Quality Manual for Accrediting Conformity Assessment Bodies

1 Scope

This document specifies general requirements for the GV Division in assessing and accrediting conformity assessment bodies (CABs) under the Quality Systems Verification Programs (QSVP). All provisions outlined in this document apply to the USDA ISO Guide 65 Program. The provisions do not apply to other Programs under the QSVP. The USDA ISO Guide 65 Program procedure is available on the GV Division QSVP Auditing Services website at http://www.ams.usda.gov/lsg/arc/audit.htm.

The QSVP are designed to provide independent verification that special processes or marketing claims are clearly defined and verified by an independent third party. These programs are voluntary, user-fee programs that are available to suppliers of agricultural products or services. They are provided by the GV Division under the authority of the Agricultural Marketing Act (AMA) of 1946, as amended; the Code of Federal Regulations (CFR) 7, Part 62; and as detailed in individual program procedures.

This document may also be used for the peer evaluation process for mutual recognition arrangements between accreditation bodies. The GV Division, operating in accordance with this document, does not have to offer accreditation to all types of CABs. For the purposes of this document, CABs are organizations providing the following conformity assessment services: testing, inspection, management system certification, personnel certification, product certification, and calibration.

For more information, please contact the Quality Management Branch Chief

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The structure of this document mirrors ISO/IEC 17011:2004 as an aid to demonstrate the GV Division's fulfillment of it.

2 Normative References

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

2.1 ISO 9000:2000, *Quality management systems - Fundamentals and vocabulary*
2.2 ISO/IEC 17000:2004, *Conformity assessment -Vocabulary and general principles*
2.3 VIM:1993, *International vocabulary of basic and general terms in metrology, issued by PIMP, IEC, IFCC, ISO, IUPAC, IUPAP, and OIML*

3 Terms and Definitions

For the purposes of this document, the terms and definitions given in ISO/IEC 17000 and the following apply. Where the terms and definitions are neither included in this document nor in ISO/IEC 17000, the terms and definitions of ISO 9000 or the International vocabulary of basic and general terms of metrology (VIM) apply. If different definitions for specific metrological terms are given, the definitions of VIM have preference.

3.1 Accreditation

Third -party attestation related to the conformity assessment body conveying formal demonstration of its competence to carry out specific conformity assessment tasks

3.2 Accreditation Body

Authoritative body that performs accreditation

NOTE: The authority of the accreditation body is generally derived from government.

3.3 Accreditation Body Logo

Logo used by an accreditation body to identify itself

3.4 Accreditation Certificate

Formal document or a set of documents, stating that accreditation has been granted for the defined scope

3.5 Accreditation Symbol

Symbol issued by an accreditation body to be used by accredited CABs to indicate their accredited status.

3.6 Appeal

Request by a CAB for reconsideration of any adverse decision made by the accreditation body related to its desired accreditation status

NOTE: Adverse decisions include:
a) Refusal to accept an application,
b) Refusal to proceed with an assessment,
c) Corrective action requests,
d) Changes in accreditation scope,
e) Decisions to deny, suspend, or withdraw accreditation, and
f) Any other action that impedes the attainment of accreditation.

3.7 Assessment

Process undertaken by an accreditation body to assess the competence of a CAB, based on particular standard(s) and/or other normative documents and for a defined scope of accreditation

3.8 Assessor

Person assigned by an accreditation body to perform, alone or as part of an assessment team, an assessment of a CAB

3.9 Complaint

Expression of dissatisfaction, other than appeal, by any person or organization, to an accreditation body, relating to the activities of that accreditation body or of an accredited CAB, where a response is expected

3.10 Conformity Assessment Body (CAB)
Body that performs conformity assessment services and that can be the object of accreditation

NOTE: Whenever the word "CAB" is used in the text, it applies to both the "applicant and accredited CABs" unless otherwise specified.

3.11 Consultancy
Participation in any of the activities of a CAB subject to accreditation

Examples are (a) preparing or producing manuals or procedures for a CAB; (b) participating in the operation nor management of the system of a CAB; (c) giving specific advice or specific training towards the development and implementation of the management system and/or competence of a CAB; or (d) giving specific advice or specific training for the development and implementation of the operational procedures of a CAB.

3.12 Expert
Person assigned by an accreditation body to provide specific knowledge or expertise with respect to the scope of accreditation to be assessed

3.13 Extending Accreditation
Process of enlarging the scope of accreditation

3.14 Interested Parties
Parties with a direct or indirect interest in accreditation

NOTE: Direct interest refers to the interest of those who undergo accreditation; indirect interest refers to the interests of those who use or rely on accredited conformity assessment services.

3.15 Lead Assessor
Assessor who is given the overall responsibility for specified assessment activities

3.16 Reducing Accreditation
Process of cancelling accreditation for part of the scope of accreditation

3.17 Scope of Accreditation
Specific conformity assessment services for which accreditation is sought or has been granted

3.18 Surveillance
Set of activities, except reassessment, to monitor the continued fulfillment by accredited CABs of requirements for accreditation

NOTE: Surveillance includes both surveillance on-site assessments and other surveillance activities, such as the following:

a) Enquiries from the accreditation body to the CAB on aspects concerning the accreditation;
b) Reviewing the declarations of the CAB with respect to what is covered by the accreditation;
c) Requests to the CAB to provide documents and records (e.g. audit reports, results of internal quality control for verifying the validity of CAB services, complaints records, management review records); and
d) Monitoring the performance of the CAB (such as results of participating in proficiency testing).

3.19 Suspending Accreditation
Process of temporarily making accreditation invalid, in full or for part of the scope of accreditation

3.20 Withdrawing Accreditation
Process of cancelling accreditation in full

3.21 Witnessing
Observation of the CAB carrying out conformity assessment services within its scope of accreditation

4 Accreditation Body (GV Division)

4.1 Legal Responsibility

The GV Division is a registered legal entity.

NOTE: Governmental accreditation bodies are deemed to be legal entities on the basis of their governmental status. Where the governmental accreditation body is part of a larger governmental entity, the government is responsible for identifying the accreditation body in a way that no conflict of interest with governmental CABs occur. This accreditation body is deemed to be the "registered legal entity" in the context of this document.

The GV Division is deemed to be a legal entity on the basis of its governmental status provided for under the AMA of 1946, as amended. The AMA gives AMS the authority to provide services so that agricultural products may be marketed to their best advantage, that trade may be facilitated, and that consumers may ascertain characteristics involved in the production and processing of products to obtain the quality of the product they desire. The AMA also provides for the collection of fees from users of these services that are reasonable and cover the cost of providing services. Under the AMA, audit services may facilitate the global marketing and trade of agricultural products; provide consumers the opportunity to distinguish specific characteristics involved in the production and processing of agricultural products; and ensure that product consistently meets program requirements.

4.2 Structure

4.2.1 The structure and operation of the GV Division is such as to give confidence in its accreditations.

The GV Division structure is outlined in the GVD 1405 List.

4.2.2 The GV Division has authority and is responsible for its decisions relating to accreditation, including the granting, maintaining, extending, reducing, suspending, and withdrawing of accreditation.

The AMA gives AMS the authority to provide services so that agricultural products may be marketed to their best advantage, that trade may be facilitated, and that consumers may ascertain characteristics involved in the production and processing of products to obtain the quality of the product they desire.

4.2.3 The GV Division has a description of its legal status, including the names of its owners if applicable, and if different, the names of the persons who control it.

The GV Division is deemed to be a legal entity on the basis of its governmental status provided for under the AMA of 1946, as amended. The GV Division structure is outlined in GVD 1405 List.

4.2.4 The GV Division documents the duties, responsibilities, and authorities of top management and other personnel associated with the GV Division who could affect the quality of the accreditation.

Duties, responsibilities, and authorities are outlined in GVD 1405 List.

4.2.5 The GV Division has identified the top management having overall authority and responsibility for each of the following:

a) Development of policies relating to the operation of the GV Division;
b) Supervision of the implementation of the policies and procedures;
c) Supervision of the finances of the GV Division;
d) Decisions on accreditation;
e) Contractual arrangements;
f) Delegation of authority to committees or individuals, as required, to undertake defined activities on behalf of top management.

The GV Division structure, authorities, and responsibilities are outlined in GVD 1405 List.

4.2.6 The GV Division has access to necessary expertise for advising the GV Division on matters directly relating to accreditation.

NOTE: Access to the necessary expertise may be obtained through one or more advisory committees (either ad-hoc or permanent), each responsible within its scope.

Refer to GVD 1120 Procedure.

4.2.7 The GV Division has formal rules for the appointment, terms of reference, and operation of committees that are involved in the accreditation process, and has identified the parties participating.

Refer to the GVD 1115 Procedure and GVD 1120 Procedure.

4.2.8 The GV Division has documented its entire structure, showing lines of authority and responsibility.

Refer to the GVD 1405 List.

4.3 Impartiality

4.3.1 The GV Division is organized and operated so as to safeguard the objectivity and impartiality of its activities.

The GV Division does not provide consultancy. Decisions on accreditation are made by persons different from those who carried out the accreditation. Refer to the GVD 1405 List.

4.3.2 For safeguarding impartiality and for developing and maintaining the principles and major policies of operation of its accreditation system, the GV Division has documented and implemented a structure to provide opportunity for effective involvement by interested parties. The GV Division ensures a balanced representation of interested parties with no single party predominating.

Refer to the GVD 1405 List GVD 1120 Procedure.

4.3.3 The GV Division's policies and procedures are non-discriminatory and are administered in a non-discriminatory way. The GV Division makes its services accessible to all applicants whose requests for accreditation fall within the activities (see 4.6.1) and the limitations as defined within its policies and rules. Access is not conditional upon the size of the applicant CAB or membership of any association or group, nor is accreditation conditional upon the number of CABs already accredited.

Access is not conditional upon the size of the applicant CAB or membership of any association or group, nor is accreditation conditional upon the number of CABs already accredited. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720–2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250–9410, or call (800) 795–3272 (voice) or (202) 720–6382 (TDD). USDA is an equal opportunity provider and employer.

Additionally, the GV Division and its employees act in accordance with AMS Directive 365.1 Employee Responsibility and Conduct.

4.3.4 All GV Division personnel and committees that could influence the accreditation process act objectively and are free from any undue commercial, financial, and other pressures that could compromise impartiality.

GV Division personnel and committees act in accordance with AMS Directive 365.1 Employee Responsibility and Conduct; 5 CFR Part 2635, Standards of Ethical Conduct for Employees of the Executive Branch; and 5 CFR Part 8301, Supplemental Standards of Ethical Conduct for Employees of the Department of Agriculture.

Consistent with 5 CFR 2634.905, specific employees, based on the duties of their position, are required to file an annual report of their financial interests and outside employment. This report uses the OGE Form 450 Confidential Financial Disclosure Report, or OGE Optional Form 450-A, as applicable.

Additionally, GV Division officials, including Program Review Committee members, must have a signed GV Division Conflict-of-Interest and Confidentiality Statement (GVD 1420 Form) on file prior to providing services to a CAB.

Refer to GVD 1102 Procedure and GVD 1115 Procedure.

4.3.5 The GV Division ensures that each decision on accreditation is taken by competent person(s) or committee(s) different from those who carried out the assessment.

The GV Division uses a committee which consists of a balanced representation of parties interested in the accreditation activities of the GV Division. A quorum of 3 members is used to make decisions on accreditation. These members have not carried out assessment activities for the CAB being reviewed. Refer to GVD 1115 Procedure.

4.3.6 The GV Division does not offer or provide any service that affects its impartiality, such as

a) Those conformity assessment services that CABs perform, or
b) Consultancy.

The GV Division's activities are not presented as linked with consultancy. Nothing is said or implied that would suggest that accreditation would be simpler, easier, faster, or less expensive if any specified person(s) or consultancy were used.

The GV Division does not offer or provide these services. The GV Division does not direct CABs to specified persons or consultants. The GV Division does not require the use of any persons or consultants. However, the GV Division does provide CABs with a list of consultants when CABs inquire. Refer to GVD 1000 Procedure.

4.3.7 The GV Division ensures that the activities of its related bodies do not compromise the confidentiality, objectivity, and impartiality of its accreditations. A related body may, however, offer consultancy or provide those conformity assessment services the GV Division accredits, subject to the related body having (with respect to the GV Division)

a) Different top management for the activities described in 4.2.5,
b) Personnel different from those involved in the decision-making processes of accreditation,
c) No possibility to influence the outcome of an assessment for accreditation, and
d) Distinctly different name, logos, and symbols.

The GV Division, with the participation of the interested parties as described in 4.3.2, identifies, analyzes, and documents the relationships with related bodies to determine the potential for conflict of interest, whether they arise from within the GV Division or from the activities of the related bodies. Where conflicts are identified, appropriate action is taken.

NOTE 1: A related body is a separate legal entity that is linked by common ownership or contractual arrangements to the GV Division as described in 4.1.

NOTE 2: A separate part of the government, outside the governmental accreditation body as described in 4.1, is considered as a related body.

Any governmental related body that provides consultancy is outside of the GV Division. These bodies have their own top management, personnel, and distinctly different name, logos, and symbols. Any person from these bodies who provided consultancy to a CAB may not participate in the assessment or in any decision of accreditation for that CAB. These conflicts-of-interest are identified and records are maintained in personnel files.

Relationships with related bodies are identified, analyzed, and documented, with the participation of interested parties. Where any conflicts-of-interest are identified, appropriate actions is taken.

Refer to GVD 1102 Procedure, GVD 1115 Procedure, GVD 1120 Procedure, and personnel files.

4.4 Confidentiality

The GV Division has adequate arrangements to safeguard the confidentiality of the information obtained in the process of its accreditation activities at all levels of the GV Division, including committees and external bodies or individuals acting on its behalf. The GV Division does not disclose confidential information about a particular CAB outside the GV Division without written consent of the CAB, except where the law requires such information to be disclosed without such consent.

Refer to GVD 1000 Procedure, GVD 1115 Procedure, GVD 1412 Procedure, and GVD 1420 Form.

The GV Division meets the requirements as outlined in 5 CFR 2635.703, Use of nonpublic information; the Freedom of Information Act (FOIA) (5 USC §552); the Privacy Act of 1974 (5 USC §552a); AMS Directive 160.1, Freedom of Information; and AMS Directive 160.2, Privacy Act.

Persons involved in GV Division accreditation activities must have a signed AMS Conflict-of-Interest and Confidentiality Statement (GVD 1420 Form) on file with the GV Division prior to providing services to CABs.

4.5 Liability and Financing

4.5.1 The GV Division has arrangements to cover liabilities arising from its activities.

AMS requires the GV Division to maintain adequate financial reserves to cover liabilities arising from its operations and/or activities.

4.5.2 The GV Division has the financial resources, demonstrated by records and/or documents, required for the operation of its activities. The GV Division has a description of its source(s) of income.

The USDA ISO Guide 65 Program is a user-fee funded program. Fees are charged in accordance with 7 CFR Part 62.

4.6 Accreditation Activity

4.6.1 The GV Division clearly describes its accreditation activities, referring to the relevant International Standards, Guides, or other normative documents.

Refer to GVD 1000 Procedure, GVD 1012 Procedure, and other documents as referenced in this Quality Manual.

4.6.2 The GV Division may adopt application or guidance documents and/or participate in the development of them. The GV Division ensures that such documents have been formulated by committees or persons possessing the necessary competence and, where appropriate, with participation of interested parties. Where international application or guidance documents are available, these should be used.

The GV Division has adopted ISO/IEC Guide 65:1996 and applicable guidance documents. The GV Division has also adopted the NOP regulation (7 CFR Part 205) and guidance documents issued by the NOP.

Refer to GVD 1120 Procedure.

4.6.3 The GV Division has established procedures for extending its activities and to react to demands of interested parties. Possible elements to be included in the procedures are

a) Analysis of its present competence, suitability of extension, resources, etc. in the new field,
b) Accessing and employing expertise from other external sources,
c) Evaluating the need for application or guidance documents,
d) Initial selection and training of assessors, and
e) Training GV Division's staff in the new field.

Refer to GU7183CCA.

5 Management

5.1 General

5.1.1 The GV Division establishes, implements, and maintains a management system and continually improves its effectiveness in accordance with the requirements of this document. Requirements for the management system that take into account the particular nature of accreditation bodies are defined in 5.2 to 5.9.

The GV Division has established and implemented a management system, as outlined in this manual. It maintains the management system and continually improves it effectiveness through the use of internal and external audits, management reviews, corrective and preventative actions, and customer feedback.

5.1.2 Where this document requires the GV Division to have or establish procedures, this means that they are documented, implemented, and maintained, and are based on formulated policies wherever suitable.

5.2 Management System

5.2.1 The GV Division's top management defines and documents policies and objectives, including a quality policy, for its activities, and it provides evidence of commitment to quality and to compliance with the requirements of this document. The management ensures effective communication of the needs of interested parties. The management also ensures that the policies are understood, implemented, and maintained at all levels of the GV Division. The objectives should be measurable and are consistent with the GV Division's policies.

NOTE: Those accreditation bodies that are signatories to a mutual recognition arrangement may refer to the obligations of the mutual recognition arrangement in their policies.

Refer to GVD 1406 List. Objectives are measured through employee performance and training, customer feedback including that from the interested parties committee, the timeframe for addressing appeals and complaints, and the timeframe for providing services.

5.2.2 The GV Division operates a management system appropriate to the type, range, and volume of work performed. All applicable requirements of this document are addressed either in a manual or in associated documents. The GV Division ensures that the manual and relevant associated documents are accessible to its personnel and ensures effective implementation of the system's procedures.

The manual and relevant associated documents (GVD 1000 - 1199 Series and GVD 1400 Series) are maintained on the GV Division server. The documents are also maintained on the GV Division AGNIS website. Documents and records are controlled in accordance with GVD 1412 Procedure.

5.2.3 The GV Division's top management appoints a member of management who, irrespective of other responsibilities, has responsibilities and authority that includes

a) Ensuring that procedures needed for the management system are established, and
b) Reporting to top management on the performance of the management system and any need for improvement.

The GV Division Quality Manager is designated as the responsible member. Refer to GVD 1405 List.

5.3 Document Control

The GV Division has established procedures to control all documents (internal and external) that relate to its accreditation activities. The procedures define the controls needed

a) To approve documents for adequacy prior to issue,
b) To review and update as necessary and re-approve documents,
c) To ensure that changes and the current revision status of documents are identified,
d) To ensure that relevant version of applicable documents are available to personnel, subcontractors, assessors, and experts of the GV Division and CABs at points of use,
e) To ensure that documents remain legible and readily identifiable,
f) To prevent the unintended use of obsolete documents, and to apply suitable identification to them if they are retained for any purpose, and
g) To safeguard, where relevant, the confidentiality of documents.

Refer to GVD 1412 Procedure.

5.4 Records

5.4.1 The GV Division has established procedures for identification, collection, indexing, accessing, filing, storage, maintenance, and disposal of its records.

Refer to GVD 1412 Procedure.

5.4.2 The GV Division has established procedures for retaining records for a period consistent with its contractual and legal obligations. Access to these records is consistent with the confidentiality arrangements.

Refer to GVD 1412 Procedure.

5.5 Nonconformities and Corrective Actions

The GV Division has established procedures for the identification and management of nonconformities in its own operations. The GV Division also, where necessary, takes actions to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions are appropriate to the impact of the problems encountered. The procedures cover the following:

a) Identifying nonconformities (e.g. from complaints and internal audits);
b) Determining the causes of nonconformity;
c) Correcting nonconformities;
d) Evaluating the need for actions to ensure that nonconformities do not recur;
e) Determining the actions needed and implementing them in a timely manner;
f) Recording the results of actions taken; and
g) Reviewing the effectiveness of corrective actions.

Refer to GVD 1440 Procedure.

5.6 Preventive Actions

The GV Division has established procedures to identify opportunities for improvement and to take preventative actions to eliminate the causes of potential nonconformities. The preventive actions taken are appropriate to the impact of the potential problems. The procedures for preventive actions define requirements for

a) Identifying potential nonconformities and their causes,
b) Determining and implementing the preventive actions needed,
c) Recording results of actions taken, and
d) Reviewing the effectiveness of the preventative actions taken.

Refer to GVD 1440 Procedure.

5.7 Internal Audits

5.7.1 The GV Division has established procedures for internal audits to verify that they conform to the requirements of this document and that the management system is implemented and maintained.

NOTE: As an indication, ISO 19011 provides guidelines for conducting internal audits.

Refer to GVD 1135 Procedure.

5.7.2 Internal audits are performed normally at least once a year. The frequency of internal audits may be reduced if the GV Division can demonstrate that its management system has been effectively implemented according to this document and has proven stability. An audit program is planned, taking into consideration the importance of the processes and areas to be audited, as well as the results of previous audits.

Refer to GVD 1135 Procedure.

5.7.3 The GV Division ensures that

a) Internal audits are conducted by qualified personnel knowledgeable in accreditation, auditing, and the requirements of this document,
b) Internal audits are conducted by personnel different from those who perform the activity to be audited,
c) Personnel responsible for the area audited are informed of the outcome of the audit,
d) Actions are taken in a timely and appropriate manner, and
e) Any opportunities for improvement are identified.

Refer to GVD 1135 Procedure.

5.8 Management Reviews

5.8.1 The GV Division's top management has established procedures to review its management system at planned intervals to ensure its continuing adequacy and effectiveness in satisfying the relevant requirements, including this document and the stated policies and objectives. These reviews should be conducted normally at least once a year.

Refer to GVD 1130 Procedure.

5.8.2 Inputs to management reviews include, where available, current performance and improvement opportunities related to the following:

a) Results of audits;
b) Results of peer evaluation where relevant;
c) Participation in international activities, where relevant;
d) Feedback from interested parties;
e) New areas of accreditation;
f) Trends in nonconformities;
g) Status of preventive and corrective actions;
h) Follow-up actions from earlier management reviews;
i) Fulfillment of objectives;
j) Changes that could affect the management system;
k) Appeals;
l) Analysis of complaints.

Refer to GVD 1130 Procedure.

5.8.3 The outputs from the management review include actions related to

a) Improvement of the management system and its processes
b) Improvement of services and accreditation process in conformity with the relevant standards and expectations of interested parties,
c) Need for resources, and
d) Defining or redefining of policies, goals, and objectives.

Refer to GVD 1130 Procedure.

5.9 Complaints

The GV Division has established procedures for dealing with complaints. The GV Division

a) Decides on the validity of the complaint,
b) Where appropriate, ensures that a complaint concerning an accredited CAB is first addressed by the CAB,
c) Takes appropriate actions and assess their effectiveness,
d) Records all complaints and actions taken, and
e) Responds to the complainant.

Refer to GVD 1445 Procedure.

6 Human Resources

6.1 Personnel Associated with the GV Division

6.1.1 The GV Division has a sufficient number of competent personnel (internal, external, temporary, or permanent, full time or part time) having the education, training, technical knowledge, skills, and experience necessary for handling the type, range, and volume of work performed.

Refer to GVD 1405 List.

6.1.2 The GV Division has access to a sufficient number of assessors, including lead assessors, and experts to cover all of its activities.

Refer to GVD 1405 List and personnel records.

6.1.3 The GV Division makes clear to each person concerned the extent and the limits of their duties, responsibilities, and authorities.

Refer to GVD 1405 List.

6.1.4 The GV Division requires all personnel to commit themselves formally by a signature or equivalent to comply with the rules defined by the GV Division. The commitment considers aspects relating to confidentiality and to independence from commercial and other interests, and any existing or prior association with CABs to be assessed.

Persons involved in GV Division accreditation activities must have a signed AMS Conflict-of-Interest and Confidentiality Statement (GVD 1420 Form) on file with the GV Division prior to providing services to CABs.

6.2 Personnel Involved in the Accreditation Process

6.2.1 The GV Division describes for each activity involved in the accreditation process

a) The qualifications, experience, and competence required, and
b) Initial and ongoing training required.

Refer to GVD 1115 Procedure, GVD 1450 Procedure, and GVD 1455 Procedure.

6.2.2 The GV Division has established procedures for selecting, training, and formally approving assessors and experts used in the assessment process.

Refer to GVD 1450 Procedure, GVD 1455 Procedure, and GVD 1460 Procedure.

6.2.3 The GV Division identifies the specific scopes in which each assessor and expert has demonstrated competence to assess.

Refer to personnel and training records.

6.2.4 The GV Division ensures that assessors and, where relevant, experts

a) Are familiar with accreditation procedures, accreditation criteria, and other relevant requirements,
b) Have undergone a relevant accreditation assessor training,
c) Have a thorough knowledge of the relevant assessment methods,
d) Are able to communicate effectively, both in writing and orally, in the required languages, and
e) Have appropriate personal attributes.

NOTE: Guidance on personal attributes may be found in publications such as ISO 19011.

Refer to GVD 1405 List, GVD 1450 Procedure, GVD 1455 Procedure, and personnel and training records.

6.3 Monitoring

6.3.1 The GV Division ensures the satisfactory performance of the assessment and the accreditation decision-making process by establishing procedures for monitoring the performance and competence of the personnel involved. In particular, the GV Division reviews the performance and competence of its personnel in order to identify training needs.

Refer to GVD 1455 Procedure. In addition, GV Division personnel receive yearly performance reviews (October 1 to September 30). Personnel should also receive mid-year performance reviews.

6.3.2 The GV Division conducts monitoring (e.g. by on-site observations, or by using other techniques such as review of assessment reports, feedback from CABs and peer monitoring of assessors) to evaluate an assessor's performance and to recommend appropriate follow-up actions to improve performance. Each assessor is observed on-site regularly, normally every three years, unless there is sufficient supporting evidence that the assessor is continuing to perform competently.

Refer to GVD 1455 Procedure.

6.4 Personnel Records

6.4.1 The GV Division maintains records of relevant qualifications, training, experience, and competence of each person involved in the accreditation process. Records of training, experience, and monitoring are kept up to date.

Refer to personnel and training records.

6.4.2 The GV Division maintains up-to-date records on assessors and experts consisting of at least the following:

a) Name and address;
b) Position held and for external assessors and experts, the position held in their own organization;
c) Educational qualifications and professional status;
d) Work experience;
e) Training in management systems, assessment, and conformity assessment activities;
f) Competence for specific assessment tasks;
g) Experience in assessment and results of their regular monitoring.

Refer to personnel and training records.

7 Accreditation Process

7.1 Accreditation Criteria and Information

7.1.1 The general criteria for accreditation of CABs are those set out in the relevant normative documents such as International Standards and Guides for the operation of CABs.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

7.1.2 The GV Division makes publicly available, and update at adequate intervals, the following:

a) Detailed information about its assessment and accreditation processes, including arrangements for granting, maintaining, extending, reducing, suspending, and withdrawing accreditation;

b) A document or reference documents containing the requirements for accreditation, including technical requirements specific to each field of accreditation, where applicable;
c) General information about the fees relating to the accreditation;
d) A description of the rights and obligations of CABs;
e) Information on the accredited CABs as described in 8.2.1;
f) Information on procedures for lodging and handling complaints and appeals;
g) Information about the authority under which the accreditation program operates;
h) A description of its rights and duties;
i) General information about the means by which it obtains financial support;
j) Information about its activities and stated limitations under which it operates;
k) Information about the related bodies as described in 4.3.7, if applicable.

The GV Division makes the information available on its Auditing Services website at www.ams.usda.gov/GVDaudits. The information may be found in this manual, GVD 1000 Procedure, and GVD 1012 Procedure.

7.2 Application for Accreditation

7.2.1 The GV Division requires a duly authorized representative of the applicant CAB to make a formal application that includes the following:

a) General features of the CAB, including corporate entity, name, addresses, legal status, and human and technical resources;
b) General information concerning the CAB such as its activities, its relationship in a larger corporate entity if any, and addresses of all its physical location(s) to be covered by the scope of accreditation;
c) A clearly defined, requested, scope of accreditation;
d) An agreement to fulfill the requirements for accreditation and other obligations of the CAB, as described in 8.1.

Refer to GVD 1000 Procedure, GVD 1012 Procedure, and LS 313 Form.

7.2.2 The GV Division requires the applicant CAB to provide at least the following information relevant to the accreditation prior to commencement of the assessment:

a) A description of the conformity assessment services that the CAB undertakes, and a list of standards, methods or procedures for which the CAB seeks accreditation, including limits of capability where applicable;
b) A hard copy and an electronic copy of the quality manual of the CAB, and relevant associated documents and records, such as information on participation in proficiency testing as described in 7.15, where applicable.

Refer to GVD 1000 Procedure, and GVD 1012 Procedure.

7.2.3 The GV Division reviews for adequacy the information supplied by the CAB.

Refer to GVD 1000 Procedure.

7.3 Resource Review

7.3.1 The GV Division reviews its ability to carry out the assessment of the applicant CAB, in terms of its own policy, its competence, and the availability of suitable assessors and experts.

Refer to GVD 1115 Procedure.

7.3.2 The review also includes the ability of the GV Division to carry out the initial assessment in a timely manner.

Refer to GVD 1115 Procedure.

7.4 Subcontracting the Assessment

The GV Division does not outsource assessments at this time. Therefore, the requirements in this section do not apply to the GV Division.

7.4.1 The GV Division shall normally undertake the assessment on which accreditation is based. The GV Division shall not subcontract the decision-making. If the GV Division subcontracts assessments, it shall have a policy describing the conditions under which subcontracting may take place. A properly documented agreement covering the arrangements, including confidentiality and conflict of interest, shall be drawn up.

NOTE: Contracting of external individual assessors and experts is not considered as subcontracting.

7.4.2 The GV Division

a) Shall take full responsibility for all subcontracted assessments and shall itself have competence in the decision-making,
b) Shall maintain its responsibility for granting, maintaining, extending, reducing, suspending, or withdrawing accreditation,
c) Shall ensure that the body and its personnel involved in the assessment process, to which assessment has been subcontracted, are competent and comply with the applicable requirements of this document, and any provisions and guidelines given by the subcontracting accreditation body, and
d) Shall obtain the written consent of the CAB to use a particular subcontractor.

7.4.3 The GV Division shall list the subcontractors it uses for assessments and shall have means for assessing and monitoring their competence and for recording the results.

7.5 Preparation for Assessment

7.5.1 Before the initial assessment, a preliminary visit may be conducted with the agreement of the CAB. This visit may result in identification of deficiencies in the system of the applicant CAB or its competencies. The GV Division has clear rules and exercises due care to avoid consultancy during such activities.

Refer to GVD 1012 Procedure.

7.5.2 The GV Division formally appoints an assessment team consisting of a lead assessor, and where required, a suitable number of assessors and/or experts for each specific scope. When selecting the assessment team, the GV Division ensures that the expertise brought to each assignment is appropriate. In particular, the team as a whole

a) Has appropriate knowledge of the specific scope for which accreditation is sought, and
b) Has understanding sufficient to make a reliable assessment of the competence of the CAB to operate within its scope of accreditation.

Refer to GVD 1102 Procedure.

7.5.3 The GV Division ensures that team members act in an impartial and non-discriminatory manner. In particular,

a) Assessment team members have not provided consultancy to the CAB which might compromise the accreditation process and decision, and
b) In accordance with the provisions of 6.1.4, the assessment team members must inform the GV Division, prior to the assessment, about any existing, former, or envisaged link or competitive position between themselves or their organization and the CAB to be assessed.

Refer to GVD 1102 Procedure.

7.5.4 The GV Division informs the CAB of the names of the members of the assessment team and the organization they belong to, sufficiently in advance to allow the CAB to object to the appointment of any particular assessor or expert. The GV Division has a policy for dealing with such objections.

Refer to GVD 1000 Procedure and GVD 1102 Procedure.

7.5.5 The GV Division clearly defines the assignment given to the assessment team. The task of the assessment team is to review the documents collected from the CAB and to conduct the on-site assessment.

Refer to GVD 1102 Procedure.

7.5.6 The GV Division has established procedures for sampling (if applicable) where the scope of the CAB covers a variety of specific conformity assessment services. The procedures ensure that the assessment team witnesses a representative number of examples to ensure proper evaluation of the competence of the CAB.

Refer to GVD 1012 Procedure.

7.5.7 For initial assessments, in addition to visiting the main or head office, visits are made to all other premises of the CAB from which one or more key activities are performed and which are covered by the scope of accreditation.

NOTE: Key activities include: policy formulation, process and/or procedure development and, as appropriate, contract review, planning conformity assessments, review, approval, and decision on the results of conformity assessments.

Refer to GVD 1012 Procedure

7.5.8 For surveillance and reassessment, where the CAB works from various premises, the GV Division establishes procedures for sampling to ensure proper assessment. All premises from which one or more key activities are performed should be assessed within a defined timeframe.

Refer to GVD 1012 Procedure

7.5.9 The GV Division agrees, together with the CAB and the assigned assessment team, to the date and schedule for the assessment. However, it remains the responsibility of the GV Division to pursue a date that is in accordance with the surveillance and reassessment plan.

Refer to GVD 1000 Procedure.

7.5.10 The GV Division ensures that the assessment team is provided with the appropriate criteria documents, previous assessment records, and the relevant documents and records of the CAB.

Refer to GVD 1000 Procedure and GVD 1102 Procedure.

7.6 Document and Record Review

7.6.1 The assessment team reviews all relevant documents and records supplied by the CAB (as described in 7.2.1 and 7.2.2) to evaluate its system, as documented, for conformity with the relevant standard(s) and other requirements for accreditation.

Refer to GVD 1000 Procedure.

7.6.2 The GV Division may decide not to proceed with an on-site assessment based on the nonconformities found during document and record review. In such cases, the nonconformities are reported in writing to the CAB.

Refer to GVD 1000 Procedure.

7.7 On-site Assessment

7.7.1 The assessment team commences the on-site assessment with an opening meeting at which the purpose of the assessment and the accreditation criteria are clearly defined, and the assessment schedule, as well as the scope for the assessment, is confirmed.

Refer to GVD 1012 Procedure.

7.7.2 The assessment team conducts the assessment of the conformity assessment services of the CAB at the premises of the CAB from which one or more key activities are performed and, where relevant, performs witnessing at other selected locations where the CAB operates, to gather objective evidence that the applicable scope the CAB is competent and conforms to the relevant standard(s) and other requirements for accreditation.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

7.7.3 The assessment team witnesses the performance of a representative number of staff of the CAB to provide assurance of the competence of the CAB across the scope of accreditation.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

7.8 Analysis of Findings and Assessment Report

7.8.1 The assessment team analyzes all relevant information and evidence gathered during the document and record review and the on-site assessment. This analysis is sufficient to allow the team to determine the extent of

competence and conformity of the CAB with the requirements for accreditation. The teams' observations on areas for possible improvement may also be presented to the CAB. However, consultancy is not provided.

Refer to GVD 1000 Procedure.

7.8.2 Where the assessment team cannot reach a conclusion about a finding, the team should refer back to the GV Division for clarification.

Refer to GVD 1000 Procedure.

7.8.3 The GV Division's reporting procedures ensure that the following requirements are fulfilled.

a) A meeting takes place between the assessment team and the CAB prior to leaving the site. At this meeting, the assessment team provides a written and/or oral report on its findings obtained from the analysis (see 7.8.1). An opportunity is provided for the CAB to ask questions about the findings, including nonconformities, if any, and their basis.
b) A written report on the outcome of the assessment is promptly brought to the attention of the CAB. This assessment report contains comments on competence and conformity, and identifies nonconformities, if any to be resolved in order to conform to all of the requirements for accreditation.
c) The CAB is invited to respond to the assessment report and to describe specific actions taken or planned to be taken, within a defined time, to resolve any identified nonconformities.

Refer to GVD 1000 Procedure.

7.8.4 The GV Division remains responsible for the content of the assessment report, including nonconformities, even if the lead assessor is not a permanent staff member of the GV Division.

Refer to GVD 1000 Procedure.

7.8.5 The GV Division ensures that the responses of the CAB to resolve nonconformities are reviewed to see if the actions appear to be sufficient and effective. If the CAB responses are found not to be sufficient, further information is requested. Additionally, evidence of effective implementation of actions taken may be requested, or a follow-up assessment may be carried out to verify effective implementation of corrective actions.

Refer to GVD 1000 Procedure.

7.8.6 The information provided to the accreditation decision-maker(s) includes the following, as a minimum:

a) Unique identification of the CAB;
b) Date(s) of the on-site assessment;
c) Names(s) of the assessor(s) and/or experts involved in the assessment;
d) Unique identification of all premises assessed;
e) Proposed scope of accreditation that was assessed;
f) The assessment report;
g) A statement on the adequacy of the internal organization and procedures adopted by the CAB to give confidence in its competence, as determined through its fulfillment of the requirements for accreditation;
h) Information on the resolution of all nonconformities;
i) Any further information that may assist in determining fulfillment of requirements and the competence of the CAB;

j) Where applicable, a summary of the results of proficiency testing or other comparisons conducted by the CAB and any actions taken as a consequence of the results;
k) Where appropriate, a recommendation as to granting, reducing, or extending accreditation for the proposed scope.

Refer to GVD 1110 Form.

7.9 Decision-Making and Granting Accreditation

7.9.1 The GV Division, prior to making a decision, must be satisfied that the information (see 7.8.6) is adequate to decide that the requirements for accreditation have been fulfilled.

Refer to GVD 1000 Procedure and GVD 1115 Procedure.

7.9.2 The GV Division, without undue delay, makes the decision on whether to grant or extend accreditation on the basis of an evaluation of all information received (see 7.8.6) and any other relevant information.

Refer to GVD 1000 Procedure and GVD 1115 Procedure.

7.9.3 Where the GV Division uses the results of an assessment already performed by another accreditation body, it has assurance that the other accreditation body was operating in accordance with the requirements of ISO/IEC 17011:2004.

In such instances, the accreditation body must be "recognized". It may be a government entity operating as an accreditation body, a member of the International Accreditation Forum, or an accreditation body recognized by NIST under the NVCASE Program.

7.9.4 The GV Division provides an accreditation certificate to the accredited CAB. This accreditation certificate identifies (on the front page, if possible) the following:

a) The identity and logo of the GV Division;
b) The unique identity of the accredited CAB;
c) All premises from which one or more key activities are performed and which are covered by the accreditation;
d) The unique accreditation number of the accredited CAB;
e) The effective date of granting of accreditation and, as applicable, the expiry date;
f) A brief indication of, or reference to, the scope of accreditation; and
g) A statement of conformity and a reference to the standard(s) or other normative document(s), including issue or revision used for assessment of the CAB.

Refer to GVD 1012 Procedure and GVD 1012 Certificate.

7.9.5 The accreditation certificate also identifies the following:

a) For certification bodies:

1) The type of certification,
2) The standards or normative documents, or regulatory requirements or types thereof, to which products, personnel, services, or management systems are certified, as applicable,
3) Industry sectors, where relevant,

4) Product categories, where relevant, and
5) Personnel categories, where relevant;

Refer to GVD 1012 Procedure.

b) For inspection bodies:

The GV Division does not conduct assessments of inspection bodies at this time. Therefore, the requirements in this section do not apply to the GV Division.

1) The type of inspection body (e.g. as defined in ISO/IEC 17021),
2) The field and range of inspection for which accreditation has been granted, and
3) The regulations, standards, or specifications or types thereof containing the requirements against which the inspection is to be performed, as applicable;

c) For calibration laboratories:

The GV Division does not conduct assessments of calibration laboratories at this time. Therefore, the requirements in this section do not apply to the GV Division.

1) The calibrations, including the types of measurements performed, the measurement ranges and the best measurement capability (BMC) or equivalent;

d) For testing laboratories:

The GV Division does not conduct assessments of testing laboratories at this time. Therefore, the requirements in this section do not apply to the GV Division.

1) The tests or types of tests performed and materials or products tested and, where appropriate, the methods used.

7.10 Appeals

7.10.1 The GV Division has established procedures to address appeals by CABs.

Refer to GVD 1000 Procedure.

7.10.2 The GV Division

a) Appoints a person, or group of persons, to investigate the appeal who are competent and independent of the subject of the appeal,
b) Decides on the validity of the appeal,
c) Advises the CAB of the final decision(s) of the GV Division,
d) Takes follow-up action where required, and
e) Keeps records of all appeals, of final decisions, and of follow-up actions taken.

Refer to GVD 1445 Procedure.

7.11 Reassessment and Surveillance

7.11.1 Reassessment is similar to an initial assessment as described in 7.5 to 7.9, except that experience gained during previous assessments are taken into account. Surveillance on-site assessments are less comprehensive then reassessments.

Refer to GVD 1000 Procedure, GVD 1012 Procedure

7.11.2 The GV Division has established procedures and plans for carrying out periodic surveillance on-site assessments, other surveillance activities and reassessments at sufficiently close intervals to monitor the continued fulfillment by the accredited CAB of the requirements for accreditation.

Refer to GVD 1012 Procedure, GVD 1115 Procedure

7.11.3 The GV Division designs its plan for reassessment and surveillance of each accredited CAB so that representative samples of the scope of accreditation are assessed on a regular basis.

The interval between on-site assessments, whether reassessment or surveillance, depends on the proven stability that the services of the CAB have reached.

The GV Division relies on either reassessment alone or a combination of reassessment and surveillance, as follows:

a) If based on reassessment alone, then the reassessment takes place at intervals not exceeding 2 years; or
b) If the combination of reassessment and surveillance is relied upon, then the GV Division undertakes a reassessment at least every 5 years. However, the interval between the surveillance on-site assessments should not exceed 2 years.

It is, however, recommended that the first surveillance on-site assessment be carried out no later than 12 months from the date of initial accreditation.

Refer to GVD 1012 Procedure

7.11.4 Surveillance on-site assessments are planned taking into account other surveillance activities.

Refer to GVD 1012 Procedure

7.11.5 When, during surveillance or reassessments, nonconformities are identified, the GV Division defines strict time limits for corrective actions to be implemented.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

7.11.6 The GV Division confirms the continuation of accreditation, or decides on the renewal of accreditation, based on the results of surveillance and reassessments described above.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

7.11.7 The GV Division may conduct extraordinary assessments as a result of complaints or changes (see 8.1.2), etc. The GV Division does advise CABs of this possibility.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

7.12 Extending Accreditation

The GV Division, in response to an application, for an extension of scope of an accreditation already granted, undertakes the necessary activities to determine whether or not the extension may be granted. Where appropriate, assessment and granting procedures are as defined in 7.5 to 7.9.

Refer to GVD 1000 Procedure.

7.13 Suspending, Withdrawing, or Reducing Accreditation

7.13.1 The GV Division has established procedures for the suspensions, withdrawal, or reduction of the scope of accreditation.

NOTE: Depending on the type of conformity assessment, the rules set by the GV Division may differ.

Refer to GVD 1000 Procedure.

7.13.2 The GV Division makes decisions to suspend and/or withdraw accreditation when an accredited CAB has persistently failed to meet the requirements of accreditation or to abide by the rules for accreditation.

NOTE: The CAB may ask for suspension or withdrawal of accreditation.

Refer to GVD 1000 Procedure.

7.13.3 The GV Division makes decisions to reduce the scope of accreditation of the CAB to exclude those parts where the CAB has persistently failed to meet the requirements for accreditation, including competence.

NOTE: The CAB may ask for reduction of its scope of accreditation.

Refer to GVD 1000 Procedure.

7.14 Records on CABs

7.14.1 The GV Division maintains records on CABs to demonstrate that requirements for accreditation, including competence, have been effectively fulfilled.

Refer to client files.

7.14.2 The GV Division keeps the records on CABs secure to ensure confidentiality. The records on CABs are managed appropriately in a manner as described in 5.4.

Refer to GVD 1412 Procedure.

7.14.3 Records on CABs include

a) Relevant correspondence,
b) Assessment records and reports,
c) Records of committee deliberations, if applicable, and accreditation decisions, and
d) Copies of accreditation certificates.

Refer to GVD 1412 Procedure.

7.15 Proficiency Testing and Other Comparisons for Laboratories

The GV Division does not conduct assessments of laboratories at this time. Therefore, the requirements in this section do not apply to the GV Division.

7.15.1 The GV Division has established procedures to take into account, during the assessment and the decision-making process, the laboratory's participation and performance in proficiency testing.

7.15.2 The GV Division may organize proficiency testing or other comparisons itself, or may involve another body judged to be competent. The GV Division maintains a list of appropriate proficiency testing and other comparison programs.

NOTE: Guidelines on operation and selection of proficiency testing and related definitions exist in ISO/IEC Guide 43-1 and ISO/IEC Guide 43-2.

7.15.3 The GV Division ensures that its accredited laboratories participate in proficiency testing or other comparison programs, where available and appropriate, and that corrective actions are carried out when necessary. The minimum amount of proficiency testing and the frequency of participation are specified in cooperation with interested parties and are appropriate in relation to other surveillance activities.

NOTE 1: It is recognized that there are particular areas where proficiency testing is impractical.

NOTE 2: Proficiency testing may also be used in many type s of inspection. Clause 7.15 should be read in this sense.

8 Responsibilities of the GV Division and the CAB

8.1 Obligations of the CAB

8.1.1 The GV Division requires the CAB to conform to the following

a) The CAB commits to fulfill continually the requirements for accreditation set by the GV Division for the areas where accreditation is sought or granted. This includes agreement to adapt to changes in the requirements for accreditation, as set out in 8.2.4.
b) When requested, the CAB affords such accommodation and cooperation as is necessary to enable the GV Division to verify fulfillment of requirements for accreditation. This applies to all premises where the conformity assessment services take place.
c) The CAB provides access to information, documents, and records as necessary for the assessment and maintenance of the accreditation.

d) The CAB provides access to those documents that provide insight into the level of independence and impartiality of the CAB from its related bodies, where applicable.
e) The CAB arranges the witnessing of CAB services when requested by the GV Division.
f) The CAB claims accreditation only with respect to the scope for which it has been granted accreditation.
g) The CAB does not use its accreditation in such a manner as to bring the GV Division into disrepute.
h) The CAB pays fees as is determined by the GV Division.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

8.1.2 The GV Division requires that it is informed by the accredited CAB, without delay, of significant changes relevant to its accreditation, in any aspect of its status or operation relating to

a) Its legal, commercial, ownership, or organizational status,
b) The organization, top management, and key personnel,
c) Main policies,
d) Resources and premises,
e) Scope of accreditation, and
f) Other such matters that may affect the ability of the CAB to fulfill requirements for accreditation.

Refer to GVD 1000 Procedure.

8.2 Obligations of the GV Division

8.2.1 The GV Division makes publicly available information about the current status of the accreditation that it has granted to CABs. This information is updated regularly. The information includes the following:

a) Name and address of each accredited CAB;
b) Dates of granting accreditation and expiry dates, as applicable;
c) Scopes of accreditation, condensed and/or in full. If only condensed scopes are provided, information shall be given on how to obtain full scopes.

Refer to GVD 1012 Procedure.

8.2.2 The GV Division provides the CAB with information about suitable ways to obtain traceability of measurement results in relation to the scope for which accreditation is provided.

Refer to GVD Newsroom – August 24, 2011, GV Division Website Q & A, GVD1012E Checklist, & GU1147MMA

8.2.3 The GV Division, where applicable, provides information about international arrangements in which it is involved.

Refer to GVD 1012 Procedure.

8.2.4 The GV Division gives due notice of any changes to its requirements for accreditation. It takes account of views expressed by interested parties before deciding on the precise form and effective date of the changes. Following a decision on, and publication of, the changed requirements, it verifies that each accredited body carries out any necessary adjustments.

Refer to GVD 1000 Procedure.

8.3 Reference to Accreditation and Use of Symbols

8.3.1 The GV Division, as proprietor of the accreditation symbol that is intended for use by its accredited CABs, has a policy governing its protection and use. The accreditation symbol must have, or be accompanied with, a clear indication as to which activity (as indicated in Clause 1) the accreditation is related. An accredited CAB is allowed to use this symbol on its reports or certificates issued within the scope of its accreditation.

The GV Division does not have an accreditation symbol at this time.

8.3.2 The GV Division takes effective measures to ensure that the accredited CAB

a) Fully conforms to the requirements of the GV Division for claiming accreditation status, when making reference to its accreditation in communication media such as the internet, documents, brochures, or advertising,
b) Only uses the accreditation symbols for premises of the CAB that are specifically included in the accreditation,
c) Does not make any statement regarding its accreditation that the GV Division may consider misleading or unauthorized,
d) Takes due care that no report or certificate nor any part thereof is used in a misleading manner,
e) Upon suspension or withdrawal of its accreditation (however determined), discontinues its use of all advertising matter that contains any reference to an accredited status, and
f) Does not allow the fact of its accreditation to be used to imply that a product, process, system, or person is approved by the GV Division.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.

8.3.3 The GV Division takes suitable action to deal with incorrect references to accreditation status, or misleading use of accreditation symbols found in advertisements, catalogues, etc.

NOTE: Suitable actions include request for corrective action, withdrawal of accreditation, publication of the transgression, and if necessary, other legal action.

Refer to GVD 1000 Procedure and GVD 1012 Procedure.