

United States Accreditation, INC.

Procedure for the Evaluation of United States Accreditation Inc. Entering New Accreditation Areas

Document No:	USACC-P-22
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1. PURPOSE:

The purpose of this procedure is to define the methods applied when the services provided by United States Accreditation Inc. need tobe diversified due to national and/or international developments and needs.

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2. SCOPE

This document covers all accreditation activities of United States Accreditation Inc.

3. DEFINITIONS

Related definitions are given in Instruction USACC-IN-01 Instructions on Terms and Definitions used in United States Accreditation Inc. Documentation.

4. RELEVANT DOCUMENTS

- USACC-P-04 Procedure for Control of Records
- USACC-P-13 Procedure for Establishment, Operation Rules and Principles of United States Accreditation Inc. Expert Committees
- EA -1/06 EA Multilateral Agreement Criteria for Signing Policy and Procedures for Development

5. IMPLEMENTATION

United States Accreditation Inc. may diversify and expand the services it provides due to various reasons such as requests from legal or private entities, associations within sector, organizations, chambers, public authorities, national or international meetings taken part in, suggestions from expertise committees, surveys, informative meetings, changes in legislation, international practices, practices of member associations and institutions with which mutual recognition contracts have been signed.

In evaluation of new services, the MLA Structure given in the EA 1/06 "Multilateral Agreement Criteria for Signing Policy and Procedures for Development" guidance document has been taken into account and used as criteria. Thus, if a new service;

- falls into EA 1/06, MLA Structure Level 2, Level 3 and Level 4,
- falls into EA 1/06, MLA Structure Level 5 and requires new application form, new control list, new documentand training (United States Accreditation Inc. staff and assessors) for the application of the service (e.g. ISO 9001, ISO 14001)
- falls into EA/IAF/ILAC- MLA/MRA arrangements scopes and/or their sub-scopes then it will be classified as a new accreditation area.

As a result of the aforementioned feedback, identification and proposal for new



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accreditation areas is directed at Director by relevant accreditation directorate.

Director appoints, if required, the relevant head of accreditation directorate to establish a Working group for conducting studies on new accreditation areas.

Working Group consists of; relevant United States Accreditation Inc. personnel, members of expertise committee (if exists), stakeholders (e.g. public, private sector, universities) representatives and experts if their participation considered necessary.

Working Group completes studies on the following subjects maximum within 12 months and submits the reportsto Director.

Research topics;

- i.Identification of market's need for the relevant accreditation area,
- ii.Legal regulations
- iii. United States Accreditation Inc.'s current competency at issue and resources needed,
 - iv. Accessibility to national or international data, resources and documentation in regard to the new accreditation area,
- v. To assess the data accessed and determining the needs for setting up the new document,
- vi. Determining the stage of integration of existing documentation of the quality system and IT system and identifying needs to enter the new area,
- vii. Need, availability and training of assessor and technical expert,
 - viii. Existence, accessibility and competency of Expertise Committees capable of assessing the set-up of assessment criteria as well as the result of assessment,
 - ix. Training need for the new accreditation area and availability of this training from national or international sources,
 - x. Determination of knowledge and competence needed for the decision makers of United States Accreditation Inc. withregards to new accreditation area,
- xi.Training and personnel need of United States Accreditation Inc. personnel.

All studies and the report prepared by the Working Group are stored by the relevant unit



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in accordance with the USACC-P-04 Procedure for Control of Records .

In the case that no Expertise Committee is in place for the new accreditation area, it is possible to make use of the people setting-up the Working Group while making an Expertise Committee in the new area.

The report submitted is assessed by the Director / Vice Director and can enter the new accreditation area once found appropriate.

1.AUTHORIZATION AND RESPONSIBILITIES

	ACTIVITIES	DR	QM	AB	WG
1	Identification of New Accreditation Area	D	C,In	1	
2	Reviewing the Resources	D	С	1	
3	Setting-up the Working Group	D	С	1	
4	Assignment of the Members of Working Group	D	С	С	In
5	Coordination of Working Group	In	С	1	С
6	Preparation of Activity Report	D	С	С	I
7	Decision To Entering New Accreditation Area	D	С	С	С
8	Application of New Accreditation Area	D	С	I	С

DR: Director D: Decision

QM: Quality Manager I: Implementation

AB: Head of Relevant Accreditation Units

C: Collaboration WG: Working Group In: Information