



WEST AFRICAN ACCREDITATION SYSTEM (SOAC)

CONFIDENTIALITY-IMPARTIALITY (C04.01)

Approval		Effective Date
Date	01/11/19	01/11/19

SUMMARY

1. PURPOSE AND SCOPE.....	3
2. REFERENCES.....	3
3. EFFECTIVE DATE AND REVIEW	3
4. SUMMARY OF CHANGES	3
5. TERMS AND DEFINITIONS	3
6. COMMON REQUIREMENTS.....	3
7. REQUIREMENTS FOR IMPARTIALITY	3
7.1. Impartiality management policies.....	3
7.2. Risk Management related to impartiality.....	4
8. REQUIREMENTS FOR CONFIDENTIALITY.....	5
8.1. Types of confidential information and documents.....	5
8.2. Confidentiality commitment.....	6
8.3. Communication of information to regulatory authorities.....	6
9. TABLE OF MODIFICATIONS	6

1. PURPOSE AND SCOPE

This document describes SOAC's requirements for confidentiality and impartiality.

2. REFERENCES

ISO/IEC 17011, Conformity assessment - Requirements for accreditation bodies accrediting conformity assessment bodies

3. EFFECTIVE DATE AND REVIEW

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

4. SUMMARY OF CHANGES

Version 00: creation.

Version 01: revision and update for some sections.

5. TERMS AND DEFINITIONS

Impartiality: presence of objectivity

Confidentiality: maintaining the secrecy of information

6. COMMON REQUIREMENTS

SOAC requires all staff (permanent staff, assessors and experts, committee members, external providers, etc.), acting on behalf of its commitment, to comply with policies and implement processes and procedures such as defined in its management system including those related to confidentiality and impartiality. It also requires all its staff to indicate any existing, past or predictable relationship that may compromise their impartiality.

7. REQUIREMENTS FOR IMPARTIALITY

7.1. Impartiality management policies

SOAC's policy is to act fairly, objectively and impartially and to eliminate or manage any potential conflict of interest. One of the main mechanisms to achieve this is to use the Board of Directors, whose balanced composition of stakeholders ensures the equity of SOAC's policy.

SOAC ensures the impartiality of its accreditation activities and does not allow any commercial, financial or other pressure to compromise this impartiality.

SOAC's policies, processes and procedures are non-discriminatory and applied in a non-discriminatory manner.

SOAC accreditation services are accessible to all conformity assessment bodies, regardless of their size or affiliation. Similarly, access to SOAC services is not dependent on the size of the applicant, the number of applicants already enrolled in the programs, or the affiliations of the organization or its location in the SOAC

operational area. Nor does SOAC accreditation depend on the number of conformity assessment bodies already accredited.

SOAC does not provide services that would compromise its impartiality, such as conformity assessment services or consulting services.

7.2. Risk Management related to impartiality

SOAC manages risks related to impartiality through a dynamic process of continuous monitoring of operations to identify potential or actual risks, treat and monitor them to minimize their impact on impartiality.

Risks can come from various sources including:

- personal interests and staff's external relationships, assessors and committee members;
- governance ;
- management;
- financial situation ;
- contracts ;
- Incentives to bring in new customers, etc.

Risks are identified in different ways by SOAC staff, the board and all stakeholders through:

- Board meetings
- management review meetings
- staff meetings
- informal meetings
- interpersonal exchanges
- inter-organizational exchanges
- etc.

The risks identified include those that could result from SOAC operations or the activities of other persons, bodies or organizations that could have an impact on SOAC operations.

When a risk is identified:

- The risk is recorded and followed by analysis and evaluation to determine treatment strategies;
- Strategies are implemented and monitored to ensure their effectiveness;
- Implementation results are continually reviewed as appropriate at management meetings;
- Implementation is also monitored through internal audits;
- A presentation of the risk management strategy, analysis, and results of risk management are presented to the Board of Directors for its opinion;

If a risk to impartiality is deemed unacceptable, that is to say, it affects the integrity of the accreditation, and cannot be reduced to an acceptable level, SOAC will not provide accreditation services until this situation is resolved.

When the risk to impartiality has been addressed and residual risk remains, SOAC documents and monitors it.

A review of the residual risks is carried out by the SOAC General Management during the management reviews.

Risk management strategies are multiple and may include, but are not limited to, the following measures:

- Personnel should not evaluate their own work;
- Accreditation decisions are made by competent committees rather than by a single individual;
- Consultation of the SOAC Board of Directors on important topics, such as organizational strategy, appeal management to include many perspectives and thus minimize risks to impartiality;
- SOAC may advise a potential candidate to use the services of a consultant, but will not specify any person or organization to use;
- Personnel must declare themselves and exclude themselves from work in which they have already been involved for at least the last two years.

8. REQUIREMENTS FOR CONFIDENTIALITY

8.1. Types of confidential information and documents

Are confidential:

- documents marked "confidential";
- information relating to the application for accreditation, in particular, the areas for which it is requested;
- the information and documents collected during the evaluation by SOAC or the evaluation team, including the nature of the corrections and corrective actions implemented by the Applicant;
- information relating to the discussions held during the examination of the file of an accredited body or candidate for accreditation;
- Information about the conformity assessment body obtained from sources other than the conformity assessment body itself (e.g. complainant, regulatory authorities).

In such cases, SOAC must maintain the confidentiality of the supplier (source) of such information and its identity must not be disclosed to the conformity assessment body, unless the source agrees.

Cannot be considered confidential:

- accreditation decisions (granting, refusal, extension, suspension, withdrawal, termination);
- the work aimed at developing SOAC procedures and, more broadly, any debate of a general nature that does not concern a particular issue;
- The information and documents required by law.

8.2. Confidentiality commitment

Those involved in the operation of SOAC are required to ensure the protection of the information to which they have access in the exercise of their function.

In particular, they are required not to make any copies of the documents entrusted to them. To this end, each participant signs a confidentiality commitment (F10P06 "Engagement of SOAC Personnel"). In addition, experts and evaluators sign the code of ethics (F02P09).

8.3. Communication of information to regulatory authorities

SOAC may be required to communicate confidential information relating to an accredited body or candidate for accreditation, at the request of the judicial authority. SOAC shall inform the body concerned of the information thus provided.

9. TABLE OF MODIFICATIONS

No.	Source	Modification in brief (Relevant changes)
C04.00- 24 January 2019		
Creation		
C04.01- 03 September 2019		
1	§ 1	The title has been revised
2	§ 2	References have been revised in line with the wording of the standards
3	§ 3	The title has been revised