

**Quality and Accreditation Institute**  
**Centre for International Accreditation**



*Change Adapt Improve*

**POLICY ON ASSESSMENT,  
SURVEILLANCE AND REASSESSMENT**

**Effective from 1 February 2020**

**Issue No.: 02**

**Issue Date: November 2023**

Quality and Accreditation Institute		
Centre for International Accreditation		
Doc. No.: QAI CIA 016	Policy on Assessment, Surveillance and Reassessment	
Issue No.: 02	Issue Date: November 2023	Page No.: 1/4

## CHANGE HISTORY

Sl. No.	Doc No.	Current Issue No.	Revised Issue No.	Date of Issue	Reasons
1	QAI CIA 016	01	02	November 2023 (7 November 2023)	<ul style="list-style-type: none"> <li>Centre for Laboratory Accreditation (CLA) changed to Centre for International Accreditation (CIA)</li> <li>Office Address changed from A-34, Sector 48, Noida to 709, Wave Silver Tower, Sector-18, Noida</li> </ul>

## 1. Introduction

QAI CIA endeavours to comply with the requirements of ISO/IEC 17011:2017 as applicable from time to time. To ensure confidence in the results of the accredited laboratories and compliance to global needs, QAI also implements required ILAC and APAC policies and use guidance documents to assist in the uniform and harmonised approach of accreditation criteria.

## 2. Existing Policy for Assessment, Surveillance and Reassessment

Currently, QAI CIA accreditation cycle is of two years. There is an on-site surveillance in 12 months and reassessment is conducted before the expiry of accreditation within 24 months from the date of accreditation.

## 3. New Policy for Assessment, Surveillance and Reassessment

QAI CIA accreditation cycle will be of two years. There will be an on-site reassessment conducted before the expiry of accreditation within 24 months from the date of accreditation. An accredited CAB has to apply six months before the expiry of accreditation in order to complete all formalities for renewal of accreditation before the expiry of the current accreditation cycle so that continuity of the accreditation is maintained.

***This is in full compliance with the Clause 7.9.3 of ISO/IEC 17011:2017 which states "A sample of the scope of accreditation shall be assessed at least every two years. The time between consecutive on-site assessments shall not exceed two years."***

Further, accredited CAB is required to submit following information/documents/ records every year in the middle of the accreditation cycle. This is to ensure that the accredited CAB is continuously complying with the requirements of the applicable standard (ISO/IEC 17025:2017 or ISO 15189:2012 or ISO 20387 or ISO/IEC 17043 or ISO 17034 or ISO/IEC 17020) and any other requirements stipulated from time to time.

### A. Internal Audit

- A.1 Internal audit plan
- A.2 Date of last internal audit
- A.3 Summary of findings of last internal audit

### B. Management Review

- B.1 Management review plan
- B.2 Date of last management review
- B.3 Minutes of the last review

### C. Proficiency Testing/ External Quality Assessment Schemes/ Inter-laboratory comparisons (ILC)/ Any other method (e.g. use of CRMs)

- C.1 Proficiency testing plan to cover the accredited scope in a period of four years
- C.2 Details of participation in last one year
- C.3 Details of action taken for any unsatisfactory results

### D. Major Changes, if any

Any major changes in last one year (e.g. change in legal status, change in management and senior staff, change in testing scope etc.)

### E. Declaration by the Management (on the letter head)

A statement "This is to declare that the CAB has been complying to the requirements of ISO/IEC 17025:2017 or ISO 15189:2012 or ISO 20387 or ISO/IEC 17043 or ISO 17034 or ISO/IEC 17020 and any other requirements prescribed by the QAI CIA since last on-site assessment"

Quality and Accreditation Institute			
Centre for International Accreditation			
Doc. No.: QAI CIA 016		Policy on Assessment, Surveillance and Reassessment	
Issue No.: 02		Issue Date: November 2023	Page No.: 3/4

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709, Wave Silver Tower, Sector 18, Noida-201301, India

Email: [info@qai.org.in](mailto:info@qai.org.in) Website: [www.qai.org.in](http://www.qai.org.in)

Mobile No.: +91 8287841146

[LinkedIn](#) | [Twitter](#) | [Facebook](#) | [YouTube](#) | [Instagram](#)

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<b>Issue No.: 02</b>	<b>Issue Date: November 2023</b>	<b>Page No.: 4/4</b>