



Accreditation Procedure
for
Bodies Operating Certification of Persons



BCB 201 (PrCB) – Feb 2023

Effective: Immediate



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NATIONAL ACCREDITATION BOARD FOR CERTIFICATION BODIES (NABCB)

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Introduction

This document defines the procedure that has to be followed by organizations seeking accreditation and also accredited organizations as bodies operating certification of persons (PrCBs). The general information is contained in this procedure. The NABCB, on request, will provide any specific information required by the organizations.

The other applicable procedures and information that are mandatory for the new applicant and the accredited organizations like Use of accreditation symbol, Complaint and Appeal procedures, Fee schedule etc. are available on NABCB website, <http://www.nabcb.qci.org.in>

1. Application for accreditation

- 1.1. NABCB has decided to provide accreditation services to any Personnel Certification Body (PrCBs) established as legal entity or identifiable part of larger legal entity in its own economy such that it can be held legally responsible for its certification services, while at the same time following principles of cross frontier accreditation laid down by International Accreditation Forum/ Asia Pacific Accreditation Cooperation (IAF/APAC).
- 1.2. In legal terms, it shall be an organization which can sue and be sued in its own name as per the legal interpretation in the relevant economy. In India, it could be a public or private limited company, LLP, a trust or a society. Partnership firms and proprietary companies do not fit into this. Any exception regarding legal status would be made only by a specific decision of the Board keeping in view the legal provisions in the economy in which the certification body is established as a legal entity.
- 1.3. PrCBs interested to get accredited by the Board for their certification system should submit application to NABCB Secretariat. The application form, BCB: F (PrCB) 001, BCB: F (PrCB) 001a for renewal of accreditation and other related documents are available on the NABCB website for reference.
- 1.4. The applicant should review the following documents prior to submitting the application online
 - a) Application Form BCB: F (PrCB) 001
 - b) Fee Schedule BCB: F (PrCB) 002
 - c) Criteria for accreditation – BCB 120 (PrCB)
 - d) Procedures for Accreditation, Use of Accreditation Symbol & Complaints, and Appeals
 - e) A copy of the accreditation agreement BCB: F (PrCB) 003
 - f) A blank copy of the Document review cum Cross reference matrix for ISO/IEC 17024 covering the specific scheme requirements if additional
 - g) Policy and Criteria for determination of Suitability and acceptance of conformity assessment schemes (BCB 002)
- 1.5. Any additional explanation needed by the applicant is provided by the CEO/Director on behalf of the Board on receipt of a specific request for the same including the necessary explanations on the specific schemes and scopes of accreditation that are covered
- 1.6. Before applying for accreditation, the applicant body shall have met the following conditions
 - a) Operated the certification process for at **least 6 months**. This is necessary to assess the ability of the CB to carry out the certification process as per the documented system. In case the same is not implemented the PrCB should inform NABCB and CEO/Director NABCB may accept the deviation based on justification provided

- b) Granted at least two certifications under the Certification Scheme for which it is seeking accreditation. If accreditation is sought for more than one Certification Scheme, one certification per Certification scheme would be sufficient

Note: In cases where the PrCB had been carrying out audits on behalf of its principals, who had been responsible for decision making, and now wants to operate the certification independently under NABCB accreditation, then the PrCB should be able to demonstrate its competence for decision making, through means like parallel decision making, etc.

- c) Carried out minimum one internal audit against the applicable criteria of accreditation including applied scheme/scope for accreditation, one management review for the documented Quality system and one meeting of the impartiality committee, if established.
- d) Personnel Certification scheme meets the requirements of NABCB policy on Conformity assessment schemes and is accepted by NABCB. NABCB may need to review the certification scheme to determine its suitability for accreditation. The man-days for scheme review would depend on extent of suitability determination. The application shall be accepted and registered only after determination of suitability.

1.7. An authorization letter shall be uploaded along with all other documents at the time of submitting the online application form, in case the application is submitted by anyone other than the top management of the PrCB. The application fee is non-refundable except when the application is not accepted by NABCB.

1.8. The applicant must also upload the required information and documents as specified in the application form.

Note 1 Evidences of the documents and records relating to the completion of internal audit and Management review shall be submitted along with the application.

Note 2 In case the PrCB gets accredited by NABCB, the organizations that were certified prior to the assessment of NABCB may be issued NABCB accredited certificates subject to a clear demonstration of compliance to NABCB accreditation criteria and seeking approval for the same. It shall also be ensured that they are covered by the scope for which the PrCB is accredited by NABCB.

1.9. The application is reviewed by the NABCB secretariat for completeness, clarity of accreditation requirements and the capability of NABCB to provide the services in timely manner. NABCB will review its ability to carry out the assessment in terms of its own policy and procedure, its competence and the ability of personnel suitable for assessment activities. Any mismatch is clarified and the outcome of the review is communicated to the applicant regarding acceptance of the application for further processing, or for completing any further requirements identified during the review. NABCB reserves the right to seek information on the antecedents of the owners / those managing certification activities and analyse it before deciding to accept the application for further processing. It may decide not to accept application if there is any adverse finding in the above exercise. The decision of the NABCB shall be communicated to the applicant with reasons for not accepting the application. The applicant can appeal against such a decision.

1.10. Upon deciding to accept the application, the same is recorded or registered and the assessment team is appointed.

1.11. At any point of time during the accreditation process the applicant may request for transferring the registered application to another legal entity. NABCB would allow the same without any additional application fees based on the justification provided by the PrCB and subject to the new legal entity

meeting all the requirements of application for PrCB scheme.

1.12. NABCB at time of application review will decide on the number of witnesses to be done within a scheme to recommend the scopes sought by the applicant PrCB. Same shall be communicated to CB along with the proposal

1.13. **Appointment of the Assessment Team:**

The assessment team, consisting of a Team Leader and the members, is identified from the pool of assessors and experts. The assessment team for each stage of the initial assessment normally consists of two members and the team for witness assessment will normally have as many members as the audit/evaluation team of the applicant body. Technical Expert, if required, could be additional to the number of team members. In case the PrCB has applied for more than one personnel certification scheme, proportionate increase in number of assessors may be done based on the mandays decided for the assessment.

In case the application is accepted for further processing, a formal acknowledgement along with proposal is sent for carrying out the assessment of the applicant body based on the expected mandays and fee schedule. The names of the members of the assessment team for carrying out the Document review and the Office assessment are also communicated to the applicant PrCB along with the proposal and the PrCB is requested to inform NABCB about acceptance of / objection against the appointment of any of the team members. Any objection by the applicant PrCB against any of the team members must be in writing, accompanied with adequate grounds for the objection. The Director/CEO of the Board will evaluate the objection and decide whether to change the team member or to overrule the objection raised by the applicant PrCB. The assessment team is then formally appointed. Efforts are made to ensure that the team is kept intact throughout the initial assessment process, however this cannot be guaranteed.

The team members are asked to commit that they do not have relationship direct/indirect with the applicant body that can affect the objectivity of the audit at the time of their appointment as NABCB assessor / expert. The team members are required to maintain confidentiality of the sensitive information about the operation of the applicant obtained as part of the assessment process unless required by law, in which case the same will be done under intimation to the PrCB.

All NABCB assessors have declared that they have no conflict of interest and committed to disclose if such a situation arises so that NABCB can take appropriate decision.

On receipt of acceptance of the proposal from the applicant and the assessment fee as per the contract as well as the appointment of the assessment team further processing of application is done.

NABCB publishes on its website, information about new applications for accreditation, for information and for receiving feedback from the industry / other stakeholders. In case any feedback from industry or stakeholders calls for a review by the NABCB, the required formalities shall be completed before further processing of the application.

1.14. If a preliminary visit is requested by the applicant PrCB the NABCB secretariat shall organize the same after obtaining the acceptance of the preliminary visit fee by the applicant PrCB. Such a visit would solely be for the purpose of gaining a better understanding of the operations of the PrCB and for the PrCB to better understand the accreditation process and clarify the expectations of NABCB as regards the requirements of the standards. The visit may result in communication of findings to the PrCB. Such a visit would not result in any decrease in the mandays for the initial assessment.

1.15. Assessment at foreign locations:

NABCB would reserve the right to take the assistance of local IAF MLA members for assessments at foreign locations. The applicant / accredited PrCB would have the normal right to appeal against specific assessor for reasons of conflict of interest. If the PrCB does not prefer to involve the local accreditation body, then the reasons for the same would have to be clearly indicated. NABCB reserves the right to share such information with the concerned accreditation body / IAF.

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

2. Criteria for accreditation

2.1 Adoption of Criteria

2.1.1 The Board has adopted the accreditation criteria for PrCBs based on international standards and guides, supported by the guidance documents released by the International Accreditation Forum (IAF) and Asia Pacific Accreditation Cooperation (APAC Definitions of various terms related to conformity assessment shall be as given in ISO 17000 and ISO 17011 (Annex1).

2.1.2 The Criteria is available on the NABCB website. The criteria documents, that have been adopted directly from international standards and are covered by copyright laws, are not available on the website. For such documents only the reference number and issue level is given. In case of need, the applicant PrCBs are required to procure such documents from the respective national standards bodies like the Bureau of Indian Standards (BIS) in India or International Organization for Standardization (ISO) or through other authorized sources.

Note: The applicant PrCB has the responsibility to obtain approval from the scheme owner in case it is not the owner of the Personnel certification scheme for which it is seeking accreditation. PrCB

2.2 Amendment to the Criteria

2.2.1 The amendment to the Criteria shall be based on the nature of changes required. The Criteria of accreditation and any guidance documents may also be taken up for amendment based on following conditions individually or severally.

- I. Any change in the international standards and guides
- II. Any change in the IAF/APAC documents for implementation of international standards and guides
- III. Significant feedback from the Peer Review assessment team that warrants amendment
- IV. Critical feedback from the implementation of the criteria
- V. Any other reason as deemed fit by the Board
- VI. Seek the advice of the Technical Committee, if one exists,
- VII. Seek representation of PrCBs before approval of the amendment.
- VIII. Seek public comments on the proposed changes through the Members of the Board and other representative bodies as the Board may deem fit.

2.2.2 The Board shall approve the amended criteria after due consultation, if needed, as follows:

- a) Seek the advice of the Technical Committee, if one exists,

- b) Seek representation of PrCBs before approval of the amendment.
- c) Seek public comments on the proposed changes through the Members of the Board and other representative bodies as the Board may deem fit.

2.2.3 The issue status of the Criteria documents is to be identified by the month and/or year of the issue.

2.3 Communication of changes to the Criteria

2.3.1 Any change in the criteria shall be notified to the accredited / applicant PrCBs by e mail/ any other means and a suitable time frame shall be given for implementing the modified criteria. Any transition policy announced by IAF would be adopted by NABCB and communicated to the PrCBs. The accredited PrCBs shall communicate their objection, if any, in writing within 30 days of the receipt of the amended criteria. If no communication is received within 30 days, it will be presumed that the accredited PrCB is willing to adopt the changed criteria.

2.3.2 The implementation of the changed criteria shall be verified during the surveillance assessment of each PrCB. In the event of any major change in the criteria, NABCB will reserve the right to carry out an additional assessment visit and the fee for such assessment visit shall be borne by the PrCB. The quote for such fee will be provided to the PrCB in advance. The assessment will be conducted with prior intimation to the PrCB.

2.3.3 In the event that an accredited PrCB is not willing to adopt the changed criteria, it is allowed to opt out of the accreditation programme and the accreditation is withdrawn with effect from the date of the implementation of revised criteria. The PrCB in such cases shall forfeit the fees already paid.

3 Conditions for Accreditation

3.1 Granting of Accreditation

3.1.1 The accreditation is granted to an applicant PrCB on completion of assessment as per the provisions of section 4 of this procedure and after the following conditions are met by the applicant PrCB:

- a) The applicant meets the criteria of accreditation and all non-conformities and concerns found against the criteria of accreditation during assessment have been closed to the satisfaction of the Board in accordance with the guidelines on the subject
- b) There are no adverse reports/information/complaints with the Board about the applicant regarding the quality and effectiveness of implementation of certification system as per the criteria of the Board. There is also no evidence of fraudulent behaviour,
- c) The personnel certified by the applicant PrCB are satisfied by the conduct of the applicant PrCB and its certification system. NABCB may request feedback from selected personnel certified by the PrCB / publicize receipt of application and seek feedback from stakeholders

Note: NABCB shall obtain on regular basis, through appropriate mechanism, feedback from few of the personnel certified by the PrCB to assess the integrity and compliance aspects of the PrCB.

- d) The applicant body has paid all the outstanding dues.
- e) The Initial accreditation shall be for a period of 3 years. Subsequent reaccreditations are

for a period of 4. If the PrCB does not issue reasonable number of certificates, NABCB reserves the right not to reaccredit the PrCB even if it applies for the reaccreditation of the same

- 3.1.2 In the event of any adverse issue arising from the reasons specified at points c and d of 3.1.1 or if there is evidence of fraudulent behavior or if the applicant PrCB intentionally provides false information or conceals information, the applicant PrCB will be given an opportunity to explain its position in writing to NABCB and present its case in person to the accreditation committee before a decision is taken in respect of granting of the accreditation. The final decision shall be taken in respect of granting of accreditation on the basis of facts and the results of such presentation.
- 3.1.3 NABCB shall publish on its website as well as in its newsletter, grant of any new accreditation it, for information and feedback from the industry / other stakeholders,

3.2 Maintaining of Accreditation

3.2.1 The PrCB shall comply with the following requirements. Subject to the PrCB meeting the conditions given below, the accreditation given to a PrCB shall be maintained for three years (first cycle) / four years (subsequent cycles)

- I. The accredited PrCB continues to meet the criteria of accreditation and all non-conformities found against the criteria of accreditation during surveillance and witness assessments have been closed to the satisfaction of the Board as per laid down criteria
- II. There are no adverse reports/information/complaint with the Board about the accredited PrCB regarding the implementation of certification system as per the criteria laid down by the Board. There is also no evidence of fraudulent behavior
- III. The personnel certified by the accredited PrCB are satisfied by the conduct of PrCB and its certification system
- IV. The accredited CB has organized witnessing as required by NABCB
- V. The accredited PrCB has paid all the outstanding dues

3.2.2 In the event of any adverse issue arising from the reasons specified at points ii and iii at Cl 3.2.1 or if there is evidence of fraudulent behavior or if the PrCB intentionally provides false information or if the PrCB conceals information the accredited PrCB will be given an opportunity to explain its position in writing to the Board and present its case in person to the accreditation committee before a decision is taken in respect of maintaining of the accreditation. The final decision shall be taken in respect of maintenance of the accreditation on the basis of facts and the results of such presentation

3.3 Suspension of Accreditation (Partial or full)

The PrCB shall be subject to suspension of accreditation either fully or partially, both in terms of scope within a scheme or for one or more schemes in case the PrCB has been accredited for more than one schemes. It shall be based on the following conditions individually or severally

- a) No/ineffective corrective actions in response to the non-conformities observed during surveillance assessments (including witness assessments) or reaccreditation assessments.
- b) Nonpayment of outstanding dues.
- c) Not organizing assessments including witness assessments in time.
- d) Any significant/major changes in the legal status, ownership, impartiality, use of sub-contractors, documentation, etc., which have not been informed to the Board within 30 days.

- e) Any willful misuse of the accreditation symbol of the Board.
- f) Any willful mis-declaration in the application form, which is discovered after the grant of accreditation/ reaccreditation.
- g) Willful non-compliance to the accreditation agreement.
- h) Willful misuse of accreditation conditions by certifying and issuing NABCB accredited certificate for scopes not covered under scope of accreditation.
- i) Inability or unwillingness to ensure compliance of the personnel certified by the accredited PrCB, to the applicable standards.
- j) Fraudulent Behavior and intentionally providing false information or concealing information.
- k) Excessive and or serious complaints against the certification system of the accredited PrCB
- l) Evidence of lack of control over the certification process/wilful bypassing of certification procedures.
- m) Evidence of unethical certification practices including providing incorrect information to NABCB; misrepresentation by sales personnel of the PrCB; faking of certification records; inappropriate relationship with consultants; etc.
- n) Non-availability of resources in some of the technical areas/schemes covered under accreditation.
- o) Inability or unwillingness to organize office/witness assessments due in time
- p) Critical or major non conformity which may bring into question the PrCB's ability to provide certification in compliance with the accreditation norms
- q) Any other condition/situation deemed appropriate by the accreditation committee.

3.3.1 A notice citing reasons and intention to suspend shall be sent to the PrCB inviting response within 15 days.

3.3.2 The accredited PrCB shall be given an opportunity to explain its position in writing to NABCB and present its case in person to the accreditation committee. The final decision shall be taken in respect of Suspension of Accreditation (Partial or full) on the basis of facts and the results of such presentation.

3.3.3 Notwithstanding the above provision for a representation by the PrCB, the accreditation committee may decide to suspend accreditation if there is sufficient evidence of willful misrepresentation of facts or willful non-compliance to accreditation criteria. The period of suspension shall be formally communicated as per the criteria laid down by the Board.

3.3.4 The information about suspension (partial or full) of the accreditation of the PrCB shall be published on NABCB website for information to all and feedback from the industry / other stakeholders.

3.4 Withdrawal of Accreditation

3.4.1 The PrCB shall be subject to withdrawal of accreditation based on the following conditions individually or severally

- I. If an accredited PrCB voluntarily relinquishes its accreditation status
- II. If the non-conformities are not appropriately addressed in spite of suspension/withholding of reaccreditation for a period not more than six months
- III. If no action is taken by the accredited PrCB in response to the suspension on any other grounds.
- IV. Complaints are received about the certification process/ certified personnel and established to be based on facts
- V. Critical or major non conformity which may bring into question the CB's ability to provide certification in compliance with the accreditation norms
- VI. Any serious non-compliance to Terms and Conditions of accreditation especially any

fraudulent behaviour which may warrant withdrawal in line with IAF MD 7.

VII. Any other condition/situation deemed appropriate by the accreditation committee

- 3.4.2 A notice of the intention to withdraw accreditation citing reasons shall be sent to the PrCB. The CB shall respond within 15 days.
- 3.4.3 The accredited certification body shall be given an opportunity to explain its position in writing to the NABCB and present its case in person to the Accreditation Committee. The final decision shall be taken in respect of Withdrawal of Accreditation on the basis of facts and the results of such representation
- 3.4.4 The withdrawal of accreditation shall be formally communicated as per the criteria laid down by the NABCB.
- 3.4.5 NABCB shall publish information about any withdrawal of accreditation on its website, in its newsletter as well as in newspapers, if necessary, for information of the industry / other stakeholders and inform IAF/APAC, if required.
- 3.4.6 The PrCB shall inform the personnel it has certified, about withdrawal of accreditation and its consequences and replace their certificates either by unaccredited certificates or certificates with another accreditation or help them transfer to another PrCB within 3 months.

4 Assessment

The assessment shall be for generic competence of the body in operating a sound certification/ system in compliance with the accreditation criteria

4.1 Preparation for the Assessment:

- 4.1.1 The NABCB Secretariat prepares a draft accreditation assessment plan for the initial accreditation process, covering three stages, as follows:
 - a) assessment of the documents. This shall cover all levels of documents of the PrCB for the accreditation scheme applied for.
 - b) assessment of office of the applicant PrCB including any branch offices/ locations from where the PrCB is offering its services /sub-contractors as applicable.
 - c) witnessing of on-site audits/evaluations being carried out by the applicant PrCB based on the scopes of accreditation / certification schemes applied for.

The normal assessment time for each stage of assessment is described at Annex 2. The draft assessment plan (for individual assessments in an assessment programme) may be prepared in stages as mentioned above depending on the information supplied and as when the individual assessment activity is planned and executed using a risk-based approach. The clarifications regarding the scopes/schemes applied for, auditor expertise available with applicant, etc. shall be provided in advance for finalizing assessment plan; -if necessary, the same shall be further verified as part of the office assessment.

The normal assessment time for each stage of assessment is described at Annex 2. The draft assessment plan (for individual assessments in an assessment programme) may be prepared in stages as mentioned above depending on the information supplied and as when the individual assessment activity is planned and executed using a risk-based approach. The clarifications regarding the scopes/schemes applied for, auditor expertise available with applicant, etc. shall be provided in advance for finalizing assessment plan; -if necessary, the

same shall be further verified as part of the office assessment.

For Personnel Certification “Key Activities” shall include the following:

Policy formulation; Process and/or procedure development; Initial approval of auditing/evaluating personnel, or control of their training; On-going monitoring of auditing/evaluating personnel; Application review; Assignment of auditing/evaluating personnel and technical experts if any, Preparation of evaluation/ assessment papers, administering of examinations, issue of evaluation reports/certificates, handling of samples and items, Control of surveillance or recertification audits, Final report review or certification decision or approval.

For the purpose of assessing scope of accreditation/ certification schemes applied for, the same shall be assessed through a combination of means such as documentation review where the PrCB’s system for competence and qualification would be reviewed, office assessment where records of persons qualified for the scope sectors/schemes is reviewed and witness of PrCB’s evaluations. The choice of assessment technique will be decided based on risk.

- 4.1.2 The draft accreditation assessment plan shall be discussed with authorized personnel of the PrCB to ensure an effective assessment plan at each stage.

4.2 Assessment Process:

4.2.1 Assessment Programme/Plan

- 4.2.1.1. The NABCB Secretariat prepares a draft accreditation assessment plan for the initial accreditation process covering three stages as follows:

- a) Assessment of the documentation of the PrCB.
- b) Assessment of the office of the PrCB including branch offices/locations / sub-contractors
- c) Witness of the evaluation being carried out by the PrCB (At least two audits/evaluations (initial /recertification) are witnessed for initial accreditation of a PrCB – if the PrCB has applied for more than one Scheme, it would be one witness per Scheme. NABCB shall decide on how many witnesses would be needed to cover the entire scope of accreditation sought by the applicant. PrCB

- 4.2.1.2. The programme shall be agreed by the Director/CEO of the Board and by the applicant PrCB.

- 4.2.1.3. The Leader of the assessment team, in consultation with Director/CEO NABCB, is authorized to identify the auditors (within the scope of accreditation) of the applicant PrCB that his team would wish to observe during the witness of audit by the applicant PrCB.

4.2.2 Initial Assessment

The initial assessment is carried out in three steps as per the assessment programme, as described in section 4.2.1.1 of this document

- 4.2.2.1. The documents are verified by the assessment team leader/or a member for compliance to the accreditation criteria as supported by the guidance documents, if any, and the scope applied for by the applicant PrCB. In case the PrCB applies

for more than one accreditation scheme, then it shall be ensured by having appropriate number of assessors that at least one assessor qualified for each accreditation scheme is part of the assessment team. A document review report of any omissions of the criteria elements is forwarded by the team leader, to the Director/CEO.

4.2.2.2. In case the PrCB has applied for more than one Scheme, then additional man-days may be added for document review and office assessment.

4.2.2.3. NABCB secretariat reviews the Document review report (DRR) and forwards a copy of the DR to the applicant PrCB for their comments and compliance. Depending on the nature of comments and changes made to the documentation, decision regarding a second review of documents shall be taken. The applicant PrCB would be informed if a second review is needed. If significant changes are needed, the second review may be charged. Any review beyond second document review would be charged by NABCB. If there are significant changes to the documentation, the PrCB would be charged for the review.

4.2.2.4. Any further review of documents would be charged to the CB. If the documentation does not meet the requirements even after 3rd review, the application is liable to be rejected

4.2.2.5. NABCB may decide to conduct a preliminary visit in case the documentation does not meet requirements after two reviews, to give an opportunity to the PrCB to clearly understand the accreditation criteria and other requirements. The visit shall be charged to the PrCB and the duration shall be decided by the Director/CEO based on the work involved. The preliminary visit will generally be carried out for one man day by the appointed leader of the assessment team that carried out the DR.

If the documentation is determined to be generally meeting the accreditation criteria, after review of the changes made, NABCB Secretariat may seek evidence of implementation of changes to the system by the applicant body

4.2.2.6. Subsequent to the documentation review stage, the onsite assessment of the head office and the branch offices/sub-contractors, if any, etc, as per the assessment programme decided at the beginning (see section 4.1.1 of this document), shall be planned. The team leader and the team member involved in the documentation review activity shall generally be part of the assessment team. Any additional team members may be inducted based on the review of mandays and the scope / certification scheme applied for.

4.2.2.7. The assessment plan for the office assessments as per the assessment programme, as prepared by the team leader is shared with the PrCB for their agreement. The responsibility for preparation of assessment plan is that of the team leader for the individual office assessments as per the assessment programme.

4.2.2.8. The assessment team will carry out the assessment of the implementation of the applicant PrCB's documented system in the head office of the applicant body and if necessary, at other office sites / sub-contractors included in the accreditation application/assessment programme.

4.2.2.9. In case information collected during the head office assessment of the PrCB

requires inclusion of other locations in the assessment programme, the applicant PrCB shall be informed and the assessment programme shall be modified to cover such locations. Subsequent monitoring at these offices / new locations shall depend on the nature of activities carried out there and the extent of control demonstrated by the applicant PrCB.

- 4.2.2.10. The branch offices / sub-contractors carrying out activities as defined above (refer section no. 4.1.1) shall be included in the assessment programme and shall be covered during an accreditation cycle
- 4.2.2.11. During the assessment and/or on demand at any time, the applicant / accredited PrCB shall provide unrestricted access to the documents and records that pertain to implementation of systems in accordance with the accreditation criteria for the scopes applied for. The records shall also include the records pertaining to applicant and personnel certified by the PrCB and the certification process and the scopes applied for. Access shall also be provided to the records of the complaints, appeals and disputes along with corrective actions and the method of verifying the effectiveness of the corrective actions. Under certain circumstances, where possibility of irregularity, malpractice and/or fraud is suspected, the records under review may also include the financial records as relevant/applicable to the certification process. Under these circumstances the NABCB assessors shall demand and take copies in any form as relevant – hard copies, scanned copies, etc.
- 4.2.2.12. The non-conformities observed during the office assessment shall be explained to the applicant PrCB and given in NABCB designated format for carrying out root cause analysis and proposing corrective actions for preventing recurrence as well as corrections, where applicable. Concerns may also be raised. The timelines for the corrective action completion shall be agreed to by the assessment team leader and the authorized personnel of the applicant PrCB as per the timelines laid down on this aspect (PI see section 9 of this procedure).
- 4.2.2.13. The team leader shall recommend, at this stage, whether to await completion of the corrective actions or to proceed with the witness of the onsite evaluations scheduled to be carried out by the applicant PrCB. Generally, any major NC in respect of areas like evaluator competence or certification process, would require the PrCB to take corrective actions before a witness is planned. The Team leader shall send a report to the Director/CEO, including details of the recommendations for witness audits and the witness audit plan, as per the Guidelines of the Board.
- 4.2.2.14. The team, nominated by NABCB Secretariat, shall carry out the witness assessment as per the assessment programme, based on the scopes/schemes applied for. The PrCB should ensure that the witness offered covers the representative processes of the concerned scheme. The assessment shall cover the complete process of evaluation for certification.
- 4.2.2.15. For all witness audits /evaluation under ISO 17024, the PrCB shall provide details of application review, and report of any prior evaluation, if applicable and any other document as required for completing the process of witness assessment. During the process of conduct of witness assessment, the NABCB witness assessment team may also ask for the documentation of the evaluated candidate(s) and other evidence seen by the PrCB's evaluation team without causing undue disturbance to the evaluation process. For the purpose of review, on completion of the witness assessment, the PrCB evaluation team shall provide the NABCB AT, the results of

evaluations and the complete evaluation report as would be presented to the PrCB's decision maker.

The PrCB shall provide at least one week in advance before the witness assessment, the following details:

- I. Number of candidates
- II. Sample Application received from candidates
- III. Application review along with evaluation man-days/hours estimation
- IV. Record of evaluator qualification for the scope/scheme along with supporting documents like CVs, knowledge & skills defined and evaluation record etc. and information on how team competence is built up for the scope/scheme.
- V. Last evaluation report for the same candidates, if any
- VI. Evaluation plan.
- VII. Evaluation Program if applicable
- VIII. CB's evaluation procedures.

Evaluation report for the witnessed evaluation along with evaluation findings as soon as the same is prepared and released for CB's technical review process.

- 4.2.2.16. The NABCB assessment team shall identify the findings (non-conformities, concerns, etc).
- 4.2.2.17. A meeting shall be held on completion of witness assessment and the applicant PrCB's evaluation team shall be explained and provided with, as far as possible, documented copy of the non-conformities/concerns observed during the assessment for corrective action as per the guidelines established by the Board. In some cases, where the results of evaluation may be based on some other factors such as laboratory testing, compilation etc, the PrCB evaluation team shall provide the final results of evaluation of candidates to NABCB. In such cases, the NABCB AT may provide only a list of findings at the end of the witnessed evaluation and the formal nonconformities and concerns may subsequently be sent after review of the evaluation results and t report of the PrCB, as appropriate. Additional NCs/Concerns may also be raised based on review of other records pertaining to the witnessed evaluation, application review and mandays estimation, evaluator's qualification, etc, in addition to those raised during the witness assessment, as applicable. The team also provides an opportunity for the applicant PrCB to ask any question about the findings and its basis during the meeting.

4.2.3. Assessment Report

- 4.2.3.1. The assessment team shall prepare a report at each stage of the assessment – office assessment, branch office assessment, and witness assessments. Non-conformities and concerns, if any, shall normally be handed over to the PrCB representative at the end of each assessment. The report at each stage of assessment shall be sent by the NABCB within timelines as prescribed at Annex of this document to the PrCB for their agreement. If no comments are received within a week, then the report is considered to be acceptable to the certification body PrCB and is deemed as final. The NABCB AT shall try to resolve any comments received on the report within timelines as prescribed at Annex 4 of this document and shall submit the report at the end of this period along with any unresolved comments from the PrCB. NABCB Secretariat would coordinate, as needed. The unresolved comments if any would be handled as per the internal procedure of NABCB for disputes

For any witness evaluations, the PrCB shall provide the witness evaluation report as

per timelines prescribed at Annex 4 of this document and in case the report is not provided, then the NABCB assessment team would record the same in their report of the witness evaluation and finalize its witness assessment report. NABCB assessment team may raise non-conformities/observations later, on the basis of any report submitted by the PrCB. If the PrCB fails to submit its evaluation report in time, then any information contained in the report may not be accepted as evidence for any contention by the PrCB against observations by the NABCB assessment team.

- 4.2.3.2. After completion of various stages of assessments and after verifying the documents and records submitted by the applicant PrCB on all the non-conformities and concerns that have been closed by the applicant PrCB as per laid down guidelines of the Board, the team leader shall prepare a final report covering all the aspects of the initial assessment - documentation review, office (including assessment of any other locations as applicable) assessment, the witness assessments and the follow-up assessments, if any, assessment findings and the acceptance of CAs, etc. The final report of initial assessment is required to be made in the prescribed format and shall essentially consist of the following:
- a) A report indicating the level of conformity of the PrCB's management system against the NABCB accreditation requirements.
 - b) The non-conformities and concerns observed during various stages of the assessment and details of corrective actions taken by the PrCB on the non-conformities/concerns and whether these are accepted by NABCB AT.
 - c) Recommendations of the NABCB assessment team with details of recommended scopes and justification for not recommending any scopes
 - d) Recommendations for special conditions like early surveillance, witness of any scope sector beyond those witnessed as part of initial assessment for reasons like confirmation of documented competence criteria, etc. NABCB team leader shall provide appropriate justifications for recommending the special conditions to be imposed.
 - e) The report shall be prepared as per the laid down Guidelines and criteria by the team leader / team members in the established formats listing the level of compliance to the requirement of the accreditation criteria of the Board.
- 4.2.3.3. All the assessment reports at the stage of initial accreditation, reaccreditation and scope extension assessments which require a decision are reviewed. In respect of surveillance office/witness assessments, as a part of monitoring mechanism of NABCB, any report may be picked up for the review after it has been issued.
- 4.2.3.4. The NABCB secretariat shall organize a review of the assessment reports, to ensure that the laid down criteria are addressed correctly. In case the review requires additional action from the PrCB, it shall be escalated to the CEO, who shall take the final decision on the matter. Based on the review, there may be a need for making changes in recommendations as needed based on the NABCB Board's accreditation criteria. Any revised report shall be sent to the applicant PrCB along with reasons for any change
- 4.2.3.5. At any stage of the assessment process, if there is a need for a full or partial reassessment or a written declaration of compliance from the PrCB, in response to the non-conformities observed, the same shall be communicated to the applicant PrCB by the Director/ CEO of the Board after obtaining the relevant supportive facts relating to assessment from the leader of the assessment team.
- 4.2.3.6. In case that the report sent has any difference from the information presented to the applicant PrCB by the assessment team at the closing meeting, the same is highlighted

and the explanation of the differences is enclosed

- 4.2.3.7. The process of closing the non-conformities/concerns and verification must be completed in the specified time. If the applicant PrCB delays the process of acceptable corrective action beyond the limits specified by the NABCB, the NABCB will reserve the right to reject the application. The fees paid by such applicant PrCB will be forfeited
- 4.2.3.8. After all the preceding steps are over, the final report shall be reviewed for completeness, by the NABCB, with respect to guidelines on the subject and shall be presented to the accreditation committee for its decision on the grant of accreditation to the applicant PrCB.
- 4.2.3.9. Wherever needed, to support the evidence of competency of the applicant PrCB, they may submit the documents and records of assessments undertaken on the applicant PrCB by other IAF MLA Members. Director/ CEO NABCB, shall ensure a detailed review, on a case-to-case basis, and provide a report of the same to the Accreditation Committee. The Committee shall decide on the extent of its consideration for the grant of scopes based on such reports. Appropriate guidelines on this subject shall be laid down for the use of assessment teams as well applicant bodies. In case of any difference in interpretation, the Board decision shall be final and binding on the applicant PrCB (please see annex 4 for details)

4.2.4. Time Period for assessment process

A typical time line for the accreditation process is given in Annex 5. The assessment process for any applicant PrCB must be completed within a maximum of one year. In the event that the process is not completed within one year, NABCB will take a decision and the application may then be kept active for one more year and applicant PrCB may be given one chance to completely restart the assessment process afresh without paying any additional application fee. In such cases the assessment process must be completed in one additional year.

In the event of delay in scheduling of witness assessments for different scope sectors applied for, as per NABCB procedure, the applicant PrCB may apply in writing to the Director/CEO of the Board for consideration of his application for part of the scope, for which the assessment process including witness assessments as per NABCB procedure has been completed. The Director/ CEO NABCB shall have the right to accede to that request or differ. Grant of accreditation for part of the scopes shall be done subject to completion of CAs for all the non-Conformities and concerns raised during the earlier stages - office assessment and the witness assessments conducted and their acceptance/closure as per the laid down criteria of the Board.

5 Accreditation Decision

- 5.1 The Accreditation Committee is responsible for taking decision on granting, maintaining, suspending, reducing or withdrawing of Accreditation and also withholding of reaccreditation as well as extension of validity of accreditation. It also ensures that the members of the Accreditation Committee were not involved in the assessment and also have had no relationship for the last two years with the applicant PrCB under consideration that can influence their decision on accreditation.
- 5.2 The reports are forwarded to the accreditation committee along with recommendations of NABCB secretariat for the decision of accreditation.
- 5.3 The decision of accreditation is taken by the Accreditation Committee unanimously and is generally not put on vote. The Head of the Committee shall be responsible for coordinating and addressing the issues raised by the members. The Head of the committee shall have the right to call for any

other assessor/experts/staff for clarifying any of the issue that is under discussion. The persons so called for clarification shall not take part in the decision of the accreditation. It shall be ensured that the persons so called for clarifications shall not have taken part in the assessment of the concerned PrCB and shall be free from any conflict of interest, except when clarification from the assessment team is needed.

5.4 The decisions of the accreditation committee are based on the assessment report, recommendations of the assessment team and the NABCB secretariat, any other relevant information about complaints, the market reputation obtained by the Board, etc. It may also involve interaction with the Director/CEO NABCB, assessment team and the applicant PrCB. The accreditation committee in its capacity shall have the right to ask for any further clarifications on the report and information submitted on the applicant's certification process and the applicant shall not refuse to present such information

6 Accreditation Information/Documents

6.1 The accreditation committee shall decide to grant accreditation to the applicant PrCB, only after the applicant PrCB has met all the conditions specified by the Board,

6.2 Two copies of the accreditation agreement shall be signed by the applicant PrCB and the applicant PrCB shall ensure that the relevant fees are paid.

6.3 On receipt of the signed agreement and the fee as per the invoice, a set of accreditation documents is issued to the applicant PrCB along with the artwork of the accreditation symbol of the Board.

6.4 The accreditation certificate in the standard template would include the NABCB accreditation symbol, the name of the PrCB, address of the premises of the PrCB from where key activities are performed, unique accreditation number, the scope of accreditation, effective date of grant of accreditation and the date of expiry of the certificate (BCB F018).

In addition to this, the following details are also included:

- Certification scheme
- Standards/Normative documents and/or regulatory requirements to which individuals are certified

6.5 The initial accreditation certificate is valid for 3 years and the date of issue and validity is indicated on the certificate.

7. Maintaining Accreditation and Accreditation Cycle

7.1 Surveillance Assessment

7.1.1 To ensure that each PrCB accredited by the Board continues to comply with the accreditation requirements, a surveillance assessment shall be carried out annually at the main office of the PrCB; other offices may be covered as per the accreditation programme. The first surveillance assessment shall be completed within 9 months from the date of grant of accreditation. However, the accredited PrCB, for valid reasons may seek a postponement of the assessment for a maximum period of three months. For deferring the surveillance, the PrCB shall give written justification and shall obtain the consent of CEO, NABCB. It shall be ensured by the CEO, NABCB that the first surveillance takes place within 12 months and gap between surveillance assessments shall not exceed 15 months

The subsequent assessments shall be every 12 months. The surveillance assessment shall be consistent with the initial assessment and include office assessment, other locations performing key activities as defined in section 4.1.1 above, including foreign locations and witness of the evaluations of the personnel certified by the accredited PrCB. The number of locations included in the surveillance assessment would normally be the square root of the total number of locations ensuring that all locations identified as critical/key locations are covered in an accreditation cycle as a minimum. For selection of locations a risk-based approach shall be adopted. Locations where highest and lowest number of certifications are undertaken, will be chosen, if applicable.

- 7.1.2 NABCB shall create an assessment program for each accredited PrCB based on the criteria as annex 6 and recommendations from the office assessment for each year. The recommendation by the assessment team for witness assessment shall be made for both schemes (as per complexity & similarity of scope) and examiners. The witness assessment programme would take into account the evaluation resources available to the PrCB, no. of examiners, no. of examination batches, no. of candidates examined by each examiner, type & mode of exam conducted per scheme etc and the extent of control demonstrated by the PrCB and observations of the office assessment as per annex -6 of this document. Specific schemes/ examinations or examiners may be chosen for witnessing. The provisions of clause 4.2 would apply as regards the number of NABCB assessors/ experts for witness audits. NABCB will try to cover maximum schemes under the scope of accreditation during its surveillance activities including both office and witness assessments. In selecting schemes to be witnessed, and specific scopes in the schemes, a risk-based approach will be used. Complex Scopes within a scheme and complex schemes will be chosen for witnessing. Also, scopes/schemes under regulatory oversight will be chosen for witnessing more often. Similarly, scopes having highest as well as lowest number of certifications will be chosen.
- 7.1.3 The non-conformity reports and concerns if any and the assessment report of each of the surveillance assessments shall be forwarded to the accredited PrCB for taking corrective action as per the laid down criteria for the maintenance of accreditation
- 7.1.4 In the event of any critical and/or major non-conformity that can affect the certification process, the secretariat informs the accredited PrCB and seeks a time bound corrective action plan. The decision for an additional follow up visit to verify the implementation of the corrective action plan as committed by the accredited PrCB is taken by the Director/CEO, NABCB in consultation with the Team leader of the assessment team. Such decision shall be binding on the accredited PrCB. The cost of the follow up visit shall be borne by the accredited PrCB. In the event accredited PrCB has not shown evidence of completion of the corrective action agreed as per committed time period, Director/CEO NABCB shall prepare a status report and submit it along with the assessment report to the accreditation committee along with recommendations of NABCB secretariat for further decision on suspension or reduction or withdrawal of accreditation. Critical/major non conformity may lead to suspension/withdrawal of accreditation depending on the seriousness.
- 7.1.5 The surveillance assessment reports shall be reviewed and presented to the accreditation committee for consideration and decision regarding any suspension (partial/full) of accreditation or scope extension or scope reduction of the accredited PrCB
- 7.1.6 The frequency of surveillance assessments may be increased based on the type of non-conformities observed, complaints received, market feedback etc. The PrCB shall be informed of the reasons for any change in the frequency.

7.2 Other Surveillance activities

- 7.2.1. NABCB Secretariat shall call for information on new certificates/report issued on a quarterly basis and based on the same may decide to seek evaluation reports on a random basis. The Secretariat would have the reports reviewed and seek any clarification. If a clear deviation from the requirement of the standard is established, then such findings would be raised as non-conformities requiring the accredited PrCB to respond. The cost for such reviews shall be charged to the PrCB.
- 7.2.2. Based on concerns noticed during the office assessment / market feedback / complaints or otherwise, Director/CEO, NABCB may decide to arrange direct interaction with personnel certified by the PrCB or organizations using these certified personnel as part of surveillance and the cost of such interactions/visits/ testing carried out if any shall be borne by the accredited PrCB. PrCBs shall, in their contract with their certified personnel provide for such activities. PrCBs shall be informed of any such activity and may join the NABCB assessor/AT for such activities if required. PrCBs would be informed of the duration of such activities and the information planned to be collected, if felt necessary.
- 7.2.3. If the such activities indicate satisfactory operation of accredited certification, then a reduction in normal witnessing could be considered. If however, the activities reveal unsatisfactory operation of the accredited certification scheme, then NABCB Secretariat would advise actions to be taken which could include a special office assessment and intensified witnessing,
- 7.2.4. The PrCB would have to bear the assessment charges in all such cases.

7.3 Reaccreditation

- 7.3.1. Normally six months prior to completion of the accreditation term, the accredited PrCB shall be informed through an alert generated by the accreditation portal about the reaccreditation process. The PrCB shall apply at least 5 months in advance of the expiry date and ensure that office assessment is carried out normally 3 months before the expiry date. In case of delays, the reaccreditation is liable to be withheld till the reaccreditation process is completed.
- 7.3.2. For the purpose of reaccreditation, the reassessment shall be carried out in accordance with process detailed in sections 4 – 6 of this procedure as applied to initial accreditation process and assessment.
- 7.3.3. In case during the accreditation cycle preceding the reaccreditation, witness assessments have been carried out as part of surveillance assessments exceeding the number of mandatory minimum witness assessments needed for reaccreditation, then no separate witness assessments are required as part of reaccreditation process. It is the responsibility of the PrCB to ensure that it offers at least the minimum number of witness assessments (as mentioned in Annex 6) required for each accreditation. These could also be certificates granted under accreditation by other ABs. The mandatory minimum number for the purpose of reaccreditation shall be the same as that for initial accreditation.
- 7.3.4. On completion of the re-accreditation process, the accredited PrCB shall initiate the relevant activities to take corrective actions on the observed non conformities and concerns, if any and complete all actions as per the criteria of the Board to close all critical & major non-conformities and ensure that corrective action plan for minor non conformities are accepted by the assessment teams, before the reaccreditation decision can be taken.

7.3.5. The assessment team shall prepare a report of all the aspects of the assessment of the office and witness assessments, if undertaken for the purpose. The final assessment report shall be made which clearly identifies the activities undertaken as part of reassessment process and includes the following:

- a) the level of conformity of the certification body's PrCB's management system against the NABCB accreditation requirements.
- b) The non-conformities and concerns observed during various stages of the assessment and details of corrective actions taken by the PrCB on the non-conformities/concerns and whether these are accepted by NABCB AT
- c) Recommendations of the NABCB assessment team with details of recommended scopes and justification for not recommending any scopes
- d) Recommendations for special conditions like early surveillance, witness of any scope sector etc, NABCB team leader shall provide appropriate justifications for recommending the special conditions to be imposed.

7.3.6. The report shall be prepared as per the laid down guidelines and criteria by the team leader / team members in the established formats listing the level of compliance to the requirement of the accreditation criteria of the Board. The reports of the re-assessment, and witness assessments if undertaken, and the corrective actions taken by the accredited certification body along with recommendations of NABCB secretariat shall then be presented to the accreditation committee for a decision.

7.3.7. If the decision by the accredited committee is to continue the accreditation, a fresh set of accreditation documents shall be issued to the accredited PrCB.

7.3.8. The reaccreditation shall be for a period of 4 years.

7.3.9. All reassessment activities shall be completed prior to the expiry of accreditation. In case there is a delay in decision-making, the accreditation shall continue, if the report of the assessment team is satisfactory. The decision of the accreditation committee shall be binding on the accredited PrCB.

7.3.10. If the accreditation committee is not able to take a positive decision for any reason, the reaccreditation may be withheld and communicated to the accredited PrCB for initiating the appropriate actions including any corrective actions. The PrCB shall complete all actions within 6 months failing which the reaccreditation may not be agreed to. The period from the date of previous expiry to reaccreditation shall be deemed to be suspension and reaccreditation effected from the original date of expiry.

8. Suspension & Withdrawal of Accreditation

8.1 Decision on Suspension and Withdrawal of Accreditation

Accreditation Committee is authorized to decide about the suspension or withdrawal of accreditation or revoking of suspension.

8.2 Suspension of Accreditation (Partial/full)

8.2.1 In addition to the requirements specified under section 3.3 Suspension of Accreditation (Partial or full) the following shall further apply. The PrCB may seek on its own suspension of accreditation citing reasons for the same with justification.

- 8.2.2 The period of suspension will not be more than six months. If the accredited PrCB does not take suitable corrective action to the satisfaction of the Board and its assessment team within six months, the Board reserves the right to withdraw the accreditation.
- 8.2.3 In the event of part / full suspension, in terms of scope within a certification scheme or the certification scheme itself or the accreditation scheme, the accredited PrCB shall be informed. The PrCB is then barred from issuing accredited certificates for the scopes for which the accreditation has been suspended till the suspension is in force.
- 8.2.4 It is allowed to take on surveillance assessment only with the permission of the CEO, who will ensure that adequate resources are provided by the PrCB such that the surveillance process is not compromised. Where the CEO of the Board is not sure of the adequate resources, the PrCB under suspension will be asked to take support of another PrCB accredited by the Board.
- 8.2.5 For revoking suspension, the accredited PrCB shall formally apply to NABCB as per the established guidelines. The suspension shall be revoked after an assessment has been carried out to verify that the corrective actions have been implemented and are effective in eliminating the reasons of suspension.

8.3 Withdrawal of Accreditation

- 8.3.1 The reasons for withdrawal are already specified at clause 3.4. Additionally, the Board may decide to withdraw accreditation based on market feedback, complaints about the certification process etc. after due investigation and providing the PrCB with an opportunity to respond to the findings.
- 8.3.2 In the event of the decision to withdraw the accreditation, the PrCB is asked to return the original accreditation certificate and the enclosure of scopes to NABCB and to stop using the accreditation symbol of NABCB with immediate effect. The Director/CEO NABCB shall also notify the legal course for initiating any penalty of such misuses if it is reported and found supported by facts and evidences.
- 8.3.3 In case a CB is found using NABCB accreditation symbol after withdrawal of accreditation supported by facts and evidences, NABCB may initiate legal action.
- 8.3.4 Withdrawal of an accreditation has consequences on the Personnel certified by the PrCB. The CB shall provide the personnel it has certified, with information on the withdrawal of its accreditation and on its consequences. Any Accredited certificates shall be considered as unaccredited, once accreditation is withdrawn and NABCB may require the PrCB to publicize this on its website and may place this information on NABCB website also. The PrCB may, in consultation with NABCB arrange for the transfer of such accredited certificates to another accredited PrCB, if possible.
- 8.3.5 Following withdrawal of accreditation, the PrCB may seek fresh accreditation as a new applicant only after a cooling period of minimum one year. NABCB shall have the right to satisfy itself if the reasons which led to withdrawal have been addressed adequately before accepting the application. Any visits needed for such a check would be charged to the PrCB.

8.4 Public Information of Suspension or Withdrawal of accreditation

The information of the suspension or withdrawal shall be placed on the NABCB website in the register of the accredited bodies and NABCB may make a public declaration in the newspapers. The charges for making the information public through newspapers shall be recovered from the PrCB involved before

revoking the suspension or renewal of the accreditation.

9. Assessment findings (Nonconformities/Concerns) and Corrective Actions

9.1 The Non conformities observed shall be categorized in three categories:

a) Critical:

- Any evidence that indicates that the certificates issued by the PrCB may not be based on sound judgment and objective evidences and may not be a true reflection of the compliance to the standards.
- Any failure of implementation of the certification rules as per accreditation criteria and raises doubts on the operation and practice of the certification and the results of the certification system being operated by the PrCB.
- Any evidence that indicates possibility of fraudulent/irregular behaviour by the PrCB, such as issuance of certificates without audit or minimal audit, violation of impartiality requirements which indicates an unacceptable threat to impartiality, issuance of certification to a client not observed to be fit for certification during validation assessments, etc.
- Critical non-conformities shall call for the immediate correction and corrective actions based on appropriate root cause analysis. Such actions shall have to be completed and non-conformities addressed within 30 days of the date these have been observed by the assessment team as per the established criteria of the Board. Critical NC shall be brought to the immediate notice of Director/CEO NABCB by the Team Leader of the NABCB AT. The PrCB may be liable for suspension/withdrawal of accreditation with due notice if such NCs are raised even as it takes action to address them. In case the corrective action is not completed within the stipulated time frame, the accreditation may be liable for suspension partially or completely or withdrawal based on the nature of non-conformity.

b) Major:

- Any evidence that casts doubt on the certification system and is less severe than in case of the critical (which bring into question the validity of certificate issued) and is evident in failure of certain elements of the criteria individually (e.g. absence of liability insurance or internal audit system not working). It may have less direct impact on the certification system and its results or any minor non-conformities that have not been acted upon within the stipulated time frame. A number of minor nonconformities associated with the same requirements or issue may be considered as major nonconformity if it indicates a systemic failure.
- Major non-conformities shall call for the early correction and corrective actions based on appropriate root cause analysis. Such actions shall be completed and non-conformities addressed within 60 days of the date these have been observed by the assessment team as per the established criteria of the Board. The PrCB shall get 10 days for proposing corrective actions and the NABCB AT shall get 10 days for review and response on these. In case the corrective actions are accepted, the PrCB shall be given 15 days to submit evidence of the implementation of the accepted corrective actions which the NABCB AT will review and respond within 15 days. In case the NC is not addressed within the stipulated time frame, the accreditation may be liable for suspension partially or completely based on the nature of the non-conformity.

c) Minor:

- Any evidence that indicates a non-compliance to the accreditation criteria and the application documents, which has negligible impact on the certification system and its results.
- Minor non conformities shall need to be addressed and corrected as early as possible but not later than 3 months (90days) from the date these have been observed by the assessment team, as per the established criteria of the Board. In case of minor NCs also the PrCBs will be required to undertake appropriate root cause analysis before deciding the corrective action. One of the analysis it will require to do is to establish whether it is an isolated case or there are other instances the same finding is observed since the rigour of the corrective actions decided will depend on the same.
- PrCB is required to propose corrective actions within 15 days, and the NABCB AT should review / respond on proposed CAs within 10 days.

Note 1: Multiple Minor NCs with related impact on the certification system shall result in a Major non-conformity based on the judgement of the assessment team.

Note 2: NCs remaining unresolved after the prescribed timelines are liable to be upgraded to the next higher category.

d) Concerns: NABCB assessment teams may also raise concerns under the following circumstances:

- minor gaps/inadequacies observed, in PrCB's documented system or practices, which do not directly amount to non-compliance. However, if no action is taken they are likely to result in nonconformities.
- Issues observed during witness assessments, which may require further review and assessment of the systems of the PrCB in the office.
- Findings of minor nature where, in the judgement of the assessment team, root cause analysis is not required
- Issues from documentation review, minor in nature, which have remained unresolved subsequent to office assessment, where the practice of the PrCB was observed to be complying with the requirements of the standard.
- Concerns are findings which do not require the PrCB to carry out any root cause analysis. It can directly inform the correction/corrective actions it has taken or intends to take (where it would take time). In certain cases, where these are unresolved issues from documentation review, the NABCB AT may ask the PrCB to submit the evidence of Corrective actions for the resolution of the concerns.

9.2 The PrCB shall be given only two chances/iterations for acceptance of corrective actions (proposed/implemented) and closure of non-conformities/concerns and from 3rd iteration onwards, they would be charged for the additional review accordingly (0.5/1 manday as decided on case-to case basis).

9.3 The time for addressing the NCs/Concerns shall be reckoned from the day the non-conformities are handed over to the PrCB.

9.4 Non-conformities of critical or major nature shall normally call for a follow up visit either to the office or on-site as per recommendation of the assessment team. Such a follow up visit shall be charged as per prevailing fee structure.

9.5 In case of minor non-conformities, a declaration in respect of completion of the corrective action by the authorized person of the PrCB may be accepted. However, during surveillance, if it is found that the Minor non-conformity is not effectively addressed, the non-conformity shall be upgraded into major non-conformity and shall have to be treated as per the criteria laid down for Major Non conformity.

Note: The assessment team may also identify opportunities for improvement and convey the same to the PrCB as observations and include in their final report.

10. Change in the status of the Certification Body

10.1. As part of the application for accreditation, the applicant body / accredited PrCB undertakes to inform NABCB within 30 days if any change takes place in any of the aspects of its status or operation that affects its:

- a) Legal, commercial or organizational status
- b) The organization, top management, and key personnel
- c) Significant changes in policies and/ or documented procedures,
- d) premises
- e) personnel, equipment, facilities, working environment or other resources, where significant and relevant.
- f) capability of evaluation or scope of accredited activities, or conformance with the requirements of the accreditation criteria.
- g) Addition/closure of any branches/ foreign locations where candidates are located / operations related to certification are performed
- h) Changes in certifications scheme that may effect the certification process
- i) Other such matters that may affect the ability of the PrCB to fulfil requirements for accreditation.

10.2. On receipt of the information of change in any of the above parameters, the Director/CEO decides whether an extraordinary visit is necessary or the change shall not affect the operation of the certification system within the accredited scope. If the Director/CEO decides on a visit, such a visit shall be charged as per prevailing fee structure. The invoice for such surveillance visit is sent to the CB. Further action shall be initiated only on timely payment of fee for the surveillance visit.

10.3. During regular surveillance the accredited PrCB is asked to confirm that no change in the parameters mentioned above or any other aspect that will affect the certification system has taken place since the last assessment.

10.4. In case an accredited PrCB is found to have given a willful wrong declaration, the Board may take suitable action and also reserves the right to suspend/withdraw the accreditation.

11. Extension/Reduction of the Scope

11.1. Extension of the scope is of two types. One where the extension of scope is being asked for a completely new certification scheme that makes it necessary to process the application similar to the initial assessment. The second is where the extension of scope has been asked for within the same certification scheme for new field/subgroup/technical area as applicable. In case it is a new scheme, then the scheme should meet the requirements of NABCB policy on conformity assessment schemes and should be accepted by NABCB as per clause 1 of this document.

11.2. Normally the extension of the scope will be carried out as part of the surveillance visit by increasing the number of assessor mandays necessary, or alternatively NABCB or the applicant PrCB may ask for an additional assessment. In case of extension of scope with in the same scheme, the

decision of extending the scope may be done based on the assessment of the office to verify the resources only. No special witness assessment may be undertaken for the extended scope.

- 11.3. In case extension of scope is for a new scheme, then NABCB would conduct document review, office assessment and witness assessment either based on the requirements prescribed in the scheme or based on elements of the scheme. NABCB may omit any of the 3 steps after review of elements/requirements of the scheme.
- 11.4. The proposal for the application and other fees for extension of the scope shall be forwarded to the PrCB.
- 11.5. The scope extension visits shall be charged as per the prevailing fee structure. Further action shall be initiated only after timely payment of fee for the scope extension visit. The procedure followed for the assessment and decision for extension of the scope is similar to the initial assessment as described in sections 4 to 6.
- 11.6. The reduction of the scopes is done based on the following:
- The accredited PrCB may like to reduce their scope of accreditation of their own accord.
 - The accredited PrCB has been placed under partial suspension on account of inadequate resources for part of the scopes and subsequently agrees for the reduction of scope.
- 11.7. The decision for extension and reduction of scope is taken by the accreditation committee.

12. Fee payable for the accreditation process and Annual Fee

The fee structure shall be approved by the NABCB. The current approved fee schedule is available on NABCB website

- 12.1. The total fee shall depend on the actual assessment days and other parameters as specified in the fee schedule.
- 12.2. Each accredited body shall pay annual fee as identified in the current approved schedule.
- 12.3. The NABCB shall have the comprehensive right to revise the fee schedule at the end of every financial year.
- 12.4. The NABCB shall take the following actions if any applicant or accredited PrCB fails to pay the fee as invoiced
- Stop further processing of the application/extension of scope/reaccreditation
 - Do not offer accreditation
 - Suspend and/or withdraw the accreditation
- 12.5. All invoices are to be paid within one month. Any failure to pay the invoices timely may result in penal action like rejection of application or suspension of accreditation, If any PrCB is found to be defaulting on payments repeatedly, NABCB may decide to ask for payment in advance for one year at a time.
- 12.6. Fees for any assessment on foreign locations carried out by the local accreditation body shall be charged at the current rates of the local accreditation body.

13. Complaints and Appeals

The detailed procedure for complaint handling and appeals BCB 203 is available on NABCB website



and the same may be referred to.

Disputes

A dispute is a disagreement between the CAB and NABCB AT (such as non- acceptance of NC by CAB, non-acceptance by NABCB AT of CAs proposed / implemented by the CABs) or CAB and NABCB Secretariat. Representation on such disagreement should be made to CEO in writing by the CAB. NABCB will handle disputes in accordance with its internal procedure for the same.

14. Publishing of the Information for Public & availability of accreditation schemes

- 14.1. The NABCB shall make public announcement of the accreditation schemes, criteria of accreditation, application for accreditation, fee schedule and other related documents on its website and on specific request.
- 14.2. The NABCB shall maintain a list of the accredited PrCBs and the applicants on its website. It also makes this information available on request.
- 14.3. The accreditation schemes are open to all applicants within the capability and scope of the NABCB.
- 14.4. The NABCB shall also make public information about suspension withdrawal of accreditation, with holding of reaccreditation and extension of validity of accreditation.

15. Confidentiality and Disclosure

- 15.1. The information obtained regarding the certification system of the applicant and accredited PrCBs that are not of the nature of public information shall be kept confidential by all the staff, members of the NABCB, panel of assessors, experts and the committee members.
- 15.2. If the NABCB has to share any confidential information due to any legal situation, the concerned PrCB shall be informed of the extent of disclosure and the body to whom the disclosure has been made

16. Obligations of the certification body and NABCB

The general obligations of the applicant / accredited PrCB and NABCB are given in Annex 5.

Annex 1 (Clause 2.1.1) (Definitions)

Definitions of terms used in the accreditation process have been adopted from ISO 17000 & ISO 17011. Some of the definitions are reproduced here

Appeal

Request by a CAB for reconsideration of any adverse decision made by the accreditation body related to its desired accreditation status.

Note: Adverse decisions include

- refusal to accept an application,
- refusal to proceed with an assessment,
- corrective action requests,
- changes in accreditation scope,
- decisions to deny, suspend or withdraw accreditation, and
- any other action that impedes the attainment of accreditation.

Complaint:

Expression of dissatisfaction, other than appeal, by any person or organization, to an accreditation body, relating to the activities of that accreditation body or of an accredited CAB, where a response is expected.

Dispute

The disputes about the accreditation system, assessment process etc.

Reducing accreditation

Process of withdrawing accreditation for part of the scope of accreditation

Scope of accreditation

Specific conformity assessment services for which accreditation is sought or has been granted

Surveillance

Set of activities, except reassessment, to monitor the continued fulfilment by accredited CABs of requirements for accreditation

Suspending accreditation

Process of temporarily making accreditation invalid, in full or for part of the scope of accreditation Partial suspension of accreditation for specific technical areas / scopes or for specific geographic areas

Withdrawing accreditation

Process of terminating accreditation in full

Witness Assessment

observation by the accreditation body of a conformity assessment body carrying out conformity assessment activities within its scope of accreditation



Annex 2 -Assessment duration (clause 4.1.1)

The normal assessment duration would be as follows

- Document review (Manuals, procedures, other documents as needed – 3 mandays for initial accreditation, 2 man days for reaccreditation and 1 man day for each subsequent schemes for both initial and reaccreditation.
- Review of corrective actions and revised documents – to be estimated by NABCB Secretariat
- Office assessment – 4 mandays for one personnel certification scheme, at least one manday would be added for each extra scheme covered in assessment. Need for any additional mandays for specific situations would be estimated by NABCB Secretariat and informed to the CB in advance
- Branch office / sub-contractor assessment – generally 1 manday depending on the activities carried out in the branch
- Witness assessments – As per plan of PrCB– NABCB would deploy a competent team comprising of assessors and TEs if required.
- Follow up assessments – To be estimated by NABCB secretariat
- In case of initial accreditation assessment, the preparation of final report by team leader and/or virtual closing meeting - 1.5 manday
- Review of response to NCs _ as per document on timelines for assessment process
- Surveillance assessments – 2 mandays for PrCB scheme and at least one manday for each additional scheme
- Any extension of scope assessment – To be estimated by NABCB secretariat. May require both office assessment and witnessing.

Annex 3

Norms for using reports from other accreditation bodies for use in NABCB accreditation process (The subject report should be of same or equivalent scheme)

Background:

NABCB, as an MRA signatory of APAC and MLA signatory of IAF is obliged to recognize accreditations issued by other MRA / MLA signatory accreditation bodies. A provision exists in the MRA / MLA procedures of APAC / IAF respectively for exchange of documents among ABs and to recognize the work done by each other.

NABCB procedure for accreditation BCB 201 also includes a provision for using reports issued by other accreditation bodies.

The recommendations by NABCB may take into account the results of assessments by other IAF MLA members.

Therefore, NABCB would consider reports of other ABs who are signatory to IAF / APAC MLA / MRA for ISO/IEC 17024.

Framework for use of reports from other ABs for initial assessments

1. NABCB would carry out its own office assessment. Use of reports from other ABs would be restricted to witness assessment reports only, for the present.
2. NABCB would carry out at least one witness assessment to confirm the PrCB's process for evaluating before using reports from other ABs. If however, NABCB has witnessed an evaluation for another AB, such a report would be acceptable in lieu.
3. NABCB would witness assessments in Schemes identified as critical as a part of initial assessment
4. When the applicant PrCB is already accredited by an APAC or IAF MRA / MLA signatory AB then NABCB may accept a witness report. In case of a new PrCB, where accreditation is granted after 2 WAs, NABCB may accept a foreign AB's witness report not older than 3 years in lieu of one WA
5. If a PrCB already holds NABCB accreditation for a PrCB scheme, it can be granted additional scopes in that Scheme based on foreign AB's accreditation without WAs. Further if a PrCB is already accredited by NABCB and has applied for scope extension for another scheme it may be granted additional scopes in that Scheme based on a foreign AB's accreditation without WAs, NABCB may take the above decision based on review of scheme as per NABCB policy.
6. Reports of witness assessments should be reasonably current – not older than 3 years on the date of NABCB assessment and audit/evaluation witnessed should meet the general NABCB criteria – a) should be either an initial audit/evaluation / renewal audit/evaluation covering all the requirements of the Scheme; b) at least all key processes of the scheme are audited/evaluated
7. NABCB would follow the IAF Guidance on exchange of documents among IAF MLA signatories. The reports would be sought from the AB directly based on the information provided by the PrCB. It shall be the responsibility of the PrCB to ensure that the AB concerned releases the reports or PrCB can submit the reports directly and NABCB will ensure get the report authenticated by the foreign AB.
8. The PrCB shall also confirm that there had been no issues raised by the other accreditation body



on examiner competency requirements during their previous assessment.

9. NABCB / Accreditation Committee may decide not to use such reports citing clear reasons

Framework for use of reports from other ABs for surveillance assessments

NABCB may utilise any witness assessment report of an IAF MLA signatory in lieu of its own witnessing requirements as part of surveillance activities. The process would be similar to that detailed above except that any report of surveillance audits would also be acceptable

Annex 4

Timelines for accreditation process

(Section 1-6 of BCB 201)

Timelines - The normal time period for the various stages of the accreditation process would be as follows:

Sl.	Accreditation Process	Time Norms
1.	Application review by Dealing Officer (from the date of receipt of application)	1 week
2.	Recording of Application (from date of receipt of complete application)	1 week
3.	Letter of Acknowledgement sent to CAB along with Team allocation (from the date of receipt of complete application)	1 week
4.	DR to be completed by AT and sent to CAB & NABCB Secretariat by Team Leader (from the date of receipt of complete application)	4 weeks
5.	CAB to respond to comments on DRR (from the date of receipt of DRR)	2 weeks
6.	Preliminary Visit to be fixed if DR issues are not resolved within 2 rounds (from date of receipt of Round 2 response on DRR from CAB)	4 weeks
7.	Report of Preliminary Visit (from the date of the visit)	2 weeks
8.	OA to be carried out (from the date DR is deemed satisfactory)	4 weeks
9.	OA Report to be submitted by AT to CAB as well as NABCB (after completion of assessment)	3 weeks
10.	Dates of WA to be fixed by CABs (after completion of OA, if there are no NCs on Competence)	2 weeks
11.	CAB to respond to Findings of OA	
	Critical NC	
	Proposed Corrective Actions	Within 3 days of the date on which the NC is observed by the AT
	Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the AT
	Major NC	
	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the AT
	Submission of evidence of implementation of accepted Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
	Closure of NC	Within 60 days of the date on which the NC is observed by the AT



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	Minor NC	Proposed Corrective Actions	Within 15 days of the date of which the NC is observed by the AT
		Implementation of Corrective Actions and closure NC	Within 90 days of the date of which the NC is observed by the AT
12.	NABCB Response on Findings		
	Critical NC	Proposed Corrective Actions	Within 2 days from the receipt
	Major NC	Proposed Corrective Actions	Within 10 days from the receipt
		Evidence of implementation of accepted corrective actions	Within 15 days from the receipt
Minor NC	Proposed Corrective Action	Within 15 days from the receipt	
13.	WAs to be carried out (from the date of notification by CAB)		Implementation of Corrective Action
14.	CAB to submit the required documents for WAs (before the date of assessment)		Min 1 week before the WA
15.	CAB to provide report of witnessed audit/inspection to AT (after completion of assessment)		Max 1 week after the WA
16.	WA Report to be submitted by AT to CAB as well as NABCB (after receipt of witnessed audit/inspection report from CAB)		3 weeks
17.	CAB to respond to Findings of WA		As given at SI. No. 11 above
18.	NABCB Response on Findings		As given at SI. No. 12 above
19.	Consolidated IA Report (in case of Initial Accreditation)		1 week after closure of all issues in OA/WAs by CAB
20.	Technical Review of IA Report (after receipt of IA report from TL)		1 week
21.	IA report to be sent to CAB (after Technical Review)		1 week after review
22.	Announcement of decision of grant (from the day of approval of minutes of the AC meeting)		1 day
23.	Once decision of accreditation is announced by NABCB, CAB has to pay the fees and sign the agreement		1 week
24.	Accreditation certificate to be issued by NABCB (after signing of agreement/clearance of payment)		1 day
25.	CAB to ensure that SA is completed (before the month of validity)		3 months
26.	RA application to be received from CAB of last accreditation cycle		6 months before date of expiry of accreditation
27.	Re accreditation OA to be completed		3 months before the date of expiry

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28.	Case for Grant of Reaccreditation to AC	Within the month of validity of accreditation
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Time lines for Scope Extension:

SI	Scope Extension Process	Time Norms	
1.	Preliminary Scrutiny of application for completeness with regard to documentation and fees (from the date of receipt of application)	2 days	
2.	Application review by Dealing Officer (from the date of receipt of application)	2 days	
3.	Letter of Acknowledgement sent to CAB along with Team allocation (from the date of receipt of application)	3 days	
4.	Offsite review of documents to be completed by AT/assessor and sent to CAB	2 weeks	
5.	Findings of offsite review to be addressed by CAB (if any) (from the completion of offsite review)	1 week	
6.	Carrying out onsite assessment (if required) (from the date issues in offsite review addressed)	4 weeks	
7.	Report to be submitted by AT to CAB (from date of onsite assessment)	2 weeks	
8.	CAB to respond to Findings of OA – (from the last date of assessment)		
	Critical NC	Proposed Corrective Actions	Within 3 days of the date on which the NC is observed by the AT
		Implementation of Corrective Actions and closure of NC	Within 30 days of the date on which the NC is observed by the AT
	Major NC	Proposed Corrective Actions	Within 10 days of the date on which the NC is observed by the AT
		Submission of evidence of implementation of accepted Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
		Closure of NC	Within 60 days of the date on which the NC is observed by the AT
	Minor NC	Proposed Corrective Actions	Within 15 days of acceptance of proposed corrective actions by the AT
		Implementation of Corrective Actions and closure of NC	Within 90 days of the date on which the NC is observed by the AT
	9.	NABCB Response on Findings	
		Critical NC	Proposed Corrective Actions
Major NC		Proposed Corrective Actions	Within 10 days from the receipt of findings
	Evidence of implementation of accepted corrective	Within 15 days from the receipt of findings	

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	actions	
	Minor NC	Proposed Corrective Actions
		Within 15 days from the receipt
10.	Technical Review of OA Report (from the date of closure of findings)	5 days
11.	WA to be carried out (from the date of completion of OA)	Desirable 2 weeks from the day CAB offers WA; max 4 weeks
12.	CAB to submit the required documents for WAs	1 week before the date of assessment
13.	CAB to provide audit/inspection report to AT (after completion of WA)	1 week
14.	WA Report to be submitted by AT to CAB (after receipt of audit/inspection report from CAB)	2 weeks
15.	CAB to respond to Findings of WA	As given at Sl. No. 8
16.	NABCB Response on Findings	As given at Sl. No. 9
17.	WA Report review to be completed (from the day of closure of findings)	3 days
18.	Announcement of decision of grant (from the day of approval of minutes of the AC meeting)	1 day
19.	Accreditation certificate to be issued by NABCB (from the day of approval of minutes of the AC meeting)	3 days

Annexure 5 (Clause 16)**(Obligations of the applicant / accredited Personnel certification body)****The obligations of the applicant / accredited personnel certification body are;**

- a) The PrCB shall commit to fulfil continually the requirements for accreditation set by NABCB for the scopes for which accreditation is sought or granted including adapting to changes in the requirements for accreditation as and when communicated and shall also commit to provide evidence of fulfilment.
- b) When requested, the PrCB shall afford such accommodation and cooperation as is necessary to enable the accreditation body to verify fulfilment of requirements for accreditation. This applies to all locations where the certification activities take place.
- c) The PrCB shall provide access to PrCB personnel, locations, equipment, information, documents and records as necessary to verify fulfilment of requirements for accreditation.
- d) The PrCB shall provide access to those documents that provide insight into the level of independence and impartiality of the PrCB from its related bodies, where applicable.
- e) The PrCB shall arrange the witnessing of certification activities when requested by NABCB
- f) The PrCB shall have, where applicable, legally enforceable arrangements with the personnel certified by them that commit these certified personnel to provide, on request, access to NABCB assessment teams, to assess the CB's performance when carrying out evaluation activities of these personnel.
- g) The PrCB shall claim accreditation only with respect to the scope for which it has been granted accreditation.
- h) The PrCB shall commit to follow NABCB's policy for the use of the accreditation symbol
- i) The PrCB shall not use its accreditation in such a manner as to bring NABCB into disrepute.
- j) The PrCB shall pay fees as determined by NABCB timely.
- k) The PrCB shall inform without delay, any significant changes relevant to its accreditation, in any aspect of its status or operation relating to:
 - (i) its legal, commercial, ownership or organizational status,
 - (ii) the organization, top management and key personnel,
 - (iii) main policies,
 - (iv) resources and locations,
 - (v) scope of accreditation, and
 - (vi) other such matters that can affect the ability of the PrCB to fulfil requirements for accreditation.
- l) The PrCB shall assist in the investigation and resolution of any accreditation related complaints about itself, referred to it by NABCB.



Obligations of NABCB

- a) NABCB shall provide information on accreditation to the accredited PrCB that shall identify the following:
- (i) the identity and where relevant, NABCB accreditation symbol
 - (ii) the name of the accredited PrCB and the name of the legal entity, if different
 - (iii) scope of accreditation
 - (iv) locations of the accredited PrCB and as applicable the certification activities performed at each location and covered by the scope of accreditation
 - (v) the unique accreditation identification of the accredited PrCB
 - (vi) the effective date of accreditation and, if applicable, its expiry or renewal date, and
 - (vii) a statement of conformity and a reference to the international standard(s) and or other normative document(s) including issue or revision used for assessment of the PrCB
 - (viii) NABCB shall make all the above information publicly available. NABCB shall also make publicly available, where applicable, information on withholding of reaccreditation, extension of validity of accreditation and suspension or withdrawal of accreditation, including dates and scopes.
- b) NABCB shall, where applicable, provide information about international arrangements in which it is involved.
- c) NABCB shall give due notice of any changes to its requirements for accreditation. It shall take account of views expressed by interested parties before deciding on the precise form and effective date of the changes. Following a decision on, and publication of, the changed requirements, it shall verify that each accredited PrCB conforms to the changed requirements.



Annexure 6 (Clause 7.1.2)

Criteria for Witnessing PrCBs is based on following Rules as below:

- a. **Rule 1:** Minimum 1 WA per scheme (includes similar schemes) per year.
- b. **Rule 2:** Slab-based as per Table-1:

Table -1

S. No	Number of Candidates examined Scheme	No. of WAs required to be Offered scheme on a 6-monthly basis
1	0-250	1 no.
2.	251-1000	2 nos.
4.	Above 1000	3 nos.

- **Note 1:** Selection of examiner(s) per scheme for witnessing shall lie with NABCB and based on the risks & multiple factors such as no. of examiners, no. of examination batches, no. of candidates examined by each examiner, type & mode of exam conducted per scheme etc.
- **Note 2:** All examiners shall preferably be assessed at least once in an accreditation cycle. This includes assessment of examiners during office assessment(s).
- **Note 3:** Similar schemes as per assessment program shall count as 1 scheme only. NABCB reserves the right to determine which schemes shall be deemed similar.
- **Note 4:** Notwithstanding Table-1 above, minimum of 01 WA per Scheme (including similar schemes) per year shall be offered by PrCB.
- **Note 5:** Each accredited scheme shall be witnessed in each accreditation cycle.
- **Note 6:** NABCB reserves the right to increase the no. of WAs based on risk and complexities of the examination.



Amendment Record

<u>Date</u>	<u>Auth. by</u>	<u>Description of Amendment</u>
March 2020	CEO	Cl. 1.16 & Annex 6 added; re-accreditation cycle re-aligned with other accreditation Schemes; Annex 2 (Assessment duration) elaborated
February 2023	CEO	Revisions in criteria for determining number of WA