

# HKAS Supplementary Criteria No. 4

## Interval between On-site Reassessment and Surveillance Visits of an Accreditation Cycle

### 1 INTRODUCTION

#### 1.1 Objective

In accordance with ISO/IEC 17011, HKAS Executive applies an assessment programme for assessing the conformity assessment body activities during the accreditation cycle to ensure that the conformity assessment activities representative of the scope of accreditation at the relevant locations are assessed during the accreditation cycle. The interval between on-site assessments, whether reassessment or surveillance visit, depends on the proven stability that the service of the conformity assessment body (CAB) has reached. HKAS has offered three monitoring plans, i.e. Plan A, Plan B and Plan C, to monitor accredited CABs' continued fulfilment of the requirements for accreditation. This document explains the details and criteria for these plans as well as the assessment procedures for determining conformity with the criteria. The three plans differ in terms of the time intervals between on-site reassessment and surveillance visits of an accreditation cycle.

#### 1.2 Principle

Each monitoring plan has its own specific set of criteria. The criteria are designed for evaluating the ability of a CAB in maintaining conformity with the accreditation criteria over an extended period of time. They are formulated in such a way that an accredited CAB can be expected to provide the same degree of confidence in its service irrespective of the monitoring plan it has selected. More details of this principle are explained in Appendix I.

1.3 For any accreditation scheme, Plan A is the nominal reassessment and surveillance visit intervals which are defined in the relevant HKAS accreditation regulations while the reassessment and surveillance intervals for Plan B and Plan C are given in Appendix II and III respectively. If no application for a change to another plan is received from an accredited CAB, the previous plan will continue to be adopted.

1.4 Upon receipt of an application to adopt Plan B or Plan C from an accredited CAB, HKAS Executive will assess its conformity with the corresponding criteria. The requested monitoring plan will be applied to the accredited CAB only after its conformity with the relevant criteria has been confirmed.

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- 1.5 HKAS Executive may issue Supplementary Criteria for interpretation of the criteria of Plan A, Plan B and C where necessary.
- 1.6 HKAS may apply different monitoring plans to the accreditation of different technical disciplines of an accredited CAB. In the application form for adopting Plan B or Plan C, an accredited CAB is required to specify the technical discipline to be covered. An individual test category under HOKLAS, an inspection field under HKIAS or a certification/validation/verification service under HKCAS is considered as a distinct technical discipline. In general, a single monitoring plan will be adopted for all activities within a technical discipline and at all sites, where applicable.
- 1.7 Subject to the discretion of HKAS Executive, Plan B and Plan C may not be available to a specific technical discipline.
- 1.8 For avoidance of doubt, despite any application for adopting a given monitoring plan from an accredited CAB, HKAS Executive may apply a monitoring plan of shorter interval between on-site assessments to it. HKAS Executive may also vary the reassessment and surveillance visit schedule of an accredited CAB as it sees fit based on findings of a reassessment or surveillance visit to that CAB or other information available to it, irrespective of the monitoring plan it has adopted for that CAB. The accredited CAB will be informed of the rationale for such decision through a notification letter within one calendar month from the effective date for the change of monitoring plan.
- 1.9 HKAS Executive will keep the monitoring plan adopted for each accredited CAB confidential. An accredited CAB electing to inform its stakeholders of its monitoring plans shall also inform the same stakeholders forthwith when its monitoring plan has been changed.

## **2 APPLICATION FOR ADOPTION OF A MONITORING PLAN**

- 2.1 A CAB's application for Plan B or Plan C will be accepted only if its duly completed application form (HOKLAS 019, HKCAS 014 or HKIAS 013) together with the required information is submitted to HKAS Executive in advance of its forthcoming reassessment. The CAB shall ensure its conformity with the relevant pre-requisite before submitting its application. Applications not meeting the pre-requisite will not be processed.
- 2.2 When arranging for a reassessment, except for the first reassessment under HOKLAS, HKAS Executive will inform the accredited CAB that it may apply for monitoring Plan B or Plan C. For HKCAS, a management system CAB can apply for monitoring Plan B or Plan C only after completion of at least one witnessing assessment cycle, if applicable according to relevant IAF mandatory documents or HKCAS supplementary criteria documents. If the CAB does not apply for a change to another plan

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concurrently with returning the confirmation for the scope of accreditation to be reassessed, HKAS Executive will continue to adopt the previous plan.

### **3 ASSESSMENT AND DECISION MAKING PROCEDURES**

- 3.1 Assessment for conformity with the criteria for different monitoring plans is conducted during a reassessment or surveillance visit. HKAS Executive may also conduct a separate assessment visit to the CAB for the monitoring plan at its discretion. The accredited CAB will be charged for the additional assessment effort for the monitoring plan in accordance with the fee schedule of the relevant accreditation scheme. The accreditation experience and history of an organisation under a HKAS mutual recognition arrangement partner for the relevant technical discipline will be accepted as satisfying the relevant requirements of a monitoring plan. Accreditation experience and history under other accreditation bodies may also be accepted if the findings of the reassessment have provided sufficient evidence to establish confidence in such accreditation.
- 3.2 Before a reassessment or a surveillance visit is arranged, a CAB undergoing monitoring Plan B or Plan C shall submit an appropriate application form (as mentioned in clause 2.1) to HKAS Executive.
- 3.3 For surveillance visits of Plan B and Plan C, the depth and coverage of these visits will be more than those of Plan A. CABs may be required to demonstrate the performance of selected conformity assessment activities similar to those for reassessments. Technical assessors/experts for specific technical areas, not necessarily covering the full scope of accreditation, are normally included in the assessment teams for one of the surveillance visits under Plan B or both surveillance visits under Plan C.
- 3.4 During the reassessment or surveillance visit, the assessment team leader will discuss with all team members and determine the CAB's conformity with the relevant criteria and provide a recommendation on the monitoring plan to be adopted using an AF17/IF17/CF17 form. Where appropriate, the assessment team may provide different recommendations for different activities, e.g. for different technical disciplines.
- 3.5 When an accredited CAB applies to include new activities in its scope of accreditation, the monitoring plan of that CAB for the relevant technical discipline will usually be applied to the new activities unless there is evidence to show that a different plan for the new activities should be applied. Where appropriate, additional surveillance visits may be recommended for the new activities if more frequent visits to maintain confidence are warranted during the initial period of their accreditation.
- 3.6 For a reassessment or surveillance visit to Plan B, if the result of the current reassessment/surveillance visit shows that the CAB does not meet the criteria for Plan B in full, Plan A will be adopted in the next reassessment/surveillance visit. For a

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reassessment or surveillance visit to Plan C, if the result of the current reassessment/surveillance visit shows that the CAB does not meet the criteria for Plan C in full, the assessment team may recommend the adoption of Plan B in future reassessments/surveillance visits provided that the criteria for Plan B are met in full; otherwise, Plan A will be adopted in future reassessments/surveillance visits. The due date of the forthcoming reassessment and surveillance visits will be determined with reference to the due date for the current reassessment/surveillance visit as stated in a previous notification letter. The original monitoring plan will not be resumed automatically. When the CAB meets the criteria for the original monitoring plan later, it shall submit another application to HKAS Executive in accordance with the procedure in Clause 2.1.

- 3.7 The recommendation of the assessment team on whether to adopt a requested monitoring plan and the rationale will be reviewed as part of the assessment report, by HKAS Executive or by the Accreditation Advisory Board.
- 3.8 HKAS Executive will determine whether an application for adopting a given monitoring plan is acceptable concurrently with making the decision on continuation of accreditation. In addition to the results of the on-site assessment, HKAS Executive may take into consideration other available information relating to the conformity of the CAB, such as feedback from users of its service, or complaints received by HKAS Executive about its service.
- 3.9 The accredited CAB will be informed of whether its application for a given monitoring plan is successful and the monitoring plan adopted in the notification letter confirming the continuation of the accreditation. The due dates of the coming reassessment and surveillance visits will be stated in the notification letter.
- 3.10 HKAS Executive will monitor the conformity of the CAB, amend the reassessment and surveillance visit schedule and inform the CAB of any change through a notification letter, where necessary.

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**Appendix I**  
**Criteria for different monitoring plans**  
*(informative)*

1. To maintain the same degree of confidence in the activities performed by different accredited CABs, the criteria for each monitoring plan are formulated based on factors affecting the ability of an accredited CAB in maintaining conformity with the accreditation criteria over the period of time between on-site reassessments and surveillance visits.
2. HKAS will monitor changes to an accredited CAB closely. Where necessary, HKAS will change the monitoring plan of that CAB to suit the changes.
3. The ability of an accredited CAB in maintaining conformity with accreditation criteria consistently over an extended period is affected by three major factors, i.e. maturity of its management system, history of its conformity with the accreditation criteria and stability of the external operation environment. These factors are the basis of the criteria in Appendix II and III.
4. Maturity of the management system
  - 4.1 A mature management system is one which is fully established and capable of achieving its objectives.
  - 4.2 Maturity of the management system is manifested in its ability to properly handle challenges presented to it. During each on-site visit, the assessment team will assess the maturity of the management system through examination of documents and records as well as discussion with staff members of the accredited CAB to obtain evidence that the management system can handle a wide range of challenges. For example, inspection of records of internal and external feedback, nonconformities, internal audits and reviews, customer complaints and handling of nonconforming work allows the assessment team to understand the types of challenge that the accredited CAB is facing and whether the CAB has developed the necessary capability to deal with them adequately.
  - 4.3 The ability of a management system to grow to maturity depends on its capability in retaining, learning from and making use of its knowledge and experience. Extensive documents and detailed records of incidents coupled with an in-depth cause analysis and efficient knowledge retrieval system is essential. During each on-site visit, the assessment team will look for such documents and records and the level of details included in them as well as the depth of the cause analysis. The ability in retaining experience is also dependent on the stability of its personnel. Experience gained will be lost upon the departure of a key staff member although such loss may be, to certain extent, minimised through extensive documentation and records and a management

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arrangement in which more than one staff member has full knowledge of such experience.

- 4.4 A mature management system is also characterised by the effective implementation of documented policy and procedures. During assessment, the assessment team will assess the degree of implementation of the management system based on observations and records.
- 4.5 Existence of an organisation culture which values quality and adherence to established procedures is an evidence of the maturity of the management system. During each on-site visit, the assessment team will appreciate the organisation culture through discussion with staff members, examination of records, observation of activities and other means. The training system and staff performance appraisal system will also be examined for evidence that such cultural values are upheld and effectively inculcated into the mind of newcomers.
- 4.6 Another characteristic of maturity is stability. A mature management system seldom undergoes drastic change in response to new challenges. Assessment of this aspect can be done through examination of the recent changes to the management system to appreciate what problems such changes were designed to address and judge whether the need for such changes reflect a lack of maturity. When assessing this aspect, it should be noted that even a mature management system will continue to evolve in response to internal as well as external stimuli. What distinguishes a mature management system from less mature one is the frequency and extent of changes and the nature of the problems such changes are designed to address. It should also be noted that organisational changes especially at the higher levels may cast doubt on the continuity of a management system and may lead to instability.
- 4.7 A mature management system is also resilient to changes. Resilience is the ability of the management system to maintain conformity with accreditation criteria after parts of it have failed, e.g., failure of a quality assurance element, failure of a piece of equipment or a step in a procedure, or unexpected unavailability of a key staff member. The seriousness a CAB places on evaluating the risk of nonconformities, devising contingency plans or including provisions in its procedures and making available resources for implementing such plans and procedures is a measure of the preparedness of the CAB against failures and therefore its resilience. The quality of staff members also determines whether the CAB can respond correctly to failures of part of its management system. The availability of backup or redundancy to cover failure or non-availability of critical resources, e.g., staff member, quality assurance measures and equipment also affect resilience. For example, (1) a CAB may have more than one staff members capable of performing a critical function such that another equally capable staff member can step in to perform the function in case of absence of the one who normally performs the duty so that the quality of the results is not compromised; (2) if the management system is such that results are checked twice, the failure of the first checking may be picked up in the second checking so that the chance of issuing

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erroneous results is much reduced; (3) a laboratory may have more than one instrument to perform the necessary function such that the breakdown of the normally used equipment will not affect the provision of service.

4.8 It should be pointed out that maturity depends on the implementation of procedures by people under specific circumstances. Therefore, a management system cannot be considered as being mature simply because it is modelled against a mature management system implemented by another CAB.

5. History of conformity with accreditation criteria

History of conformity with accreditation criteria is considered a reliable indicator predicting continual conformity in the future. The assessment results of the CAB in the current and the last reassessments and the surveillance visits between them for the same technical discipline will be taken into account. The factors to consider include the quantity and seriousness of the nonconformities identified, the effectiveness and timeliness of the corrective actions taken, frequency of recurrence of nonconformities, performance in proficiency testing activities, and other feedback received by HKAS Executive about the conformity of the CAB, e.g., complaints.

6. Stability of external operation environment

The external operation environment has a direct or indirect impact on the operation of a CAB. The factors to consider include the ownership of the CAB, the market conditions, including demand for the service, competition, availability of human and non-human resource, development of new relevant technology, the mix of activities performed by the CAB, etc. When these factors change, the CAB must respond to it effectively to maintain its viability and such response may affect its conformity with accreditation criteria. Therefore, a more stable internal and external environment will lead to a more stable operation of a CAB.

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**Appendix II**  
**Monitoring plan B**  
*(normative)*

1. Interval between reassessment and surveillance visits of an accreditation cycle

The intervals between reassessment and surveillance visits of an accreditation cycle are shown in the following table. In general, an on-site surveillance visit to an accredited CAB will be conducted not later than the interval specified in the following table<sup>1</sup>. The surveillance visit may be conducted concurrently with an assessment visit for extension of scope of accreditation within the same technical discipline.

| Types of visit     | Intervals in calendar months |       |       |
|--------------------|------------------------------|-------|-------|
|                    | HOKLAS                       | HKCAS | HKIAS |
| Surveillance visit | 12                           | 16    | 12    |
| Reassessment       | 36                           | 48    | 36    |

2. Application and adoption

HKAS Executive will process an application for change of monitoring plan only after the accredited CAB has provided sufficient evidence to demonstrate its conformity with the pre-requisite stated below. Before the adoption of the requested monitoring plan for the next accreditation cycle, HKAS Executive will assess the CAB against the criteria stated below, usually during a reassessment.

3. Pre-requisite

- a. The CAB shall have been accredited by HKAS<sup>2</sup> for the relevant technical discipline for at least three years.
- b. There shall not be any drastic change to the structure and ownership of the accredited CAB in the past 12 months. The management system shall also be free of any major changes for at least 24 months.

4. Criteria

4.1 Maturity

- a. The management system shall have been effectively implemented. All routine operation shall be handled through a combination of documented procedures and knowledgeable staff.
- b. The system has provisions in its procedures or documented contingency plan and the required resources to correctly handle all common failures.



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- c. The annual turnover rate of key staff members<sup>3</sup> in the preceding two years shall not be more than 15%, unless otherwise accepted by the HKAS Executive. If the number of key staff members is between three and seven, there shall not be more than one key staff member left the CAB in the preceding two years. No staff turnover in the preceding two years is allowed for a CAB with less than three key staff members.
- d. There shall be evidence of strong commitment to improvement as shown by the depth of system review and extensive and continual effort made by management for identification of areas for improvement and taking corresponding actions. Many preventive actions shall have been effectively implemented since the establishment of the management system.

#### 4.2 History of conformity with accreditation criteria

##### 4.2.1 CABs under HOKLAS

- a. Upon receipt of an application for change to Plan B, HKAS Executive will assess the CAB based on the following requirements (i), (ii) and (iii). For maintaining Plan B, HKAS Executive will assess the CAB based on the following requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| Monitoring Activity   | Critical Nonconformity (NC) | Significant Nonconformity (NC)    |  |
|---|-----------------------------|-----------------------------------|--|
|   |                             | Management System                 | Technical Activity <sup>4</sup>  |
| (i) Current reassessment  | Not allowed                 | Not allowed                       | Not more than 10% of accredited technical activities shall have significant NC |
| (ii) Each surveillance visit <sup>6</sup> since the last reassessment | Not allowed                 | Not allowed                       | Not more than 5% of accredited technical activities shall have significant NC  |
| (iii) Last reassessment <sup>5</sup>                                  | Not allowed                 | Not more than two significant NCs | Not more than 10% of accredited technical activities shall have significant NC |

- b. At least 93%<sup>7</sup> of its results in proficiency testing activities participated within the period stipulated in the respective HOKLAS Supplementary Criteria shall be satisfactory. Effective and timely corrective actions shall have been taken

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for all unsatisfactory results in proficiency testing activities since the last reassessment/assessment visit;

- c. Corrections and corrective actions for all significant NCs identified by HKAS Executive in the last reassessment shall have been completed to the satisfaction of HKAS Executive within the prescribed period of time.
- d. No more than 20% of its significant NCs identified by HKAS Executive since the last reassessment shall have recurred. If the total number of significant NCs was less than five, recurrence of one significant NC is allowed.
- e. The number of minor NCs should be relatively small compared with the size of operation of the CAB. Although no upper limit is set for the allowable number of minor NCs, a significant NC may be raised if related minor NCs indicated that the validity of an activity has been seriously and adversely affected.
- f. For a CAB accredited for less than 10 technical activities, not more than one technical activity would be allowed to have significant NC in each reassessment. For a CAB accredited for less than 20 technical activities, not more than one technical activity would be allowed to have significant NC in each surveillance visit.

#### 4.2.2 Product Certification Bodies under HKCAS

- a. Upon receipt of an application for change to Plan B, HKAS Executive will assess the CAB based on the following requirements (i), (ii) and (iii). For maintaining Plan B, HKAS Executive will assess the CAB based on the following requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| Monitoring Activity   | Critical NC | Significant NC    |  |
|---|-------------|-------------------|--|
|   |             | Management System | Technical Activity <sup>4</sup>  |
| (i) Current reassessment  | Not allowed | Not allowed       | Not more than 10% of accredited technical activities shall have significant NC |
| (ii) Each surveillance visit <sup>6</sup> since the last reassessment | Not allowed | Not allowed       | Not more than 5% of accredited technical activities shall have significant NC  |

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| Monitoring Activity                  | Critical NC | Significant NC                    |  |
|--------------------------------------|-------------|-----------------------------------|--|
|                                      |             | Management System                 | Technical Activity <sup>4</sup>  |
| (iii) Last reassessment <sup>5</sup> | Not allowed | Not more than two significant NCs | Not more than 10% of accredited technical activities shall have significant NC |

- b. Corrections and corrective actions for all significant NCs identified by HKAS Executive in the last reassessment shall have been completed to the satisfaction of HKAS Executive within the prescribed period of time.
- c. Not more than 20% of its significant NCs identified by HKAS Executive since the last reassessment shall have recurred. If the total number of significant NCs was less than five, recurrence of one significant NC is allowed.
- d. The number of minor NCs should be relatively small compared with the size of operation of the CAB. Although no upper limit is set for the allowable number of minor NCs, a significant NC may be raised if related minor NCs indicated that the validity of an activity has been seriously and adversely affected.
- e. For a CAB accredited for less than 10 technical activities, not more than one technical activity would be allowed to have significant NC in each reassessment. For a CAB accredited for less than 20 technical activities, not more than one technical activity would be allowed to have significant NC in each surveillance visit.

#### 4.2.3 Management System Certification Bodies under HKCAS

- a. Upon receipt of an application for change to Plan B, HKAS Executive will assess the CAB based on the following requirements (i), (ii), (iii) and (iv). For maintaining Plan B, HKAS Executive will assess the CAB based on the following requirements (i), (ii) and (iii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| Monitoring Activity               | Critical Nonconformity (NC) | Significant Nonconformity (NC) |
|-----------------------------------|-----------------------------|--------------------------------|
| (i) Current reassessment (office) | Not allowed                 | Not allowed                    |

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| <b>Monitoring Activity</b>   | <b>Critical Nonconformity (NC)</b> | <b>Significant Nonconformity (NC)</b> |
|--|------------------------------------|---------------------------------------|
| (ii) Each surveillance visit <sup>6</sup> (office) since the last reassessment | Not allowed                        | Not allowed                           |
| (iii) Each witnessing assessment <sup>8</sup>                                  | Not allowed                        | Not allowed                           |
| (iv) Last reassessment <sup>5</sup> (office assessment)                        | Not allowed                        | Not allowed                           |

#### 4.2.4 Validation/Verification Bodies under HKCAS

- a. Upon receipt of an application for change to Plan B, HKAS Executive will assess the CAB based on the following requirements (i), (ii) and (iii). For maintaining Plan B, HKAS Executive will assess the CAB based on the following requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| <b>Monitoring Activity</b>   | <b>Critical Nonconformity (NC)</b> | <b>Significant Nonconformity (NC)</b> |
|--|------------------------------------|---------------------------------------|
| (i) Current reassessment (both office and witnessing)  | Not allowed                        | Not allowed                           |
| (ii) Each surveillance visit <sup>6</sup> (both office and witnessing) since the last reassessment | Not allowed                        | Not allowed                           |
| (iii) Last reassessment <sup>5</sup> (both office assessment and witnessing)                       | Not allowed                        | Not allowed                           |

#### 4.2.5 CABs under HKIAS

- a. Upon receipt of an application for change to Plan B, HKAS Executive will assess the CAB based on the following requirements (i), (ii) and (iii). For maintaining Plan B, HKAS Executive will assess the CAB based on the following requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

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| Monitoring Activity   | Critical NC | Significant NC                    |  |
|---|-------------|-----------------------------------|--|
|   |             | Management System                 | Technical Activity <sup>4</sup>  |
| (i) Current reassessment  | Not allowed | Not allowed                       | Not more than 10% of accredited technical activities shall have significant NC |
| (ii) Each surveillance visit <sup>6</sup> since the last reassessment | Not allowed | Not allowed                       | Not more than 5% of accredited technical activities shall have significant NC  |
| (iii) Last reassessment <sup>5</sup>                                  | Not allowed | Not more than two significant NCs | Not more than 10% of accredited technical activities shall have significant NC |

- b. Corrections and corrective actions for all significant NCs identified by HKAS Executive in the last reassessment shall have been completed to the satisfaction of HKAS Executive within the prescribed period of time.
- c. No more than 20% of its significant NCs identified by HKAS Executive since the last reassessment shall have recurred. If the total number of significant NCs was less than five, recurrence of one significant NC is allowed.
- d. The number of minor NCs should be relatively small compared with the size of operation of the CAB. Although no upper limit is set for the allowable number of minor NCs, a significant NC may be raised if related minor NCs indicated that the validity of an activity has been seriously and adversely affected.
- e. For a CAB accredited for less than 10 technical activities, not more than one technical activity would be allowed to have significant NC in each reassessment. For a CAB accredited for less than 20 technical activities, not more than one technical activity would be allowed to have significant NC in each surveillance visit.

Note 1:

For avoidance of doubt, the following information should be noted. Reassessments and surveillance visits under this plan will be conducted in accordance with provisions in 4.24 to 4.27 of HKAS 002. Some of them are summarised as follows. HKAS Executive may vary the reassessment and surveillance visit schedule as it sees fit. During a surveillance visit, the assessment team may examine any aspects within the scope of accreditation of the organisation being assessed, irrespective of whether those aspects have been examined in the last reassessment or surveillance visit. Depending on the outcome of a reassessment or surveillance visit and the response from the organisation, additional reassessment and surveillance visits or

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follow-up visits may be conducted. Furthermore, HKAS Executive may conduct surveillance visits without giving prior notification to the organisation concerned.

Note 2:

The accreditation history under another HKAS MRA partner will be considered in accordance with the principle set out in 3.1 of this document.

Note 3:

Key staff members are those staff members who have significant impact on conformity with accreditation criteria and the quality of the accredited activities. Usually, they are at supervisory level or above. Staff members at a lower level may also be key staff members if their performance directly affects the quality of the output of the CAB, e.g. for work involving sophisticated skills and techniques or making important judgement or decisions, such that any error or omission cannot be readily discovered or adequately checked before or after issuing the results. As judging whether a staff member is a key staff member requires detail knowledge of his/her duty and authority, it is the responsibility of the accredited CAB to identify who are their key staff members. The assessment team will evaluate whether such judgement is soundly based.

The adverse effect of the change of key staff members may be significantly reduced if the CAB is operating under a mature system and has good transition arrangement. Hence, if the turnover rate of key staff is higher than the requirement, the CAB shall provide evidence, such as a transition plan, to the assessment team to demonstrate that stable operation of the CAB has been maintained. The assessment team may consider the CAB's maturity as being acceptable irrespective of the staff turnover rate after assessing the evidence together with other assessment findings. When evaluating the evidence submitted, the assessment team will give due regard to factors such as the overlapping period, the experience of the successors, the smoothness and effectiveness of the transition arrangement and any non-compliance with the principles stated in Appendix I of this Supplementary Criteria. The assessment team will provide justification for its decision as to whether the CAB is mature and record it in the appropriate assessment form. The assessment team will also consider whether the overall maturity of the CAB is adequate to support the monitoring plan the CAB is applying for. HKAS Executive will review the evidence provided by the CAB as well as the view of the assessment team before making a decision.

Note 4:

For the purpose of calculating the percentage, a technical activity is defined as follows for different accreditation schemes:

**HOKLAS:** A technical activity is a specific test, calibration, proficiency testing scheme or production of reference material. A test or calibration includes all the steps to obtain the given characteristics of the subject. The subject should be provided by the customer and the characteristics are those required by the customer. An intermediate step or a series of intermediate steps designed to prepare the test subject for subsequent steps is not a separate test or calibration. A product standard or piece of legislation may include more than one tests. Calibration of the same instrument for different ranges may be considered as different activities if different techniques are used.

**HKCAS:** Product certification in accordance with a certification scheme is regarded as a technical activity. **HKIAS:** A technical activity includes all the steps necessary to inspect the subject of inspection. A specific inspection method or procedure may be considered as a

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technical activity.

Note 5:

The results of the last reassessment for the relevant technical discipline will be taken into consideration. When the current reassessment is the first reassessment for the given technical discipline, the results of the initial assessment for that technical discipline will be considered.

Note 6:

The results of the surveillance visits conducted for the relevant technical discipline since the last reassessment will be taken into consideration. When the current reassessment is the first reassessment for the given technical discipline, the results of the surveillance visits since the initial assessment for that technical discipline will be considered.

Note 7:

The percentage is calculated based on the number of individual results in the proficiency tests. For example, if a laboratory took part in 5 proficiency tests in the period concerned, and these tests had 4, 5, 6, 7 and 8 results respectively, and the laboratory obtained 4, 4, 6, 7 and 7 satisfactory results respectively, the laboratory would have returned  $(4+4+6+7+7)/(4+5+6+7+8) = 28/30$  or 93.3% satisfactory results.

Note 8:

The results of at least one witnessing assessment for each accredited technical cluster as defined in IAF MD 17:2019 or other relevant HKCAS Supplementary Criteria documents will be considered.

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**Appendix III**  
**Monitoring plan C**  
*(normative)*

1. Intervals between reassessment and surveillance visits of an accreditation cycle

The intervals between reassessment and surveillance visits of an accreditation cycle are shown in the following table. In general, an on-site surveillance visit to an accredited CAB will be conducted not later than the interval specified in the following table<sup>1</sup>. The surveillance visit may be conducted concurrently with an assessment visit for extension of scope of accreditation within the same technical discipline.

| Types of visit     | Intervals in calendar months |       |       |
|--------------------|------------------------------|-------|-------|
|                    | HOKLAS                       | HKCAS | HKIAS |
| Surveillance visit | 16                           | 20    | 16    |
| Reassessment       | 48                           | 60    | 48    |

2. Application and adoption

HKAS Executive will process an application for change of monitoring plan only after the accredited CAB has provided sufficient evidence to demonstrate its conformity with the pre-requisite stated below. Before the adoption of the requested monitoring plan for the next accreditation cycle, HKAS Executive will assess the CAB against the criteria stated below, usually during a reassessment.

3. Pre-requisite

- a. The CAB shall have gone through at least one cycle of reassessment under monitoring plan B for the relevant technical discipline. Accredited management system CB for EMS, OH&SMS and QMS certifications can apply for monitoring Plan C only after it has demonstrated sufficient experience and performance to adopt an enhanced programme for witnessing assessment as defined in IAF MD 17: 2019 or other applicable HKCAS Supplementary Criteria documents.
- b. There shall not be any major change to the management system, organisational structure and ownership of the accredited CAB in the past 24 months and no such change shall be expected in the coming 24 months.

4. Criteria

4.1 Maturity

- a. The management system shall have been effectively implemented. All routine



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operation shall be handled through a combination of documented procedures and knowledgeable staff. There shall be provisions in its procedures or documented contingency plans as well as the required resource to handle all common failures and the majority of less common failures. There shall also be evidence that such procedures or contingency plans are effective.

- b. The system shall value experience and lessons learnt and shall be effective in capturing them. For example, changes have been made to documents or new documents have been issued every time when experience has been gained, e.g. through feedback such as staff opinion, external complaints, assessment findings, internal audit findings or other corrective or preventive actions and the details included in such documents are adequate in enabling persons without prior knowledge of their background to follow, coupled with an effective information retrieval system which enable relevant information to be retrieved without difficulties.
- c. There shall be evidence of strong commitment to improvement as shown by the depth of system review and extensive and continual effort made by management for identification of areas for improvement and taking corresponding actions. A large volume of preventive action shall have been effectively implemented since the establishment of the management system.
- d. The annual turnover rate of key staff members<sup>3</sup> in the preceding three years shall not be more than 15%, unless otherwise accepted by the HKAS Executive. If the number of key staff members is between three and seven, there shall not be more than one key staff member left the CAB in the preceding three years. No staff turnover in the preceding three years is allowed for a CAB with less than three key staff members.
- e. The organisation shall have established a culture valuing quality. Observations and discussion with staff members shall be able to confirm that quality will not be compromised for expediency. Observation shall also show that staff members are familiar with documented procedures and they habitually refer to documented procedures if in doubt. Staff members shall also feel empowered by the fact that when documented procedures are found to be unsuitable, the system encourages them to raise it and prompt and effective actions are invariably taken. The training and induction system of the organisation shall also be effective in inculcating such culture in new recruits.

## 4.2 History of conformity with accreditation criteria

### 4.2.1 CABs under HOKLAS

- a. Upon receipt of an application for change to Plan C, HKAS Executive will assess the CAB based on the following requirements (i) and (ii). For

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maintaining Plan C, HKAS Executive will also assess the CAB based on the requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| Monitoring Activity   | Critical Nonconformity (NC) | Significant Nonconformity (NC) |   |
|---|-----------------------------|--------------------------------|---|
|   |                             | Management System              | Technical Activity <sup>4</sup>   |
| (i) Current reassessment  | Not allowed                 | Not allowed                    | Not more than 7% of accredited technical activities shall have significant NC |
| (ii) Each surveillance visit <sup>6</sup> since the last reassessment | Not allowed                 | Not allowed                    | Not more than 4% of accredited technical activities shall have significant NC |

- b. At least 95%<sup>7</sup> of its results in proficiency testing activities participated within the period stipulated in the respective HOKLAS Supplementary Criteria shall be satisfactory. Effective and timely corrective actions shall have been taken for all unsatisfactory results in proficiency testing activities since the last reassessment.
- c. Corrections and corrective actions for all significant NCs identified by HKAS Executive in the last reassessment shall have been completed to the satisfaction of HKAS Executive within the prescribed period of time.
- d. Not more than 15% of its significant NCs identified by HKAS Executive since the last reassessment shall have recurred. If total number of significant NCs was less than seven, recurrence of one significant NC is allowed.
- e. The number of minor NCs should be relatively small compared with the size of operation of the CAB. Although no upper limit is set for the allowable number of minor NCs, a significant NC may be raised if related minor NCs indicated that the validity of an activity has been seriously and adversely affected.
- f. For a CAB accredited for less than 15 technical activities, not more than one technical activity would be allowed to have significant NC in the current reassessment. For a CAB accredited for less than 25 technical activities, not more than one technical activity would be allowed to have significant NC in each surveillance visit.
- g. No complaint or similar feedback caused by significant NCs of the CAB shall have been received by HKAS Executive since the last reassessment.

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#### 4.2.2 Product Certification Bodies under HKCAS

- a. Upon receipt of an application for change to Plan C, HKAS Executive will assess the CAB based on the following requirements (i) and (ii). For maintaining Plan C, HKAS Executive will assess the CAB based on the requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| Monitoring Activity   | Critical NC | Significant NC    |   |
|---|-------------|-------------------|---|
|   |             | Management System | Technical Activity <sup>4</sup>   |
| (i) Current reassessment  | Not allowed | Not allowed       | Not more than 7% of accredited technical activities shall have significant NC |
| (ii) Each surveillance visit <sup>6</sup> since the last reassessment | Not allowed | Not allowed       | Not more than 4% of accredited technical activities shall have significant NC |

- b. Corrections and corrective actions for all significant NCs identified by HKAS Executive in the last reassessment shall have been completed to the satisfaction of HKAS Executive within the prescribed period of time.
- c. Not more than 15% of its significant NCs identified by HKAS Executive since the last reassessment shall have recurred. If the total number of significant NCs was less than seven, recurrence of one significant NC is allowed.
- d. The number of minor NCs should be relatively small compared with the size of operation of the CAB. Although no upper limit is set for the allowable number of minor NCs, a significant NC may be raised if related minor NCs indicated that the validity of an activity has been seriously and adversely affected.
- e. For a CAB accredited for less than 15 technical activities, not more than one technical activity would be allowed to have significant NC in the current reassessment. For a CAB accredited for less than 25 technical activities, not more than one technical activity would be allowed to have significant NC in each surveillance visit.
- f. No complaint or similar feedback caused by significant NCs of the CAB shall have been received by HKAS Executive since the last reassessment.

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#### 4.2.3 Management System Certification Bodies under HKCAS

- a. Upon receipt of an application for change to Plan C, HKAS Executive will assess the CAB based on the following requirements (i), (ii), (iii) and (iv). For maintaining Plan C, HKAS Executive will assess the CAB based on the requirements (i), (ii), (iii) and (iv) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| <b>Monitoring Activity</b>   | <b>Critical Nonconformity (NC)</b> | <b>Significant Nonconformity (NC)</b> | <b>Minor Nonconformity (NC)</b> |
|--|------------------------------------|---------------------------------------|---------------------------------|
| (i) Current reassessment (office)  | Not allowed                        | Not allowed                           | Not more than one               |
| (ii) Each surveillance visit <sup>6</sup> (office) since the last reassessment | Not allowed                        | Not allowed                           | Not more than one               |
| (iii) Each witnessing assessment <sup>8</sup>                                  | Not allowed                        | Not allowed                           | Not more than one               |
| (iv) Last reassessment (office assessment)                                     | Not allowed                        | Not allowed                           | Not more than one               |

#### 4.2.4 Validation/Verification Bodies under HKCAS

- a. Upon receipt of an application for change to Plan C, HKAS Executive will assess the CAB based on the following requirements (i), (ii) and (iii). For maintaining Plan C, HKAS Executive will assess the CAB based on the requirements (i), (ii) and (iii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| <b>Monitoring Activity</b>                            | <b>Critical Nonconformity (NC)</b> | <b>Significant Nonconformity (NC)</b> | <b>Minor Nonconformity (NC)</b> |
|---|------------------------------------|---------------------------------------|---------------------------------|
| (i) Current reassessment (both office and witnessing) | Not allowed                        | Not allowed                           | Not more than one               |

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| <b>Monitoring Activity</b>   | <b>Critical Nonconformity (NC)</b> | <b>Significant Nonconformity (NC)</b> | <b>Minor Nonconformity (NC)</b> |
|--|------------------------------------|---------------------------------------|---------------------------------|
| (ii) Each surveillance visit <sup>6</sup> (both office and witnessing) since the last reassessment | Not allowed                        | Not allowed                           | Not more than one               |
| (iii) Last reassessment (both office and witnessing)   | Not allowed                        | Not allowed                           | Not more than one               |

#### 4.2.5 CABs under HKIAS

- a. Upon receipt of an application for change to Plan C, HKAS Executive will assess the CAB based on the following requirements (i) and (ii). For maintaining Plan C, HKAS Executive will assess the CAB based on the requirements (i) and (ii) during each surveillance visit or reassessment. If a reassessment or surveillance visit is conducted concurrently with an assessment visit for extension of scope of accreditation, only nonconformities related to activities already accredited will be considered.

| <b>Monitoring Activity</b>  | <b>Critical NC</b> | <b>Significant NC</b>    |   |
|---|--------------------|--------------------------|---|
|   |                    | <b>Management System</b> | <b>Technical Activity<sup>4</sup></b>   |
| (i) Current reassessment  | Not allowed        | Not allowed              | Not more than 7% of accredited technical activities shall have significant NC |
| (ii) Each surveillance visit <sup>6</sup> since the last reassessment | Not allowed        | Not allowed              | Not more than 4% of accredited technical activities shall have significant NC |

- b. Corrections and corrective actions for all significant NCs identified by HKAS Executive in the last reassessment shall have been completed to the satisfaction of HKAS Executive within the prescribed period of time.
- c. No more than 15% of its significant NCs identified by HKAS Executive since the last reassessment shall have recurred. If the total number of significant NCs is less than seven, recurrence of one significant NC is allowed.
- d. The number of minor NCs should be relatively small compared with the size of operation of the CAB. Although no upper limit is set for the allowable number of minor NCs, a significant NC may be raised if related minor NCs indicated that the validity of an activity has been seriously and adversely affected.

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- e. For a CAB accredited for less than 15 technical activities, not more than one technical activity would be allowed to have significant NC in the current reassessment. For a CAB accredited for less than 25 technical activities, not more than one technical activity would be allowed to have significant NC in each surveillance visit.
- f. No complaint or similar feedback caused by significant NCs of the CAB shall have been received by HKAS Executive since the last reassessment.

Notes 1, 3, 4, 7 and 8:

Same as Notes 1, 3, 4, 7 and 8 of Appendix II.

Note 6:

The results of the surveillance visits conducted for the relevant technical discipline since the last reassessment will be taken into consideration.