



WEST AFRICAN ACCREDITATION SYSTEM (SOAC)

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


Approbation		Effective date
Date	09/12/20	14/12/20
Signature		

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1 Purpose and scope

This instruction applies to all conformity assessment bodies located in member states covered by SOAC, fully or partially accredited by third-party accreditation bodies. It specifies the procedures for handling their accreditation requests by the SOAC.

2 References

- C01- Accreditation Rules ;
- P06- accreditation process management ;
- ILAC-G21, Cross-Frontier Accreditation - Principles for Cooperation;
- IAF MD12, Accreditation Assessment of Conformity Assessment Bodies with Activities in Multiple Countries ;
- P26-CALA Policy on Transfer of Accreditation.

3 Distribution list

All services concerned.

4 Effective date and review

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

5 Summary of changes

Version 00: creation.

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

Version 02: revision of terminologies and update of provisions.

6 Terms and definitions

- **AFRAC** : African Accreditation Cooperation ;
- **MLA**: Multilateral Recognition Arrangements (MLA);
- **MRA**: Mutual Recognition Arrangement ;
- **IAF** : International Accreditation Forum;
- **ILAC** : International Laboratory Accreditation Cooperation;
- **CAB** : Conformity Assessment Body ;
- **UEMOA**: West African Economic & Monetary Union

7 Process description

7.1 Basic requirements for processing accreditation applications for 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 applicable only for accreditation schemes 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 (MRA/MLA) is eligible for SOAC accreditation without reassessment; this provision applies only for a scope of accreditation covered by the above MRA/MLA. Conformity assessment bodies accredited by an accreditation body that is not a signatory to the AFRAC, IAF or ILAC MRA/MLA will be subjected to SOAC initial assessment.

If the CAB is to be reassessed during the year in which it submits its application for accreditation to SOAC, a full initial assessment will be performed by SOAC.

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

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

7.1.2 Review prior to the acceptance of the file of the CAB accredited by a foreign AB and candidate for SOAC accreditation

The pre-review request package must be submitted at least six months prior to the next assessment.

SOAC implements an appropriate process to obtain sufficient information to make a decision on the CAB's application for accreditation. SOAC shall conduct a review of the CAB's current accreditation. This review shall be conducted by means of a document review.

SOAC shall determine the criteria for the competence of personnel involved in this pre-review. The review may be conducted by a team of one or more individuals. The individual or team conducting the preliminary visit, when required, has the same competence as the assessment team mobilized for the scope of accreditation concerned.

The findings of the review must be documented. At a minimum, the review will address the following aspects:

- confirmation that the CAB accreditation falls within one of the existing SOAC accreditation schemes;

- the site(s) concerned are covered by the current accreditation of the CAB;
- evidence that the scope is accredited by a body signatory to the AFRAC, ILAC or IAF mutual recognition agreements;
- the Quality Manual or equivalent documentation;
- the internal audit programme established by the CAB;
- internal audit records and management review minutes since the two last assessments;
- evidence of successful participation in proficiency testing, if applicable;
- the report of the initial accreditation assessment or the most recent accreditation reassessment report, and the latest consecutive assessment report; the status of any outstanding nonconformities that may result from. If these assessment reports are not available or if the consecutive assessment or reassessment has not been completed as required by SOAC procedures, then the CAB shall be treated as a new client (initial accreditation assessment);
- complaints received and action taken, when relevant;
- Any current commitments made by the CAB to regulatory bodies in relation to its scope of accreditation to meet regulatory requirements;
- The financial status of the CAB;
- Any other information deemed necessary during the review.

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

Note: The prior visit is not an assessment.

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

Note: The prior visit does not constitute an accreditation assessment.

7.1.3 Procedures for awarding 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:

- the implementation of corrections and corrective actions with regards to all outstanding major nonconformities;
- the CAB's action plans for correction and corrective actions to resolve the outstanding minor non-conformities are available;
- All payments due to the previous accreditation body are cleared.

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

If the prior review of documents and / or onsite visit identifies blocking factors, the CAB will be considered as a new client (organization of an initial assessment). The justification for this decision must be communicated to the CAB, it must be documented; the relevant records must be kept.

The accreditation decision-making process is carried out in accordance with procedure P06 «Accreditation process management», which stipulates in particular that the personnel making the accreditation decision is different from the one involved in pre-review activities.

If no blocking factors are identified during the pre-review, the CAB accreditation cycle will now be based on SOAC one and SOAC will set the assessment programme for the remainder of the new CAB accreditation cycle.

When the pre-review leads to the conclusion that the CAB should be treated as a new client (SOAC initial assessment), the accreditation cycle begins after the accreditation decision.

SOAC shall make the accreditation decision before any consecutive 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 the process of this instruction and to the integrity of the accreditation. To this end, at the request of SOAC, the OEC will provide all the 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 non-conformity not yet addressed. Thus, the OEC should not use the pretext of confidentiality in order not to provide complete and truthful information. If it has not been possible to communicate effectively with the OEC, SOAC will note the reasons and endeavor to obtain the necessary information from other sources.

Effective cooperation between the CAB and SOAC is essential to the successful operation of the process of this instruction and the integrity of the accreditation. To this end, upon request from SOAC, the CAB will provide all documents and information required by this instruction. The CAB 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 and will endeavor to obtain the necessary information from other sources.

The CAB must authorize the previous accreditation body to provide the information requested by SOAC.

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

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

8 Related documents

Refer to F02P01-Current QMS Control list

9 Table of modifications

No.	Source	Modification in brief (Relevant changes)
I03P06.00- 16 October 2019		
Creation		
I03P06.01- 17 October 2019		
1		Code and cover page updated
2	§ 6	The word “abbreviation” (title) has been replaced by “Terms” (title)
3	§ 8	This section has been updated and adding a form
I03P06.02- 09 December 2020		
1	Cover Page	Revision and update of title
2	2	Removed reference to an obsolete APLAC document
3	6	Revised and updated title
4	7	Update of all the provisions, in particular the elimination of the transfer process, source of confusion
5	8	Updated related documents