

AC 8.0 Nonconformities and Corrective Actions

1. Purpose:

The purpose of this procedure is to provide emphasis over GAC's policy on corrective actions taken by the CAB in relation to the findings raised during the assessment or aside from assessment, the procedure also provides applicable timelines in doing so.

2. Scope:

This procedure covers the handling of non-conformities and corrective actions following assessment activities.

3. Responsibilities:

Assessment team will decide the severity of any finding to be raised, it is the responsibility of the CAB to determine the actions to be taken to correct it.

If a CAB exceeds time limit Accreditation Services Manager or Division Manager can decide to extend the timeframe as deemed fit, this can be either upon request of the CAB or as decided by GAC on case by case basis.

4. Procedure:

GAC can raise finding to a CAB at any time it finds non-compliance to an applicable requirement. Also, during the performance of assessments activities, the assessment team may find evidence that the conformity assessment body is not fulfilling the accreditation requirements following which the assessment team raises the findings, GAC categories the findings as non-conformity and observation defined in the below paragraph, it should be noted that classification of findings is very context dependent.

Nonconformity

A failure to meet accreditation criteria [accreditation standard, requirements of regional/international organizations, MS requirements, Standard/scheme ...]:

- That leads to non-valid activity results, (and/or)
- That results in the non-effectiveness of the Management System, (and/or)
- That threatens the integrity of the Accreditation Body.

For a non-conformance to be closed out, CAB must provide root cause analysis, statement of the corrective action along with the supporting evidences within a defined time limit as agreed, timelines that can be followed in relation to a particular assessment are illustrated in the table below.

Examples of Nonconformities include:

- *something that contributes directly to the reliability of the conformity assessment result, for example, inadequate staff training or using someone who has been a consultant on the same object of conformity in the recent past;*
- *has the potential to compromise the conformity assessment result because it is always there, for example, a calibration deficiency, staff inexperience in relation to the conformity assessment activity being undertaken, inadequate quality control;*
- *is a systematic problem, for example, it is identifiable and not random such as the document control system does not ensure that all copies of manuals are current;*
- *an issue that has been raised previously as observation/NC but has not been fully or appropriately addressed.*

Observation

A weakness, that if not treated, may lead to a non-conformity.

Observations themselves do not prevent accreditation from being granted or maintained and require no specific immediate action by the Applicant or accredited CAB, it is required that the CAB provides at least the proposed corrective action and it can be closed with follow-up in the next assessment, however if a CAB provides the corrective action evidence(s) GAC or GAC assessment team (as applicable) will be obliged to evaluate the corrective action to close out the finding as deemed fit.

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Once the assessment team and team leader have confirmed the categorisation, the applicant or accredited CAB shall be informed of the situation during the assessment and given an appropriate time-limit to outline and undertake corrective actions as appropriate.

Time limit for closure of non-conformities	
Type of Assessment	*Time Limits
Initial	6 months
Surveillance	2 months
Renewal	Normally 6-months but at least 1 month before end of cycle
Scope extension (including when with regular assessment e.g. surveillance, renewal...)	6 months
Transition assessment	6 months
Follow-up	2 months
Special Assessment (Unannounced, reinstation.)	2 months

*time limit can be further extended upon GAC's discretion (see section#3), for other types of assessment time-limit can be decided on case by case basis considering the context of the assessment conducted.

If an assessment accounts more than one technique e.g. Surveillance with extension or and transition, normally the higher time limit to be followed. Depending on accreditation cycle it is possible to adjust lesser timeframe in case of an assessment that accounts extension of scope with renewal assessment to avoid affecting duration or impact on accreditation cycle.

AC 4.2 sheet is followed to document the findings as well as closures pertaining to process of the corrective actions. This sheet includes 4 options for closure of the findings,

Closed: when evidence provided is good enough that it can be fully closed without the need of follow-up,

Pending: when evidence provide is not enough to the satisfaction of the assessment team and requires further actions and submission of evidences.

Closed but not at agreed date: The CAB exceeded the agreed timeframe in closing out the finding, the late submission of evidences is to be dealt on case by case basis depending on FM's evaluation of the CAB, (seriousness of the CAB, if there's a valid delay e.g. public holidays or extraordinary event or if intentional no response), GAC can proceed to decision making process who can determine the extent effect on the accreditation scope related to outstanding findings.

Closed but needs follow up in next asst: The evidence was good enough to close the finding however in assessment team determination it was needed to follow up in the next due assessment to ensure proper implementation.

5. Associated Documents

- AC 4.2 Nonconformity Sheet and Assessment report
- AC 11.0 Assessment techniques