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P002 Performing assessments

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South Lane Tower I
1, avenue du Swing
L-4367 Belvaux
Tél.: (+352) 2477 4360
Fax: (+352) 2479 4360
olas@ilnas.public.lu
www.portail-qualite.lu

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1 Purpose of the procedure

The purpose of this procedure is to describe the process of performing an assessment in the context of accreditation of conformity assessment bodies (CABs).

2 References

Conformity assessment bodies shall comply with the OLAS, EA, ILAC and IAF documents listed in Annex A006 as part of their accreditation.

3 Definitions

3.1 Types of assessment

Accreditation assessment

Systematic, independent and documented process for obtaining records, statements of fact or other relevant information and evaluating them objectively to determine the extent to which a conformity assessment body meets the requirements set by harmonised standards.

Initial assessment (granting assessment)

First assessment following an application to grant accreditation.

The assessment consists of:

- assessing the compliance of the CAB's quality management system with all the requirements of the standards and with other normative documents on the national, European and international level concerning accreditation and all other document issued by European and international bodies and organizations in the area of accreditation,
- checking that the arrangements described in the quality management system are effectively and efficiently applied,
- assessing, on the basis of this information, the CAB's technical competence to perform tests or calibrations as well as the inspections or certifications covered by the application.

During a granting assessment, all the fields of activities included within the scope of accreditation must be assessed. Nevertheless, OLAS can choose not to assess all the techniques of each area if their number is very important. The remainder will be controlled during the surveillance assessments throughout the entire accreditation cycle.

Extension assessment

Assessment performed following an application to extend a CAB's scope (area) of accreditation.

The assessment consists of:

- assessing the competence of the CAB for the area covered by the extension with all the requirements of the standards or other applicable documents on the national, European and international level concerning accreditation and with all other document issued by European and international bodies and organizations in the area of accreditation,
- checking compliance and application of specific documents to these elements,
- ensuring that all the arrangements relating to the area covered by the application to extend the scope are subject to the general rules in force for the CAB.

During an extension assessment, OLAS assesses at least the area concerned by the extension.

Surveillance assessment

Assessment intended to check if the conditions required to maintain a CAB's accreditation are met.

The assessment consists of:

- assessing the implementation of corrective action, which the CAB was committed to take following findings established during the previous assessment, with all the requirements of the standards or other normative documents on the national, European and international level concerning accreditation and with all other document issued by European and international bodies and organizations in the area of accreditation,
- confirm maintaining of technical competence of the CAB for areas of activity contained in the technical annex to the certificate, and covered by the surveillance assessment,
- assessing changes, which have occurred in the CAB since the previous assessment,
- checking the compliance of the quality management system since the last assessment.

During a surveillance assessment, OLAS can proceed to sample its fields of activities in order to assess the complete accreditation scope during an entire accreditation cycle.

Renewal assessment (reassessment)

Assessment intended to reevaluate every 5 years compliance of the CAB with the accreditation criteria for all activities covered by the area (scope) of accreditation. Like the assessment to grant accreditation, this is a full assessment of the CAB.

The assessment consists of:

- assessing the compliance of the CAB's quality management system with all the requirements of the standards or other applicable documents on the national, European and international level concerning accreditation and with all other document issued by European and international bodies and organizations in the area of accreditation,
- checking the application of the quality management system,
- validating the continued technical competence of the CAB for the items indicated in the scope of accreditation to the certificate,
- ensuring the implementation of corrective action, which the CAB was committed to after the non-compliances found during the last assessment.

During a reassessment, all the fields of activities inscribed in the scope of accreditation must be assessed. Nevertheless, OLAS can choose not to assess all the techniques of each area if their number is very important. The remainder will be controlled during the surveillance assessments throughout the entire accreditation cycle.

Additional assessment

Assessment performed, on the opinion of the Accreditation Committee and on the decision of the head of OLAS department, following an initial, extension, surveillance or reassessment. OLAS specifies the objectives and conditions of the assessment.

3.2 Assessment techniques

Office assessment



The objective of this assessment is to verify, among others, the conformity of the quality management system, the traceability of the records, the staff folders (competences, trainings, etc.), the closing of the findings and the implementation of corrective actions.

Witness assessment

A witness assessment is organized for all accredited or applying CABs in the frame of a granting, surveillance, extension or a renewal assessment. It corresponds to the following by the OLAS assessors of:

- an inspection of a building or premises performed by an inspection body;
- a certification assessment (products or systems) performed by a certification body;
- a sampling activity performed by a laboratory;
- a testing, analysis or calibration activity performed by a laboratory.

The witness assessments can be organized before or during the quality assessment. If witness assessments need to be performed after the quality assessment, they have to be planned within a 6-month delay.

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Document review

A documentary review is carried out systematically, prior to the organization of an initial assessment. It is intended to verify the compliance of the management system of the CAB to the requirements of / the standard (s) of for which he is a candidate for accreditation.

For the accreditation of a testing laboratory, calibration laboratory or of medical biology, the review of the validation files is carried out by the technical assessor in charge of the assessment of the concerned domain.

Document assessment

The document assessment is an assessment based on an examination of documents submitted by the CAB.

Remote assessment

Assessment of the physical location or virtual site of a conformity assessment body, using electronic means.

3.3 Definitions related to findings

Non-critical finding

Non-compliance with accreditation requirements*, whose consequences do not have a direct impact on the reliability of results or decisions and which does not compromise the overall operation of the management system.

The finding may be the result of a requirement that has not or only partially been addressed, or of a requirement that needs to be further formalised or clarified.

Critical finding

Non-compliance with accreditation requirements*, whose consequences present a risk to the reliability of results or decisions or a risk to the ability of the management system to maintain the quality level of conformity assessment activities.

The accumulation or repeated occurrence of non-critical findings from the same requirement may indicate a major deficiency in the management system.

** Accreditation requirements include applicable standards, regulatory requirements and mandatory OLAS, EA, ILAC and IAF guides.*

Closing of a finding

Result of the verification by OLAS of the implementation and effectiveness of all actions provided in the action plan, the relevance of it has been validated by the audit team.

3.3 Other definitions

Strong areas

Practices that meet the requirements of the standard, going beyond what is requested and:



- provide additional information, and/or
- are particularly innovative, and/or
- are particularly efficient.

Sensitive areas

Sensitive areas represent:

- subjects or areas related to the identified findings, and/or
- "minor" deviations, not to be qualified as findings. However, they are practices that, if they persist, could become findings in future audits.

Sensitive points do not have to be formally "closed" by the assessors during the next assessment. Nevertheless, sensitive points from the previous assessment are followed up by the assessors to

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determine whether the situation has not drifted into a finding. A sensitive point that has not been dealt with may thus become a finding during the next assessment.

Conformity assessment body

A conformity assessment body (CAB) can be:

- a testing laboratory,
- a calibration laboratory,
- a medical laboratory,
- an inspection body,
- a certification body.

Virtual site

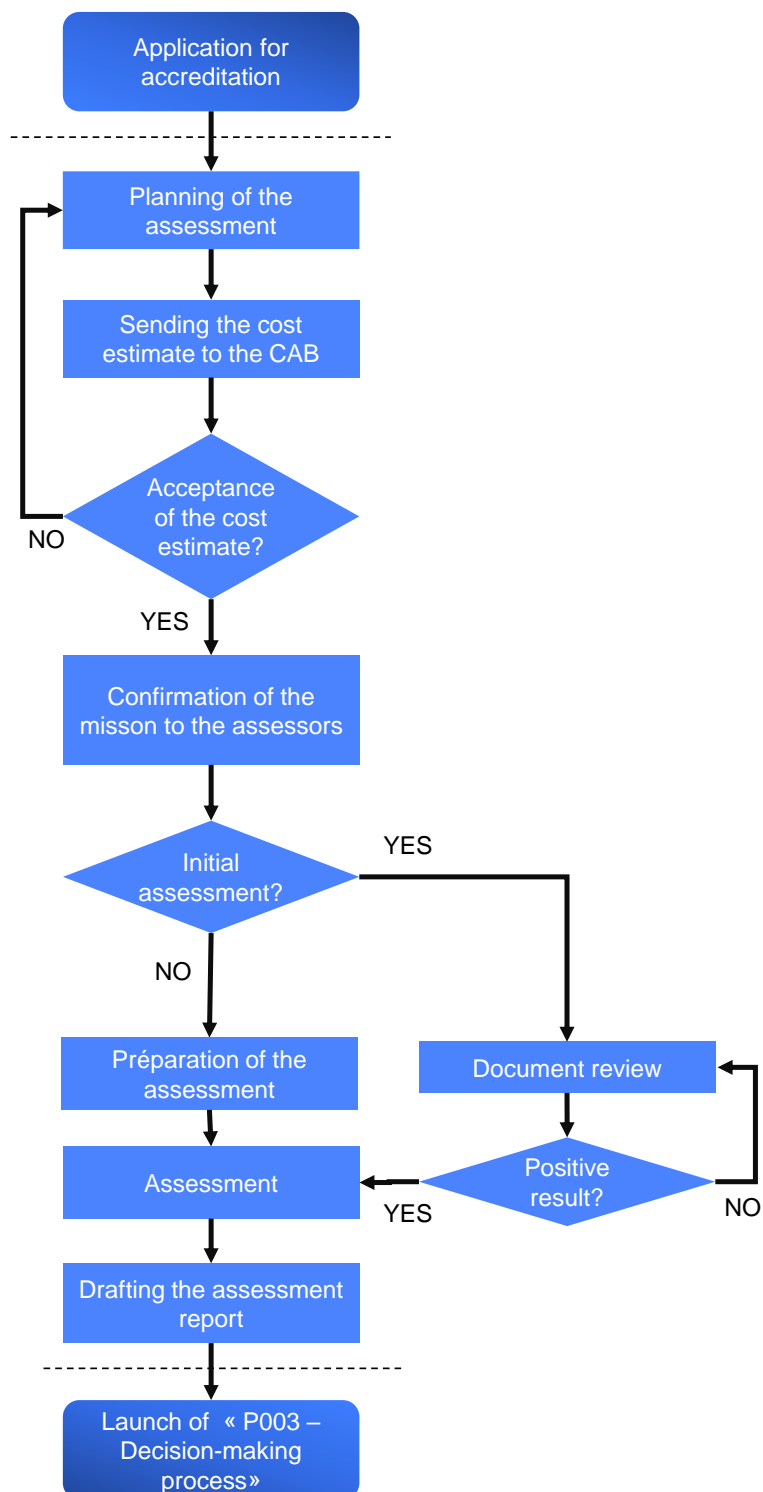
A virtual site is an online environment allowing persons to execute processes, e.g. in a cloud environment.

Transfer of accreditation

Procedure by which an accreditation is granted (with a new accreditation number), taking into account the history of another accreditation.

4 Assessment process

The assessment process is illustrated below.



4.1 Planning of assessments

Planning includes selecting the domains and sites to be assessed, designating the assessment team, calculating the number of assessment days and setting the assessment date.

For the organization of assessments, OLAS has defined the following policies:

- **Initial or renewal assessments:** during an granting or a renewal of accreditation, a witness assessment of each general domain of the scope of accreditation is systematically organized.
- **Extension assessments:** for an extension of accreditation, a witness assessment of each new activity concerned by the extension is systematically organized.
- **Surveillance assessments:** each of the areas of the scope of accreditation is subject to a witness assessment at least once during the accreditation cycle. The choice of the assessed areas, during each surveillance, is defined on case by case, together with the concerned CAB in order to assure that the whole scope of accreditation has been covered during a complete accreditation cycle.

The forms *F021A* and *F021B* allow planning the organization of all assessments over a complete cycle of accreditation.

Accreditation of multi-site organizations is described in appendix *A013 – Accreditation of multi site organizations*.

Assessment of parameters added within the context of a flexible scope is detailed in appendix *A012 – Management of fixed and flexible accreditation scopes*.

Assessment team

An assessment team always consists of an assessor for the evaluation of the quality management system, and at least one assessor for the evaluation of the technical aspects. An assessor can have both roles. For an extension assessment organized between two assessments, OLAS can decide to only call a technical assessor, if the quality management system has been assessed positively during the previous assessment.

The quality assessor is the team leader (TL). He represents the assessment team in relation to the management of the assessed CAB and is responsible for the presentation of the final assessment report. He is, in the last resort, responsible for all phases of the assessment.

If they have the competence, some quality assessors can be authorized as technical assessors.

A technical assessor can perform alone a witness assessment, without the presence of the TL.



A technical expert does not perform witness assessments without the presence of the TL.

If necessary, OLAS ensures that the CAB has sufficient interlocutors for the different members of the audit team. The number of assessors simultaneously present on site is adjusted accordingly.

After appointing the assessment team, the accreditation manager sets the duration of the assessment, in consultation with the assessment team if necessary. The date of the assessment is fixed in consultation with the CAB and the assessment team.

Junior quality assessor:

The accreditation manager can appoint a junior quality assessor to accompany the assessment team, provided it has been accepted by the client. During their juniorat, junior

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quality auditors shall actively participate in audits in the presence of the TL. The TL entrusts him with part of the quality assessment, as well as the drafting of potential findings, under his supervision.

Observers:

For each of the assessments to grant accreditation, a member of OLAS accompanies the assessment team as an observer. For other assessments, his presence is depending on the need of the CAB or OLAS.

OLAS may invite the competent authorities concerned by the assessed domain to participate in the accreditation assessments as an observer, in accordance with the modified law of 4th of July 2014 on the reorganization of ILNAS.

The CAB is informed in advance of the presence of any observer (OLAS team, authority, etc.) during an assessment.

4.2 Acceptance of the cost estimate by the CAB

The accreditation manager prepares the cost estimate for the assessment, which includes the composition of the assessment team, the dates and the duration of the assessment.

The CAB must accept or refuse the cost estimate, the duration of the assessment and the composition of the assessment team by transmitting the signed document filled up to OLAS.

In case of refusal, it must be motivated.

For OLAS, acceptable reasons to refuse a cost estimate can be:

- problems of confidentiality or impartiality of the assessor or expert works or any other conflict of interest,
- prior professional relations with the assessor or expert,
- eventual errors in the calculation of the audit cost,
- differences in understanding with regard to the accreditation scope.

If the CAB accepts the cost estimate, the organization of the assessment continues as stated in the present procedure.

If the CAB refuses the cost estimate, the relevant accreditation manager will review the reason and seek the advice of the head of OLAS department or this deputy.

If the refusal is justified, the assessment planning will be reviewed taking into account the reason for refusal and the CAB will be informed.

If the refusal of the cost estimate is not justified, OLAS will maintain the cost estimate. In case the deadlines for a surveillance or additional assessment are exceeded, OLAS may suspend the accreditation of the CAB in accordance with procedure *P003*. If an initial, extension or reassessment is not performed within the deadlines, accreditation will not be granted, extended or renewed.

In case of cancellation of the assessment by the CAB, any non-refundable travel and accommodation costs will be charged to the CAB. If the assessment is cancelled less than 10 working days before the scheduled date, the preparation and report drafting costs will be charged to the CAB.

In addition, OLAS charges a penalty calculated as follows:

- If the cancellation of the assessment by the CAB occurs less than 10 working days before the scheduled assessment date, OLAS applies a penalty of 50% of the assessment costs for the scheduled assessment days not performed.

- If the cancellation of the assessment by the CAB occurs within 1 working day of the scheduled assessment date or during the assessment, OLAS charges 100% of the assessment costs for the scheduled assessment days not performed.

If, during an assessment, OLAS has to interrupt the assessment for reasons attributable to the CAB, the preparation and drafting costs, travel and accommodation costs, as well as the assessment costs for the assessment days performed will be invoiced to the CAB.

4.3 Confirmation of the assessor's mission

When the cost estimate is accepted by the CAB, the accreditation manager sends a mission order to each member of the assessment team indicating the nature and the duration of the assessment, the dates, the references of the CAB, as well as the composition of the assessment team.

Each member has to return the last page of this letter to OLAS, dated and signed in order to formalize the acceptance the mission.

4.4 Preparation of the assessment / Document review

The accreditation manager shall ensure that the assessors and experts have all the documents necessary for the smooth running of the assessment, such as:

- a project of the assessment plan – form *F003S – Assessment plan*
- form *F059 – List of documents for the preparation of an assessment* as well as the relevant quality system documents;
- if applicable, a copy of the application for accreditation for the assessment to grant, extend and renew accreditation, including the draft scope of accreditation,
- the current scope of accreditation for surveillance or additional assessments,
- if applicable, a copy of the previous assessment report,
- if applicable, the OLAS regulatory database or annex *A022 – Medical laboratories – presentation of the national legislation*,
- if applicable, the form *F030 – Indicators of management system conformity assessment bodies' performance*,
- any other document necessary to achieve the assessment of the CAB.

If necessary, the assessors may contact directly the CAB to ask for additional information or documents needed to prepare the audit.

Before each assessment to **grant accreditation**, the team leader shall review the documents at his disposal to check compliance with the provisions of the applicable standards and guides (cf. Appendix *A006*). He records the date of this review into the assessment plan *F003S*.

The document review preceding the initial assessment is realized on the basis of the documents listed in form *F059*. For laboratories, a sample of validation files will be requested and shall be sent to the concerned technical assessors before the assessment, in order to allow them to analyze the files in the context of their preparation.

If this document review reveals any critical findings, the OLAS head of department may decide not to proceed to the assessment. In this case, the applicant CAB receives a preliminary report of the document review set up by the form *F003N – Document review* and the non-conformity sheets issued. The costs for the drafting of the preliminary report are equivalent to half a day's assessment per implicated assessor and have to be covered by the applicant CAB.

The accreditation procedure will only restart after all critical findings have been closed by the CAB and after validation based on tangible evidence by the assessor concerned and the OLAS head of department.

4.5 Realization of the assessment

The TL contacts the assessment team and the CAB applying for accreditation to elaborate the assessment plan detailing the main phases of the assessment and sends it to OLAS at least 2 weeks before the assessment for final verification and validation. If a technical assessor acts alone, he has to establish his own assessment plan applying the same principles. OLAS sends the final assessment plan to the CAB and assessors at least 5 working days prior to the assessment.

The assessment consists of at least four phases:

- an opening meeting ;
- the evaluation of the quality management system and the technical competences of the staff of the CAB, realized in conformity with the principles defined in the standard ISO 19011;
- a consultation meeting of the assessment team;
- a closing meeting.

These four audit phases are detailed in the annex to this document.

Attendance sheets

The originals of the attendance sheets for opening and closing meetings and of the form *F003E* shall be kept by the team leader for **at least 2 years** before being destroyed.

Where, for reasons of availability, unequal assessment duration or staggered assessment dates, one or more technical assessors start the assessment before or after the team leader, they also start their assessment with a short meeting to validate the scope of accreditation and the logistical aspects concerning them.

Similarly, when not all assessors are present at the final closing meeting, intermediate closing meetings shall be held so that each assessor, after having finished his part of the assessment, can present his or her conclusions and any findings.

An attendance sheet must be signed for each opening and closing meeting. These sheets are to be included in the final report.

Short assessment report

The form *F003P – Short assessment report* is sent to the assessed CAB and to OLAS at the latest on the working day following the assessment. This form gives a summary of information on conformity of the quality management system, on competence of personnel and a conclusion drawn from the assessment..

When a technical assessors holds a closing meeting in the absence of the TL, he drafts a short assessment report *F003P* of his area(s) and sends it to the TL, who will be responsible for creating a "final" *F003P* with all the information gathered during the technical and quality assessment.

Proposals for corrective actions from the CAB

After the assessment, the CAB provides an analysis of the extent and cause of the findings and proposes corrective actions on the form *F003E*. The description of the extent of the finding shall take into account the services concerned, the precedence and the possible impact (sending of erroneous results or not).

The electronic version of this form is then transmitted to the TL and/or the technical assessor and/or the expert who established the finding for validation. If the responses are considered insufficient, the assessors or the experts ask supplementary information. Only one exchange

between the concerned assessor and the CAB is allowed. If the responses stay insufficient at the end of this exchange, OLAS decides on the next steps to be taken..

The TL or the technical assessor can limit the time required to take a corrective action in accordance with the severity or degree of risk of the non-conformity.

Critical findings

Before being closed, the critical findings must be subject to corrective actions applied effectively within 3 months that follow the assessment. For this reason, proofs of the implementation of corrective actions shall be sent to the assessors and the experts having written the findings, for closing them from a documentary point of view. The effectiveness of corrective actions is automatically verified during the next audit of the concerned domain.

During this period of 3 months, an accreditation report cannot be presented to the Accreditation Committee as long as the proofs have not been validated. After the period of 3 months, the file is presented to the Accreditation Committee for opinion. If one / or several critical findings are not closed, the Committee will give his opinion in accordance with the provisions of the OLAS procedure *P003*.

Non-critical findings

The application of the corrective actions must be done within 3 months following the assessment. No later than 6 months after the end of the assessment, the CAB sends to OLAS an intermediary report indicating, for each non-critical finding raised the applied corrective action and the date on which the corrective actions have been closed.

In case of a delay in closing a corrective action, the CAB shall specify in this report the reasons of the delay and the action plan meant to assure the closure.

Within 6 months of the office assessment, the CAB shall send to OLAS the form *F037 – intermediary report* indicating, for each finding, the corrective action taken and the date on which it was completed. If OLAS does not receive the intermediary report or if the corrective actions have not been implemented without valid reason, OLAS can ask the opinion of the Accreditation Committee for further actions to undertake.

4.6 Assessment report writing



The TL draws up the assessment report. He chooses the appropriate template of assessment report among those available on the OLAS website. In his report, he includes:

- Form *F003S – Assessment plan*,
- Form(s) *F003E – Finding and corrective action*,
- if applicable, any supporting documents for the corrective action proposed by the accredited CAB,
- the adapted scope of accreditation validated by the TL.

OLAS's expectations with regard to the drafting of assessment reports are detailed in Appendix *A025 – Audit Report Writing Guide*.

The team leader shall include in his statement with regard to the granting, maintaining, withdrawing, etc. of accreditation status, the conclusions of all technical assessors and experts who were involved in the assessment.

It is imperative that the assessment report contains the result of the control of corrective action from the previous assessment. Findings recorded during the previous assessment where corrective action has proved to be unsatisfactory must be recorded as new findings.

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In the event of a difference of opinion on a finding or the closing of a finding, the assessment team has to refer to OLAS, which can call on an expert in the area to propose a solution. This solution will be submitted to the Accreditation Committee together with the final report.

The TL sends the following documents to OLAS in electronic format, no later than **30 working days** after the assessment has been carried out:

Assessment report;

Form *F003M – Follow-up of accreditation assessments* to give a feedback concerning the duration of the assessment, the number of technical assessors and experts involved in the mission, and the points of the standard or the technical areas to control in priority during the next assessment;



Form *F011A Evaluating the services of a technical assessor or an expert* for each technical or junior quality assessor or technical expert, who accompanied him during the assessment.

OLAS remains responsible for the contents of the final report, including recorded findings. OLAS sends the final report to the CAB before it is distributed to the members of the Accreditation Committee.

5 Provisional timetable for the granting or renewal of accreditation of a CAB

This provisional timetable is only given by the way of indication to help the CAB to plan the proceeding of the granting or renewal of an accreditation.

Month	OLAS	CAB
0	Registration of the CAB Notification following acceptance of the application	Sends the application for accreditation Sends (if necessary) complementary documents
0.5	Planning of the assessment (CAB and assessors)	
2	Sending of the cost estimate to the CAB Sending of the mission orders to the assessors Document review (only for initial assessments)	Acceptation of the cost estimate
3	Initial assessment (office and witness)	Proposals for corrective actions
5	Sending of the assessment report	
6		Maximum delay to implement corrective actions for critical findings
7 – 8.5	Meeting of the Accreditation Committee and notification of the decision by the head of OLAS department	

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It does not take into account the supplementary delays due to the unavailability of the client or the assessors, the refusal of an assessor, the critical findings identified during the document review or the delay in the reception of corrective actions or the assessment report.

6 Management policy of a CAB's move

Inspection and certification bodies

The CAB must inform OLAS of its move by mail. The accreditation certificate and its technical appendix are updated with respect to the new address of the CAB. The former accreditation certificate is no longer valid and must be returned to OLAS.

Testing, calibration and medical laboratories

The laboratory must inform OLAS of its move by mail and request the suspension of its accreditation from the date when the laboratory stops its activities in its former premises.

The audit for lifting of the suspension after the move is used to verify in particular the environmental conditions and the qualification of equipments. It is similar to a renewal audit, covering all the areas of activity listed in the scope of accreditation. This audit is the beginning of a new accreditation cycle.

The suspension of the accreditation lasts until the decision is made following the audit carried out in the new premises. During this period of suspension, the laboratory cannot issue reports covered by accreditation (OLAS logo). On the OLAS website, the laboratory will keep on appearing in the National Accreditation Register, bearing the mention "voluntary suspension of accreditation".

Exception:



For tests, calibrations or analyses carried out on-site (e.g. pH or electrical conductivity of water using portable equipment), voluntary suspension of accreditation is not required.

7 Management of changes in company name or legal form

Any change of company name or legal form shall be notified to OLAS by mail. If necessary, the accreditation certificate and its technical annex will be updated with the same accreditation number. The old accreditation certificate is no longer valid and shall be returned to OLAS.

8 Management of transfers of accreditation

Any request to transfer an accreditation to a new legal entity shall be made via forms F001A, B or C respectively. OLAS conducts an assessment (documentary or on-site), to assess the impact on the transferred activities and to ensure that the accreditation requirements continue

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to be met. A new accreditation number is assigned to the transferred accreditation certificate and scope.

9 Special provisions for carrying out audits in cases of force majeure

When the organisation of an on-site assessment has to be cancelled in the short term, OLAS always favours the reorganisation of a new on-site assessment at a later date.

However, the following examples of situations can be considered as cases of force majeure:

- If the moving of one or more assessors becomes impossible for an indefinite period of time, due to an event such as border closures or lockdown ;
- If the postponement of the assessment leads to an exceeding of the validity date of the accreditation certificate (reassessment);
- If the number of assessments affected by a cancellation is significant and a reorganisation at later dates hinders the functioning of OLAS and the AC.

The "force majeure" assessment is then a combination of document assessment and remote assessment (via tele- or videoconference, if possible provided by the CAB concerned) to replace the office and/or witness assessment.

In order to justify the "force majeure" assessment, the accreditation manager in charge of the file carries out an analysis on the basis of form *F040*.

Types of assessment concerned

The "force majeure" assessments apply to:

- Surveillance and renewal assessments ;
- Scope extension assessments in areas where technical competence has already been demonstrated on similar activities;
- Transition assessments to a new version of an accreditation standard (e.g. ISO/IEC 17025:2017).

No on-site witness assessment will be organised in addition to the "force majeure" assessment, unless critical findings in the operation of the organisation are identified by the assessment team. In this case, OLAS reserves the right to take any decision in accordance with procedure *P003 - Decision-making process*.

For initial assessments and extension assessments to activities where technical competence has not yet been demonstrated on similar activities, the organisation of an on-site assessment is mandatory.



Assessment planning

As far as possible, OLAS tries to maintain the planned dates for the office and witness assessment to carry out the "force majeure" assessment.

OLAS also maintains the assessment durations initially planned for the assessors, including the planned durations for witnessing, assessment preparation and report writing.

If a request for extension is postponed, the assessment duration is re-evaluated.

The team leader organises the remote interviews in consultation with the CAB and the assessment team in order to cover the needs of each. He sends the *F003S* assessment plan

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detailing the main phases of the assessment at least 2 weeks before the assessment (if possible) to OLAS for verification and final validation.

OLAS encourages CABs and assessors to give priority to remote assessments, as opposed to document assessments, in order to facilitate communication as much as possible. Depending on the size of the CAB and the number of assessors in the team, OLAS recommends staggering the interviews in time to ensure the availability of each participant.

Carrying out the assessment

The remote assessment includes the phases described in point 6.2, with the exception of the "witness" part.

After the closing meeting, the CAB has a period of 3 additional working days to review and accept/refuse findings identified by the assessors. During this 3-day period, the CAB may provide additional information to the assessors to avoid any misunderstanding.

Finding sheets are signed by the CAB and the assessors concerned. A scanned version of the signed finding sheets is sent to OLAS for information. Electronic signatures on PDF documents are also accepted.

10 Annex : Assessment phases

10.1 Phase I – the opening meeting

The opening meeting is intended to:

- present the assessment team to the CAB clarifying the roles and responsibilities,
- remind the objectives and criteria for accreditation,
- control the range of the field of accreditation,
- validate the assessment program,
- confirm compliance with rules for confidentiality,
- sign the attendance form.

The opening meeting is conducted by the TL.

10.2 Phase II - evaluation of the system and the technical skills

Evaluation of the quality management system and the technical skills of the staff of the CAB is realized in conformity with the principles defined in the standard ISO 19011.

During the assessment, the assessment team shall ensure that:

- the quality management system of the CAB complies with the standards and guides (OLAS, EA, IAF and ILAC) listed in Appendix A006 and the references stated in the scope of accreditation,
- the corrective actions based on findings identified during the previous assessment, are efficiently closed,
- the use of the OLAS accreditation symbol is part of the accredited CAB's rights and obligations as described in appendix "A003 – Guidelines for the use of the OLAS logo". The control must be done on certificates, internet sites, informative, commercial or publicity documents,
- the test results subject to the interlaboratory comparison programme obtained by the form F023 demonstrate the competence of the laboratory in the areas concerned in the application,
- the situation of the laboratories with regard to the traceability of measurements, the reference materials and measurement equipment is defined,
- the laboratories have installed an approach for evaluation of the uncertainty calculations presented in the scope of accreditation
- the quantities that are followed up by metrology and the measuring range are defined.

The assessment team has to document any findings recorded in the course of the assessment, based on the definitions for critical and non-critical findings, as defined in this document.

All findings have to be documented in a clear and precise way and supported by evidence.

For all findings the assessors and experts have to fill out the box "Motivation of the classification of the finding". For critical findings, the assessors and the experts also have to provide a clear description of the risk associated with this type of finding on form F003E – *Non-conformity report*.

10.3 Phase III – consultation meeting of the assessment team



A consultation meeting of the assessment team enabling any finding sheets to be completed.

If the assessment team does not reach a conclusion regarding a finding, it shall refer to OLAS for clarification.

10.4 Phase IV – the closing meeting

A closing meeting with the TL, the technical assessors, experts and, insofar as possible, the management of the assessed CAB and the managers of the departments concerned, which enables:

- to present at least the findings recorded during the assessment to the management of the CAB,
- to sign the approval or rejection of the findings recorded on F003E forms. In case of refusal of a finding by the CAB, the Accreditation Committee takes a decision,

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- to set a date for reception of corrective actions, which must not exceed 15 working days after the assessment,
- to define the changes to be done by the CAB on its accreditation scope,
- to inform the CAB about the next steps of the accreditation procedure,
- to sign the attendance sheet.

Once the closing meeting completed, the classification of the identified findings cannot be modified any more.

Before leaving the premises of the CAB, the assessors and experts are obliged to return all documents that belong to the assessed, except the documents expressly necessary to write the assessment report. The originals of the finding reports and attendance lists are stored by the TL.