Association of British Certification Bodies

Minutes of the Management Systems Sector Committee Meeting held on Thursday 21 May 2015 at BSI, Kitemark Court, Davy Avenue, Knowlhill, Milton Keynes, MK5 8PP

Members Present:

Mr Steve Russell	NQA, Chairman
Ms Janet White	BSI
Mr Keith Goddard	The British Assessment Bureau
Mr Richard Colwell	BASEC
Ms Helen Taft	SIRA
Mr Max Linnemann	NMO

In Attendance:

Mr Trevor Nash	Chief Executive

1.0 Apologies for absence

Apologies had been received from John Sexton (AFNOR UK), Ben Salter (Certification International), Wayne Thomas (SIRA) and Tanya Kuchukova (TUV).

2.0 Minutes of the meeting held on 25 February 2015

The minutes were agreed as a true record.

3.0 Matters arising from the minutes not covered elsewhere on the agenda

3.1 Ex minute 6.2 IAF MLA recognition

Trevor Nash reported that he had spoken with the Chairman of the IAF MLA Committee who said that Singapore Accreditation Council should recognise all certifications accredited by an MLA signatory even if they are not, themselves, a signatory for a particular standard.

4.0 Liaison reports

4.1 SBAC/CBMC

Revisions of the UK CBMC scheme documentation have been published and are available on the ADS website and include:-

UKCBMC-001 – issue 8	Document Master Index
UKCBMC-002 – issue 12	UK SOP
UKCBMC-003 – issue 3	UK CBMC Record Register
UKCBMC-009 – issue 1	UK CBMC Oversight Process

The UK CBMC successfully completed its 2014 oversight programme. The EAQG (European Aerospace Quality Group) OPMT 2014 oversight programme also had 100% completion which was a highly successful outcome as this had not been achieved by the EAQG OPMT for four years.

Only four training providers remain in the European Scheme, two in Italy and two in the UK.

EAQG Other Party Management Team (OPMT) was subject to Sector Management Structure (SMS) oversight between19 to 21 May 2015. Three CBMC's selected for review were Austria, France & Italy.

As the ballot for the revised AS 9104-003 has not been accepted by one sector, a re-ballot is necessary. It is unlikely the new AS 9104-003 will be published in 2015 due to the timescales involved with sector commentary/feedback and review cycles.

AS 9101:2014/E auditor training transition has been effective and infrequently utilised auditors should be contacted to complete the training as it will be terminated on 1 July 2015.

OASIS is now on a 12 to 15 year old platform and will be replaced by OASIS NextGen during 2015/2016. Volunteers to beta test the next generation of OASIS will be sought towards the end of 2015 as part of the testing and piloting stage of the project.

4.2 DIQF

The last DIQF meeting was held on 14 April.

The main reason for the meeting was to look at how MOD can improve confidence from third party quality management system certification. The meeting consisted of a round table open discussion which resulted in several points of agreement. The need was identified for MOD to start raising formal complaints regarding issues identified with certification body assessments. It was agreed to progress the proposal for MOD involvement in the assessment planning process as it was felt the pilot had improved things.

It was agreed that MOD should approach UKAS and EA regarding the ISO 9001:2015 transition to seek assurance that the process approach is being effectively implemented and seek confidence in the different approaches from certification bodies on durations of transition assessments.

There was discussion of pushing for all MOD contractors to implement AS9100 as it was felt this clearly demonstrates the process approach. Concern was expressed that where suppliers only have a small proportion of their business associated with MOD contracts they may pull out of tenders because of this additional requirement.

The proposal to develop an IRCA scheme specifically for the defence sector was not considered viable as not all certification bodies require their assessors to be IRCA registered and the development of a Defence Body of Knowledge with CQI was put on hold.

4.3   JTISC

There have been no formal JTISC Committee meetings since early 2014.

There has been some work on preparing collateral for the next level of TickITplus (Capability Level) but nothing concrete has been published for review yet. It is expected that something will be available around July 2015. There is a possibility of piloting the new levels later in the year.

Steve Russell asked about the take up of TickITplus and Trevor Nash responded that he was aware that two certification bodies had dropped out of the scheme. Steve Russell and Janet White both reported a poor take up of the scheme from clients.

4.4   QS/1

FDIS ISO 9001:2015 is expected to be circulated for a two month ballot in July, with publication still anticipated for September.

4.5   SES/1/1

ISO/TC 207/SC1 met in Japan earlier in the year and was unable to complete the review of all the comments received on the DIS and there was a follow up meeting in London in April. The FDIS will then be circulated for a two month ballot, with publication expected in September.

A recommendation has been made to CASCO for revision of ISO/IEC 17021-2 following the publication of ISO 14001:2015.

4.6   CAS/1

ISO/IEC 17021-1:2015 will be published on 15 June. The FDIS comments have been addressed by the co-convenors of WG 21 and the CASCO secretariat and few minor editorial changes have been made.

The ISO/IEC 17011 WG has met twice with a third meeting in May after which a Committee Draft should be produced. It is expected that a UK mirror committee will be set up under CAS/1.

5.0   Meetings

5.1   EACC   3/4 March 2015

There was a discussion session on the High Level Structure of management systems standards which considered:

- How can a certification body demonstrate to an accreditation body its ability to assess an organisation's risk based Thinking?

- How can a certification body demonstrate to an accreditation Bbdy how oganisational context is built into audit programmes and activities?

- At a witnessed assessment, what might an accreditation body expect to see to identify that the certification body has understood and implemented the new requirements of the certification standard resulting from the HLS?

There were some lively discussions about the extent of changes resulting from the HLS requirements. Some members consider that there are no major changes and that the HLS requirements do not require major changes in assessment. Others argued that significant changes have to be implemented regarding leadership and organisational context, for instance. New requirements also reinforce the process approach and this will be a challenge for some certification body auditors.

It was concluded that the HLS requirements represent a big challenge for certification bodies and accreditation bodies will need to verify that their assessors fully understand the implications and how and when they raise findings on certification bodies.

The EACC is proposing revision of EA-6/03 EA Document for Recognition of Verifiers under the EU ETS Directive.

Work is continuing on the development of a document on a harmonised approach to accreditation for OHSAS 18001. A draft was circulated for comment and there were a large number of comments. The Task Force now has to review the comments but the process has been delayed as the convenor has left his accreditation body.

The following questions were discussed:

- o Can an accredited certification body issue non-accredited certificates in a scope for which it is accredited? There was no consensus and it was agreed to prepare a discussion paper for submission to IAF.

- o If certification bodies perform energy audits, is this consultancy? The EA Environmental Working Group considersit is consultancy but stakeholders disagree. It was agreed to submit the question to the IAF Technical Committee as a discussion paper.

- o A proposal for a harmonised approach to the ISO 9001 transition arrangements based on the UKAS process. There was no consensus on a harmonised approach and it was agreed to submit a discussion paper, seeking a harmonised process, to the IAF Technical Committee.

- o Can certified organisations outsource critical/core processes and, if so, how should a certification body deal with this? It was agreed to raise this as a question for the next EACC meeting.

- o Can the principles of IAF MD 2 be applied to OHSAS 18001 certification, as its scope is limited to QMS and EMS? It was agreed that EACC should draft a resolution to the General Assembly proposing expansion of the scope of IAF MD 2 to match the scope of the EA MLA for EA AB's.

- o Does a certification body losing a client have to cooperate with the certification body gaining the client? It was agreed that this is not a mandatory requirement of IAF MD 2.

Kevin Belson, the current vice Chairman of EACC is expected to take over as Chairman following the next meeting in October. This will be confirmed at the General Assembly meeting at the end of May.

5.2   UKAS PAF   10 March 2015

Paul Stennett provided a review of UKAS activity in 2014/15 and a look ahead to the main objectives for 2015/16.

Main points from 2014/15 were:

- Most business objectives were met except that growth was lower than expected
- Recruitment of technical staff is becoming more difficult
- Successful transition for ISO17020:2012 (inspection bodies)
- Successful upgrade of communications equipment

- Customer portals delayed due to prospective upgrade of the Dynamics operating system
- Customer feedback indices are still improving although there is still room for improvement in dealing with extensions of scope
- Planning for operational restructuring to help with responsiveness
- Good growth in healthcare accreditation: improved relations with the Care Quality Commission and the Welsh Government including the first accreditation for social care provision
- Growth in interest in the UKAS Health and Social Care Sub-committee.

Objectives for 2015/16:

- IT system upgrade
- Upgrade of intranet and launch of new website
- Office refurbishment or relocation
- Operations restructure and review of processes
- Transition of more accreditation standards
- Maintaining links with Government through a period of change
- Customer portals
- Accreditation in financial services
- Pilot for very small inspection bodies

It was noted that a large amount of capital expenditure would be required to meet the objectives for next year and assurance was sought that this would not impact on fees. Paul Stennett advised that the costs had been fully factored in and that there would not be any higher than normal fee increases to cover the costs of these developments.

Jeff Ruddle presented a report on UKAS operations including details of a proposed reorganisation of the operations sections. The changes are based on customer feedback from survey data and focus groups indicating that dissatisfaction with UKAS service is mainly from larger, complex customers. Steve Russell commented that UKAS should be seeking to improve customer service irrespective of the restructure.

Michael Mainelli, a UKAS non-executive director, presented a report Backing Market Forces – How to make voluntary standards work for financial services Regulation.

The PAF was followed by a PAC meeting. There was feedback on the revision of the customer agreement. A sticking point has been some UKAS customers using the term accreditation for some (non-accredited) services. UKAS wanted a requirement in the agreement to prevent this. It has now been agreed that this should be restricted to the term in the context of Regulation 765 i.e. harmonised standards. UKAS is considering removing the requirement for overseas customers to have an agent for the service of process. There are still some other points to be clarified subject to legal advice.

In connection with the 'Employer of Choice Programme' UKAS has a staff survey performed annually by an external HR consultancy. UKAS was pleasantly surprised by the results, with one disappointing area which was internal communication.

5.3   EAHHC   24/25 March 2015

There was a question regarding how to handle an application for accreditation when the applicant has not granted any certificates in the field before it is assessed by the NAB. It is acceptable in the regulatory field, but in the voluntary sector, only on a case-by-case basis, and provided witnessing takes place at some point.

There is a proposal to review EA-2/13 Policy for Cross Frontier Accreditation based on the experience gained, particularly the need for a mechanism to check that implementation of EA-1/13 S1 for the evaluation of branches set up in the Member State is correct.

It appears that the HHC is still determined to proceed with the paper on (non) recognition of certificates/reports issued to European organisations by European conformity assessment bodies under a non European accreditation.

5.4   IAF   9 – 16 April 2015

The following Working Groups met:

- Management Systems Certification
- Greenhouse Gasses and Energy Management
- IT Management Systems
- Information Security Management Systems
- Food
- Business Continuity Management Systems
- Medical Devices

There was much discussion on the ISO 9001:2015 transition and the need for a harmonised transition process. However, there was no consensus and it was accepted that individual accreditation bodies will be taking different approaches. This is partly due to the transition document being informative and, therefore, not obligatory for accreditation bodies to follow. There was a suggestion that in order to prevent a repeat of the current situation future transition documents should be mandatory. The Accreditation Auditing Practices Group (AAPG) drafted a paper on what a certification body should demonstrate to complete the transition, but this is also only guidance. It can be expected that a similar situation will arise with the ISO 14001:2015 transition.

ISO/IEC 27006:2015 will be endorsed as a normative document and the transition period will be two years from its publication. IAF is not developing a document for this transition.

There is a joint Technical Committee/ MLA Committee Working Group looking at issues of accreditation body inconsistency. The WG was established following a paper, submitted by IIOC, which identified a number of examples of inconsistency between different accreditation bodies. A survey by the WG revealed that 21 of 42 accreditation bodies that responded have their own additional rules/requirements that go beyond ISO/IEC 17021 and IAF mandatory documents. The consensus was that it is acceptable for an accreditation body to add requirements and that this should not be considered as inconsistency. Some accreditation bodies voiced the opinion that inconsistency is inevitable and were not interested in working towards improving consistency. Others were willing to review their additional requirements. There was disappointment from the certification body associations at the lack of willingness of some accreditation bodies to acknowledge the problem of inconsistency between accreditation bodies and address the issues.

The following Task Forces met:

- Accreditation body assessor competence
- Multi-sites where sampling is not applicable
- Control of entities acting on behalf of certification bodies (franchisees)
- Remote assessment
- Industry specific schemes (sector schemes)
- Principles for determining duration of accreditation body assessments
- OHSAS 18001 transition to ISO 45001

Drafts mandatory documents on accreditation body assessor competence and multi-sites where sampling is not applicable are currently out for 60 day comment.

It was noted that there will be a need to review a number of IAF documents in line with ISO/IEC 17021-1:2015 following its publication. The AAPG will review the papers it has issued that relate to accreditation of management systems certification bodies. The Auditing Practices Group will also need to review its papers in line with ISO 9001:2015.

Apart from those concerned with the ISO 9001:2015 transition, there were two discussion papers.

- Is an energy audit management consultancy as defined by ISO/IEC 17021? There was no consensus regarding whether an energy audit in accordance with ISO 50002 is management system consultancy. However, there was consensus that the performance of energy audits in accordance with ISO 50002, and provision of environment and/or energy management

system certification for the same client is considered to be an unacceptable threat to impartiality.

- Is it acceptable for a certification body to total the durations from IAF MD 5 for two surveillance visits and a recertification audit and divide this into three equal parts? This would not conform to ISO/IEC 17021 requirements, specifically the recertification requirements. IAF MD 5 has a sequence of events and the paper outlines an improper methodology adding all the days together. However, alternative approaches to the one third, one third, two thirds approach of MD 5 can be considered by a CB and the CB must demonstrate how its processes satisfy the requirements; in ISO/IEC 17021 and IAF MD 5.

IAF remains supportive of the concept of a global database of management systems certificates and is developing a business case.

5.5   EAAB   15 April 2015

There was concern at the lack of a harmonised ISO 9001 transition process and EAAB urged EA accreditation bodies to work towards this.

EAAB continues to monitor how EA is addressing the issue of lack of resource in some accreditation bodies. At first it was thought this issue was restricted to the smaller, developing accreditation bodies but is now recognised it can also be a problem for some of the well established accreditation bodies.

5.4   EA General Assembly   28/29 May 2015

Trevor Nash will be representing EFAC at this meeting.

6.0   UKAS

6.1   UKAS update

There has not been a Management Committee meeting since the last MS Sector meeting so there is no update from UKAS.

6.2   Members' issues

Trevor Nash raised a question that had been received from Certification International regarding the frequency of witnessed assessments, particularly whether other Members are subject to a witnessed assessment in each accredited scope during each accreditation cycle. It was noted that the baseline requirement of IAF MD 17 is for one witness in each cluster, normally of the critical code, in each accreditation cycle. Janet White commented that the BSI Assessment Manager wants a witnessed assessment in each scope but

in extreme circumstances may agree to just witness the critical code. Steve Russell commented that different UKAS staff have differing views on whether a witnessed assessment in each scope is necessary. He also emphasised the need for programmed visits to be performed as, otherwise sanctions would be applied.

Keith Goddard reported that BAB is currently receiving four witnessed assessments per year but with extensions to scope this is likely to move to eight next year. He felt that witnessed assessments should be spaced evenly over the accreditation cycle and that there should not be peaks in any particular year.

Steve Russell agreed to raise the UKAS policy on witnessed assessments at the UKAS Management Systems Certification Technical Advisory Committee meeting in June.

Action: Steve Russell

7.0   Any other business

There was no other business.

8.0   Date and venue of next meeting

The next meeting is scheduled for Tuesday 29 September at NQA, Dunstable (to be confirmed).