted before the on-site assessments. It is the responsibility of the CB to forward audit dates on a quarterly basis to SADCAS. Should a witnessing not be done before the on-site visit, the assessment team will recommend continued accreditation subject to a successful witnessing. The AAC will also take this aspect into consideration.

7.5.15 FSMS sub-scopes will be excluded from the assessment plan if witnessing cannot be performed for the FSMS sub-scopes (IAF MD 16). Any accredited food chain category of FSMS which has not been witnessed within a period exceeding 12 months will not be considered in the assessment if there is no CB client to witness. The reason will be communicated to CB via the assessment plan SL 20 which will be confirmed by the CB prior to assessment.

7.5.16 If the CB has lost clients for MS IAF Critical Codes within the accreditation cycle and is due for renewal of accreditation such Codes will be excluded from the reassessment plan (SL 20) as IAF MD 17 requires witnessing within an accreditation cycle.

8 THE ACCREDITATION CYCLE

8.1 The Accreditation Cycle begins on the day of the decision to grant the initial accreditation or decision after re-assessment, and is valid for a period of 5 years, subject to the Accreditation Requirements being met (Refer to F 44). The assessment programme shall ensure that the requirements of the international standard and other normative documents containing requirements for CB and the scope of accreditation are assessed taking risks into consideration.

8.2 Once accreditation has been granted, the Scheme Coordinator shall apply an assessment programme in which the assessments of the CB's activities throughout the cycle are planned and conducted in accordance with SADCAS AP 20.

8.3 When establishing the assessment programme, the Scheme Coordinator shall cover the scope(s) of each accredited CB and consider factors such as information about the CB's management system and activities, its performance, risks identified, relevant locations/sites, number and competency of the auditors and number of clients/certificates issued. Some of this information will normally be recorded by the Team Leader on the Assessment Matrix (SADCAS F 101/102/103) and/or on the Assessment Feedback (SADCAS F 57) forms, or will be contained in the Accreditation Approvals Committee decisions. The assessment programme need to be periodically reviewed and updated.

8.4 The Assessment Programme consists of:

- Periodic on-site assessments; and
- A reassessment prior to the expiry of the Certificate of Accreditation.

9 PERIODIC ASSESSMENT

9.1 General

Following accreditation, SADCAS will check for continuing compliance with accreditation requirements by carrying out periodic on-site visits to a CB. The first periodic on-site assessment is undertaken not more than 12 months after accreditation thereafter annually throughout the accreditation cycle. The Intervals between periodic on-site assessments can be extended depending on risks associated but must not exceed two years. If SADCAS determines that an on-site assessment is not possible or feasible, another assessment technique (e.g. remote assessment) shall be used to achieve the same objective as the on-site assessment being replaced.

The level of sampling of locations and personnel will depend on performance over the assessment cycle, the extent of any changes, which have taken place, and the level of confidence, which can be placed in the performance measures, and control systems of the CB.

9.2 Periodic on-site assessment

Periodic on-site visits will be planned to cover the whole of the scope(s) of accreditation over the assessment cycle. SADCAS shall plan the periodic on-site visits of accredited CB taking into account other periodic on-site activities. Any revisions to the management system will be reviewed during these visits. Extensive changes may require additional assessment time.

A report will be provided to the facility at the time of the periodic on-site assessment. Where corrective action is required, the facility shall address the nonconformity and to have the corrective action cleared within two (2) months after the assessment.

In most cases evidence can be provided by email/fax/post although there may be situations where additional visits to the CB may be required. SADCAS will review the evidence provided and decide upon its acceptability.

9.3 Multi-Location Certification Bodies

For multi-location CBs the central quality system and technical requirements will be subject to periodic onsite assessments with the first periodic onsite visit being undertaken not more than 12 months after accreditation thereafter annually throughout the accreditation cycle. The intervals between periodic onsite visits can be extended depending on the risks associated but must not exceed two years. It is anticipated that, in addition to the central CB, at least one location will be visited each year, with a visit to each location generally taking place over the assessment cycle. However, the level of sampling of locations and personnel will depend on performance over the assessment cycle, the extent of any changes which have taken place and the level of confidence which can be placed in the performance measures and control systems of the CB.

9.4 On-site Assessment of Certification Bodies

On-site assessment of a CB will be carried out at **each** periodic onsite visit where practicable. The same criteria used for assessment will be considered when determining the number and type of activities to be witnessed. The CB shall inform SADCAS if a site is not available for the scheduled periodic onsite visit.

The applicant organization shall address the raised nonconformities and have corrective action cleared within two (2) months after the assessment.

10 REASSESSMENT

10.1 The CB shall submit an application forms for renewal of accreditation at least 9 months before the expiry of the accreditation with at least the following:

- Fully completed management and technical checklists containing comments on how the requirements of the relevant standard are implemented and in which policy/procedures it is addressed.
- SADCAS may request other information as needed e.g. reports for new scopes added.

NOTE: If an application and payment for reassessment is not received six months prior to the expiration of accreditation, the facility shall be required to undergo the initial accreditation process that includes payment of application fee and document review.

10.2 The application information will be submitted to the assessment team once they are appointed in order to allow the team to prepare for the assessment, and request any further information/clarification before the assessment. Feedback on this information need not be provided, unless they are any concern on information provided and where the CB is required to take actions.

10.3 A re-assessment is planned and conducted at least 6 months prior to the end of the accreditation cycle. Re-assessment visits will consider information gathered from assessments performed within the accreditation cycle. This information is normally obtained from the assessment matrix forms completed for the cycle. The Scheme Coordinator shall review and analyze the fully completed assessment matrix, document the analysis and consider the information from the review in planning the re-assessment The same criteria used for assessment will be considered when determining the number of activities and personnel to be assessed. The reassessment shall confirm the competence of the CB and cover all the requirements of the standard(s) for which the CB is accredited.

10.4 The applicant organization shall address the raised nonconformities and have corrective action cleared within two (2) months after the assessment.

Note: Should the application for renewal of accreditation not be submitted before the expiry of the Certificate, a re-assessment may not be conducted prior to the end of the accreditation cycle, resulting in the expiry of the CB's accreditation and the CB having to re-apply for accreditation as a new applicant. All application fees and timeframes will be applied for the re-application.

11 SCOPE EXTENSIONS

11.1 There are two types of extensions to the scope of accreditation:

- A whole new scope including the conformity assessment activities within that scope; and
- Conformity assessment activities added to an existing accredited scope.

11.2 Following receipt of an application for extension of the scope of accreditation including supporting information to show that the requirements for accreditation are met, SADCAS will determine the application in accordance with clause 3 and determine whether or not there is a need for an additional assessment or if an assessment of the requested scope can occur during the CB next planned assessment. SADCAS F 44 may be excluded from the documentation to be submitted by the CAB unless it has been revised since the last application. SADCAS F43(f) for the Nominated Representative may be excluded from documentation submitted by the CAB unless an alternate or new Nominated Representative is required for the scope extension.

11.3 The following factors will be taken into consideration:

(i) Existing scope of accreditation;
(ii) Risks associated with the activities or locations to be covered in the scope extension;
(iii) Scopes applied for;
(iv) The location at which the extension to scope is sought;
(v) Whether or not different set of competencies required to perform the requested scopes; and
(vi) Competency of staff.

11.4 For an assessment of the extension of scope applied for to take place at the next scheduled assessment, the application must be submitted to SADCAS at least six (6) weeks prior to the next assessment date.

11.5 Where possible and desirable, any additional work will be carried out at the next periodic on-site assessment or re-assessment visit; where necessary, additional visits will be arranged. The assessment programme and planning for the subsequent assessments will be reviewed and may be revised and the CB fees may be revised accordingly.

11.6 For extension to critical scopes, SADCAS shall witness the scope prior to accreditation being granted to the CB for that scope.

11.7 For non-critical scopes SADCAS shall witness a minimum of 1 scope per application for extension prior to the extension being given and conduct a file review on the remainder.

11.8 In those instances where in the opinion of SADCAS the extension is such that it involves no new expertise by the CB, SADCAS may waiver the on-site assessment of the office. The reason for this should be documented in the specific file for the company.

11.9 For product certification, once a scope has been approved, it is possible for a CB to add additional standards to the approved scope without being assessed by SADCAS for the additions, provided that the CB can demonstrate that they have access to the competence required by the applicable specifications/standards such as:

a) The written specifications/standard;

b) Competent auditors;
c) Competent testing facilities;
d) Specific requirements as required by IAF documents

12 ACCREDITATION OF CRITICAL FOREIGN LOCATIONS

Refer to SADCAS AP 19.

13 SCOPE OF ACCREDITATION

13.1.1 It is SADCAS' policy to define the scope(s) of a CB's accreditation as precisely as possible. CBs will therefore be asked to specify in detail the specific sub scopes and NACE codes for which accreditation is sought and the locations at which these activities are to be carried out. The scope(s) and sub scope(s) will be agreed as far as possible before the assessment in order to determine the extent of the assessment activities. Following successful assessment, the scope(s) including standard specifications and procedures relevant to the certification activities concerned will be identified on the accreditation Scope.

Following accreditation, the Scope is considered to be in the public domain unless otherwise requested by the CB for legitimate reasons and will form the basis of SADCAS publication Directory of Accredited Organizations

14 TIMESCALE FOR ACCREDITATION PROCESS

14.1 SADCAS makes every effort to ensure that all applications are processed as efficiently as possible. The time taken to process an application depends on a number of factors, some of which are outside the control of SADCAS. The timing is dependent on:

(i) The quality of the applicant's documentation and the extent to which it complies with SADCAS requirements. A delay can occur due to insufficient documented procedures and submission of inadequate Quality Manuals;
(ii) The availability of suitable assessors/technical experts;
(iii) The level of implementation of the system and available evidence of technical competence
(iv) How efficiently the applicant organization clears the nonconformities after the initial assessment;
(v) The availability of the resources within SADCAS.

15 COMPLAINTS, APPEALS AND DISPUTES

15.1 Complaints, appeals and disputes will be handled in accordance with the SADCAS AP 08.

16 OBLIGATIONS AND DUTIES OF ACCREDITED FACILITIES

16.1 The obligations and duties of an accredited facility are captured in the SADCAS F 44. All applicant organizations need to familiarize themselves with the content of this document.

16.2 Accredited facilities are obliged to pay fees specified in SADCAS AP 02. The current rates are published on the SADCAS website: www.sadcas.org

17 SUSPENSION OF ACCREDITATION

17.1 The SADCAS TR 06 covers suspension and reinstatement of accreditation.

17.2 If the CB is to perform any activity in the suspended scope during the suspension period, they must inform SADCAS at their earliest opportunity for arrangements for a re-instatement assessment.

18 WITHDRAWAL OF ACCREDITATION

18.1 The SADCAS TR 06 covers withdrawal of accreditation.

18.2 If the CB accreditation is withdrawn, the CB shall submit a new application for accreditation to SADCAS should they want to continue.

19 REDUCTION OF SCOPE OF ACCREDITATION

A CB may apply to SADCAS to have their scope of accreditation reduced at any time. An application for the reduction in scope may be for a number of reasons such as lack of access to the expertise needed for the scope, insufficient applications in the scope, etc.

If the CB fails to meet the requirements for accreditation for the sub scope(s)/NACE codes already accredited including competence of personnel, SADCAS shall reduce the scope of accreditation to exclude those sub scopes/NACE codes.

SADCAS will update the certificate and scope of accreditation accordingly and publish the amended version on the SADCAS website.

20 REFERENCES

- IAF Mandatory, informative and guidance documents are available on the IAF website www.iaf.nu
- ISO/IEC 17021-1: Conformity assessment – Requirements for bodies providing audit and certification of management systems - Part 1: Requirements
- ISO/IEC 17021-2: Requirements for bodies providing audit and certification of management systems -- Part 2: Competence requirements for auditing and certification of environmental management systems

- ISO/IEC 17021-3: Conformity assessment – Requirements for bodies providing audit and certification of management systems – Part 3: Competence requirements for auditing and certification of quality management systems
- ISO/IEC 17021-10: Conformity assessment - Requirements for bodies providing audit and certification of management systems - Part 10: Competence requirements for auditing and certification of occupational health and safety management systems
- ISO 22003-1:2022 Food Safety – Requirements for bodies providing audit and certification of food safety management systems
- ISO/IEC 17024: Conformity assessment – Requirements for bodies operating certification of persons
- ISO/IEC 17065: Conformity assessment – Requirements for bodies certifying products, processes and services
- ISO 19011: Guidelines for auditing management systems
- ISO 45001: Occupational health and safety management systems – Requirements with guidance for use
- SADCAS TR 01: Part 1: Conditions for the use of SADCAS accreditation Symbol
- SADCAS TR 01: Part 2: Use of combined Accreditation Symbol and ILAC MRA/IAF Mark
- SADCAS TR 03: Nominated representative and signatories – Responsibilities
- SADCAS TR 06: Suspension and re-instatement of accredited organizations
- SADCAS AP 08: Customer feedback handling procedure
- SADCAS AP 13: Preparation of assessment report
- SADCAS AP 14: Accreditation decision making process
- SADCAS AP 18 – Criteria for extraordinary assessments
- SADCAS AP 19: Cross frontier accreditation
- SADCAS AP 20 – Sampling for assessment purposes
- SADCAS PM 01 – SADCAS Policy Manual
- SADCAS F 40(a): Checklist ISO IEC 17021-1-2015 Conformity Assessment - Requirements for Bodies Providing Audit and Cert MS
- SADCAS F 40(b): Checklist ISO IEC 17065-2012 Conformity assessment - Requirements for bodies certifying products processes & Services
- SADCAS F 130 - Evaluation of Conformity Assessment Schemes Checklist
- SADCAS F 43 (d): Application for accreditation of certification bodies for management systems
- SADCAS F 43 (e): Application for accreditation of certification bodies – Products
- SADCAS F 43 (g): Application for accreditation of certification bodies for personnel
- SADCAS F 43 (f): Application for approval of personnel
- SADCAS F 44: SADCAS accreditation agreement
- SADCAS F 46 (a): Onsite assessment – Opening meeting agenda
- SADCAS F 46 (b): Onsite assessment – Closing meeting agenda
- SADCAS F 46 (c): Attendance register – Onsite assessment – Opening/closing meetings
- SADCAS F 57: Feedback from assessments
- SADCAS F 61 (b): Conformity assessment body – Nonconformity, corrective action and clearance report
- SADCAS F 61 (c): Assessment recommendation report
- SADCAS F 61 (a-6) - Document Review Report for Personnel Certification Bodies

- SADCAS F 61 (h-1): Report on witnessing of a management systems certification body (ISO/IEC 17021)
- SADCAS F 61 (h-2): Report on witnessing of a product certification body (ISO/IEC 17065
- SADCAS F 61 (h-3): Report on witnessing of a certification body for persons
- SADCAS F 81: Witness summary for certification bodies
- SADCAS F 93: Completeness check of application and Resource review
- SADCAS F 101: Assessment cycle matrix ISO/IEC 17021-1:2015
- SADCAS F 102: Assessment cycle matrix ISO/IEC 17065:2012
- SADCAS F 103: Assessment cycle Matrix ISO/IEC 17024:2012
- SADCAS SL 20: Assessment Plan
- SADCAS AP 23 - Remote Assessments- Management and Execution
- SADCAS F 115 – List of Applicable Documents - CBAS
- SADCAS F 128 – Risk Evaluation Form
- SADCAS F 130 - Evaluation of Conformity Assessment Schemes Checklist

APPENDIX 1: ACCREDITATION SCOPES

Table 1: QMS ACCREDITATION SCOPE (ISO 9001)

All the IAF codes (see IAF ID1) have been merged into a series of technical clusters for QMS.

Technical cluster	IAF code	Description of economic sector/activity, according to IAF ID1	Critical code(s)
Food	1	Agriculture, forestry and fishing	3
	3	Food products, beverages and tobacco	
	30	Hotels and restaurants	
Mechanical	17	Basic metals and fabricated metal products	22 or 20
	18	Machinery and equipment	
	19	Electrical and optical equipment	
	20	Shipbuilding	
	22	Other transport equipment	
Paper	7	Limited to “Paper products”	9
	8	Publishing companies	
	9	Printing companies	
Minerals	2	Mining and quarrying	2 or 15
	15	Non-metallic mineral products	
	16	Concrete, cement, lime, plaster, etc.	
Construction	28	Construction	28
	34	Engineering services	
Goods production	4	Textiles and textile product	5 or 14
	5	Leather and leather products	
	6	Wood and wood products	
	14	Rubber and plastic products	
	23	Manufacturing not elsewhere classified	
Chemicals	7	Limited to “Pulp and paper manufacturing”	12
	10	Manufacture of coke and refined petroleum products	
	12	Chemicals, chemical products and fibres	
Supply	25	Electricity supply	26
	26	Gas supply	
	27	Water supply	
Transport & Waste	24	Recycling	24
	31	Transport, storage and communication	

Technical cluster	IAF code	Description of economic sector/activity, according to IAF ID1	Critical code(s)
management	39	Other social services	
Services	29	Wholesale and retail trade; Repair of motor vehicles, motorcycles and personal and household goods	
	32	Financial intermediation; real estate; renting	
	33	Information technology	
	35	Other services	
	37	Education	
	36	Public administration	37 or 33
Nuclear	11	Nuclear fuel	11
Pharmaceutical	13	Pharmaceuticals	13
Aerospace	21	Aerospace	21
Health	38	Health and social work	38

Table 2: EMS ACCREDITATION SCOPE (ISO 14001)

All the IAF codes (see IAF ID1) have been merged into a series of technical clusters for EMS.

Technical cluster	IAF code	Description of economic sector/activity, according to IAF ID1	Critical code(s)
Agriculture, forestry and fishing	1	Agriculture, forestry and fishing	1
Food	3	Food products, beverages and tobacco	3
	30	Hotels and restaurants	
Mechanical	17	Limited to “Fabricated metal products”	20 or 21
	18	Machinery and equipment	
	19	Electrical and optical equipment	
	20	Shipbuilding	
	21	Aerospace	
	22	Other transport equipment	
Paper	7	Limited to “Paper products”	9
	8	Publishing companies	
	9	Printing companies	
Construction	28	Construction	28
	34	Engineering services	

Technical cluster	IAF code	Description of economic sector/activity, according to IAF ID1	Critical code(s)
Goods production	4	Textiles and textile products	4 and 5
	5	Leather and leather products	
	6	Wood and wood products	
	23	Manufacturing not elsewhere classified	
Chemicals	7	Limited to "Pulp and paper manufacturing"	7 and 10 and 12 and 13
	10	Manufacture of coke and refined petroleum products	
	12	Chemicals, chemical products and fibres	
	13	Pharmaceuticals	
	14	Rubber and plastic products	
	15	Non-metallic mineral products	
	16	Concrete, cement, lime, plaster, etc.	
	17	Limited to "Base metals production"	
Mining and quarrying	2	Mining and quarrying	2
Supply	25	Electricity supply	25 or 26
	26	Gas supply	
	27	Water supply	
Transport & Waste management	31	Transport, storage and communication	24 and 39 (limited to NACE 37, 38.1, 38.2, 39)
	24	Recycling	
	39	Other social services	
Services	29	Wholesale and retail trade; Repair of motor vehicles, motorcycles and personal and household goods	29 or 35 or 36
	32	Financial intermediation; real estate; renting	
	33	Information technology	
	35	Other services	
	36	Public administration	
	37	Education	
Nuclear	11	Nuclear fuel	11
Health	38	Health and social work	38

Table 3: OH&S ACCREDITATION SCOPE (ISO 45001)

All the IAF codes (see IAF ID1) have been merged into a series of technical clusters for OH&SMS.

Technical cluster	IAF code	Description of economic sector/activity, according to IAF ID1	Critical code(s)
Agriculture, forestry and fishing	1	Agriculture, forestry and fishing	1
Food	3	Food products, beverages and tobacco	3
	30	Hotels and restaurants	
Mechanical	17	Limited to “Fabricated metal products”	20 and 21
	18	Machinery and equipment	
	19	Electrical and optical equipment	
	20	Shipbuilding	
	21	Aerospace	
	22	Other transport equipment	
Paper	7	Limited to “Paper products”	9
	8	Publishing companies	
	9	Printing companies	
Construction	28	Construction	28
	34	Engineering services	
Goods production	4	Textiles and textile products	[4 (with dyeing) and 5 (with tanning)] or 6
	5	Leather and leather products	
	6	Wood and wood products	
	23	Manufacturing not elsewhere classified	
Chemicals	7	Limited to “Pulp and paper manufacturing”	[7 and 10 and 12 and 13 and 16] or 17
	10	Manufacture of coke and refined petroleum products	
	12	Chemicals, chemical products and fibres	
	13	Pharmaceuticals	
	14	Rubber and plastic products	
	15	Non-metallic mineral products	
	16	Concrete, cement, lime, plaster, etc.	
	17	Limited to “Base metals production”	
Mining and quarrying	2	Mining and quarrying	2
Supply	25	Electricity supply	25 or 26
	26	Gas supply	

	27	Water supply	
Transport & Waste management	31	Transport, storage and communication	[31 (limited to dangerous goods) and 24] or 39 (limited to NACE 37, 38.1, 38.2, 39)
	24	Recycling	
	39	Other social services	
Services	29	Wholesale and retail trade; Repair of motor vehicles, motorcycles and personal and household goods	29 or 35 or 36
	32	Financial intermediation; real estate; renting	
	33	Information technology	
	35	Other services	
	36	Public administration	
	37	Education	
Nuclear	11	Nuclear fuel	11
Health	38	Health and social work	38

Table 4: FSMS & HACCP Sub-scopes Food Chain Categories
Clusters, Categories, sub-categories and included activities are included, as applicable, according to ISO 22003-1:2022

Cluster	Category	Category Description	Subcategory	Subcategory Description	Examples of included activities
Primary production	A	Farming or handling of animals	AI	Farming of animals for meat/ milk/ eggs/ honey	Raising animals (other than fish and aquaculture) used for meat production, egg production, milk production or honey production. Growing, keeping, trapping and hunting (slaughtering at point of hunting). Associated temporary packing without modification or processing of the product.
			AII	Farming of fish and seafood	Raising fish and seafood used for meat production. Growing, trapping and fishing (slaughtering at point of capture). Associated temporary

Cluster	Category	Category Description	Subcategory	Subcategory Description	Examples of included activities
					packing without modification or processing of the product.
	B	Farming or handling of plants	BI	Farming - Handling of plants (other than grains and pulses)	Growing or harvesting of plants (other than grains and pulses): horticultural products (fruits, vegetables, spices, mushrooms, etc. and hydrophytes for food. On farm storage of plants (other than grains and pulses), including horticultural products and hydrophytes for food.
			BII	Farming - Handling of grains and pulses	Growing and harvesting of grains and pulses for food. Handling grains and pulses. On farm storage of grains and pulses for food.
			BIII	Pre-process handling of plant products	Activities on harvested plants that do not transform the product from original whole form, including horticultural products and hydrophytes for food. These include cleaning, washing, rinsing, fluming, sorting, grading, trimming, bundling, cooling, hydro-cooling, waxing, drenching, aeration preparing for storage or processing, packing, repacking, staging, storing and loading.
Processing food for humans and animals	C	Food, ingredient and pet food processing	C0	Animal - Primary conversion	Conversion of animal carcasses intended for further processing including lairage, slaughter, evisceration, bulk chilling, bulk freezing, bulk storage of animals and game gutting, bulk freezing of fish and storage of game.

Cluster	Category	Category Description	Subcategory	Subcategory Description	Examples of included activities
			CI	Processing of perishable animal products	Processing and packaging including fish, fish products, seafood, meat, eggs and dairy requiring chilled or frozen temperature control. Processing of pet food from animal products only.
			CII	Processing of perishable plant-based products	Processing and packaging including fruits and fresh juices, vegetables, grains, nuts, pulses, frozen water-based products, plant-based meat and dairy substitutes. Processing pet food from plant products only.
			CIII	Processing of perishable animal and plant - Products (mixed products)	Processing and packaging including pizza, lasagne, sandwiches, dumplings and ready-to-eat meals. Includes off-site catering kitchens. Includes products of industrial kitchens not offered for immediate consumption. Processing perishable pet food from mixed products
			CIV	Processing of ambient stable products	Processing and packaging of products stored and sold at ambient temperature including canned foods, biscuits, snacks, oil, drinking water, beverages, pasta, flour, sugar and food-grade salt. Processing ambient stable pet food.
	D	Feed and animal food processing			Processing feed material intended for food and non-food producing animals not kept in households, e.g. meal from grain, oilseeds, by-products of food production. Processing feed mixtures, with or without additives,

Cluster	Category	Category Description	Subcategory	Subcategory Description	Examples of included activities
					intended for food-producing animals, e.g. premixes, medicated feed, compound feeds.
Catering/ food service	E	Catering/ food service			Open exposed food activities such as cooking, mixing and blending, preparation of components and products for on-site direct consumer consumption or take away. Examples include restaurants, hotels, food trucks, institutions, work places (school or factory cafeteria), including retail with on-site preparation (e.g. rotisserie chicken). Includes reheating of food, event catering, coffee shops and pubs.
Retail, transport and storage	F	Trading, retail and e-commerce	FI	Retail/ wholesale	Storage and provision of finished products to customers and consumers (retail outlets, shops, wholesalers). Includes minor processing activities, e.g. slicing, portioning, reheating.
			FII	Brokering/ trading	Buying and selling products on its own account without physical handling or as an agent for others of any item that enters the food chain.
	G	Transport and storage services			Storage facilities and distribution vehicles for perishable food and feed where temperature integrity shall be maintained. Storage facilities and distribution vehicles for ambient stable food and feed. Relabelling/repackaging excluding open exposed

Cluster	Category	Category Description	Subcategory	Subcategory Description	Examples of included activities
					product materials. Storage facilities and distribution vehicles for food packaging material.
Auxiliary services	H	Services			Services provisioned related to the safe production of food and feed including water supply, pest control, cleaning services and waste disposal.
Packaging material	I	Production of packaging material			Production of packaging material in contact with food, feed and animal food. May include packaging produced on-site for use in processing.
Auxiliary equipment	J	Equipment			Equipment for food, feed or packaging processing, vending machines, kitchen equipment, processing utensils, filters, hygienic design of equipment and facilities.
Bio/ chemical	K	Chemical and bio-chemical			Production of food and feed processing aids, additives (e.g. flavourings, vitamins), gases and minerals. Production of bio-cultures and enzymes.

APPENDIX 2: GUIDANCE ON ASSESSMENT AND DEVELOPMENT OF CONFORMITY ASSESSMENT SCHEMES

ELEMENTS	DESCRIPTION OF CONTENTS
Subject	What is the subject of the scheme; - To which (group of) products, services, processes, systems or competences does your certificate relate? - About which aspect of the product, service, process, system or competence is your certificate concerned?
Authors	By whom has the scheme been drawn up?
Certificate	What is your actual certificate of conformity? What are the conditions of validity of the certificate? - How long is the certificate valid? - How can the certificate lose its validity? - Where can the user check the validity? How is the applicable certification system mentioned or how is reference made to it?
Certification mark	What do you communicate to the market as significance of the mark?
Certification requirements	Which standard or which normative document contains the requirements? - How do you show that assessable requirements have been formulated? - Have any legal requirements been included? - In what way are the legal requirements acted on? - Have only legal requirements been included? - Is there an explanation/interpretation of the requirements? - Has the explanation/interpretation been published?

Certification method	Which method do you have to reach decisions on the conformity? - How do you show that your method is suitable to support the certificate of conformity (product certification: ISO/IEC 17065; certification of management systems: ISO/IEC 17021; certification of competence: ISO/IEC 17024)? - Which method do you have for monitoring that the certificate holder continues to meet the requirements? - How do you show that your method is suitable for monitoring that the certificate holder continues to meet the requirements?
Conditions	What provisions and evaluation criteria have you laid down for granting, maintaining, extending, curtailing, renewing, suspending or withdrawing certification? - Is your definition of non-conformity in accordance with the definition in the accreditation standard and/or IAF guidance? - If the scheme contains legal requirements: are the legal requirements met by the granting of a certificate? - What rights and obligations have you laid down for yourself and the applicants and/or certificate holders and in which documents? - How and in which document have you laid down that the certificate holder is continuing to meet the provisions? - What arrangements have you made regarding the recording of complaints by the certificate holders?
Procedures	Have you described your certification procedures? - How can you show that your procedures are appropriate? - In what way has validation taken place?
Competence	Which competence requirements have you described? - Which competence requirements have you described for your assessors? - Which competence requirements have you described for your deciders? - Which competence requirements have you described for other personnel? - How can you argue that your competence requirements are appropriate?

Openness	Which documents are in the public domain? - How are they brought into the public domain? - How do you publish the list of certificate holders? - What information is provided in so doing?

APPENDIX 3: GUIDANCE ON CONTENTS OF PRODUCT CERTIFICATION SCHEMES (ADAPTED FROM ISO/IEC 17067)

No	Conformity assessment functions and activities within product certification schemes	Types of product certification schemes b						
		1a	1b	2	3	4	5	6 (N)d
1	**Selection**: including planning and preparation activities, specification of requirements, e.g. normative documents, and sampling, as applicable	x	x	x	x	x	x	x
2	**Determination of characteristics**, as applicable, by: a) testing b) inspection c) design appraisal d) assessment of services or processes e) other determination activities, e.g. verification	x	x	x	x	x	x	x
3	**Review** Examining the evidence of conformity obtained during the determination stage to establish whether the specified requirements have been met	x	x	x	x	x	x	x
4	**Decision on certification** Granting, maintaining, extending, reducing, suspending, withdrawing certification	x	x	x	x	x	x	x
5	**Attestation, licensing**							
	a) issuing a certificate of conformity or other statement of conformity (attestation)	x	x	x	x	x	x	x
	b) granting the right to use certificates or other statements of conformity	x	x	x	x	x	x	x
	c) issuing a certificate of conformity for a batch of products		x					
	d) granting the right to use marks of conformity (licensing) is based on surveillance (VI) or certification of a batch.		x	x	x	x	x	x
6	**Surveillance**						-	

	a) testing or inspection of samples from the open market			**x**		**x**	**x**	
	b) testing or inspection of samples from the factory				**x**	**x**	**x**	
	c) assessment of the production, the delivery of the service or the operation of the process				**x**	**x**	**x**	**x**
	d) management system audits combined with random tests or inspections						**x**	**x**

a) Where applicable, the activities can be coupled with initial audit and surveillance audit of the applicant's management system or initial assessment of the production process. The order in which the assessments are performed may vary and will be defined within the scheme. b) A product certification scheme includes at least the activities 1, 2, 3, 4 and 5 a).
c) The symbol *N after 6* has been added to show an undefined number of possible other schemes, which can be based on different activities.

APPENDIX 4: TYPES OF PRODUCT CERTIFICATION SCHEMES

ELEMENTS	DESCRIPTION OF CONTENTS
Scheme type 1a	In this scheme, one or more samples of the product are subjected to the determination activities. A certificate of conformity or other statement of conformity (e.g. a letter) is issued for the product type, the characteristics of which are detailed in the certificate or a document referred to in the certificate. Subsequent production items are not covered by the certification body's attestation of conformity. The samples are representative of subsequent production items which could be referred to by the manufacturer as being manufactured in accordance with the certified type. The certification body may grant to the manufacturer the right to use the type certificate or other statement of conformity (e.g. letter) as a basis for the manufacturer to declare that subsequent production items conform to the specified requirements.
Scheme type 1b	This scheme type involves the certification of a whole batch of products, following selection and determination as specified in the scheme. The proportion to be tested, which can include testing of all the units in the batch (100% testing), would be based, for example, on the homogeneity of the items in the batch and the application of a sampling plan, where appropriate. If the outcome of the determination, review and decision is positive, all items in the batch may be described as certified and may have a mark of conformity affixed, if that is included in the scheme.
Scheme type 2	The surveillance part of this scheme involves periodically taking samples of the product from the market and subjecting them to determination activities to check that items produced subsequent to the initial attestation fulfil the specified requirements. While this scheme may identify the impact of the distribution channel on conformity, the resources it requires can be extensive. Also, when significant nonconformities are found, effective corrective measures may be limited since the product has already been distributed to the market.
Scheme type 3	The surveillance part of this scheme involves periodically taking samples of the product from the point of production and subjecting them to determination activities to check that items produced subsequent to the initial attestation fulfil the specified requirements. The surveillance includes periodic assessment of the production process. This scheme does not provide any indication of the impact the distribution channel plays on conformity. When serious nonconformities are found, the opportunity may exist to resolve them before widespread market distribution occurs.

Scheme type 4	The surveillance part of this scheme allows for the choice between periodically taking samples of the product from the point of production, or from the market, or from both, and subjecting them to determination activities to check that items produced subsequent to the initial attestation fulfil the specified requirements. The surveillance includes periodic assessment of the production process. This scheme can both indicate the impact of the distribution channel on conformity and provide a premarket mechanism to identify and resolve serious nonconformities. Significant duplication of effort may take place for those products whose conformity is not affected during the distribution process.
Scheme type 5	The surveillance part of this scheme allows for the choice between periodically taking samples of the product either from the point of production, or from the market, or from both, and subjecting them to determination activities to check that items produced subsequent to the initial attestation fulfil the specified requirements. The surveillance includes periodic assessment of the production process, or audit of the management system, or both. The extent to which the four surveillance activities are conducted may be varied for a given situation, as defined in the scheme. If the surveillance includes audit of the management system, an initial audit of the management system will be needed.
Scheme type 6	This scheme is mainly applicable to certification of services and processes. Although services are considered as being generally intangible, the determination activities are not limited to the evaluation of intangible elements (e.g. effectiveness of an organization's procedures, delays and responsiveness of the management). In some situations, the tangible elements of a service can support the evidence of conformity indicated by the assessment of processes, resources and controls involved. For example, inspection of the cleanliness of vehicles for the quality of public transportation. As far as processes are concerned, the situation is very similar. For example, the determination activities for welding processes can include testing and inspection of samples of the resultant welds, if applicable. For both services and processes, the surveillance part of this scheme should include periodic audits of the management system and periodic assessment of the service or process.

APPENDIX 5: GUIDANCE ON CONFORMITY ASSESSMENT CONDITIONS FOR PRODUCT CERTIFICATION SCHEMES

ELEMENTS	DESCRIPTION OF CONTENTS
Sampling	Where applicable, the scheme should define the extent to which sampling of the product to be certified is required, and on what basis such sampling should be undertaken both at the selection and surveillance stages. The scheme should define when sampling is required and who is permitted to undertake it. - NOTE Useful information on this topic is given in ISO 10576-1, ISO 2859-10, ISO 3951-1 and ISO 22514-1.
Acceptance of conformity assessment results	In some cases, clients might have obtained the results of determination activities, such as testing, inspection or auditing, prior to making an application for certification. In such a situation, the conformity assessment result may be from a source not within the contractual control of the certification body. The scheme should define whether and under what conditions such conformity assessment results can be considered in the certification process.
Outsourcing of the conformity assessment activities	If the scheme permits outsourcing (subcontracting) of conformity assessment activities such as testing, inspection or auditing, then the scheme should require these bodies to meet the applicable requirements of the relevant International Standards. For testing, it should meet the applicable requirements of ISO/IEC 17025; for inspection, it should meet the applicable requirements of ISO/IEC 17020; and for management system auditing, it should meet the applicable requirements of ISO/IEC 17021. The scheme should state the degree to which prior agreement to outsourcing needs to be obtained from the scheme owner or the client whose products are being certified under the scheme.
Complaints and appeals to the scheme owner	The scheme owner should define the complaints and appeals process and who is responsible for undertaking this process. Appeals against the decision of the certification body and complaints about the certification body should be addressed to the certification body in the first instance. Appeals and complaints that have not been, or cannot be, resolved by the certification body can be addressed to the scheme owner.

Licensing and control of the mark	Where the scheme provides for the use of certificates, marks or other statements of conformity, there should be a license or other form of enforceable agreement to control such use. Licenses can include provisions related to use of the certificate, mark or other statement of conformity in communications about the certified product, and requirements to be fulfilled when certification is no longer valid. Such licenses may be between two or more of the following: — scheme owner; — certification body; — client of the certification body
Surveillance	If surveillance is included, the scheme should define the set of activities (see function 6 in Appendix A) that make up the surveillance functions. When deciding upon the appropriate surveillance activities, the scheme owner should consider the nature of the product, the consequences and probability of nonconforming - products and the frequency of the activities.
Non-conforming	The scheme should define requirements that apply when a product no longer fulfils certification requirements, such as product recall or
products	providing information to the market.
Reporting to the scheme owner	When reporting to the scheme owner is required, the content and frequency of reporting should be defined. Such reporting may be for the purpose of scheme improvement, for control purposes and for monitoring the extent of conformity by clients.
Subcontracting of the operation of the scheme	If the scheme owner subcontracts all or part of the operation of the scheme to another party, it should have a legally binding contract defining the duties and responsibilities of both parties. A governmental scheme owner can subcontract operation of the scheme by regulatory provisions.
Marketing	The scheme should define the policies and procedures related to marketing, including the extent to which certification bodies and clients can make reference to the scheme.
Fraudulent claim of certification	Actions and responsibilities for situations where certification under the scheme is being claimed fraudulently should be described.

Maintenance and improvement of a scheme	
Review of scheme operation	The scheme owner should define a process for reviewing the operation of the scheme on a periodic basis in order to confirm its validity and to identify aspects requiring improvement, taking into account feedback from stakeholders. The review should include provisions for ensuring that the scheme requirements are being applied in a consistent manner.
Changes in specified requirements	The scheme owner should monitor the development of the standards and other normative documents which define the specified requirements used in the scheme. Where changes in these documents occur, the scheme owner should have a process for making the necessary changes in the scheme, and for managing the implementation of the changes (e.g. transition period) by the certification bodies, clients and, where necessary, other stakeholders.
Other changes to the scheme	The scheme owner should define a process for managing the implementation of other changes to the rules, procedures and management of the scheme.
Scheme documentation	The scheme owner should create, control and maintain adequate documentation for the operation, maintenance and improvement of the scheme. The documentation should specify the rules and the operating procedures of the scheme, and in particular the responsibilities for governance of the scheme.

APPENDIX 6: AMENDMENT RECORD

Revision status	Change			Approved by	Effective Date
	Page No.	Clause	Description of change		
Issue 7	11	6.2.1	Item (iii): Deleted "on-site" and substituted with "onsite or remote".	CEO	2020-02-04
	12		Deleted the note at end of paragraph which read "On-site assessment is a mandatory requirement for an initial assessment".		
	13	6.2.15	New clause added: "At the end of an assessment, whether performed on-site or remotely, a closing meeting shall be held between the assessment team and the CB. Refer to SADCAS F 46 (b). At this meeting, the assessment team shall report on the findings identified during the assessment and detail in writing any nonconformities. The Team Leader will provide the CB with an opportunity to seek clarification on the findings including any nonconformities and their basis". Renumbered subsequent clauses.		
		6.2.16	Added: "without undue delay. If the written report on the outcome of the assessment differs from the outcome delivered at the close of the assessment (see 6.2.15 above), SADCAS shall provide an explanation to the assessed conformity assessment body, in writing" at the end of first sentence.		
Issue 8	All	All	Whole procedure revised to include requirements of ISO/IEC 17065, ISO/EC 17067, ISO/TS 22003 and IAF MD 16	CEO	2022-02-25
Issue 9	11	5.4	Added "The Assessment Team in collaboration with Scheme Coordinator shall review additional information/documents submitted by facility as part of addressing document review report findings and confirm adequacy prior to arranging initial assessment." at the end of the paragraph.	CEO	2023-02-28
Issue 10	8	3.2	Added under (iv) "Assign an assessment team and, before engagement, confirm that they possess the required competence in the scope applied for or area of accreditation and request the team to sign SADCAS F 45 (a) Nondisclosure/Confidentiality Statement – Assessors/ Technical Experts"	CEO	2023-09-22
	9		Added under (xiii) : If an application is received with scopes that the Scheme Coordinator has no technical competence to determine suitability and acceptability of technical information received, an Assessor/Technical Expert or other SADCAS personnel with the required competence in the		

			scope shall be engaged to complement the Scheme Coordinator during the review.		
	11	5.3.4	Added: Selection of Technical Assessors/Experts who will conduct document review shall be based on their knowledge of specific IAF Codes applied for.		
		5.3.6	Deleted SADCAS F61(a-4) and SADCAS F 61(a-5) and substituted with SADCAS F 40(a) and SADCAS F40(b)		
	21	7.5.15	New Subclause added: FSMS sub-scopes will be excluded from the assessment plan if witnessing cannot be performed for the FSMS sub-scopes (IAF MD 16). Any accredited food chain category of FSMS which has not been witnessed within a period exceeding 12 months will not be considered in the assessment if there is no CB client to witness. The reason will be communicated to CB via the assessment plan SL 20 which will be confirmed by the CB prior to assessment		
		7.5.16	New Subclause added: If the CB has lost clients for MS IAF Critical Codes within the accreditation cycle and is due for renewal of accreditation such Codes will be excluded from the reassessment plan (SL 20) as IAF MD 17 requires witnessing within an accreditation cycle.		
	23	10.1	NOTE Added: If an application and payment for reassessment is not received six months prior to the expiration of accreditation, the facility shall be required to undergo the initial accreditation process that includes payment of application fee and document review.		
Issue 11	33-35	Table 4	Alignment with ISO 22003-1:2022	CEO	2024-02-29
Issue 12	24	10.3	Added “The Scheme Coordinator shall review and analyze the fully completed assessment matrix, document the analysis and consider the information from the review in planning the re-assessment” on first paragraph.	CEO	2025-03-31
		11.2	Added “SADCAS F 44 may be excluded from the documentation to be submitted by the CAB unless it has been revised since the last application. SADCAS F43(f) for the Nominated Representative may be excluded from documentation submitted by the CAB unless an alternate or new Nominated Representative is required for the scope extension” at the end of the paragraph.		