Jordanian Accreditation System

نظام الاعتماد الأردني

Accreditation Unit

ACCREDITATION PROCESS REQUIREMENTS AND CRITERIA

Jordan Accreditation System - Accreditation Unit

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1. PURPOSE AND SCOPE

The purpose of this document is to provide Accredited conformity assessment body (CAB), CABs applying for accreditation and Assessment teams with the necessary requirements and policies applicable for the accreditation Process.

This document is applicable to all schemes of accreditation covered by JAS-AU.

2. REGULATORY FRAMEWORK

Accreditation Unit – Jordan accreditation and standardization system is established as the independent national accreditation body authorized to accredit conformity assessment bodies based on international requirements.

The following instructions form the legislative framework according to which JAS-AU operates:

- Article no. (21-b) of the Law of Standards and Metrology no. (22) For the year 2000 and its amendments.
- Bylaw on "Administrative Organization of Jordan Standards and Metrology Organization" no. (88) For the year 2015
- "Instructions for Administration of Accreditation Procedures of Conformity Assessment Bodies" defines the criteria according to which the assessment and the accreditation of conformity assessment bodies are conducted.

3. CONDITIONS FOR GRANTING ACCREDITATION

The conformity assessment body is bound by the following conditions:

4-1 Fulfilling all specified requirements.

4-2 Paying all fees and financial costs incurred by the approval in accordance with the provisions referred to in the instruction's fees.

4-3 The validity of all data and information submitted to JAS-AU for the purpose of applying and granting accreditation.

4.GENERAL APPLICATION INFORMATION

The Conformity Assessment Body requesting accreditation shall fill in the application form qf071-02 which shall be signed by an authorized representative of the applicant CAB.

The applicant CAB shall specify the scope of accreditation on the scope of accreditation form qf071-32 according to the related JAS-AU's policy JAS-P07 for testing and calibration laboratories and ILAC Guidance document ILAC G28 for inspection bodies and submit it to JAS-AU along with the application form.

The applicant CAB shall provide the necessary documents and evidence to demonstrate fulfillment of the accreditation criteria according to the List of documents necessary for accreditation when submitting the application.

Documents necessary for accreditation are listed in the following documents:

- qf 71-03 list of documents Necessary for Accreditation (TESTING, CALIBRATION, MEDICAL)
- qf 71-95, List of Required Documents (INSPECTION)
- qf 71-20 Necessary submitted documents for certification bodies.
- Qf 71-117 list of documents Necessary for Accreditation (PT Providers)

Upon the reception of the required documents, a review process of the application for completeness using a checklist of submitted documents necessary for Accreditation is performed within five working days.

When the CAB submits all documents, JAS-AU informs the CAB of receiving the management system Documentation using a confirmation letter.

After the completion of the submission of the application and the required documents by the applicant and the completion of resource review by JAS-AU and before formally accepting and signing the agreement, the applicant CAB is informed by Preliminary meeting whether physical or by e-mail to ensure the following :

1-The requirements for accreditation are clearly defined, documented, and understood, and.

2-Any issue related to accreditation between JAS-AU and the applicant CAB is resolved such as fees required, assessment team members, scheduled dates of assessments, etc. in addition to the rights and obligations for each party.

For product certification bodies the certification scheme is reviewed for preliminary acceptance by the Relevant working group in the technical committee. The review shall be performed Within 2 weeks before performing Resource review. If the certification scheme is nationally, regionally, internationally

approved, evaluation of suitability of the scheme by the relevant group of the technical committee is not performed.

The accreditation agreement is signed between JAS-AU and the representative of the conformity assessment body authorized to sign. This agreement is considered as a contract between the JAS-AU and the conformity assessment body.

Upon the request of the CAB, a preliminary visit may be conducted at the applicant to assess the suitability for accreditation within 1 month of signing the agreement. The preliminary visit shall not include any consultation.

The preliminary visit includes the following main aspects:

-The appraisal of the prerequisites regarding personnel, premises, and management system under accreditation.

-The final agreement on the scope of accreditation for the initial assessment.

The CAB shall Apply the management system for at least (3) months including at least conducting one management review meeting and two internal audits before onsite assessment. (When applying for accreditation for the first time).

The application for accreditation is published and made available to applicants and accredited CABs on JAS -AU website (www.au.gov.jo).

JAS-AU has the right to reject any application in the cases detailed in the Instructions for Administration of Accreditation of Conformity Assessment Bodies, provided that the conformity assessment body is informed of the reasons for this based on the internal procedures of the unit.

The conformity assessment body is allowed to submit a new application after (60) days from the rejection date.

The conformity assessment body shall maintain all records related to the accreditation scope for at least (5) years, whenever appropriate.

For testing, calibration and medical laboratories, the laboratories are entitled to subcontract tests within their accreditation scope in the necessary urgent cases only for specific time period and according to their procedures.

5.RESOURCE REVIEW

JAS-AU will review the application and all information submitted by the applicant and clarify all outstanding issues with the applicant before proceeding to checking the availability of resources and whether JAS-AU offers the scope of accreditation applied for and is able to carry out the assessment.

An assessment team is nominated, the names of which are made known to the CAB, to allow the CAB to object to members of the team, with justification.

JAS-AU will form an assessment team consisting of the assessment team leader and Technical Assessors and/or technical experts or observers. The size and formation of the team is based on the size of the conformity assessment body and the nature of the accreditation scope.

Conformity assessment body is informed of the names of the members of the assessment team within an appropriate period based on the unit's internal procedures and has the right to object within 1 week to any member of the assessment team and provide justification for such objection, otherwise the applicant is considered to agree to the formation of the assessment team.

6.ASSESSMENT PROCESS

Documentation Assessment

Upon acceptance of the team by the CAB and signing the agreement by the JAS-AU, the team is given one month (from the date of signing the application) to evaluate the Management System documentation to determine whether the CAB's management system complies with the relevant accreditation standard, applicable regulatory requirements, and any other requirements for accreditation.

For product certification bodies, the designated assessment team conducts a scheme evaluation before the document review.

The assessment team shall provide the applicant with the results of the document review and a recommendation based on the outcomes of the documentation assessment. The CAB will be provided with an opportunity to correct any non-conformities noted in the report according to the time frame determined in (JAS-P01)-Policy on Grading Of Non-Conformities before an on-site assessment can be scheduled.

Upon the completion of the Documentation and Record Review and the agreement with the applicant CAB on the dates, an initial on-site assessment within maximum (6) months from the date of accepting management system documentation, on the condition that the CAB applied the management system for at least (3) months including conducting at least one management review meeting and two internal audits.

On-Site Assessment

The purpose of the formal on-site assessment is to verify the information submitted by the applicant CAB and to confirm the adequacy and competence of its activities in the applied scope of accreditation in this regard; the assessment team will examine records, files, and further documents. In case of non-conformities that were detected by the team a Nonconformity report shall be given to the applicant. The CAB is required to submit their proposed corrective action reports within a week.

The applicant CAB is responsible for making all necessary on-site arrangements for the proper conduct of the assessment, including the provisions to allow the assessment team to examine documentation and access to all areas, records, and personnel for the purpose of the assessment.

Durations required to implement the corrective actions based is on Grading of Non-Conformities Policy (JAS-P01).

At any point in the initial assessment process, if there is evidence of fraudulent behavior, if the conformity assessment body intentionally provides false information or if the conformity assessment body conceals information, JAS-AU terminates the assessment process.

7.DECISION MAKING

Once all non-conformities recorded at the assessment are closed. The decision will be taken by the Accreditation Committee to grant, maintain (in case of major changes), suspend, withdraw, reduce, extend or renew the accreditation based on the assessment team recommendation.

Confirmation of accreditation decisions (after surveillance visits when no changes of scope are required) is taken by JAS-AU.

Accreditation certificates issued by JAS-AU are valid for 5 years from the date of the decision when granting accreditation for the first time. In the case of accreditation renewal, the requirement of JAS-P027 applies. If the CAB applied for re-accreditation, a full reassessment is carried out before the expiry date of accreditation certificate according to JAS-AU (JAS-P027) policy on reassessment of accredited

conformity assessment bodies. Noting that reaccreditation can include extending the accredited scope and/or shrinkage of accredited scope.

8. SURVEILLANCE

During the accreditation cycle the whole scope is to be covered in surveillance visits. The first surveillance visit for accredited CABS shall be conducted within 1 year from the date of initial assessment, during the remainder of the accreditation cycle surveillance visits will be conducted and the planed based on the recommendation of the assessment team and the associated risk with the CAB activities and in any case the duration between two consecutive visits shall not exceed 2 years.
Extraordinary assessments may be conducted because of complaints or changes in the CAB.

9.SCOPE EXPANSION

Accredited conformity assessment bodies have the right to request extending its accreditation by adding other conformity assessment activities to its scope by notifying the unit in writing of its intention to expand its accreditation scope by filling application and scope of accreditation and submitting the required documents and submitting the required documents at least 2 months prior to the onsite visit.
When the accredited CAB applies for an extension, the assessment may be combined with the scheduled surveillance visit, or an extra visit is arranged upon the CAB's request.
For product certification and if the product certification body applies for scope expansion to include accreditation of a new certification scheme, evaluation of the new scheme shall be performed.

10. REASSESSMENT

Re-assessment visits are performed in case of re-accreditation according to JAS-AU policy on reassessment of accredited conformity assessment bodies (JAS-P027).
The CAB applying for reaccreditation shall submit application and all necessary documents Before (12) months from the expiry of accreditation certificate.
If the decision on accreditation renewal of the CAB is taken before the expiry date of accreditation certificate, the CAB is consulted regarding the accreditation cycle whether to begin from the date after the certificate end date or the decision date.

If the decision on the accreditation renewal is not made before the expiry date, a formal letter is issued to the relevant conformity assessment body informing it about the expiry of certificate, the requirements of JAS-AU symbol instructions and the agreement on the use combined JAS-AU symbol and ILAC MRA/IAF MLA MARK, if signed with it, regarding the expiry of certificate.

The relevant conformity assessment body is requested to provide JAS-AU with the accreditation certificate and scope and evidence on notifying affected clients of the expiry of certificate. Both the accreditation certificate and scope shall show the expiry status as a watermark on each page and the accreditation directory on JAS-AU website is updated accordingly.

A new accreditation certificate and scope is issued on the renewal decision; the cycle starts from the renewal decision date and the expiry period will be stated in the accreditation history on the certificate.

JAS-AU will not be held responsible if the CAB does not abide to the time frames set within this policy and the accreditation certificate expires before the renewal decision is taken.

In case the conformity assessment body operates in multiple countries, IAF MD 12 shall be applied.

11. SUSPENSION, REDUCTION, AND WITHDRAWAL

Compulsory

The accreditation unit has the right to suspend accreditation - for all or part of the accreditation scope for a period that does not exceed (90) days in cases defined in Instructions for Administration of Accreditation of Conformity Assessment Bodies.

JAS-AU is obligated to inform the conformity assessment body of the decision to suspend the accreditation – full or partial - with an indication of the reasons for it without delay.

The accreditation of the conformity assessment body shall be withdrawn – in full or partial - upon the expiry of suspension period due to its failure to take the required corrective measures. In the event of partial withdrawal, a new certificate shall be issued.

JAS-AU has the right to withdraw the accreditation when any behavior involving acts of fraud, cheating, deception, falsification of information, or intentional violation of accreditation requirements is proven.

The relevant conformity assessment body is requested to provide JAS-AU with the accreditation certificate and scope and evidence on notifying affected clients of the suspension, reduction, and withdrawal. Both the accreditation certificate and scope shall show the suspension, reduction, and

withdrawal status as a watermark on each page and the accreditation directory on JAS-AU website is updated accordingly.

Voluntary

The accredited conformity assessment body has the right to request voluntary suspension for all or part of its accreditation scope / reduction, withdrawal of accreditation for a period that does not exceed (180) days, provided that JAS-AU is informed of its desire to do so in writing using form no(qf071-103) through the authorized personnel. JAS-AU will conduct any suitable assessment activities (if necessary) prior to issuing its decision on lifting the suspension.

If the CAB exceeds the voluntary suspension period, Accreditation for the suspended activities will be withdrawn.

The conformity assessment body has the right to request an extension to the voluntary suspension period, provided that the total suspension period does not exceed 180 days.

In the event of voluntary reduction of the accreditation scope, a new accreditation certificate shall be issued for the accredited scope.

In the event of the voluntary withdrawal of the full scope of accreditation, the accreditation is considered expired from the date specified by the unit.

The relevant conformity assessment body is requested to provide JAS-AU with the accreditation certificate and scope and evidence on notifying affected clients of the voluntary suspension, reduction, and withdrawal. Both the accreditation certificate and scope shall show the suspension, reduction, and withdrawal status as a watermark on each page and the accreditation directory on JAS-AU website is updated accordingly.

JAS-AU takes the necessary actions to ensure that the accredited CAB informs its affected clients of the suspension, reduction or withdrawal of its accreditation and the associated consequences without undue delay.

The CAB is issued a formal letter covering the following:

1. The CAB shall immediately stop using JAS-AU symbol on all (Test reports, calibration certificates, conformity certificates, inspection certificates , PT reports) ,stickers and labels, papers, documents and promotional materials related to conformity assessment activities affected by the (withdrawal or suspension), (partial or Full) decision
2. To provide JAS-AU with proof showing the parties affected by the (withdrawal or suspension), (partial or Full) decision and informing these affected parties of the decision to (withdrawal or suspension),(partial or Full) within (10) days from the date of the decision.

Failure to comply with the decision will lead to withdrawing the accreditation (partially / Fully) and publishing in the Official Gazette

JAS-AU publishes on its website the status of every accreditation, including whether a particular accreditation has been reduced or withdrawn.

JAS-AU promulgates in the official gazette about forced or voluntary reduction/withdrawal decisions of the accreditation and the reasons thereof.

12. CONFIDENTIALITY

All information obtained or created during the accreditation process shall be treated in confidence. All assessors used by JAS-AU are required to sign the JAS-AU Assessor Contract, as well as impartiality and confidentiality declaration before conducting and assessment they perform. Any breach of confidentiality will be viewed in a very serious manner.

12. APPEALS

Accredited CABS and CABS applying for accreditation has the right to appeal to JAS-AU within the time specified in the unit's internal procedures that is published on JAS-AU website, from the date it was notified of any decisions taken by JAS-AU that it deems unfair against the following:

- Decisions to grant/renew accreditation.
- Accreditation confirmation decisions
- Decisions to extend accreditation.
- Reduction/ withdrawal Decisions
- Partial or Full Suspension Decisions

13. JOINT ASSESSMENTS

Accreditation of CABs in cooperation with a foreign accreditation body can only be granted in one of the following cases and following the rules stated in Joint Assessment Procedure (QP-079).

- If a joint assessment is conducted by JAS-AU and Foreign accreditation body assessors.
- If joint assessment is not possible, then JAS-AU has to contract an Assessor from abroad.
- If both cases are not possible, then JAS-AU has to send an apology for not being able to grant Accreditation or proceed with the existing Accreditation to the CAB and explaining the situation.

joint assessment is conducted by the JAS-AU and foreign accreditation body assessors in the following cases:

- If JAS-AU cannot find a competent technical assessor/ expert for the required scope of accreditation, a joint assessment can be carried out thereon.
- If the lab requested to carry out the assessment jointly with a certain foreign accreditation body in order to save time and money,etc.

The foreign accreditation body shall be internationally recognized and a signatory of a Multilateral Agreement with ILAC/IAF.

Resulting assessment reports will be submitted to the relevant Committee for final decision as per the decision issuing process mentioned in article No.(6) of this document.

In some cases, decision of accreditation can be based on foreign accreditation body assessment reports, with making sure the fulfillment of JAS-AU policies/requirements.

Timeframe for the Accreditation Process (Initial assessment)

Activity	Time frame
Application	
- Review the application and documents submitted by the CAB for completeness;	Within five working days.
- Review of the certification scheme by the TC for preliminary acceptance by the Relevant working group in the technical committee	Within 2 weeks before performing Resource review
- Resource review	Within two weeks of receiving the scope
Assessment	
- Implementation of the preliminary visit	Within four weeks of signing the agreement
- Evaluation of the certification scheme by the assessment team	Within 3 weeks after signing the agreement
- Implementation of the Document and record review	Within a month after signing the agreement for all conformity assessment schemes except for product certification (within a month after accepting the scheme)
- CAB rectifies the nonconformities found during the document review	Within max. 4 months from notifying the CAB of the results of the review.
- CAB suggests the appropriate corrective actions using form qf071-24.	Within one week of receiving the assessment report
- The designated assessment team assesses the proposed corrective actions submitted by the CAB	Within 7 days from receiving them. And shall inform the CAB in writing if any proposed action is inappropriate.
- The designated assessment team assesses the corrective actions submitted by the CAB	Within 2 weeks from receiving them. (Evaluation of the corrective actions of Documentation Assessment qf071-50) shall be filled.
- If there is a change on the nominated assessment team chosen in the process of resource review, members of the Assessment team shall be send to the CAB	At least three weeks before the agreed date for the assessment.

- Preparation of the "Documents Package" needed by the assessment team for the conducting of the onsite assessment.	At least 10 days before the assessment.
- Sending: List of tests/calibration/sampling to be witnessed (qf071-27)/ Inspections to be witnessed (qf071-104) certification activities to be witnessed, assessment time table (qf071-26) to the CAB	One week before the assessment; given that this shall be within (6) months from the acceptance of the management system documentation and closing of all non-conformities resulted from the document and record review, if there were any, and that the applicant CAB implemented the management system for at least (3) months. On-site assessment usually lasts (2-3) working days.
- Prepare the second payment costs	Within one week of Receiving memo from the assessment section
- All proposed corrective actions by the applicant CAB submitted (in written form) to the team leader	within one week of the assessment.
- Informing the applicant of accepting/ rejecting its proposed corrective actions.	Is made by Assessment team within (7) days
- Completion of the Reports of the Assessment Team	Max (4) weeks after conducting the assessment (2 weeks for the Technical Assessor/expert and 2 week for the Team leader)
- Duration for the closure of nonconformities by applicant CAB.	(5) months after conducting the assessment.
- Completion of the evaluation of the corrective actions report (the supplements to the technical and to the final report)	Max (2) weeks after closing up all non-conformities (by the CAB) detected during the on-site assessment.
If all non-conformities raised during the onsite assessment were not closed within (5) months, the applicant is requested to submit new and appropriate corrective actions	Applicant has to submit new corrective actions within a month.
Decision about accreditation	
- Invite AC to meet.	Within a week from sending assessment records to the secretary of AC.
- Decision about the Accreditation by AC.	within (30) days after sending the assessment records to AC. In case any AC decision took more than one month, a justification shall be made.
- Preparing the Accreditation Certificate.	within (7) working days after the decision is taken.
- Review of accreditation certificate and scope by the CAB	Within 5 working days after sending them

3. JAS-AU ACCREDITATION CRITERIA

1. Accreditation standards:

1.	ISO/IEC 17025 - Testing and calibration laboratories
2.	ISO 15189- Medical laboratories – Requirements for quality and competence
3.	ISO/IEC 17065 - Conformity assessment – Requirements for bodies certifying products, processes, and services.
4.	ISO/IEC 17020 - Conformity assessment – Requirements for the operation of various types of bodies performing inspection
5.	ISO/IEC 17021-1- Conformity assessment – Requirements for bodies providing audit and certification of management systems – and relevant management system standard
6.	ISO/IEC 17043 - Conformity assessment – General requirements for proficiency testing

Mandatory Documents which are required to be used by accredited, applicants CABs and assessment teams for best practices in applying and interpreting the accreditation criteria:

2. General Requirements for all CABSs (latest issues):

1.	**Instructions for Administration of Accreditation of Conformity Assessment Bodies No. (4)**
2.	**تعليمات أجور الاعتماد رقم (٥)**
3.	**تعليمات استخدام رمز وشعار نظام الاعتماد الأردني رقم (٦)**
4.	**اتفاقية استخدام العلامة المشتركة لرمز نظام الاعتماد الاردني وعلامة ILAC MRA**

JAS-AU Policies applicable for All CABS

1.	JAS-P01-Policy on Grading of Non-Conformities
2.	JAS-P23-JAS-AU Policy on Accreditation and Conformity Assessment During Extraordinary conditions
3.	JAS-P27-JAS-AU policy on reassessment of accredited conformity assessment bodies
4.	JAS-P28- CONDITIONS FOR THE USE OF JAS-AU ACCREDITATION SYMBOL and COMBINED ACCREDITATION SYMBOL FOR ILAC MRA/IAF MLA MARK

3. JAS-AU Policies applicable for Testing (including medical testing) and calibration laboratories (as applicable to the sector)

1.	JAS-P02-Policy of Proficiency Testing
2.	JAS-P03-Policy of Measurements Uncertainty
3.	JAS-P04-Policy on Metrological Traceability
4.	JAS-P05-Policy for Using Reference Materials
5.	JAS-P06-Policy for Using Testing Standards/Methods in the Scope of Accreditation
6.	JAS-P07-Documenting and describing the standards of testing and or calibration methods
7.	JAS-P08-Policy for Validation of Test Methods
8.	JAS-P09-Policy on Accreditation for Non-Destructive Testing
9.	JAS-P11-Safety Policy for Labs Performing Environmental & Water Testing
10.	JAS-P12-Safety Policy for Chemical and Biological Sector
11.	JAS-P13-Policy for Labs Performing Environmental and Water Testing, Good Laboratory Practice
12.	JAS-P14-Policy on Test and Measuring Equipment Documentation
13.	JAS-P15-Policy on Traceability in Chemical Measurements
14.	JAS-P17-Calibration of Piston Pipettes Using Gravimetric Method

15.	JAS-P18-Safety Policy in Food Testing Labs
16.	JAS-P19-Safety Policy in Testing Laboratories
17.	JAS-P21-Policy on in-house calibration
18.	JAS-P22-Safety Policy in Electrical Testing Laboratories
19.	JAS-P25- Air Quality Measurements Policy
20.	JAS-P26- Sensory Testing Laboratories Policy

4. Specific requirements applicable to Construction Laboratories:

1.	قائمة الحد الأدنى من طرق الفحص المطلوبة لحصول المختبرات الانشائية على الاعتماد- وزارة الاشغال العامة والاسكان

5. Specific requirements applicable to Medical Laboratories:

1.	JAS-P16-Policy Biosafety and Biosecurity Policy for Medical Labs
2.	JAS-P20-Policy for Method Validation in Medical Laboratories
3.	تعليمات اسس ضبط الجودة الداخلية للمختبرات الطبية تعليمات رقم (٥) لسنة ٢٠٠٥
4.	تعليمات اسس وشروط ضبط الجودة المخبرية وتحسينها الصادرة استنادا لأحكام المادة (١٩ و ٢٢) من نظام ترخيص المختبرات الطبية الخاصة رقم (٣٠) لسنة ٢٠٠٣
5.	تعليمات رقم (٢) لسنة ٢٠٠٦ تعليمات معدلة لتعليمات اسس ضبط الجودة الداخلية في العمل المخبري رقم (٥) لسنة ٢٠٠٥
6.	نظام رقم (٩٢) لسنة ٢٠٠٨ نظام معدل لنظام ترخيص المختبرات الطبية الخاصة
7.	نظام رقم (٣٠) لسنة ٢٠٠٣ نظام ترخيص المختبرات الطبية الخاصة صادر بمقتضى المادتين (٥) و(٦٦) من قانون الصحة العامة رقم (٥٤) لسنة ٢٠٠٣
8.	نظام رقم (٣٥) لسنة ٢٠٠٤ - نظام معدل لنظام ترخيص المختبرات الطبية ٢٠٠٤

6. Specific requirements applicable to Inspection Bodies:

1.	JAS-P02-Policy of Proficiency Testing
2.	JAS-P03-Policy of Measurements Uncertainty
3.	JAS-P04-Policy on Metrological Traceability
4.	JAS-P05-Policy for Using Reference Materials
5.	JAS-P21-Policy on in-house calibration
6.	JAS-P24: Policy on Accreditation Requirements for Inspection Bodies Working in the Field of Lifting Equipment and Lifting Accessories
7.	ILAC P15:05/2020 Application of ISO/IEC 17020:2012 for the Accreditation of Inspection Bodies
8.	نموذج فحص الرافعات وسلامة تركيبها بالمشاريع الانشائية الصادر عن وزارة الأشغال والاسكان

7. Specific requirements applicable to certification bodies :

1.	IAF MD25:2023 Criteria for Evaluation of Conformity Assessment Schemes