



IAF Mandatory Document

Control of Entities Operating on Behalf of Accredited Management Systems Certification Bodies

Issue 1

(IAF MD 23:2018)

The International Accreditation Forum, Inc. (IAF) facilitates trade and supports regulators by operating a worldwide mutual recognition arrangement among Accreditation Bodies (ABs) in order that the results issued by Conformity Assessment Bodies (CABs) accredited by IAF members are accepted globally.

Accreditation reduces risk for business and its customers by assuring them that accredited CABs are competent to carry out the work they undertake within their scope of accreditation. ABs that are members of IAF and the CABs they accredit are required to comply with appropriate international standards and the applicable IAF application documents for the consistent application of those standards.

ABs that are signatories to the IAF Multilateral Recognition Arrangement (MLA) are evaluated regularly by an appointed team of peers to provide confidence in the operation of their accreditation programs. The structure and scope of the IAF MLA is detailed in IAF PR 4 – Structure of IAF MLA and Endorsed Normative Documents.

The IAF MLA is structured in five levels: Level 1 specifies mandatory criteria that apply to all ABs, ISO/IEC 17011. The combination of a Level 2 activity(ies) and the corresponding Level 3 normative documents is called the main scope of the MLA, and the combination of Level 4 (if applicable) and Level 5 relevant normative documents is called a sub-scope of the MLA.

- ☐ The main scope of the MLA includes activities e.g. product certification and associated mandatory documents e.g. ISO/IEC 17065. The attestations made by CABs at the main scope level are considered to be equally reliable.
- ☐ The sub scope of the MLA includes conformity assessment requirements e.g. ISO 9001 and scheme specific requirements, where applicable, e.g. ISO TS 22003. The attestations made by CABs at the sub scope level are considered to be equivalent.

The IAF MLA delivers the confidence needed for market acceptance of conformity assessment outcomes. An attestation issued, within the scope of the IAF MLA, by a body that is accredited by an IAF MLA signatory AB can be recognized worldwide, thereby facilitating international trade.

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Introduction to IAF Mandatory Documents

The term “should” is used in this document to indicate recognized means of meeting the requirements of the standard. A Conformity Assessment Body (CAB) can meet these in an equivalent way provided this can be demonstrated to an Accreditation Body (AB). The term “shall” is used in this document to indicate those provisions which, reflecting the requirements of the relevant standard, are mandatory.



Control of Entities Operating on Behalf of Accredited Management Systems Certification Bodies

0. SCOPE

1. sistemi di gestione
2. soggetti situati nello stesso Stato del CAB accreditato, o in uno Stato differente
3. possono essere agenzie, società in franchising, società partecipate o semplicemente collegate con un contratto.

This document relates to entities, performing and/or managing management system certification activities, on behalf of certification bodies (CBs) holding accreditation, which are not wholly or partly owned or employed by the CB. The entities may or may not be located in the same country as the CB head office and may be a representative, agency, franchisee or sales office of the CB or any entity which has a contractual relationship with the CB for performing certification activities.

Normative references:

ISO/IEC 17011:2017 – Requirements for accreditation bodies accrediting conformity assessment bodies

ISO/IEC 17021-1:2015 – Requirements for bodies providing audit and certification of management systems -- Part 1: Requirements

1. OBLIGATIONS OF CERTIFICATION BODIES



1.1 Risk Assessment of Candidate Entities

Prior to entering any agreement, the CB shall perform a comprehensive risk assessment on the candidate entity in the country in which it is located and in the countries in which it will be operating on behalf of the CB. If it identifies an unacceptable risk that is not manageable, the CB shall not proceed with the agreement.

The risks shall be considered with regard to impartiality, competence, consistency, independence, and levels of local risk to certification business in the country where the CB is planning for the entity to operate. (See Annex 1.) Existing accreditation of the entity can be taken into account.

1.2 Establishment of the Legally Enforceable Agreement

The CB shall establish a legally enforceable agreement with the candidate entity to include but not be limited to:

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- i) That the candidate entity shall conform to the applicable requirements including legal status, impartiality, competence requirements, process requirements and with the CB's management system, to the extent that the candidate entity is involved in the delivery of certification services.
-  The candidate entity shall operate within the CB's management system and/or under its own accreditation;
-  As needed, based on the risk assessment, additional controls shall be defined and implemented;
- ii) The entity is subject to on-site internal audit by the CB on an ongoing basis. The audits shall include all activities performed by the entity on behalf of the CB. The audit frequency shall depend on the risk assessment and the results of previous audits;
- iii) Mandatory annual reporting on key performance indicators (KPIs), including those specified in *IAF MD 15: IAF Mandatory Document for the Collection of Data to Provide Indicators of Management System Certification Bodies' Performance*;
- iv) Provision of access to control and monitoring by the CB's Accreditation Body (AB) as deemed necessary;
- v) Details of the activities to be provided by the entity;
- vi) Responsibilities, authority and liability of each party;
- vii) Provision of resources, training, continuous professional development;
- viii) Intellectual property and protection;
- ix) Before outsourcing any activities it performs on behalf of the CB, the entity shall obtain the agreement of the CB.

CBs shall report to their ABs all established entities' operations and the markets in which they operate.

In cases of termination of the agreement, the CB shall inform its AB with the reasons of termination.

1.3 Compliance of Entities' Operations with the Applicable Requirements and the CB Management System and Governance Documents

The requirement to conform to the applicable accreditation requirements is extended to the entity, in relation to the services it performs on behalf of the CB.

CBs shall monitor the ongoing performance of the entity, including on-site internal audits (including witnessing audits) of the entities to the relevant accreditation requirements of the CB's management system, the CB's Governance Documents and other applicable documents in relation to the activities performed on behalf of the CB.

2. OBLIGATIONS OF ACCREDITATION BODIES

2.1 AB Monitoring of Entities

When an AB is notified that such an entity is to be used by a CB, the AB shall share this information (clause 7.8.1 of ISO/IEC 17011) with local AB(s) and may seek their inputs taking into account the requirements of clause 8 of ISO/IEC 17011. [VEDERE IN FONDO](#)

Local ABs shall identify, when it comes to their attention, entities, accredited by foreign ABs, operating in the local market and communicate this information to the foreign AB.

The CB's AB shall decide on an assessment program of its entities in accordance with the requirements of ISO/IEC 17011, *IAF MD 12: Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries* and other applicable documents and shall inform the local AB if applicable.

The CB's AB shall inform the local AB of cases of termination of the agreement between the CB and the entity for fraudulent or unethical behavior.

2.2 AB Assessment of Entities' Operations

ABs shall determine the frequency of assessment for each CB and its entities in an accreditation cycle based on the requirements of ISO/IEC 17011 and the applicable IAF documents.

The CB's AB may initiate visits to entities to investigate specific situations triggered by adverse trends (including the indicators that are required to be identified by the entities and the CB and reported on a regular basis to the AB) or market feedback, such as:

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- ☐ A sudden change in the number of certificates issued by the CB;
 - ☐ The entity raises few or no nonconformities during a long period of time, for example over a certification cycle, if the entity is performing audits;
 - ☐ Situations that call into question the credibility of accredited certification;
 - ☐ Complaints from customers of certified organizations or other interested parties indicating concerns about the effectiveness of an entity's certification process;
 - ☐ Negative publicity: i.e. issues raised by media organizations regarding a particular product, organization or entity, with relation to specific technical areas; problems identified through social networking sites; specific negative feedback from NGOs regarding the performance of accredited certification;
 - ☐ Intervention from regulators, or negative feedback from regulators;
 - ☐ The raising of systemic issues and concerns by the entity during witnessed assessment by the AB for a client when no such findings were recorded in earlier audits of the same client, especially by the same auditor/team;
 - ☐ Evidence that regulatory requirements, especially in regulation-sensitive management systems such as FSMS, EMS or OHSMS, are not adequately audited, particularly if there is a direct impact on people's health or safety.

Note: Annex 2 can be used to assist the investigation of such situations.

In the event of poor performance by the entity (which can be triggered by complaints from local ABs, regulatory bodies or other stakeholders, poorly maintained records, non-effective training and evaluation of local staff, etc.), an AB may need to change the assessment program of the CB, e.g., by programming additional special visits.

Information related to poorly performing entities shall be shared with the local AB, and its cooperation requested for any subsequent action, with the agreement of the CB.

Annex 1: Elements That Can Be Checked During the Risk Assessment (Informative)

Elements that can be checked during the risk assessment include but are not limited to:

- ownership and owners and their relationships (business and other);
- related businesses, including relationships with consulting companies;
- criminal records of owners and entity - clean records;
- potential issues with authorities, violations, acts, bans, tax records, social security records;
- former relations with other CBs, if any, current status, reasons for termination of relationships;
- number of employees on record, including external resources;
- scopes of competence of auditors, auditor files, current contracts;
- financial stability.

Note: the Local AB may be a source of information.

I'HHC ci darà conferma se riportare sul certificato:

- 1.se occorre seguire il principio che sono importanti SOLO le conformity assessment activities, allora dovrebbero entrare nel certificato solo alcuni sedi del CAB, e alcuni terzisti
- 2.se occorre seguire il principio che sono importanti le sedi CAB, allora dovrebbero entrare nel certificato TUTTE le sedi del CAB, e nessun terzista
- 3.se occorre seguire il principio che sono importanti SOLO le sedi CAB e solo se in queste sono svolte conformity assessment activities, allora dovrebbero entrare nel certificato alcune sedi del CAB, e nessun terzista

Quale delle tre opzioni?

ISO 17011 - 7.8.1 d) locations of the accredited conformity assessment body and, as applicable, the conformity assessment activities performed at each location and covered by the scope of accreditation

Altro discorso poi è decidere quali sedi verificare, a prescindere se siano o meno sul certificato.

Accredia deve verificare le sedi rilevanti, non le sedi critiche.

IAF ha confermato la possibilità di verificare anche sedi di soggetti terzi (esempio società di auditing) che operano per il CAB

**Annex 2: Toolset for Special Investigative Assessment of Entities' Operations
(Informative)**

If a special investigative assessment is necessary, below is a recommended list of topics that can be checked to assess the evidence for conformity of entities' operations:

- legal information, registration, ownership, legal records of company and owners/managers;
- other types of activity performed by the entity;
- related entities through common ownership and links between owners;
- management structure and management of conflict of interest;
- tax and social security information and correspondence with volume of work;
- auditor resources - evidence of their existence and their demonstrated competence;
- financial aspects;
- cross-check of dates of audits and hard evidence for the presence of the auditors (for example that travel receipts, hotel invoices, payment details do not overlap with other audits);
- to confirm with clients the presence of audit teams, audit days, length of audits, etc.;
- actual state of the company;
- check rates against direct costs;
- check for large consulting subcontractors - large amounts paid to subcontractors; payments to auditors, contracts with auditors, payments to companies to do audits.

Other topics for checking may be added, as required.

End of IAF Mandatory Document Control of Entities Operating on Behalf of
Accredited Management Systems Certification Bodies

Further Information:

For further information on this document or other IAF documents, contact any member of IAF or the IAF Secretariat.

For contact details of members of IAF, see the IAF website: <http://www.iaf.nu>.

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