INSTITUTE FOR ACCREDIATION OF THE REPUBLIC OF NORTH MACEDONIA

Procedure for assessment in the office and witnessing of certification bodies for management systems

PR 05-07

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1. PURPOSE

The purpose of this procedure, issued by the director of IARNM, pursuant to article 23 of the Statute of IARNM, is to define the assessment in the office and *w*itnessing activities for the accreditation of management systems certification bodies. This document will enable IARNM to determine whether the CB has competent personnel for organising/planning and auditing, and to assess the CB's competence to perform certification audits.

2. DEFINITIONS

For the purpose of this document, the definitions below are applicable.

Witnessing
Observation of the CAB (conformity assessment body) carrying out conformity assessment services within its scope of accreditation (clause 3.25 of MKC EN ISO/IEC 17011:2018). Witnessing of an audit is an activity performed by an AB (accreditation body) whereby it observes, without interfering and influencing, an audit performed by a CB (certification body) audit team.
Depending upon the objectives of the witnessing, the complete audit may be observed or just relevant parts of the audit. The witnessing is done on-site at the CB client premises or remote audit observation via electronic means.
Note: IARNM may witness other activities conducted by CBs as part of their accreditation process, outside of the scope of this document.

File review
Activity performed by IARNM whereby it reviews and evaluates the records and documents pertaining to a given certification file, in order to determine whether the relevant CB procedures were followed and implemented. This is normally done at the CB premises, with the appropriate CB staff and/or auditors, although it may be performed remotely or elsewhere (eg: CB client premises) as appropriate and agreed.

Scope of accreditation
Specific management system standards and their relevant parts, codes, sectors, categories or technical areas, according to which CBs grant an accredited certification in a specific location.

3. General policies

Objectives

The objective of assessment in the office and witnessing, is to provide assurance of the competence of the MS CB across the scope of accreditation. The competence requirements related to certification and auditing personnel are specified in ISO/IEC 17021 series, and in IARNM's procedure PR 03-05.

IARNM assesses the scope of each applicant and accredited CB through the use of the various mechanisms that are available, including:

- office assessment activities;
- witnessing activities; and
- other assessment activities, as defined in Procedure: PR 05-02 Assessment Methodology (point 4.)

In accordance with Article 3 of the Accreditation Agreement, IARNM shall ensure that the requirement for witnessing by IARNM is included in the contract agreements between CBs and their clients and confirm that

refusal to accept a witness assessment by IARNM, must be justified and accepted by the CB and IARNM, and could result in withdrawal of accredited certification where reasons are not accepted.

3.1 General instructions for office assessment activities

In the course of the assessment of the certification body's head office or its dislocated sites, the assessor team shall use, in addition to the general assessment techniques, the following techniques: examination of records, system documents, interviews with the certification body's staff. Team shall especially focus on:

• organizational structure of certification body, the appropriate position and composition of the Management Board / mechanism for safeguarding impartiality / committee for safeguarding impartiality (involvement of all parties interested in certification, involvement of specific parties interested in certification of different management systems, balanced representation of interested parties) and the authorities of the Board / mechanism for safeguarding impartiality / impartiality protection / committee for safeguarding impartiality;

• ensuring impartiality of certification activities, identifying risk to impartiality, controlling risks, (ongoing activity, providing information to the Board / mechanism for safeguarding impartiality / impartiality protection committee for safeguarding impartiality / interested parties, top management commitment);

• financial stability, resources;

• appropriate relations and cooperation with clients (access to certification service, appropriate contracts with clients, non-discriminatory treatment of clients);

• ensuring confidentiality;

• proper division of the functions of certification/education/verification/testing/inspection, when several such activities are performed within the same certification body;

• appropriate management of the competencies of the staff involved in certification procedures;

• the certification process, and controlling and maintaining records in order to prove efficient implementation of the certification process;

• the assurance of independence at the decision-making level as to grant/refuse/withdraw a certificate, and auditing;

• the suitability of subcontractors, when relevant;

• the performance of certification activities at dislocated sites (key and non-key activities);

-the efficiency of the control system for the sites at which the critical activities are performed, when relevant;

- the performance of conformity assessment procedures abroad;
- accessibility (public accessibility of information);
- making reference to certification and the use of marks (ISO/IEC 17021-1, 8.3);
- the implementation of the relevant mandatory documents, other guidance documents; and
- performing certification by fields/schemes/standards from the scope of accreditation

3.1.1 Certification body operating certification of management systems

When assessing a certification body for certification of management systems, the following shall be checked in addition to that mentioned under 3.1:

- the procedure of defining the requirements for the competencies (knowledge, experience, skills) of the staff taking part in conducting and carrying out audits and certification (for all types of management systems, for any technical field and for any function in certification process), and the results of implementation of the procedure (МКС EN ISO/IEC 17021-1 : 2016, p.7.1.2, Annex A; МКС EN ISO/IEC 17021-2, and/or МКС EN ISO/IEC 17021-3 and/or ISO/IEC TS 17021-10);

- the procedure of initial competence evaluation, regular monitoring of competencies of the staff taking part in conducting and carrying out audits (MKC EN ISO/IEC 17021-1 : 2016, p.7.1.3;), and evidence of meeting the requirements for staff (PR 03-05);
- the procedure of selecting and appointing the audit team (selection criteria) (MKC EN ISO/IEC 17021-1 : 2016, p.9.2.2);
- the procedure of defining the audit time, decreasing and increasing the audit time (appropriateness of criteria, compliance with criteria) (MKC EN ISO/IEC 17021-1: 2016, p.9.1.4; IAF MD 5; IAF MD 1, IAF MD 11);
- developing an audit programme for the complete certification cycle, indicating audit activities (MKC EN ISO/IEC 17021-1 : 2016, p.9.1.3);
- defining the audit plan and objectives (certification body), scope of audit (integrated …, participants' roles) and audit criteria as well as reporting on achievements (MKC EN ISO/IEC 17021-1: 2016, p.9.2.3;);
- the auditors' competencies; The frequency of assessing the adequateness of maintenance of auditors' competencies in individual fields shall be adapted by the assessor to the speed of development of techniques, technologies and systems . Some fields (e.g., the fields of IAF 19, IAF 33, IAF 3, IAF 12, IAF 13) will need more frequent assessment for the proper maintenance of competencies);
- the procedure of defining the audit findings and remedying the nonconformities;
- the procedure of evaluating the effectivness of corrections and corrective actions (MKC EN ISO/IEC 17021-1: 2016, 9.4.10);
- the completeness of audit report (MKC EN ISO/IEC 17021-1 : 2016, 9.4.8);
- the procedures in the "multi-site" certification procedure (IAF MD 1; IAF MD 5; MKC EN ISO/IEC 17021-1: 2016, 9.1.5);
- the audit procedures in two stages (MKC EN ISO/IEC 17021-1: 2016, p.9.3.1)
- the introduction of risk-based approach;
- the procedure in the event of transfer of certificate from another certification body (MKC EN ISO/IEC 17021-1 : 2016, 9.5.2.2, IAF MD 2);
- carrying out remote audits (IAF MD 4, IAF MD 5);
- auditing the scope of certification in the case of the organisation outsourcing a part of its functions (IAF MD5);
- • informing the clients of the presence of IARNM at witnessing and its policy in the case they refuse witnessing (inclusion in the contract with the client, possible sanctions); and
- special audits (MKC EN ISO/IEC 17021-1 : 2016, p.9.6.4).
- Reporting information on issued certificates to the IAF CertSearch database (IAF MD 28);
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- Monitoring changes to reference documents and applying their latest valid editions (e.g. MKC EN ISO 14001:2015/A1:2024, MKC EN ISO 9001:2015/A1:2024, MKC EN ISO 45001:2023/A1:2024).
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3.1.1.1 Certification of quality management systems ISO 9001

In assessing a certification body for quality management systems, attention shall be paid to:

- the definition of the requirements for competence for all functions in the certification process in accordance with ISO/IEC 17021-3, p.4;
- competencies of the auditors: general competence according to EN MKC EN ISO/IEC 17021-1 : 2016, p.7, and specific knowledge according to ISO/IEC 17021-3, p.5;

(knowledge of the environement being audited, understanding of the organization's context...)

- the definition of the requirements for other personnel according to ISO/IEC 17021-3, p.6;

3.1.1.2 Certification of environmental management systems to ISO 14001

In assessing a certification body for environmental management systems, attention shall be paid to:

- the definition of the requirements for competence for each function in the certification process and for each EMS field in accordance with ISO/IEC 17021-2, p.5–7; (knowledge of the audited organisation's environment, understanding the risks, communication, knowledge of the audited organisation's processes, …).
- competencies of the auditors: general competence according to MKC EN ISO/IEC 17021-1 : 2016, 7, and specific EMS knowledge according to ISO/IEC 17021-2, p.5.1–5.10;
- the definition of the requirements for competence in environmental aspects for individual EMS fields according to ISO/IEC 17021-2, p.6.1–6.7;
- the definition of the requirements for other personnel according to ISO/IEC 17021-2, p.7.1–7.2.

3.1.1.3 Certification of occupational health and safety management systems ISO 45001

When evaluating the certification body for occupational health and safety management systems, special attention is paid to:

- defining the necessary competencies for all functions in the certification process in accordance with ISO/IEC TS 17021-10, p.4;
- competencies of OH&S auditors: general competence according to EN MKC EN ISO/IEC 17021-1:2016, p.7 and specific knowledge according to ISO/IEC TS 17021-10, p.5
(knowledge of the risks of the organization being audited, understanding the organization's context...);
the competencies of the persons reviewing the reports and making a decision on certification: general competence in accordance with EN MKC EN ISO/IEC 17021-1:2016, 7 and specific knowledge according to ISO/IEC TS 17021-10, p.6

- defining the requirements for other staff in accordance with ISO/IEC TS 17021-10, p.7;

3.2 General instructions for using witnessing to cover the scope of accreditation

Based on the data received from the Certification Body (CB), including Application Form OB 05-03-1 and the CB Questionnaire MS OB 05-64, IARM prepares an Assessment Plan (OB 05-62-5-1), covering the scope of each applicant or accredited CB for each accreditation cycle. The Plan shall be periodically reviewed and updated as necessary, in accordance with the information provided by the CB in the questionnaire and the findings and conclusions from previous assessments.
The Assessment Plan takes into account the need to assess conformity with activities performed in multiple countries and cross-border certification activities, in accordance with IAF MD 12 and EA-2/13 M.
Note: Each accredited CB is obliged, at the beginning of the year and no later than 31 January of the current year, to submit a completed CB Questionnaire MS OB 05-64 and an Annual Certification/Witnessing Plan, in order to enable the preparation or revision of the Assessment Plan (OB 05-62-5-1) with regard to planned witness assessments.

3.2.1 Witnessing the performance of audits

Witnessing of audits shall be aimed at verifying the efficiency of the certification procedure (appointing the appropriate auditors, correct definition of the audit time), the appropriateness of setting the scope of certification and establishing the competencies of auditors (compliance with the audit procedure, demonstration of the appropriate knowledge and understanding of the certification criteria, presence of suitable auditing skills, and ability to audit the fulfilment of the relevant criteria), and at providing a representative sample for the assessment of competence of the certification body.

Note: Witnessing can also be initiated for other reasons, according to the IARNM procedures and/or policies e.g. upon the receipt of complaints, claims, disputes, market or regulator feedback.

The assessors shall only observe the audit and shall not influence its proceeding by their actions, or ask questions to the auditee, or express their opinions.

Before starting the witnessing of an audit, the certification body whose audit is to be witnessed shall provide: the report from previous audit; an audit programme and plan with information on auditors and audit sites; information on the competence of the auditors included in the audit to be witnessed; calculation of audit time; a description of the client's organisation, activity; and other. The assessor shall assess the documents provided and adapt the assessment accordingly.

When witnessing/assessing the performance of auditor team, the assessors shall closely monitor (MKC EN ISO/IEC 17021-1: 2016, p.9.4):

- the performance/mutual co-operation of the members of auditor team (including observers, interpreters …), team leading (controlling changes in plan);
- the knowledge of auditing/verification procedures and techniques;
- the way of communicating with the client (initial (contents), closing meeting (contents, attendance list), control of contingencies);
- the capability of obtaining substantial evidence (asking proper questions and focusing on the important requirements);
- the knowledge of the certification requirements (knowledge of specific requirements for certification of different management systems, knowledge of the national regulations,eg. environmental and OH&S requirements; knowledge of the requirements for the competencies of the client's staff);
- the reporting of findings (correct definition of a finding; nonconformities shall not be reported in terms of possibilities for improvement; a finding shall refer to the criterion and the evidence); p.9.4.5
- coordination of different opinions regarding findings; any disagreements should be recorded; and
- the duration, appropriateness of the audit programme (relevance of sites, coverage of the scope).

Within two weeks after the conclusion of the audit, which was witnessed by IARNM assessors, the certification body shall submit to IARNM its report prepared for the auditee organisation. The assessor/assessment team shall prepare a report on witnessing the audit (form OB 05-56-2), which shall include information on implementation of the certification procedure, on the audit carried out, the performance and competence of the auditor team, and also information on evaluation of the contents of the subsequently sent report. Particular attention should be paid to the contents of the report (nonconformities shall not be reported in terms of possibilities for improvement; findings shall refer to the criterion and the evidence, conclusions…) (MKC EN ISO/IEC 17021-1: 2016, p.9.4.8).

Normally, the full on-site audit shall be witnessed, unless objectives for a particular activity can be satisfied with a partial witnessing. If a case of reduced witness audits occure, IARNM shall document the reasons for deviation from the basic principles of witnessing. However the objective of witnessing shall be met. When witnessing an audit, the assessors shall assess the performance of the complete audit team. Opening and closing meeting shall be witnessed, also audit of all relevant processes of the CB's client management system.

When possible, the assessors shall inform the auditors of the witnessing results immediately after the audit in the company has been completed, but without the presence of the auditee.
Note: The certification body's client shall be responsible for the safety of assessors while witnessing the audit, and shall inform all the participants of the measures taken. Should IARNM's assessors perceive potential risk

of damage during the course of the audit, they shall take immediate action and request to meet with the lead auditor.

3.3 General instructions for using vertical audits to cover the scope of accreditation

The criteria for sampling for ensuring coverage of whole scope of accreditation are given in Procedure for risk analysis during assessment planning and sampling during assessment PR 05-08.

3.3.1 Vertical audit

At the initial assessment and the re-assessments of a certification body for management systems, at least two procedures of certification for each basic certification scheme (management system standard) shall be assessed through vertical audits:

- The selection shall be made from among the most critical or complex groups of sectors (IAF MD 5) from the scope of accreditation;

The selection shall also include cases of multi-site organisations, cases involving transfer of certificates, and cases of certification procedures carried out abroad, as well as initial audits, surveillance audits and integrated audits.

Regular surveillance visits shall include at least one vertical audit for each certification scheme, so that all the sectors/groups within the accreditation schemes are examined in one assessment period.

In vertical audit, attention should also be paid to the following:

- how the findings and conclusions are presented (nonconformities shall not be reported in terms of possibilities for improvement; findings shall refer to the criterion and the evidence) (MKC EN ISO/IEC 17021-1:2016, p.9.4.5); and audit report contens, p.9.4.8 cause analysis of nonconformities p.9.4.9;
- documentation of verification of the effectiveness of corrections and corrective actions (MKC EN ISO/IEC 17021-1:2016, p.9.4.10).

4. PROCEDURE FOR CARRYING OUT A WITNESSING

When requested, the CB shall promptly provide to the IARNM the complete and updated schedule of confirmed and planned audits (dates, location, audit team composition, audit type and scope, etc.), in order to allow the IARNM to schedule or update the program for the coverage of the scope of accreditation.

If the CB client refuses the IARNM witnessing, the CB shall duly justify such situation and it shall be accepted by the IARNM.

If the client refuses an AB witness from the CB, in order to avoid sanctions, the CB must withdraw the issued certificate, or if it is no longer certified, the CB must not use the accreditation mark on the certificate.

When deciding how many and which audits are to be witnessed, IARNM shall take into account factors such as:

- the CB's overall performance;
- factors such as process complexity or legislation etc. which influence the ability of the certified organisation to demonstrate its ability to meet the intended outcomes of the MS;
- feedback from interested parties including complaints about certified organizations;
- the results of the CB's internal audits;
- scheme owner requirements, if applicable;
- changes in CB work patterns – growth of work within a specific region or technical area;
- number of clients within the CB’s scope of accreditation;
- confidence in the CB’s auditor evaluation and approval process; and
- previous or other office or witnessing assessment results, etc.

The following additional factors may be taken into account to select witnessing activities:

- number of certificates issued;
- number of auditors;
- different auditors;
- whether auditors are internal staff or external resource;
- different audits, initial audit (stage 1/stage 2), surveillance and recertification;
- complex clients, combined and/or integrated audits, multi-site audits;
- countries where audits in the certification process are performed;
- result of previous witnessing activities;
- complaints, customer surveys;
- interested parties and regulators requests;
- the technical clusters already assessed;
- experience from other types of accreditation of the CB, if applicable;
- previous history of the CB's ability to manage its operations;
- level of controls exercised by a CB over its critical activities;
- specific scheme requirements; and
- national agreements with clients.

Pre-witness activities shall ensure that the AB has the CB's audit plan, previous audit reports if applicable, audit team competence records and the justification for calculation of the audit time.

For each witnessing, the IARNM appoints an assessment team, competent in the relevant scope of accreditation. IARNM shall inform the CB in advance of the AB assessment team composition. The CB and/or its client can object to the nomination of a given IARNM assessor on the grounds of demonstrated close or direct relationships with competitors (threats to impartiality) or a previous valid complaint against an assessor, etc.

It is the duty of the CB to inform its client, to explain the witnessing procedure, and to get the client's agreement. The CB is not expected to change its audit team, audit plan or audit duration due to the witnessing. If such changes do take place, the CB shall provide appropriate justification to the IARNM.

During witnessing, the IARNM assessors' activities shall be those of an observer, without influencing the conduct of the audit by the CB's audit team. Access to the client's documentation reviewed by the CB's audit team shall be promptly provided to the IARNM's assessors upon request.

Any information collected during the witnessing of an audit is confidential and shall be treated by the IARNM assessors and staff accordingly.

The direct questioning of the CB's client by the IARNM is not allowed, as this can affect the outcome of the audit. IARNM assessors shall not provide any opinions to the CB, while the audit is being conducted. IARNM's assessors shall not provide any opinions to the CBs client at any time. IARNM's assessors should ensure that their presence and witnessing activity is not perceived as interference by the CB's client, and is instead viewed positively.

Feedback on the CB's performance, including any assessment findings/non-conformities, shall be given to the CB's audit team when the witnessing is completed. This should occur after the audit, always in the absence of the CB's client.
When relevant to the objective and scope of the witnessing, the IARNM's assessors shall get and review the CB's own audit report (and any additional information required).

It is the responsibility of the CB's client to inform in advance the audit team and the AB assessors, of all the applicable safety requirements. IARNM's assessors shall conform to safety rules made known to them by the organization; however, it is expected that IARNM's assessors shall take immediate action at any time to avoid injury, including leaving the area or the organization if necessary.

If at any time during the assessment of a CB audit the IARNM's assessor observes a potential condition he or she considers to be an imminent risk of high severity (e.g. health and safety or the environment) the IARNM's assessor shall request an immediate private meeting with the CB's audit team leader to inform him or her of the potential threat, with the expectation that the CB's audit team leader will address the threat with the organization in accordance with the CB's process and any legal obligation.

The report on witnessing shall give evidence and provide the conclusions and judgement of the assessment team as to the implementation of CB process to perform the audit and the conformity and performance of the CB team, with the relevant requirements and the overall competence of the CB for the activities it performs. IARNM witnessing report (OB 05-56-2) shall include. where applicable:

- comments on CB planning (determination of audit time, audit programme and audit plan);
- audit team (competence of the team, job assignment, scope coverage and effectiveness of the audit);
- auditing technique (interview, observation of processes and activities, review of documentation and records, sampling, establishment of audit trails, ability to collect, verify and record evidence of conformity and nonconformity in line with the required elements for the type of audit, appropriateness of grading of findings, handling of previous findings, reporting, opening and closing meetings and debriefs);
- comments on CB findings and conclusions in relation to the client MS conformity and
    - implementation, and significant findings not reported or identified by the CB's audit
    - team, if applicable;
- others (e.g. whether impartiality was maintained, safety arrangements, confidentiality, regulatory or legal compliance, post-witnessing activities if included, conformity with the CB procedures);
- findings and conclusions identified during the witnessed audit; and
- a conclusion on the reliability of the CB's report to reflect the actual audit findings and conclusions.

The IARNM report on the witnessing should not duplicate the information already provided in the CB audit report.

If the IARNM's assessor was not present throughout the CB audit, the witness report should outline which audit activities were witnessed (including identification of the parts of the audit plan and which requirements of the MS standard were witnessed by the AB).

5. SPECIFIC APPROACH FOR SAMPLING OF SCOPES

How to read the tables – explanations

All the IAF codes (defined in IAF ID1), according to IAF MD 17 have been merged into a series of technical clusters (taking into consideration the applicable regulations, the technicalities of the processes, and the

consequent competence needed by CB's audit team) as appropriate for each type of MS certification (QMS, EMS and OH&SMS).

Critical codes have been identified for each technical cluster. A critical code is a code that from a technical point requires the CB's audit team to have a higher level of:

- competence (due to the complexity of the processes / environmental aspects involved), or
- caution (due to the risk of non-conformities and their impact, or to the high degree of regulation), or
- diligence (due to the desired personal behaviours that are important for personnel involved in certification activities as required in a specific context).

If another coding system is used, the CB must establish a correlation between their coding system and the coding system defined in this document.

General rules applicable to QMS, EMS and OH&SMS schemes

The assessment program shall guarantee that competence is assessed throughout the scope in the accreditation cycle, for all IAF codes for each MS scheme, using all available mechanisms.

If this manner of assessment is not possible in one accreditation cycle, then IARNM shall reduce the scope of accreditation.

Following the initial granting of accreditation, within the accreditation cycle, IARM shall perform at least one witness assessment activity for each Management System (MS) scheme, in each technical cluster.
This programme shall continue until the Certification Body (CB) demonstrates sufficient experience and performance results to transition to an advanced level of planning.

When the Certification Body demonstrates sufficient experience and improvements in the performance of audits, IARNM shall perform at least one witness assessment activity in each technical cluster for each MS scheme, supplemented by other assessment activities to ensure that each technical cluster, for each MS scheme, is assessed within a period of two consecutive accreditation cycles.

IARNM shall document the reasons for any deviations from the basic principles of witness assessment planning.

The frequency of witness assessments may be increased again if significant changes occur in the CB's auditor qualification process, its practices, audit results, or audit personnel.

For initial accreditation for each MS scheme, IARM shall witness both Stage 1 and Stage 2 audits for at least one of the CB's clients.
Prior to commencing the witnessing of the Stage 2 audit of the same audit, the CB shall submit the complete Stage 1 audit report and/or conclusions to the IARM assessment team.
If the CB has no new clients, it is permissible to witness one recertification audit or two surveillance audits covering the key processes.

The following witnessing rules apply for the granting and extension of accreditation of each MS scheme to be complemented with other assessment activities to guarantee the appropriate coverage of the applicant scope:

i. if a technical cluster has only 1 critical code, the IARNM shall perform a witnessing activity in this critical code to grant accreditation for all the IAF codes in that cluster - e.g. for QMS,

cluster Food, with 1 witnessing activity in IAF code 03, the IARNM can grant accreditation in the other IAF codes (01 and 30) of that cluster; for EMS, cluster Paper, with 1 witnessing activity in IAF code 09, the IARNM can grant accreditation in the other IAF codes (7 and 8) of that cluster;

ii. if a technical cluster has more than 1 critical code, the IARNM shall perform at least a witnessing activity:

a. in all the critical codes that are identified with an “and” (on the “Critical code” column);
e.g. for EMS, cluster Goods Production, with 1 witnessing activity in IAF code 04 or 05, the AB can grant accreditation in all the noncritical codes (06 and 23) of that cluster, but the other critical code (04 or 05) needs to be witnessed to be granted.

b. in one of the critical codes that are identified with an “or” (on the “Critical code” column);
e.g. for QMS, in cluster Mechanical, with 1 witnessing activity in IAF code 20 or 22, the IARNM can grant accreditation in the other IAF codes (17, 18, 19, 20 or 22) of that technical cluster;

c. in all critical codes identified with "and", i.e. critical codes within the middle brackets […] or in the critical code identified as "or" (in the "Critical Code" column);

e.g. for OH&S, the "Chemicals" cluster, with 1 witnessing activity in IAF code 7 or 10 or 12 or 13 or 16, the accreditation body can grant accreditation in all non-critical codes, i.e. 14 and 15, plus 17 of that cluster, but other critical codes must be witnessed, i.e. 7 or 10 or 12 or 13 or 16, in order to be granted.

Instead, for the same cluster mentioned above, with 1 witnessing activity in IAF code 17, the accreditation body can grant accreditation in IAF code 17 and in all other IAF codes, i.e. 7, 10, 12, 13, 14, 15 and 16, from that technical cluster;

iii. if it is not possible to perform a witnessing activity in the IAF code/s identified as critical, the IARNM can agree with the CB on one of these two options:

a. the IARNM can grant accreditation only in the non-critical IAF code/s of the technical cluster for one of which a witnessing activity is performed (e.g. for QMS - Food cluster - with 1 witnessing activity in IAF code 30, the IARNM can grant accreditation for both IAF code 30 and 01), or
b. the IARNM can grant accreditation in all the codes of the cluster, performing an office activity in the critical code/s, but on condition:

- that the CB has demonstrated its competence on a documental basis in all the codes of the cluster; and
- that the witnessing activity for the critical code/s takes place before any certificate for the critical code/s based on accreditation is issued.

However, in such cases, if the result of the witnessing activity is negative, IARNM must reduce the scope of accreditation.

Note: for existing accredited CBs, if they already hold accreditation for a critical code but not the related non-critical code they can have their accreditation extended to include the noncritical codes.

If the CB wants to be accredited only in one or more non-critical IAF codes, a minimum of one witness audit is required in each cluster with non-critical IAF codes.

In addition to the above, it is necessary to assess competence also for all noncritical codes before the IARNM can grant accreditation. Therefore, accreditation shall be granted only:

i. in IAF codes where the CB has already taken decisions for certification (e.g. for QMS, with 1 witnessing in IAF code 03, the IARNM shall grant accreditation only for IAF codes 30 and 03 in cases where the CB has taken no decisions for certification in IAF code 01).

IARNM applies a more detailed definiton of the scope for each IAF code by subdividing it into NACE codes.

The possibility of granting or extending accreditation for a full IAF code (including all NACE codes within the IAF code) is always conditional upon the Certification Body (CB) demonstrating that it has:

Demonstrated competence, through witness assessments or accreditation decisions for the NACE codes within the relevant IAF code (to be verified through an office assessment – vertical audit); and/or

Available competence, i.e. competent auditors for all NACE codes within a given IAF code, as well as competence for all certification functions (in accordance with Annex A of ISO/IEC 17021, as specified in the ISO/IEC 17021 series and in IARM Procedure PR 03-05), which shall be verified through an office assessment (review of personnel files).

6. QUALITY MANAGEMENT SYSTEMS (ISO 9001)

Technical cluster	IAF code	Description of economic sector/activity, according to IAF ID1	Critical code
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-mettalic mineral products	
	16	Concrete, cement, lime, paster, etc..	
Construction	28	Construction	28
	34	Engineering services	
Goods production	4	Textiles and textile products	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 manifacturing	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 management	24	Recycling	24
	31	Transport, storage and communication	
	39	Other social services	
Services	29	Wholesale and retail trade; Repair of motor vehicles, motorcycles and personal and household goods	37 or33
	32	Financial intrenediation; real estate; renting	
	33	Informatin technology	
	35	Other services	
	37	Education	
	36	Public administration	
Nuclear	11	Nuclear fuel	11
Pharmaceutical	13	Pharmaceutical	13
Aerospace	21	Aerospace	21
Health	38	Health and social work	38

7. ENVIRONMENTAL MANAGEMENT SYSTEMS (ISO 14001)

Technical cluster	IAF Code	Description of economic sector/activity, according to IAF ID1	Critical code
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	
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	

Chemical	7	Limited to "Pulp and paper manufacturing"	7 and 10 and 12 and 13
	10	Manifacture 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	24	Recycling	24 and 39 (limited to NACE 37, 38.1, 38.2, 39)
	31	Transport, storage, and communication	
	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 intrenediation; 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

8. OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT SYSTEMS (ISO 45001)

Technical cluster	IAF Code	Description of economic sector/activity, according to IAF ID1	Critical code
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	
Chemical	7	Limited to “Pulp and paper manufacturing”	[7 and 10 and 12 and 13 and 16] or 17
	10	Manifacture 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	24	Recycling	[31 (limited to dangerous goods) and 24] or 39 (limited to NACE 37, 38.1, 38.2, 39)
	31	Transport, storage, and communication	
	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 intrenediation; 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

Reference documents

- PR 05-08 Procedure for Sampling During Assessment

- R15 Regulation for Determination of Fields for Calibration, Testing, Inspection and Certification Areas
- MKC EN ISO/IEC 17021-1:2016 Conformity Assessment - Requirements for Bodies that Provide Audit and Certification of Management Systems - Part 1: Requirements (ISO/IEC 17021-1: 2015)
- MKC EN ISO/IEC 17021-2:2019 Conformity Assessment - Requirements for Bodies that Provide Audit and Certification of Management Systems - Part 2: Competence Requirements for Audit and Certification of Environmental Management Systems (ISO/IEC 17021-2:2016)
- MKC EN ISO/IEC 17021-3: 2019 Conformity Assessment - Requirements for Bodies that Provide Audit and Certification of Management Systems - Part 3: Requirements for Competence for Audit and Certification of Quality Management Systems (ISO/IEC 17021-3:2017)
- MKTC ISO/IEC TS 17021-10:2020 Conformity Assessment - Requirements for Bodies that Provide Audit and Certification of Management Systems - Part 10: Requirements for Competence for Audit and Certification of Occupational Health and Safety Management Systems
- IAF ID 1 IAF Informative Document for QMS and EMS Scopes of Accreditation
- IAF MD 1 IAF Mandatory Document for the Audit and Certification of a Management System Operated by a Multi-Site Organization
- IAF MD 2 IAF Mandatory Document for the Transfer of Accredited Certification of Management Systems
- IAF MD 4 IAF Mandatory Document for the Use of Information Communcation Technology (ICT) for the Purposes of Audit/Evaluation.
- IAF MD 5 Determination of Audit Time of Quality, Environmental and Occupational Health and Safety Management Systems
- IAF MD 11 IAF Mandatory Document for Application of ISO/IEC 17021-1 for Audits of Integrated Management Systems
- IAF MD 12 Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries
- EA-2/13 M EA Cross Border Accreditation Policy and Procedure for Cross Border Cooperation between EA Members
- IAF MD15 IAF Mandatory Document for the Collection of Data to Provide Indicators of Management System Certification Bodies' Performance
- IAF MD 17 IAF Mandatory Document for Witnessing Activities for Accreditation of Management System Accreditation Bodies
- IAF MD 28 IAF Mandatory Document for the Upload and Maintenance of Data on IAF Database
- ИАФ-ИСО Јоинт Цоммуниђуé он Аддитион оф Цлимате Цханге Цонсидератионс то МСС

Further documentation

- OB 05-62-5-1 MS CB Assessment Plan (four-year)

OB 05-64 Questionnaire, in accordance with IAF MD 15 – IAF Mandatory Document for the Collection of Data on Management System Certification Body Performance Indicators

- OB 05-11 Programme for Initial Assessment/Supervision/Reassessment
- OB 05-55-2 MS CB Check List
- OB 05-56-2 MS CB Witnessing Report
- OB 05-55-1-1 MS CB Check List – Vertical Audit Report
- OB 05-49-1 MS CB Assessment Report