# PROCEDURE FOR EXTENSION OF ESYD TECHNICAL CAPABILITY

**ESYD DEPESD**

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**Chairman of ESYD**

## PROCEDURE FOR EXTENSION OF ESYD TECHNICAL CAPABILITY

### 1. Aim

This procedure is applicable when, at the initiative of ESYD or at the request of an organization, ESYD intends to undertake an assessment **of a new conformity assessment scheme or an extension of an existing conformity assessment scheme for which it is considered that the necessary technical capacity is not available.** The procedure aims to define the conditions that are necessary to be available to ESYD the abovementioned technical capability. **Also, the conditions under which ESYD may stop the provision of accreditation services in a specific conformity assessment scheme are set**.

### 2. Staff in charge for the application

In charge for the application of the present procedure are the **Managing Director of ESYD** and the relevant Members of the Unit.

**The decision to initiate or not and the interruption of services in a specific accreditation scheme is taken by the BoD of ESYD following recommendation from the National Accreditation Council.**

### 3. Steps for Development of a new Accreditation Scheme

3.1 The Managing Director of ESYD, considering a former relevant resolution of ESYD or a request for accreditation, for a scheme for which he deems that the necessary technical capability is not available, fills in Part 1 of the Development Document, a sample of which is given in Annex A of the present document.

3.2 After the completion of the Development Document, it is forwarded through the Member of the Unit for examination to the internal working group of the Sectorial Managers of the Accreditation Division the scheme of which is closest to the scheme to be developed.

3.3 The working group in cooperation with the Director of the Accreditation Division examines the applicability of the possible extension of ESYD Technical Competence, taking into consideration technical and economical criteria. **More specifically, it is examined if the new conformity assessment scheme is accreditable**. In this examination, the working group takes into consideration the requirement of the guideline EA 1/22. Especially for the extension of ESYD technical capability in the field of person's certification bodies' accreditation, the relevant guideline ESYD G-SCHEMPERS shall be implemented. In the negative case, the Unit informs the applicant. In the positive case, the working group examines whether it is necessary the assembly of an ad hoc Committee and in case that this is

affirmative, proposes accordingly to the **Managing Director of ESYD**, which takes the relevant decision after recommendation of the National Accreditation Council when is considered necessary in the sense of the participation of the interested parties.

3.4 When developing the new accreditation scheme the following are taken into account:

**(a) the purpose of extending the services of ESYD in a new accreditation scheme**
**(b) analysis of existing resources and technical competence**
**(c) access to the necessary technical expertise**
**(d) the need to develop new guidelines**
**(e) training of all involved in the accreditation process**
**(f) the implementation of the transition period**
**(g) the views of the interested parties**

3.5 The working group or the ad hoc committee, draw up an action plan necessary for the development of the new scheme, complete Part 3 of the Development Document which is submitted to the **Managing Director** of ESYD for approval.

3.6 The action plan may include actions such as:

- Supply of documentation (standards, guidelines, regulations etc.)
- Developement of methodology, including guidelines for the performance of assessment to the new object.
- Cooperation with another accreditation body, member of EA MLA. This cooperation may include:
  - Consultation,
  - Performance of common assessment,
  - Hiring of suitable assessor.
- The selection of new, suitable assessors or experts.
- The training of all persons involved in the task of accreditation.

3.7 In each step of development, the procedures standardized by ESYD are applied.

3.8 After the approval of the development program, it starts its realization, with responsibility of the **Managing Director** of ESYD, who for this purpose cooperates with the working group or the ad hoc committee.

3.9 After the completion of each partial step of the program, the working group or the ad hoc Committee examines and validates the corresponding result. The Quality Manager updates the Quality Management System where is applicable.

3.10 After the completion of all actions, a total assessment of the actions is performed by the Quality Manager, the Training Manager, the Accreditation Director and the Managing Director of ESYD. The result is recorded in Part 4 of the Development Document.

## 4. Discontinuation of accreditation services to an existing accreditation scheme

**ESYD in order to decide to discontinue services in a particular accreditation scheme, take into account at least the following:**
**(a) the views of the interested parties**
**(b) the conventional obligations of ESYD**
**(c) the determination of the transitional period**
**(d) external communication to interrupt services in a specific accreditation scheme.**
**(e) the requirement to disclose such information**
**The decision to discontinue services in a specific accreditation scheme is taken by the BoD of ESYD following a recommendation from the National Accreditation Council**.

**ANNEX A**
**Development Document**

**1. General Data**

| **The development occurs after** (Write down X in the relevant position) | | | |
|---|---|---|---|
| **ESYD Initiative** | | **Application of an Organization** | |
| **Name of Organization** (if applied) | | | |
| **Date** | | **No of ESYD Resolution (or Protocol No)** | |

| **The new object (or the request) concerns assessment of:** ((Write down X in the relevant position) | | | | | | |
|---|---|---|---|---|---|---|
| **Testing** | **Calibration** | **Product Certification/ Inspection** | **System Certification** | **Persons Certification** | **Verification** | **Other Case** |
| | | | | | | |

| **Analytical Description of the Object / Requested Accreditation** | | | |
|---|---|---|---|
| **s/n** | **Description** | **Standard / Method / Provision** | **Comments** |
| **1** | | | |
| **2** | | | |
| **3** | | | |
| **4** | | | |

| **Managing Director of ESYD** | | **Date** | |
|---|---|---|---|

**2. Initial Elaboration**

| **Working Group** | | **Date of Discussion** | |
|---|---|---|---|
| **The assembly of ad hoc Committee is necessary?** (Write down X in the relevant position) | | | |
| **YES** (if yes, continue with the completion of the table) | | **NO** (if no, go to Part 3) | |
| **Justification of the necessity for the assembly of an ad hoc Committee** | | | |
| **Proposed composition of ad hoc Committee** | | | |
| **Accreditation Director** | | | |
| **Approved by the Managing Director of ESYD** | | **Date** | |
| **Remarks** | | | |

## 3. Development Program

| **Working Group/ ad hoc Committee** | | **Date of Discussion** | |
|---|---|---|---|

| s/n | Description of steps | Target Date | Estimated Cost | Remarks |
|---|---|---|---|---|
| **1** | Supply of documentation | | | |
| **2** | Development of Methodology | | | |
| **3** | Cooperation with another accreditation body | | | |
| **4** | Selection of assessors / experts | | | |
| **5** | Training (permanent staff, assessor) | | | |
| **6** | Review / modifications / changes | | | |
| **7** | Validation | | | |
| **8** | Incorporation in QMS | | | |
| **9** | Overall estimated cost | | | |

| **Approval by the Managing Director of ESYD** | | **Date of Discussion** | |
|---|---|---|---|

## 4. Review of Development

| Competent Person | Date | Signature | Remarks |
|---|---|---|---|
| **Training Manager** | | | |
| **Quality Manager** | | | |
| **Accreditation Director** | | | |
| **Managing Director of ESYD** | | | |