

A143 – CALA POLICY ON GROUP ACCREDITATION

Revision 1.0

March 24, 2023



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1.0 SCOPE

This policy applies to all CALA accredited laboratories that meet the requirements outlined below.

2.0 BACKGROUND

Network laboratories operating from more than one location and operating under a single management system may qualify for CALA group accreditation. As group accreditation is based on a single management system it will minimise duplication of the assessment of all elements of the system at each site allowing for a more efficient use of laboratory resources. In some cases, this will lead to a reduction in assessor resources deployed by CALA resulting in reduced cost to the laboratory.

3.0 REQUIREMENTS FOR IMPLEMENTATION OF THE CALA POLICY ON GROUP ACCREDITATION

To be considered for group accreditation the laboratory must have at least two locations operating under the same legal entity. Several factors will be considered in grouping laboratories. These include, but are not limited to, field of accreditation, laboratory location, accreditation cycle, size of laboratory and operational variability between locations. The number of laboratories in a group shall normally be limited to 5 labs. Consideration will be given to larger groups on a case-by-case basis.

The following conditions must be met for organizations seeking group accreditation:

- All locations within or seeking group accreditation must be part of the same legal entity
- All locations operate under the same management system (as defined in ISO/IEC 17025) with a central office
- The laboratory shall identify a member of staff having defined responsibility and authority for ensuring that the management system is implemented across the group
- The laboratory shall identify a central contact person for the coordination of onsite assessment and follow-up activities.
- The laboratory shall document fully the extent of interactions between laboratories within the group including the allocation of testing, transfer of samples between locations, data review and movement of staff and/or equipment between locations.
- If applicable, have mechanisms in place to track progress of work throughout the locations of the Group, regardless of any transfer of work between locations;
- Laboratories within the group must ensure that customers are aware and agree with any transfer of work between locations.

3.1 Assessment and Accreditation Process

All CALA policies and procedures for laboratory accreditation apply as normal to group accreditation.

For reassessment visits, the implementation of the entire management system will be reassessed over the Group. The management system requirements are assessed from one location (preferably the location identified as the head office). However, any location within the group may be chosen as long as they have access to key records for all other laboratories within the group. Local QA/QC staff shall be made available remotely as needed by the assessment team.

CALA reserves the right to perform a complete assessment of the management system (and any technical elements as necessary) at any site covered by a corporate accreditation, particularly when major deficiencies are identified at one or more sites.

The laboratory scope will be assessed at each location regardless of whether they are performing the exact same testing. In some cases, the same assessors may be used across the different locations within the group. All sites are visited once every two (2) years as per the normal assessment cycle. All laboratories within the group shall be assessed within the calendar year. CALA reserves the right to share assessment reports with teams that are assessing other locations within the group to identify systemic issues.

When submitting corrective actions in response to nonconformities against the management requirements, the network must provide evidence that the corrective action has been implemented at all locations in the group. While assessing a location, if an assessor identifies a nonconformity that is against the management system, it will be cited even if not explicitly tasked with assessing the management system for that location.

If a new location (not previously accredited by CALA) is being brought into the existing group, that location must undergo a full assessment. Any outstanding management system nonconformities from previous assessments of other locations in the group must be addressed prior to the new member joining.

An assessment report will be prepared by the assessment teams for each individual location within the Group. The individual reports will clearly identify the findings applicable to specific locations. The report containing the management system findings that are common to all locations (e.g., a finding pertaining to the Quality Manual or equivalent) will be included in the report of the main laboratory or the laboratory from which management the system assessment was completed.

Each laboratory with the group will be assigned a unique member number and Individual scopes of accreditation are issued to each member of the group. The scope of accreditation of each location will contain references to the location being part of a group accreditation and will list all the other locations that are part of the Group

3.1.1 Suspensions and Withdrawals

Suspensions, reductions, and withdrawals in scope at one location as a result of a management system failure will automatically involve consideration by CALA of the implications for the Group. Where associated activities at other locations are affected or where distinction between affected and unaffected activities at different locations is not feasible, the suspension, reduction, or withdrawal of scope would apply across the Group.

4.0 REVISION HISTORY

Revision Number	Revision Date	Nature of Revision
1.0	March 24, 2023	Initial publication