

ISO/IEC 17021:2011 Requirement Matrix



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ISO/IEC 17021:2011 and IAF Mandatory Documents	CB References and Attachments Identify document and sections as applicable	Conforms		AB Comments Include date new comment is added	CB Response (to AB Comments) Include date new comment is added
		Yes	No		
Sections are paraphrased. Refer to specific document for detail.					

Note: Entries in **bold** below reflect changes from ISO/IEC 17021:2006.

5.1.1 Legal entity.					
5.1.2 Certification agreement.					
5.1.3 Responsibility for certification decisions.					
5.2.1 Publicly accessible statement by top management regarding impartiality.					
5.2.2 Impartiality analysis and review by the impartiality committee.					
5.2.3 Not offering certification when relationships that threaten impartiality cannot be eliminated or minimized.					
5.2.4 Not certifying another CB for management systems.					
5.2.5 No management systems consultancy.					
5.2.6 No internal audits of certified clients.					
5.2.7 Not certifying a client when the CB's relationship with a management systems consultancy poses an unacceptable threat to impartiality.					
5.2.8 Not outsourcing audits to a management system consultancy organization.					
5.2.9 No CB marketing linked to management systems consultancy.					
5.2.10 Ensuring no conflict of interest of personnel.					
5.2.11 Response to any threats to impartiality.					
5.2.12 Personnel, internal and external, and committees, shall act impartially.					
5.2.13 Requiring personnel, internal and external, to reveal any potential conflict of interest.					
5.3.1 Risk and liability analysis.					
5.3.2 Evaluation of finances and sources of income for threats to impartiality, and review by the impartiality committee.					
6.1.1 Organizational structure, including duties, responsibilities and authorities for personnel and committees; and relationships to any other parts of the organization.					
6.1.2 Top management authority and responsibility.					
6.1.3 Rules for committees.					
6.2.1 Impartiality committee					
6.2.2-6.2.3 Documented composition, terms of reference, duties, authorities and competence of members, and responsibilities of the impartiality committee.					

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7.1.1 Processes for determining and demonstrating competence of all personnel involved in certification.					
7.1.2 Documented process for determining competence criteria.					
7.1.3 Documented processes for the initial evaluation and ongoing monitoring of competence and performance.					
7.1.4.1 Functions of management and administrative personnel					
7.1.4.2 Access to technical expertise.					
7.2.1 Competence of personnel managing audit programs.					
7.2.2 Access to sufficient auditors.					
7.2.3 Informing each person of their duties, responsibilities and authorities.					
7.2.4 Defined processes for selecting, training, authorizing and monitoring of auditors, and selection of experts, including the observation of an on-site audit for initial competence evaluation.					
7.2.5 Documented processes for demonstrating effective auditing, including the use of auditors with generic auditing knowledge and skills and knowledge and skills for auditing in specific technical areas. Based on ISO 19011.					
7.2.6 Ensuring auditors/experts familiar with requirements and access to up-to-date documented procedures and instructions.					
7.2.7 Use of auditors/experts with demonstrated competence.					
7.2.8 Providing specific training of auditors, experts and others, as needed.					
7.2.9 Knowledge and experience of person(s) taking certification decisions.					
7.2.10-7.2.12 Documented procedures for monitoring and measurement of performance and competence of personnel involved in audit and certification activities, including on-site observation.					
7.3 Written agreement for external auditors/experts.					
7.4 Personnel records.					
7.5.1 Process and enforceable arrangements for outsourcing.					
7.5.2 Not outsource the certification decision.					
7.5.3 CB responsibility for outsourced certification activities.					
7.5.4 Documented procedures for qualification and monitoring of bodies providing outsourced services; records of the qualification of auditors.					
8.1-8.1.4 Publicly accessible information.					
8.2-8.2.3 Certification documents.					

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8.3 Directory of certified clients.					
8.4.1 CB policy governing any mark it authorizes certified clients to use.					
8.4.2 CB shall not permit its marks to be applied to laboratory test, calibration or inspection reports.					
8.4.3 CB's requirements of the client organization regarding reference to certification.					
8.4.4 CB ownership of marks and reports and control of use and references.					
8.5—8.5.7 Policy and arrangements to safeguard confidentiality.					
8.6.1 Information provided by the CB to its clients.					
8.6.2 Notice to clients of changes by the CB.					
8.6.3 Notice to the CB of changes by a client.					
9.1.1.1 Development of an audit program for the full certification cycle.					
9.1.1.2 Audit program for initial, surveillance and recertification. Three year certification cycle. Adjustments to audit program.					
9.1.1.3 Taking account of certification or other audits.					
9.1.2.1 CB requirements for audit planning.					
9.1.2.2.1-9.1.2.2.2 Determining audit objectives.					
9.1.2.2.3 Determining audit scope.					
9.1.2.2.4 Determining audit criteria.					
9.1.2.3 Preparation of the audit plan.					
9.1.3 Process for selecting and appointing audit teams for competence needed, including 9.1.3.1 through 9.1.3.5.					
9.1.4 Documented procedures for determining auditor time, justification and records, including 9.1.4.1 and 9.1.4.2.					
9.1.5 Program for multi-site sampling.					
9.1.6 Communicating the defined tasks of the audit team to the audit team and client.					
9.1.7 Providing information about audit team members to provide the client sufficient time to object.					
9.1.8 Audit plan and dates communicated to client.					
9.1.9.1 Process for conducting on-site audits.					
9.1.9.2 Conducting the opening meeting.					
9.1.9.3-9.1.9.3.3 Communication during the audit.					
9.1.9.4 -9.1.9.4.2 Observers and guides.					
9.1.9.5-9.1.9.5.2 Collecting and verifying information.					
9.1.9.6-9.1.9.6.4 Identifying and recording audit findings to enable an informed certification decision.					
9.1.9.7 Preparing audit conclusions.					
9.1.9.8-9.1.9.8.3 Conducting the closing meeting.					
9.1.10.1 Written audit report for each audit.					

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9.1.10.2 Audit team leader responsible for the content of the audit report, which shall provide an accurate, concise and clear record of the audit to enable an informed decision, including a through j.					
9.1.11 CB requirements for client to analyze cause and describe correction and corrective actions within a defined time.					
9.1.12 CB review of corrections, identified causes , and corrective action by client to determine these are acceptable. CB shall verify effectiveness of actions. Evidence shall be recorded. Client shall be informed of the review and verification.					
9.1.13 Informing the client of CB's actions for verifying effective correction and corrective action.					
9.1.14 Certification decision by person(s) different from those that carried out the audits.					
9.1.15 Prior to granting initial certification, satisfactory correction and corrective action for "major" nonconformities and acceptable plans for minor nonconformities.					
9.2.1 Required application information.					
9.2.2.1 Application review by the CB.					
9.2.2.2 Following review, CB shall accept or decline an application. CB shall document reasons for declining an application					
9.2.2.3 Based on the application review, determination of competence needed for the audit team and certification decision.					
9.2.2.4 Appointment of an audit team with needed competences.					
9.2.2.5 Appointment of person(s) to make certification decision with needed competences.					
9.2.3 Initial certification audit in two stages.					
9.2.3.1.1 Stage 1 audit expectations.					
9.2.3.1.2 Stage 1 audit findings and concerns communicated to the client.					
9.2.3.1.3 Consideration of stage 2 audit arrangements based on stage 1 audit findings.					
9.2.3.2 Stage 2 audit.					
9.2.4 Analysis of stage 1 and stage 2 audits for initial certification audit conclusions.					
9.2.5-9.2.5.2 Information for the initial certification decision.					
9.3.1.1-9.3.1.2 Surveillance program					
9.3.2.1 Surveillance audit content					
9.3.2.2 Surveillance audits conducted at least once a year.					
9.3.3 Maintaining certification					
9.4.1.1 Recertification audit planned to evaluate continued					

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fulfillment and effectiveness of the management system.					
9.4.1.2 Recertification audit plan shall consider performance over the period of certification, including review of surveillance audit reports.					
9.4.1.3 For recertification audit planning consideration of the need for a stage 1 for significant changes.					
9.4.1.4 For recertification audit planning consideration of multiple sites or multiple management system standards.					
9.4.2.1 Recertification audit shall include an on-site audit that addresses effectiveness, improvement, and achievement of policies and objectives.					
9.4.2.2 For nonconformities from the recertification audit, the CB shall define time limits for correction and corrective action to be implemented prior to expiration of certification.					
9.4.3 Decisions on renewing certification based on the review of the recertification audit plus results over the period of certification plus complaints from users.					
9.5.1 Special audits for extensions to scope.					
9.5.2 CB documented process for short notice audits in response to complaints or suspension.					
9.6.1-9.6.7 Suspending, withdrawing or reducing certification					
9.7.1-9.7.8 Appeals					
9.8.1-9.8.10 Complaints					
9.9.1-9.9.4 Records on clients and applicants					
10.1 Management system requirements options					
10.2.1-10.2.4 Management system requirements in accordance with ISO 9001					
10.3.1-10.3.8 General management system requirements					
IAF Mandatory Documents					
IAF MD 1 Certification of Multiple Sites Based on Sampling					
IAF MD 2 Transfer of Accredited Certification of Management Systems					
IAF MD 3 Advanced Surveillance and Recertification Procedures (ASRP)					
IAF MD 4 Use of Computer Assisted Auditing Techniques (CAAT) for Accredited Certification of Management Systems					
IAF MD 5 Duration of QMS and EMS Audits					