Assessor Guide

(STQC/SAB/P03)
Issue :01

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0.1 Approval and Issue

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Reviewed by : Scheme Representative

Approved by : Head, SAB

Note:

- Scheme Representative is responsible for issue and distribution of this document including amendments.
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0.2 Amendment Record

Sl. No.	Date	Issue	Reason of Change / Change Details
1.	01-03-2021	01	First Issue

1. PREFACE

This Guide is to provide assistance to Lead Assessors & Technical assessors of STQC Approval Body. It describes the role of an Assessor in conducting the Assessment-related activities for STQC Approval Body.

The methodologies being described are basically to help an Assessor to be able to discharge his/ her responsibilities very effectively. Since an Assessor would be representing STQC Approval Body during the assessment of an applicant IT Testing Laboratory, the Assessor should understand STQC Approval Scheme and its approval process, its objectives as well as the assessment methodology.

An Assessor must ensure that he/she carries with him the following documents during onsite assessment of IT Testing Laboratory:

I.   ISO/IEC 17025:2005 'General Requirements for the Competence of Testing and Calibration Laboratories'

II.   STQC Approval criteria document STQC/SAB/D02

III.   STQC/SAB/F02, Assessment Forms

2. INTRODUCTION

STQC APPROVAL BODY provides third-party approval of Information Technology Testing laboratories engaged in testing software applications & systems for E-Governance Projects.

STQC Approval Body is committed to ensure that the approval requirements and assessment system for IT Testing laboratories are in line with international norms and practices based on STQC Approval Criteria detailed in STQC/SAB/D02.

STQC APPROVAL BODY assures itself of the competence of the laboratories it approves through a system of assessment in accordance with ISO/IEC 17025:2005 'General Requirements for the Competence of Testing and Calibration Laboratories' and Particular requirements for IT Testing Laboratories as per Approval Criteria.

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The assessment is carried out by a team of Assessors, led by a Lead Assessor, empanelled by STQC APPROVAL BODY.

The assessment is carried out systematically on all aspects of technical competence and of IT Testing IT Testing Laboratory management system. The objective evidence so collected forms the basis:

- for arriving at a judgment for recommendation of the team

- to specify the competence of IT Testing Laboratory in terms of its capability to perform the test(s) for which it is seeking approval or holds approval.

The objective of the assessment, however, is not to compile non-conformities as an evidence to justify denial of approval.

This guide has been prepared based on the general practices followed by international bodies and the experience of experts of the country. This document accordingly aims to:

a. provide the guidance to the Assessors during the assessment of a IT Testing Laboratory;
b. ensure uniformity of assessment and reporting; and
c. Eliminate ambiguities or doubts about the interpretation of requirements(s).

It is presumed that the Assessors, who have been nominated by the Approving Body, are fully aware of the Approval Scheme as per STQC/SAB/D01, its objectives and the on-site Assessment procedure. Assessment forms & Checklists given in STQC/SAB/F02, which will form a part of the Assessment Report.

This document shall guide the Lead Assessor and the Technical Assessor(s) in completing various forms & checklists and compile the assessment report.

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3. ASSESSOR ROLE

a. The objective of any on-site assessment is to obtain evidence on compliance with respect to ISO/IEC17025: 2005 'General Requirements for the Competence of Testing and Calibration Laboratories' and STQC Approval Criteria STQC/SAB/D02. Basically, the STQC APPROVAL BODY Assessor's role is to conduct on-site assessment of IT Testing Laboratory to adjudge the compliance to STQC Approval Criteria.

b. The Assessor shall also check that the IT Testing Laboratory meets other requirements of STQC APPROVAL BODY as per Approval Criteria for the relevant Discipline & Type of testing and has competence to perform the specific test(s) or specific type of tests.

c. The team members shall ensure that they are using the latest documents as per Master List of documents STQC/SAB/F05 which is available on the web-site for each assessment. Also pay their attention to the specific announcements on web-site pertaining to policy decisions and its transition period (if any) etc. before proceeding with the assessment.

d. Since IT Testing Laboratory approval requires formal recognition of competence to carry out specific tests or types of tests by a IT Testing Laboratory, an Assessor has also to consider conformities against these aspects in the assessment. Thus, an Assessor would be required to exercise his scientific & technical judgement and form his opinion regarding extent of conformity with respect to approval criteria.

e. Assessors are required to maintain the confidentiality on the matters/ subjects related to IT Testing Laboratory.

f. Notwithstanding the strength of the STQC APPROVAL BODY system, the success of the approval scheme depends on the Assessors who perform on-site assessment. Thus, the Assessors play a vital role in determining the credibility and value of the approval.

g. In case the assessment team members observe gross non-conformities in the documents and their implementation, the lead assessor shall consult with HEAD-STQC APPROVAL BODY Secretariat for abandoning the assessment process.

h. The role of Lead Assessor, Technical Assessor, Technical Expert and Technical Observer during assessment of testing and calibration laboratories is given below:

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3.1. Role of Lead Assessor

Before the start of Assessment the Lead Assessor should prepare an Assessment Plan in STQC/SAB/F02 ANNEXURE-01 which should include the laboratory locations/ departments / sections / areas / activities to be assessed and assignment to various Assessors based on their expertise. The Observer (Potential Assessor) should also be guided about the conduct of assessment.

The Lead Assessor must review the Laboratory's documented Management System to verify compliance with the Approval Criteria requirements of ISO / IEC 17025: 2005 and STQC/SAB/D02. He should assess that the documented Management System is indeed implemented & effective, as described and record observations in Assessor Notings STQC/SAB/F02 ANNEXURE-02. He should also complete Checklist STQC/SAB/F02 ANNEXURE-14, and record conclusion / comments related to the requirements of respective clause number. All Non-Conformity(ies) must be identified and reported, separately on each sheet in STQC/SAB/F02 ANNEXURE-03. No non conformity shall be closed during the assessment. Laboratory shall evaluate the root cause of the non conformity and propose correction and corrective action. The maximum time period given for a laboratory to close the Nonconformity is two months from the date of assessment.

As a leader of the Assessment team, lead assessor would collect the reports and documents from all technical assessors including his/her own report and compile it. A consolidated statement of Non-Conformities raised during the Assessment shall be listed in STQC/SAB/F02 ANNEXURE-05. If, during Surveillance or Re-assessment, a case of critical system failure and gross negligence in technical aspects is noticed, the Lead Assessor will at the earliest inform NABL and elaborately bring it out in the Summary of Assessment report STQC/SAB/F02 ANNEXURE-09 with the recommendations.

Lead Assessor must get an endorsement from the laboratory on STQC/SAB/F02 ANNEXURE-09 and hand over a photocopy of the

STQC/SAB/F02 ANNEXURE-09 along with STQC/SAB/F02 ANNEXURE-03 forms to the Laboratory to enable them to take corrective actions. Copies of Form STQC/SAB/F02 ANNEXURE-07, STQC/SAB/F02 ANNEXURE-08 & STQC/SAB/F02 ANNEXURE-10 shall also be given to the laboratory.

The Lead Assessor is also required to monitor the performance of Technical Assessor(s), Expert(s) and the Observer(s). The lead assessor shall also recommend whether the Observer is capable to perform the role of a Technical Assessor in future, if asked By Approving Body. The Lead assessor's comments / rating for each Technical Assessor shall be enclosed with the report in STQC/SAB/F02 ANNEXURE-15.

3.2. Role of Technical Assessor

The Technical Assessor should clearly understand the areas / activities to be assessed by him. He must review the Laboratory's documented system to verify compliance with the requirements of ISO/IEC 17025: 2005 and Approval Criteria STQC/SAB/D02 and other policies/ guidelines of Approving Body. He should assess to verify that the documented SOPs, test methods, records are indeed implemented & effective, and record observations in STQC/SAB/F02 ANNEXURE-02. He should also complete Assessment Checklist STQC/SAB/F02 ANNEXURE-14 related to the requirements of respective clauses and using STQC/SAB/F02 ANNEXURE-04 for Test(s) /retesting witnessed by him. The Technical Assessor must review and confirm his acceptance of demonstrated capability. Assessors shall review the competence of the proposed Authorised Signatory(ies) and recommend in STQC/SAB/F02 ANNEXURE-07. Assessors shall refer relevant criteria for requirements of authorised signatory.

All Non-Conformity (ies) must be identified and reported, separately on each sheet in STQC/SAB/F02 ANNEXURE-03. The Scope of Approval to be granted to the Laboratory must be checked thoroughly with necessary recommendations on STQC/SAB/F02 ANNEXURE-08 for testing laboratories and signed on each page with indication on total number of pages. Any deletions or alterations in the scope must be clearly brought out and signed by both the Laboratory Representative and the Assessor.

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The report should be handed over to the Lead Assessor. When the Lead Assessor, also performs the job of a Technical Assessor, he should follow the above procedure.

3.3. Role of Technical Expert

The role of Technical Expert is same as of Technical Assessor, except he will seek guidance of Lead Assessor in filling the relevant forms, checklist etc.

3.4. Role of Observer

The Observer (Potential Assessor) will be assigned to accompany the Lead Assessor and Technical Assessor(s) as per the schedule provided to him. He shall be guided by the Lead Assessor and the Technical Assessor(s). He is not required to submit any report to the Lead Assessor

4. ASSESSOR ASSIGNMENT PROCEDURE

4.1 If the application form and/ or associated documents received from IT Testing Laboratory are acceptable to STQC APPROVAL BODY, it shall appoint Assessment Team and inform the IT Testing Laboratory. STQC APPROVAL BODY Secretariat, in consultation with Lead Assessor, will constitute the composition of team. Laboratories have the right to object to the appointment of a particular Lead Assessor/ Assessor, and in such cases, STQC APPROVAL BODY may offer an alternative to the extent possible, if the reasons given by the IT Testing Laboratory are acceptable to STQC APPROVAL BODY.

4.2 Assessors are chosen to the extent possible from the empanelled list of Assessors maintained by STQC APPROVAL BODY based on individual's technical expertise vis-à-vis a IT Testing IT Testing Laboratory requested scope of approval. The number of Assessors in the team shall depend on the range and volume of calibration or testing involved. For multi-disciplinary IT Testing Laboratory, Assessors shall be selected in such a manner so as to cover each discipline and its range/ scope of operation.

4.3 Lead Assessor/ Assessor(s) are informed subsequently after the IT Testing Laboratory has agreed on the membership of the team.

5. PROCEDURE FOR ASSESSMENT OF NEW APPLICANT LABORATORIES

5.1 STQC APPROVAL BODY shall first appoint the Lead Assessor and send IT Testing IT Testing Laboratory Quality Manual and application to the Lead Assessor.

5.2 The Lead Assessor shall examine the Quality Manual and shall submit Adequacy Report to STQC APPROVAL BODY within 30 days. Once the IT Testing Laboratory satisfactorily address the inadequacies of the Quality manual; STQC APPROVAL BODY shall plan the pre-assessment in consultation with the lead assessor and IT Testing Laboratory.

5.3 The identification, classification and expression of non-conformity are given below:

A non-conformity can be identified and can be one or more of the following:

    related to the management system

    related to technical activities

    failure to fulfill the required objectives

    difference between work practices and documented instructions

A non-conformity can be classified as Major or Minor.

A major non-conformity is:

    absence of a procedure required by standard

    significant failure to implement a procedure

    direct-effect on quality of results

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All other non-conformities are minor.

The statement of non-conformity must be expressed as at least one of the following:
non-blaming statements of fact
based on recorded objective evidence
directly related to specific documented requirement

5.4 STQC APPROVAL BODY shall then inform the Lead Assessor to undertake Pre-Assessment visit to IT Testing Laboratory to assess the Management System and the quantum of work, and take the following action:

(i) If the Management System is acceptable, the Lead Assessor shall inform STQC APPROVAL BODY recommending on-site assessment.

(ii) The Lead Assessor shall handover to the IT Testing Laboratory a copy of the complete report covering areas of inadequacies and actions to be taken by the IT Testing Laboratory in the forms given in STQC APPROVAL BODY and send the original Pre-assessment report to STQC APPROVAL BODY. On receipt of this report, STQC APPROVAL BODY shall take up the matter with the IT Testing Laboratory for necessary action.

(iii) In case of no or minor inadequacies, the Lead Assessor may advise STQC APPROVAL BODY on constitution of Assessment Team and date of assessment.

(iv) STQC APPROVAL BODY shall inform Assessors and decide the dates of assessment consulting all concerned.

5.5 STQC APPROVAL BODY shall send a copy of the application to each Assessor; a copy of Quality Manual, if available, (otherwise STQC APPROVAL BODY instructs the IT Testing Laboratory to send the copy of quality manual). The Assessor may also seek any further information like test procedures etc. from the IT Testing Laboratory, in order to better prepare for their assigned areas of responsibility.

5.6 To the extent possible, the assessment shall be completed in one phase, even for multi-disciplinary laboratories. There shall be only one Lead Assessor for entire assessment. For large and multidisciplinary laboratories, it may not be possible to conduct the assessment in one phase and may be completed in two or more phases

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6. PRE-ASSESSMENT

6.1. Objective

The objective of a Pre-Assessment carried out by STQC APPROVAL BODY is:

- to have a better understanding of the documentation;

- to familiarize with the facilities, sites/ location, circumstances and to have better knowledge of operations;

- to make the methodology to be adopted for the assessment;

- to review the scope of approval and to ascertain the requirement of the number of Assessors/ experts and the duration of assessment.

The Lead Assessor must take into consideration the travelling distance and time required for visit to different sites and also for witnessing site activities.

6.2. Visit

During the Pre-Assessment visit made by the Lead Assessor, the following actions should be carried out in every case:

- explaining the purpose of the assessment, the tasks of Assessors and making clear to the IT Testing Laboratory the methodology to be adopted;
- explaining the obligations on the part of the IT Testing Laboratory to confirm by demonstration that the management of the IT Testing Laboratory understands the procedures;
- reviewing the management system documents including the availability of standard operating procedures to cover the tests/ measurements that it is carrying out, Internal Audit& Management Review reports;
- reviewing the scope of the approval;
- Giving an overview of the approval process.
- Obtain signatures on STQC APPROVAL BODY Terms and Conditions for maintaining Approval in Approval Agreement if not submitted by IT Testing Laboratory earlier.

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7. ON-SITE ASSESSMENT

One day before the day of assessment, the Assessment Team shall meet and plan assessment program. This shall include the distribution of work amongst the Assessors. The format of the assessment plan to be finalized is given at STQC/SAB/F02 ANNEXURE-01. The time schedules in the assessment plan shall be realistic so that each activity can be completed as scheduled. Lead assessor shall ensure proper time management of the team members during assessment.

7.1. Opening Meeting:

a. To begin with the Lead Assessor and the team shall have an opening meeting with IT Testing Laboratory representatives where the team and the IT Testing Laboratory personnel will introduce each other.

b. The Assessment team should get acquainted with the IT Testing Laboratory, the departments/ sections and their locations.

c. The Lead Assessor should make it clear in his opening remarks that the object of the assessment is to assess the work of IT Testing Laboratory according to the ISO/ IEC 17025: 2005 'General Requirements for the Competence of Testing and Calibration Laboratories' and Approval criteria STQC/SAB/D02.

d. The Lead Assessor shall ensure that he / she explains the objective and scope of assessment and what is expected from the IT Testing Laboratory during the assessment.

e. The Lead Assessor shall present the assessment plan to IT Testing Laboratory representatives. The IT Testing Laboratory will be requested to assign guide/ co-coordinator to accompany each Assessor.

f. The Lead Assessor shall assure the IT Testing Laboratory that all findings will be treated in strict confidence.

g. The Lead Assessor shall inform the IT Testing Laboratory that the team members shall not be approached by the IT Testing Laboratory for closure of NCs during the assessment and the response to the closure of NCs has to be sent by IT Testing Laboratory after conducting root cause analysis.

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h. Lead assessor shall obtain signatures of all participants of opening meeting in STQC/SAB/F02 ANNEXURE-06.

Note: The assessment team should spend considerable time for the opening meeting especially to explain the audit objectives and audit scope of the assessment.

7.2. On-site Assessment Procedure:

a. The Assessment Team shall proceed to various sections of the IT Testing Laboratory as planned earlier. Assessors must be objective and should not convey the impression of having superior knowledge and judgement.

b. Assessor(s) should thoroughly examine the technical competence of the IT Testing Laboratory in terms of manpower, qualification, experience, up to date knowledge, equipment and other related elements.

c. While interviewing the IT Testing Laboratory personnel, the assessors should create a comfortable environment to gather all information needed to accurately evaluate the competence of the IT Testing Laboratory.

d. The technical competence of the IT Testing Laboratory personnel could be verified by examining their qualification, experience, training relevant to the job/ responsibilities assigned and observations during the tests.

e. Assessors shall track the status of the IT Testing IT Testing Laboratory authorized signatories, which are detailed in the IT Testing IT Testing Laboratory application form and its Quality Manual/ Procedure Manual/Work instructions.

f. Assessors shall check the authorized signatories of the IT Testing Laboratory based on the following criteria and recommend to STQC APPROVAL BODY for approval:

- Qualification and experience as detailed in relevant specific criteria.
- Position in overall staff structure.

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- Familiarity with the test procedures and awareness of any limitations of these procedures.
- Knowledge of the procedures for recording, reporting and checking results.
- Awareness of the requirements and conditions for STQC APPROVAL BODY approval, particularly those related to test reports.

g. Test methods used by the IT Testing Laboratory should be in accordance to standard practices which are properly documented, controlled and appropriately validated.

h. Assessors should ascertain that the SW Testing tools if any used by the IT Testing Laboratory/SETL is validated/has valid license.
   This shall be an element in determining the scope of approval of IT Testing Laboratory as in STQC/SAB/F04.

i. During assessment of testing laboratories, the Assessor will review the capability of the Laboratory to demonstrate test methods for which approval is being sought. STQC APPROVAL BODY may authorize the assessors to examine/retest the test results obtained by the laboratories in measurement audits.

j. During their investigation, if the team finds that work is being sub-contracted, such scope should not be considered.

k. For site testing/ site calibration facilities the assessors shall do thorough examination of the operation of the management system at site, normally where testing for a customer is performed. The assessors shall also assess testing competency of the on-site staff, with particular emphasis on Test Environment for testing to be carried out at site.

l. If the IT Testing Laboratory is functioning in shifts; the assessor shall ensure the competence of staff working in shift operations and report the details.

m. Although the assessment must be thorough, the Assessors should avoid giving the impression that they are trying to score points or trap the IT Testing Laboratory staff in order to find reasons for rejecting its application. Assessors need to show a positive attitude during the process of assessment.

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n. The object of assessment is to ascertain by observations of the activities whether the work of the IT Testing Laboratory is being carried out in accordance with ISO/ IEC 17025: 2005 'General Requirements for the Competence of Testing and Calibration Laboratories' and applicable Approval Criteria.

o. Favorable and adverse noting must be based on objective evidence and be recorded and verified before leaving the area under assessment. To secure agreement on the facts, and to avoid subsequent disputes, Assessors shall record detailed non-conformities as they occur in STQC/SAB/F02 ANNEXURE-03 and Each non-conformity shall be countersigned by the accompanying IT Testing Laboratory representative or the section in-charge.

p. At the time of assessment of the IT Testing Laboratory, Assessors will discuss with the Quality Manager of the IT Testing Laboratory whether the IT Testing Laboratory's quality control & quality assurance activities are performed as defined in lab documents.

q. Checklists provided should be verified and completed during the course of assessment of the IT Testing Laboratory for SETL; Checklist(s) are like aid memoir to Assessors so that all aspect of IT Testing Laboratory management system and technical criteria are taken care of. However, STQC/SAB/F02 ANNEXURE-14 should be used to record the observations.

r. Lead Assessor shall, during the course of on-the-spot assessment, verify the effectiveness of management system and related documents using the audit techniques and shall raise the relevant non-conformity. The Lead Assessor shall use STQC/SAB/F02 ANNEXURE-03 to raise the nonconformity. This form shall be an annexure to the final report.

s. Since it is not possible to assess every procedure in operation, Assessors should use his own judgment to select one or more test procedure(s) for their demonstration. The selection of the test would have to be such that it can help assess the IT Testing Laboratory competence, in terms of equipment and capabilities of experts with equal emphasis on site testing for such laboratories. In doing so, the Assessors shall select items of work in progress, witness measurement and verify documents and record of test artifacts.

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t. The Assessors are required to conduct some replicate tests, where applicable, using old samples whose reported results are available to study repeatability and reproducibility of test results.

u. In some cases, Assessors may trace back test results from previously issued Test reports be perused for further investigation. The Assessors shall use STQC/SAB/F02 ANNEXURE-04 to record the findings.

v. At the end of each assessment day, the Lead Assessor shall consolidate their findings. The Lead Assessor shall brief the IT Testing Laboratory about the non-conformity(s) noticed by the team. The above would facilitate IT Testing Laboratory take corrective actions on the non-conformity observed.

A formal meeting for de-briefing of each day's findings may not be necessary for small laboratories (one with limited scope and resources), where the findings have been conveyed during the day's proceedings.

w. The Lead Assessor and Assessors shall individually complete assessment report in relevant forms which shall be countersigned by the accompanying IT Testing Laboratory representative. The NC report will indicate whether the non-conformity is major or minor

x. After the Assessors have completed their individual assessment, a preliminary meeting of Assessment Team is held to summarize their conclusions.

7.3. Compilation Report:

a. Each Assessor, based on his verification, shall prepare as part of his recommendations the details of calibration and the test for which the IT Testing Laboratory is to be approved.

b. The Lead Assessor shall consolidate the findings in STQC/SAB/F02 ANNEXURE-05 based on individual Assessor's STQC/SAB/F02 ANNEXURE-03 report(s).

c. The Lead Assessor shall, in his final report in Summary of Assessment form STQC/SAB/F02 ANNEXURE-09 giving the reasons for limiting or partially recommending the scope of approval, for test(s) against those applied tests. The Lead assessor/ Technical assessor must sign the documents related to scope of Testing or Calibration with the comment 'recommended'.

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7.4. Closing Meeting:

a. The Lead Assessor shall summarise the findings of the Assessment Team and present it to the IT Testing Laboratory representatives. The Lead Assessor shall invite each Assessor to summarise his/ her findings.

b. During the closing meeting, the management representative present shall be asked to suggest a date for completion of corrective action of all non-conformity and to acknowledge this by in STQC/SAB/F02 ANNEXURE-09.

c. A copy of Summary Report in STQC/SAB/F02 ANNEXURE-09 along with STQC/SAB/F02 ANNEXURE-03 reports along with STQC/SAB/F02 ANNEXURE-07 and STQC/SAB/F02 ANNEXURE-08 (not the original) are to be given to the representative of the IT Testing Laboratory.

d. The closing meeting is to end with thanks giving for the co-operation and assistance given by IT Testing Laboratory/SETL.

e. Record of Participation is taken in STQC/SAB/F02 ANNEXURE-06 for the closing meeting including participants on audio/video systems.

f. Refer also to cl. 9. Of this procedure on Conduct of Closing Meeting.

7.5. Post Assessment:

a. Lead Assessor shall send the assessment report along with recommendation to STQC APPROVAL BODY at the earliest (within ten days of assessment) and in confidence by speed post or by courier service mail.

b. Assessor shall close the NC(s) raised once IT Testing Laboratory/SETL have taken satisfactory corrective actions and submit satisfactory documentary evidence.

c. When a further visit is required / clarifications required, the Assessors shall be contacted by STQC APPROVAL BODY secretariat.

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8. GUIDE TO FORMULATE RECOMMENDATIONS FOR STQC APPROVAL BODY (SAB)

a. The Lead Assessor shall take into account the number and type of non-conformities found during assessment.

b. Where no non-conformities are found, the Lead Assessor shall recommend approval of the SETL.

c. When non-conformities are found, the Lead Assessor cannot recommend approval. In such cases, the recommendation shall be such that approval may be granted subject to the satisfactory discharge of all non-conformities. Lead Assessor should also recommend if the evidence of the corrective actions received from IT Testing Laboratory would suffice or a further visit by STQC APPROVAL BODY official or Assessor would be required.

d. Where in one area of testing, major non-conformities have been identified/recorded, but overall there are no major system failures, the Lead Assessor may recommend approval for all areas except for the non-complying area.

e. The IT Testing Laboratory (SETL) management shall be asked to specify the period required to complete the corrective action for non-conformities. This period should not be more than 2 months.

f. Normally, a period of one month should be regarded as reasonable.

g. Where the number and seriousness of non-conformities found is such that the whole of the IT Testing Laboratory (SETL) management system and organization is demonstrably inadequate, the Lead Assessor's recommendations shall be such that approval is refused.

h. In such cases, the Lead Assessor shall advise the IT Testing Laboratory to discuss action with STQC APPROVAL BODY.

9. PROCEDURE FOR CONDUCTING CLOSING MEETING

The purpose of the closing meeting is to enable the team to present the IT Testing Laboratory management with a summary of the findings of the assessment and to inform the management of the recommendations that the team will make to the STQC APPROVAL BODY.

This Final meeting shall be chaired by the Lead Assessor, who should:

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a. Thank the IT Testing Laboratory for its assistance and cooperation. He shall also refer to individuals as may be appropriate.

b. Explain the significance of the type of non-conformities.

c. Ask for questions to be deferred until the findings have been presented, although points of clarification should not be refused.

d. Invite each Assessor to summarize his or her findings based on the report, but it should not be discussed in detail. He should present his/ her findings as individual Assessor.

e. Invite the IT Testing Laboratory to specify the date by which any required corrective actions will be implemented.

f. Provide the IT Testing Laboratory with an opportunity to discuss the assessment and answer any questions.

g. During the closing meeting, the Assessment Team should not enter into debating the validity of their conclusions or recommendations. If these are questioned, the Assessor may, however, enumerate individual non-conformities, which justify the recommendations in question and point out the combined effect of the observations of the assessment. If the IT Testing Laboratory (SETL) is still unwilling to implement the recommendations, the Lead Assessor should advise them to take up the matter with STQC APPROVAL BODY.

10. SCOPE OF APPROVAL

It is STQC APPROVAL BODY's policy to define the scope of a SETL (STQC Empanelled Testing Laboratory) approval as precisely as possible. To ensure that users of the laboratories are provided an accurate and unambiguous description of the test(s) covered by the IT Testing Laboratory under approval. Laboratories are, therefore, asked to specify in detail the types of test(s) for which approval is sought. Laboratories are required to list the standard specifications or other methods relevant to test(s).

a. Assessor(s) should ensure by discussing with IT Testing Laboratory for capability and competence of the IT Testing Laboratory to determine and define its scope of approval.

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b. Every effort will have to be made to reach agreement with the IT Testing Laboratory on the content of their scope before the assessment. This is important, not only to avoid possible misunderstandings, but also to help the Assessors to operate effectively, concentrating their attention in those areas of activity appropriate to the scope of Approval.

c. In some cases, as the assessment proceeds, it may become clear that the IT Testing Laboratory is not really in a position to achieve approval in certain areas within the originally conceived scope. In such cases, the Lead Assessor may be able to recommend approval for asuitably reduced or redefined scope and it should reflect in the audit records.

d. The scope of approval be recommended in STQC/SAB/F02 ANNEXURE-08.

e. The recommended scope of approval shall clearly specify the parameters for which the IT Testing Laboratory is performing site test(s).

f. When IT Testing Laboratory refers to standards/lab test procedures, the same to be indicated in its scope of approval.

11. PROCEDURE FOR HANDLING DOCUMENTS AFTER ASSESSMENT

For reasons of ensuring confidentiality of documents of the IT Testing Laboratory or SETL, the following rules are to be observed:

a. On completion of the assessment visit, Assessors shall return the Quality Manual, Application and other documents to the IT Testing Laboratory.

b. The Lead Assessor shall return the Quality Manual and application along with assessment report to STQC APPROVAL BODY in original.

12. SURVEILLANCE AND RE-ASSESSMENT

a. Approval is granted for the period of two years. Surveillance of approved SETL (STQC empanelled Testing Laboratory) is to be completed on yearly basis, and should be conducted each year.

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b. Surveillance is to ensure that approved SETL continues to comply with ISO/ IEC 17025:2005 'General Requirements for the Competence of Testing and Calibration Laboratories' and applicable Approval Criteria.

c. The on-site surveillance or re-assessment team shall be headed by a Lead Assessor.

d. The on-site surveillance visit shall take place within 12 months of the grant of approval and cover selected aspects of the IT Testing Laboratory, such that the entire scope is covered including those of site testing.

e. STQC APPROVAL BODY shall provide the on-site surveillance / re-assessment audit team a copy of relevant parts of the previous assessment report as background information.

f. Assessors to concentrate particularly on any areas of testing where there is reason to believe standards have not been maintained, where non-conformities were observed during previous visits, or where there have been changes in staff.

g. Members of the on-site surveillance / re-assessment team can obtain a copy of the Quality Manual at the time of audit or prior to it from the IT Testing Laboratory.

h. If during an on-site surveillance or Reassessment visit, it is found that there have been significant changes, e.g., of staff, equipment or the range of services available, these matters shall be recorded. Assessors shall check that the changes are not such as to diminish the IT Testing Laboratory capabilities, particularly as described in the scope of approval and that they have already been fully notified to STQC APPROVAL BODY.

i. A Re-assessment visit will involve a comprehensive re-examination of the IT Testing Laboratory management system and calibration/ testing activities and will be similar in format and detail to the initial assessment.

j. The Re-assessment visit shall normally take place four months prior to expiry of approval. Laboratories have been requested to apply for renewal of approval, six months prior to expiry of approval.

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