HKAS Policy Document No. 4

HKAS Policy for Accreditation of Inspection Bodies according to ISO/IEC 17020:2026 under HKIAS (ISO/IEC 17020:2026 HKIAS Policy)

Introduction

This document provides HKAS policy for accreditation of inspection bodies according to ISO/IEC 17020:2026 under the Hong Kong Inspection Body Accreditation Scheme (HKIAS). This document contains policy that serves as additional explanation of the requirements of ISO/IEC 17020:2026 and is mandatory. This document shall therefore be read in conjunction with ISO/IEC 17020:2026. More detailed requirements specific to certain administrative aspects and technical disciplines are issued as individual HKAS and HKIAS Supplementary Criteria.

1 Scope

(No additional explanation)

2 Normative reference

(No additional explanation)

3 Terms and definition

(No additional explanation)

4 General requirements

(No additional explanation)

5 Structural requirements

It is the responsibility of the inspection body to carry out its work in accordance with the applicable Laws and Regulations of Hong Kong and the country/economy where inspection activities are carried out. It should be emphasized that assessment of the inspection body's compliance with the relevant regulatory requirements is outside the scope of HKAS accreditation. (ISO/IEC 17020:2026 Cl 5.3)

6 Resource requirements

6.1 Personnel

(a) Supervisory personnel of an inspection body shall have appropriate competence and sufficient authority to train and supervise their subordinates properly. They shall demonstrate their understanding of the field of inspection in which they exercise supervision. They shall also have the necessary knowledge and experience to evaluate the professional judgement made by their subordinates. (ISO/IEC 17020:2026 Cl 6.1.1)

(b) Management personnel shall have adequate supervisory experience. They shall have suitable qualifications or training, and have sufficient experience and ability to direct the operations of the inspection body, and to accept responsibility for the implementation of the management system. (ISO/IEC 17020:2026 Cl 6.1.1)

6.2 Facilities and equipment

(a) The inspection body shall assign personnel to ensure that the maintenance and necessary calibrations of equipment are conducted in accordance with a realistic schedule. (ISO/IEC 17020:2026 Cl 6.2.5)

(b) HKAS policy on metrological traceability and calibration is detailed in HOKLAS Supplementary Criteria No. 2. Specific recommendations for calibration and recalibration of selected items of equipment required by inspection bodies operating in specific technical discipline are also given in HOKLAS Supplementary Criteria No. 2 or HKIAS Supplementary Criteria for a specific inspection field. (ISO/IEC 17020:2026 Cl 6.2.7)

(c) HKAS policy on the use and acceptability of certified reference materials (CRMs) and reference materials (RMs) for the calibration of equipment is detailed in HOKLAS Supplementary Criteria No. 1. An inspection body undertaking calibrations of equipment using CRMs or RMs shall demonstrate conformity with such policy to HKAS Executive. (ISO/IEC 17020:2026 Cl 6.2.8)

Note: Calibration of some equipment may be performed by an accredited inspection body provided that the inspection body has the necessary reference standards and/or materials and competent technical personnel to perform the calibration. The uncertainty of calibration achieved shall meet the requirements of the applications. Where the inspection body conducts in-house calibrations, the competence of the calibration staff, reference standards or reference materials employed, applicable calibration procedures including uncertainty evaluation and the adequacy of calibration records will be assessed by the assessment teams.

6.3 Externally provided products and services

When an inspection body uses externally provided inspection activities for part of the inspection or the entire inspection that it is accredited to undertake, the inspection body shall select an external provider that meets the same independence criteria as itself. (ISO/IEC 17020:2026 Cl 6.3.2b))

7 Process requirements

7.1 Review of requests, tenders and contracts

(No additional explanation)

7.2 Inspection methods and procedures

Inspection body using 'non-standard' inspection methods shall have policy and procedure for their design, development and subsequent validation. The procedure shall include a step to confirm that the 'non-standard' methods meet the needs of the given application or field of application. (ISO/IEC 17020:2026 Cl 7.2.6)

7.3 Handling of items

(No additional explanation)

7.4 Inspection records

(a) The inspection body shall maintain a record system that allows ready retrieval of original inspection data pertinent to any issued inspection report or certificate, which shall cover the followings where applicable (ISO/IEC 17020:2026 Cl 7.4.2): -

(i) details of the request, tender contract or work order, including records of any verbal communications;
(ii) the unique identification and full description of the item(s) inspected;
(iii) the inspection method(s) used;
(iv) original observations and data;

(v) identification of the person performing the inspection;
(vi) where and when the inspection was performed;
(vii) environmental conditions during the inspection, where critical to the inspection;
(viii) results of laboratory test(s) on the item(s) inspected, where relevant;
(ix) supporting rationale of any professional judgement; and
(x) identification of the person checking the calculations and data transfer.

(b) For inspections which are impracticable to repeat for evaluating the correctness of inspection results, the record system of the inspection body shall be capable of retaining sufficient objective evidence on how the inspection was performed. Where necessary, photographs or video clips should be used to record how the inspection was performed and how the samples were obtained. (ISO/IEC 17020:2026 Cl 7.4.2)

7.5 Control of data and information

(No additional explanation)

7.6 Inspection report and inspection certificate

(a) The inspection body shall keep a complete and exact copy of each report or certificate issued for any accredited inspection activity. (ISO/IEC 17020:2026 Cl 7.6.1)

(b) It should be recognised that the end-users of inspection reports may not be its direct clients and as such all information that is necessary for the understanding of the results shall be included in the inspection report or certificate. Omission of the necessary information is not allowed unless the inspection report or certificate is for the use by internal users or the client is the end-user of the report or certificate. This shall be taken into account when the agreement with the client on reporting results in a simplified way is being negotiated. If inspection results are reported in a simplified way, the report or certificate should state as such and that full details are available from the inspection body, unless it is prohibited by law. (ISO/IEC 17020:2026 Cl 7.6.6)

7.7 Handling of appeals

(No additional explanation)

7.8 Handling of complaints

(No additional explanation)

8 Management system requirements

8.1 General

(No additional explanation)

8.2 Policies and responsibilities

(No additional explanation)

8.3 Documented information

The minimum period for retention of records set by HKAS Executive is four years unless a longer period is specified by regulatory authorities, in relevant HKAS or HKIAS Supplementary Criteria, or in other requirements such as the client's instructions. For equipment records and inspection procedures, the retention period of at least four years shall be counted from the date on which the use of the equipment or the procedures stopped. For personnel records, the retention period of at least four years shall be counted from the date of departure of the staff member concerned. (ISO/IEC 17020:2026 Cl 8.3.3)

8.4 Actions to address risks and opportunities

Note: The inspection body should take a proactive approach when considering actions to address the risks (e.g. potential nonconformities) and opportunities (e.g. for improvement) identified. The risk level should be assessed and the extent of the action taken should be commensurate with the likelihood and consequence of the risk. Actions for addressing risks and opportunities may be taken in response to e.g. operational process analysis, internal audit or external assessment findings, output from management review, complaints, staff and customer feedback, analysis of data and results of monitoring.

8.5 Corrective actions

(No additional explanation)

8.6 Internal audits

(a) Internal auditing should be completed once every twelve months.

(ISO/IEC 17020:2026 Cl 8.6.1)

(b) The records of competence and authorisation of the personnel conducting internal audit shall be retained. (ISO/IEC 17020:2026 Cl 8.6.2b))

(c) When the inspection body seeks extension of scope of accreditation, the inspection body's management should ensure that audits are carried out and corrective actions are satisfactorily completed prior to the HKAS on-site assessment visit. (ISO/IEC 17020:2026 Cl 8.6.2c))

(d) The records of audit shall include name(s) of auditor, date(s) and type(s) of audit, area(s) audited, details of aspects examined (even where no nonconformities were observed), references to relevant documents, audit findings (nonconformities or opportunities for improvement), subsequent investigation and follow up actions taken according to the inspection body's procedures for handling corrective actions and risks and opportunities, where relevant. (ISO/IEC 17020:2026 Cl 8.6.2g))

8.7 Management review

(a) A management review should be conducted once every twelve months. (ISO/IEC 17020:2026 Cl 8.7.1)

(b) There shall be clear indications in the records for outputs of management review of the actions to be taken, by whom and by when. (ISO/IEC 17020:2026 Cl 8.7.3)