




WEST AFRICAN ACCREDITATION SYSTEM (SOAC)

SOAC policy on the processing of applications for accreditation of conformity assessment bodies already accredited by foreign accreditation bodies

Approval		Effective date
Date	20/12/22	21/12/22
Signature		

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1 Purpose and scope

This instruction applies to all conformity assessment bodies located in the Member States covered by SOAC that are fully or partially accredited by third party accreditation bodies. It specifies how their applications for accreditation are to be handled by SOAC.

2 References

- C01- Accreditation rules ;
- P06- Managing the accreditation process ;
- ILAC-G21, Cross-border accreditation - Principles of cooperation ;
- IAF MD12, Assessment of accreditation of conformity assessment bodies operating in more than one country;

3 Mailing list

All services involved.

4 Commencement and review

This document is applicable on the date indicated on the cover page. It will be updated as necessary.

5 Summary of changes

Version 00: creation.

Version 01: revision of some sections and update of the table of changes.

Version 02: revision of all chapters and update of the procedure.

Version 03: revision of some sections and update of the table of changes

Version 04: Withdrawal of the CALA Policy on Transfer of Accreditation

6 Terms and definitions

- **AFRAC:** African Accreditation Cooperation (AFRAC) ;
- **MLA:** Multilateral Recognition Agreements ;
- **MRAs:** Mutual Recognition Agreements;
- **IAF:** International Accreditation Forum ;
- **ILAC:** International Laboratory Accreditation Cooperation ;
- **CAB:** Conformity Assessment Body;
- **UEMOA:** West African Economic and Monetary Union .

7 Description of the process

7.1 Basic requirements for processing applications for accreditation of CABs accredited by foreign accreditation bodies

7.1.1 Eligibility criteria for the application of the provisions of this document

The provisions of this document are only applicable to accreditation programmes covered by SOAC.

Only accreditation issued by an accreditation body that is a signatory to the AFRAC, IAF and ILAC Mutual Recognition Agreements or Multilateral Recognition Agreements (MRAs/MLAs) is eligible for SOAC accreditation without reassessment; this provision applies only for a scope of accreditation covered by the above MRAs/MLAs. Conformity assessment bodies accredited by an accreditation body that is not a signatory to the AFRAC, IAF or ILAC MRAs/MLAs will be subject to an initial SOAC assessment.

If the CAB is due for reassessment in the year in which it submits its application for accreditation to SOAC, a full initial assessment will be carried out by SOAC.

These provisions apply only if the CAB has a valid accreditation.

In cases where accreditation was granted by an accreditation body that has ceased to operate or whose recognition by AFRAC, ILAC or IAF has been suspended or withdrawn, the CAB will be considered a new client.

7.1.2 Pre-acceptance review of the application of the CAB accredited by a foreign AO and applying for SOAC accreditation

The application for prior review must be submitted at least six months before the next assessment.

SOAC implements an appropriate process to obtain sufficient information to make a decision on the CAB's application for accreditation. The SOAC shall conduct a review of the current accreditation of the CAB concerned. This review should be conducted by means of a document review involving an assessment team. The review may be conducted by a team of one or more individuals. The composition of the team assigned to carry out the review depends, inter alia, on the dossier submitted. The SOAC determines the competence criteria of the staff involved in the review in advance.

If an on-site visit is required after the desk review, the SOAC selects an assessment team in accordance with the provisions in force (C01 chapter 7.1.3.1).

The findings of the review must be documented. The review will cover at least the following aspects

- Confirmation that the CAB accreditation falls under one of the operational accreditation programmes at SOAC level;
- the site(s) concerned are covered by the current CAB accreditation;
- proof that the scope is accredited by a signatory to the AFRAC, ILAC and/or IAF mutual recognition agreements;

- the Quality Manual or equivalent documentation;
- the internal audit programme established by the CAB;
- Internal audit and management review reports since the last two evaluations;
- proof of successful participation in proficiency tests, where applicable;
- the initial accreditation assessment report, or alternatively the most recent accreditation assessment report and the latest follow-up assessment report; the status of any outstanding non-conformities that may have resulted. If these assessment reports are not available or if the follow-up assessment or reassessment has not been completed in accordance with SOAC procedures, then the CAB will be treated as a new client (initial accreditation assessment);
- complaints received and actions taken, if any ;
- Any current commitments the CAB has made to regulators regarding its scope of accreditation to meet regulatory requirements;
- The State of the OEC's finances ;
- Any other information deemed necessary during the review.

If the examination of the above documents is not satisfactory, in particular if **major unresolved non-conformities are identified**, SOAC will organise a visit to confirm the validity of the accreditation. Responses to any findings during this visit must be provided and forwarded to SOAC within 30 days.

Note: The pre-visit does not constitute an accreditation assessment.

7.1.3 How to get SOAC Accreditation

The SOAC accreditation certificate may be issued to the CAB subject to satisfactory review of the documents and records listed above, in particular

- implementation of corrections and corrective actions for all outstanding major non-conformities;
- CAB action plans for correction and corrective actions to address outstanding minor non-conformities are available;
- all payments due to the previous accreditation body are settled.

Any difference between the requested scope of accreditation and the previous scope is subject to assessment.

If the screening (document review and/or site visit) identifies blocking factors, the CAB will be considered a new customer (initial assessment to be arranged). The rationale for this decision should be communicated to the CAB, documented and records kept.

The accreditation decision-making process is carried out in accordance with procedure P06 "Management of the accreditation process", which stipulates, among other things, that the personnel who make the accreditation decision are different from those involved in the screening activities.

If no blocking factors are identified in the screening, the CAB accreditation cycle will now be based on the SOAC accreditation cycle and SOAC will set the assessment programme for the remainder of the new CAB accreditation cycle.

Where the screening concludes that the CAB should be treated as a new client (SOAC initial assessment), the accreditation cycle starts after the accreditation decision.

The SOAC must make the accreditation decision before any subsequent assessment or reassessment.

7.1.4 Cooperation between SOAC, the previous accreditation body and the CAB

Effective cooperation between the CAB and SOAC is essential to the smooth running of this appraisal process and the integrity of the accreditation. To this end, the CAB will, upon request from the SOAC, provide all documents and information required by this instruction. The conformity assessment body is required to provide all information on the status of its accreditation with the previous accreditation body, including any outstanding non-conformities. Thus, the CAB should not use confidentiality as an excuse for not providing complete and truthful information. If it has not been possible to communicate effectively with the CAB, SOAC will note the reasons for this and seek to obtain the necessary information from other sources.

The CAB shall authorise the previous accreditation body to provide the information requested by the SOAC.

SOAC may contact the accreditation body that previously accredited the CAB when the CAB has not provided the requested information.

When the SOAC accreditation of the CAB is effective, it is published on its website.

8 Related documents

See F02P01-List of QMS documents in force.

9 Table of changes

N°	Source	Amendment in brief (Relevant amendments)
I03P06.00- 16 October 2019		
Creation		
I03P06.01- 17 October 2019		
1		Updated cover page and code
	§ 6	The word "acronym" (title) has been replaced by "Terms" (title)
2	§8	This section has been updated and the addition of a
I03P06.02- 09 December 2020		

N°	Source	Amendment in brief (Relevant amendments)
1	Cover page	Revision and updating of the title
2	2	Removal of reference to an obsolete APLAC document
3	6	Revision and updating of the title
4	7	Update of all provisions, including removal of the confusing transfer process
5	8	Update of associated documents
I03P06.03- 10 October 2021		
1	§7.12	Update of the whole provision
I03P06.04- 20 December 2022		
1	5	Removal of the CALA policy on transfer