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|  | **Integration of accreditation requirements according to** standard ISO/IEC 17020:2012 |  |

*Purpose*: The aim of this form is to identify the level to which the accreditation requirements have been taken into account in the applicant's mode of operation. It helps Cofrac determine the advisability of triggering the on-site assessment of the applicant.

This is a requirement for any initial accreditation or major extension application, and is therefore enclosed with the accreditation application expressed in form INS FORM 01.

We remind applicants that they face sanctions if they give any false information.

This form supplements the accreditation application formulated by**[[1]](#footnote-1)**:

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The following table refers to standard **ISO/IEC 17020:2012 and document INS REF 02.**

The body must have taken into account all the requirements of standard ISO/IEC 17020:2012 and of document INS REF 02, and the items summarised in the table below only represent a focus on certain requirements of this standard. The examples listed hereinafter are non-exhaustive and are only given as a guide.

* In the "Avail(able)" column, state whether, **Y**es or **N**o, the body has defined and documented how it meets the accreditation requirements linked to the stated topic.
* In the "Appli(ed)" column, state whether, **Y**es or **N**o, the body has already implemented these provisions and is capable of demonstrating this.

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| For a major extension application**[[2]](#footnote-2)**, answer all questions up to §7.4. |

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| **General requirements (ISO/IEC 17020:2012 - §4)** | AvailY/N | AppliY/N |
| **4.1 Impartiality and independence** |
| 4.1.1 to 4.1.5 | Rules defined and actions implemented to guarantee that the inspection activities are conducted with impartiality: organisation enabling definition of the commitment to impartiality, and regular self-scrutiny of the risks as detailed in §4.1.3 of standard ISO/IEC 17020:2012; implementation of actions to eliminate or reduce the identified risks, etc. |  |  |
| 4.1.6 | Independence ☞ choose your body's independence type (A, B or C)👓Integration of the obligations linked to the regulation of your sector of activity.🕮 Details of incompatible activities: design, manufacturing, supply (marketing), installation, purchasing, possession, use, maintenance of inspected objects. |
| Appendix A1🡪 type A | Case of bodies providing third-party inspections.The inspection body and its personnel must not exercise any incompatible activities for the categories of objects for which accreditation is requested. Where applicable, the body must not be part of a legal entity conducting incompatible activities. Nor must it have any links (contractual, equity, shared personnel, etc.) with one or more legal entities conducting incompatible activities. |  |  |
| Appendix A2🡪 type B | Case of bodies providing inspections only for the organisation of which they are part, and whose inspection service constitutes a distinct, identifiable entity (e.g., internal inspection department).Only the inspection department and its staff are prohibited from conducting incompatible activities. |  |  |
| Appendix A3🡪 type C | Case of bodies involved in incompatible activities that may provide services to all types of clients (internal or external).The body must have put in place mechanisms guaranteeing separation of responsibilities in terms of inspection and in terms of incompatible activities. A person cannot conduct the inspection of an object once they have conducted an incompatible activity for this same object (unless authorised by the regulations).  |  |  |
| **4.2 Confidentiality** |
| 4.2.1 / 4.2.3 / 6.1.13 | Protection of the confidentiality of the inspection data, or data obtained for third parties, by all personnel, subcontractors or external service providersE.g.: contract, code of ethics, confidentiality commitment, etc. |  |  |
| 4.2.1 / 4.2.2 | Informing clients of any data concerning them that is to be made public, where applicable.E.g.: terms and conditions of sale, service contract, advertising, etc. |  |  |
| **Structural requirements (ISO/IEC 17020:2012 - §5)** |
| **5.1 Administrative requirements** |
| 5.1.5 | Communicating to the client the contractual conditions of providing the inspection servicesE.g.: contract, terms and conditions of sale, etc. |  |  |
| **5.2 Organisation and management** |
| 5.2.2 and 6.1.2 | Organising and maintaining the ability to fulfil the technical functionsE.g.: adequate number of inspectors, monitoring regulatory and technical developments, etc. |  |  |
| 5.2.3 / 5.2.5 / 5.2.6 and 5.2.7 | Definition of the positions and responsibilities of the personnel involved in the inspection activities; each person must know the extent of their mission and their responsibility.Designation of one or more qualified, experienced and available technical managers and their deputy/deputies, for ensuring the continuity of the inspection activity.E.g.: organisation chart, function sheet, job description, engagement letter, etc. |  |  |
| **Resource requirements (ISO/IEC 17020:2012 - §6)** |
| **6.1 Personnel** |
| 6.1.2 and 6.3.1 | Having a sufficient number of competent personnel, linked to the body by a contract. |  |  |
| *☞ State if the body uses external personnel, under contract, to work within the management system put in place by the body. If so, specify the proportion and the functions concerned.* |
| 6.1.1 and 6.1.36.1.5 to 6.1.7 | Personnel management roles including the requirements in terms of selection, training, qualification and monitoring of inspectors and other members of staff involved in the inspection activities.E.g.: recruitment criteria, qualification path with mentoring, training content, criteria for maintaining qualification, etc., as applied and specific to the inspection activityThe training must be suited to experience and take account of the results of personnel monitoring. |  |  |
| 6.1.8 and 6.1.9 | Organisation and implementation of monitoring for each member of staff involved in the inspection activities and each position they occupy, to ensure their competence. E.g.: observations of on-site inspection, proofreading of inspection reports, interviews, customer feedback, etc.The competence of the inspectors is monitored on site or by another assessment method, according to relevant criteria defined by the body. This monitoring aims in particular to guarantee the uniformity of the inspection results. |  |  |
| ☞ *State if monitoring has been conducted for each of the activities concerned by the accreditation application:**If not, state the planning schedule for such monitoring:*  |
| **6.2 Installations and equipment** |
| 6.2 | Management rules for all installations and inspection equipment used by the body (e.g., maintaining equipment in good condition, managing defective equipment, etc.). |  |  |
| 6.2.4 6.2.6 to 6.2.10 | Identification of equipment with a significant influence on the inspection results and implementation of a calibration programme if applicable.E.g.: list of equipment used, equipment life-cycle sheet, etc. |  |  |
| 6.2.11 | Selection criteria for suppliers, verification of purchases (goods, services, etc.) and storage conditions for ensuring conformity at the time of purchase and over time. |  |  |
| 6.2.13 and 7.1.8 | Validating the software or automated equipment involved in the inspections and ensuring the protection, integrity and confidentiality of data. E.g.: backups, antivirus, password for protecting software access, software qualification tests, calculation methodology with test data for verifying the result, comparison between raw and finalised data, etc. |  |  |
| **6.3 Outsourcing** |
| 6.3.1 to 6.3.47.4.4 | Defining whether or not outsourcing is used.If applicable or envisaged, defining how outsourcing is used (e.g., reasons that may lead to outsourcing, competence criteria for subcontractors and related proof, informing the client, identifying the results provided by the subcontractor in the inspection report, etc.).👓Integration of restrictions or prohibitions linked to the regulations |  |  |
| **Process-related requirements (ISO/IEC 17020:2012 - §7)** |
| **7.1 Inspection methods and procedures** |
| 7.1.1 to 7.1.4 | The inspection methods must be defined, suitable, relevant and documented. These methods must be kept up-to-date and made available to users.The inspections must be planned.E.g.: reference to instructions, standards, specifications, inspection plans, internal methods, inspection planning rules, etc.  |  |  |
| 7.1.5 | Existence of contract management to ensure that the work to be conducted falls within the field of competence of the body, that the requested mission is correctly defined, and that the body has the necessary resources. The body must regularly check that the service is performed correctly, correct if necessary, and ensure that the requested service has been properly executed.E.g.: production of the contract review, regular checks of service progress, etc. |  |  |
| ☞ *State if the body has already performed any services.**If accreditation is required for conducting activities, have any dummy services been carried out?*🕮 *Note (INS REF 05): a "dummy" inspection mission is an inspection mission conducted like a future actual inspection mission but without accreditation* |
| **7.2 Handling samples and objects presented for inspection** |  |  |
| **7.4 Inspection reports and inspection certificates + Appendix B Optional items for certificates and inspection reports** |
| 7.4.1 / 7.4.2 and 7.3.2 | Existence of a template inspection report or certificate containing the required items used for the missions carried out.E.g.: Report covering the data listed in §7.4.2 supplemented, where applicable, with items listed in appendix B and tracking the inspector who has conducted the inspection.👓 Integration of mandatory items linked to the regulations, where applicable.© Integration of the requirements of document Cofrac GEN REF 11 concerning the use of the accreditation mark. |  |  |
| 7.4.5 | Modifications (additions, corrections) made to an already-issued report or certificate must be tracked to avoid any loss of information and link between the different versions.E.g.: existence of revision management rules, for example use of the endorsement "Cancels and replaces report No. xxx" and retention of the associated tracking. |  |  |
| **7.5 Claims and appeals / 7.6 Claims and appeals process** |
| 7.5.17.5.3 to 7.5.57.6.1 to 7.6.3 and 7.6.5 | The inspection body must have defined rules for recording, analysing and processing claims and appeals (🕮 see definition §3.9 and 3.10 of the standard). Claims or appeals must be analysed, verified and processed without any discrimination. |  |  |
| 7.5.2 | Third parties (clients, authorities, etc.) must, upon request, be informed of the rules for processing claims and appeals.E.g.: informing clients of this point in contracts, on the website, in advertising, etc. |  |  |
| 7.6.4 | The final response made to a claim or an appeal requires the intervention of an independent person who has not been involved in the inspection activity from which the claim or appeal originates. |  |  |
| **Management system requirements (ISO/IEC 17020:2012 - §8)** |
| **8.2 Management system documentation** |
| 8.2.1 | The body must define the objectives to be attained as part of its inspection activity, relevant and comprehensible to all personnel.E.g.: existence of a policy detailing objectives that may be pursued or are measurable using indicators, communication of the policy and objectives to personnel, methods for revising objectives, delineating objectives in annual performance reviews, etc. |  |  |
| 8.2.3 | The management must designate a member of the management team responsible for and authorised to coordinate, maintain and improve the management system.E.g.: designation of a quality manager with the requisite skills and authority; delegation from management to quality manager for the required scope; function or job description of the quality manager detailing their missions and authority, etc. |  |  |
| **8.3 Control of documents** |
| 8.3.1 / 8.3.2 | The inspection body must establish rules for controlling its internal and external documentation. E.g.: rules for managing the documentation, both internal (operating procedures, technical instructions, procedures, etc.) and external (Cofrac documents, regulatory texts, etc.), and the software used, including the requirements of standard ISO/IEC 17020; rules for identifying documents, for document distribution, periodic review of documents and documents update, where applicable (e.g., technical and regulatory developments, etc.). |  |  |
| **8.4 Control of records** |
| 8.4.1 / 8.4.2 and 7.3.1 / 7.1.7 | The inspection body must establish rules for managing records in compliance with the requirements of § 8.4.1 of standard ISO/IEC 17020:2012 and protecting the confidentiality of the inspection data. These records serve to demonstrate the correct implementation of the management system and the correct performance of the inspections.The data collected during the inspection must be recorded in timely fashion to avoid any loss of information.E.g.: rules for managing records including these aspects, rules for destroying data media, contracting with external service providers for data storage, management of paperless or printed data, choice of data recording medium during inspection, method and timescale for integrating these data in reports, etc. |  |  |
| **8.5 Management review** |
| 8.5.1 to 8.5.3 | The body must put in place an annual management review including the input and output data listed in §8.5.2 and 8.5.3. This review must make it possible to ensure that the management system has attained the previously-defined objectives and define the upgrading needs in order to improve the service delivered to the client. |  |  |
| *☞ State if a management review has been conducted.**If not, state the planning schedule for such a review:* |
| **8.6 Internal audits** |
| 8.6.1 to 8.6.5 | The body must put in place internal audits to ensure that the management system is functioning correctly and efficiently, in order to attain the set objectives. An audit programme must make it possible to review the entire management system at a defined frequency, and must be implemented by competent, independent personnel who meet the requirements of §8.6.5. |  |  |
| *☞ State if an audit programme has been defined and if an internal audit has been carried out.**If not, state the planning schedule for such a programme:* |
| **8.7 Corrective actions** |
| 8.7.1 to 8.7.4 | Corrective action: proven non-conformityThe body must define the rules for identifying, managing and recording non-conformities. These rules must include determination of the causes of the non-conformities and their correction. The actions must be suitable and enable the causes of the non-conformities to be eliminated, to avoid them being reproduced.E.g.: non-conformity processing rules, non-conformity management and tracking table, corrective actions, etc. |  |  |
| **8.8 Preventive actions** |
| 8.8.1 to 8.8.3 | Preventive action: potential non-conformityThe body must define the rules for identifying, managing and recording the actions implemented to prevent non-conformities, by anticipating them.E.g.: rules for processing and tracking continuous improvement actions, etc. |  |  |

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| **Reference to accreditation (GEN REF 11 document available from www.cofrac.fr)** |  |  |

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| **Forename SURNAME:** |  | **Date:** |  |

*By submitting this form, you agree that Cofrac may record and process your personal data for the purposes strictly necessary* *to examine and manage your request.*

*Cofrac will only keep your personal data for as long as is necessary to process it, and then, at the end of this period, in accordance with the applicable legal or regulatory time limits.*

*Your personal data will not be communicated to third parties unless such communication is necessary for the processing of your request, for the fulfilment of Cofrac's legal obligations or for the performance of the missions that have been conferred upon it.*

*In accordance with Regulation (EU) No. 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, as well as Law No. 78-017 of 6 January 1978 on Data Processing, Data Files and Individual Liberties,**you are entitled to a right of access, rectification, limitation, withdrawal of consent and opposition to the processing of data concerning you. You may exercise all these rights by sending your request by post to the following address Cofrac, 52 rue Jacques Hillairet - 75012 Paris, or by e-mail: contact.rgpd@cofrac.fr. You also have the right to lodge a complaint with the Commission Nationale Informatique et Libertés (CNIL).*

Supplementary requirements may apply to inspection families, for which the following table details the specific requirement documents applicable:

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| **Reference of documents available from www.cofrac.fr** |
| INS REF 09 | Monitoring of heavy vehicles |
| INS REF 13 | Inspection of agricultural and food products with AOC and PGI labels |
| INS REF 14 | External quality control of medical devices |
| INS REF 17 | Periodic inspection of certain categories of classified installations for the protection of the environment, which are subject to declaration |
| INS REF 18 | Required regulatory checks for ERP (establishments receiving the public) and IGH (high-rise buildings) |
| INS REF 19 | Checks on the conformity of works equipment at the request of the Works Inspection Authority (Inspection du Travail) |
| INS REF 20 | Inspections of the classification of commercial tourist accommodation |
| INS REF 23 | Technical inspections of funfair and amusement park rides, machines and installations |
| INS REF 26 | Checks on workplace electrical installations |
| INS REF 29 | Periodic inspection of digital tachographs |
| INS REF 31 | Inspection of standardized energy saving operations within the framework of the Energy Saving Certificate delivery system |
| INS REF 32 | Assessment of the conformity applicable to accredited inspection bodies for notification purposes  |

1. Designation of the body as defined in 1.1 of document INS FORM 01 [↑](#footnote-ref-1)
2. E.g.:extending the scope of accreditation to include new basic competences or integrating a new legal entity within a network (cf. §10.2.1 of accreditation regulation INS REF 05) [↑](#footnote-ref-2)