



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	1 of 9

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Completion of the following signature blocks signifies the review and approval of this Document.

Name	Job Title / Role	Signature	Date
Authored by	Assistant Director- Certification	<i>Approved</i>	26/02/2017
Checked by	Assistant Director- Inspection and Verification	<i>Approved</i>	26/02/2017
Approved by	Deputy Director- Technical Services	<i>Approved</i>	26/02/2017

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# KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	2 of 9

## 1. OVERVIEW CONTENT

### 1.1 Process Overview

This operating procedure provides for the Management of assessment, surveillance, re-assessments and reporting of findings.

### 1.2 Purpose

This procedure defines how assessment, surveillance, reassessment and reporting are carried out by KENAS.

### 1.3 Scope

This procedure is applicable to all KENAS assessments activities leading to accreditation decisions.

### 1.4 Role(s) and Responsibility

Role	Responsibility
Technical Services Team	Management and execution of assessment activities
MR	Update of the procedure for relevance and on its intended use

## 2. DEFINITIONS/ABBREVIATION

The table below defines new or changed terms that are included in or associated with this process.

Term	Definition
KENAS	Kenya Accreditation Service
MR	Management Representative
CEO	Chief Executive Officer-KENAS
CAB	Conformity Assessment Body
Accreditation	Process undertaken by an accreditation body to assess the competence of a CAB based on particular standard (s) / other normative documents and for a defined scope of accreditation



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	3 of 9

Surveillance	Set of activities except re- assessment and initial assessment to monitor continual fulfillment by accredited CABs of requirements of accreditation
Scope of Accreditation	Specific conformity assessment services for which accreditation is sought or has been granted

### 3. PROCESS INSTRUCTIONS

#### 3.1 Application for accreditation

- 3.1.1 A CAB shall be given an application form and an accreditation agreement template for filing once they express the need for accreditation. The templates can also be downloaded from the KENAS website [www.kenas.go.ke](http://www.kenas.go.ke)
- 3.1.2 A duly filled and signed application and accreditation agreement shall be submitted back to KENAS who shall review the documents and disposition. If the application form is adequately filled, KENAS staff from the Technical Department shall review and sign it off for progression to the next stage. The applicant is informed that the application has been reviewed and found to be adequate will be progressed to document review. The accreditation agreement shall be signed by the CEO, KENAS and a copy returned to the CAB. In the event that the application form does not have adequate information, the CAB shall be informed to provide the information prior to progression.
- 3.1.3 On reviewing the application, KENAS ability to carry out the assessment shall be determined in terms of competence and time
- 3.1.4 Once the application has been reviewed for adequacy, KENAS shall appoint an assessment team and notify the CAB for concurrence or otherwise..

#### 3.2 Pre-assessment

- 3.2.1. The appointed assessment team shall review the documents submitted by the CAB to verify conformance with the requirements of the relevant standard and other applicable normative documents. A document review report shall be submitted to the CAB and shall include identified gaps (if any). The document review shall be conducted within 5 working days of the assignment of the team and any gaps will be required to complete by the CAB within 4 weeks of submission of the report.
- 3.2.2 For a new client whose scope of operations may not be clear from the document submitted, a pre-assessment may be carried out to confirm the operation of the CAB as well as to clarify any issues that may have emerged during the document review. This pre-assessment



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	4 of 9

visit will help to guide on the proper composition of the assessment team and the number of days required for the onsite assessment. This exercise though desired is not mandatory and hence the CAB concurrence will be sought. A pre-assessment can also be carried out at the CAB's request. The pre-assessment will ordinarily be done by the Lead Assessor or delegate.

### 3.3 Preparation for the Initial Assessment Visit

- 3.3.1 The lead assessor shall draw the assessment plan detailing areas to be assessed. This shall take into consideration the sampling plan determined for each respective assessment as per the procedure for sampling during assessments and internal audits KENAS - TS-OP-018
- 3.3.2 The plan shall be sent to the CAB and to all the assessment team members two weeks before commencement of the assessment. The CAB will be required to acknowledge receipt of notification and concurrence to the dates of assessment and of the assessors.

### 3.4 The Initial Assessment Visit

- 3.4.1 The Lead assessor shall chair the opening meeting and address the agenda items as per KENAS-GUD-003
- 3.4.2 Where necessary, the Lead assessor may allow for a brief tour of the facilities before starting the assessment.
- 3.4.3 The assessment team shall examine all aspects of the implementation of the management system and fulfilment of the technical requirements to verify that it meets the normative standards requirements and demonstrates competence.

### 3.5 Recording

- 3.5.1 The assessment team shall record details of observations and findings and where non-conformities are raised, seek concurrence from the CAB representative
- 3.5.2 The assessment team shall summarize all the findings during the assessors review meeting, making reference to relevant clauses of the standard (s), and other support documentation. When there is difficulty in reaching conclusion about a finding the team shall refer back to the technical department at KENAS for direction, preferably talking to the scheme owner or the Deputy Director Technical Services who shall provide guidance of resolution.



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	5 of 9

### 3.6 Closing Meeting

- 3.6.1 The Lead Assessor shall chair the closing meeting convened for the purpose of presenting the assessment findings to the CABs management and staff.
- 3.6.2. The agenda of the closing meeting shall be as per KENAS-GUD-003.
- 3.6.3 During the closing meeting the assessment team shall present in detail each of the non-conformities raised in order to ensure that the organization fully and clearly understands each of them.
- 3.6.4 The Leader Assessor shall compile the assessment report and indicate key areas that require corrective action within 5 working days on completion of the assessment.
- 3.6.5 The CAB shall develop a corrective action plan with timelines for closure and seek concurrence with KENAS. This should not take more than one month.
- 3.6.6 The CAB shall provide evidence of corrective actions taken to ensure closure of the non-conformities raised within 1 month from time of agreement of corrective actions. KENAS shall verify the closure of the non-conformities prior to progression of the case file for decision making.

### 3.7 Surveillance assessment

- 3.7.1 KENAS shall draw bi-annual/annual surveillance schedule and notify the client one month before the scheduled surveillance.
- 3.7.2 An assessment team shall be allocated and appointed to perform the surveillance and shall carry out surveillance assessments in a similar manner as on-site assessment carried out in as per clause 3.3.1 all through to 3.6.5, The scope of surveillance may not be as elaborate as the one for the initial assessment.
- 3.7.2. Surveillance assessment visits shall be planned to cover the entire accreditation scope over the accreditation cycle.
- 3.7.3 KENAS shall confirm in writing the continuation of accreditation or any other accreditation decision based on the report of surveillance assessment.
- 3.7.4 KENAS may perform unscheduled surveillance assessment as a result of complaints received and/or significant changes in the CABs management system and operations.

### 3.8 Re-accreditation assessment



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	6 of 9

3.8.1 Following accreditation of a CAB, KENAS shall draw a plan for assessment for re-accreditation of each CAB. KENAS shall notify the CAB of their accreditation due and treat the last surveillance on the program as re-accreditation assessment..

3.8.2 The re-accreditation assessment shall be planned in a manner that it starts before the accreditation period lapses so as not to create any gap in the CAB's accreditation status. When this happens, the process shall start with document review the followed by clause 3.3.1 to 3.6.5 to assess the accredited scope for continuation of accreditation and a new accreditation agreement signed. The CAB shall communicate to KENAS regarding any changes envisaged. The document review outcome shall be captured in the overall assessment report.

3.8.3 If the accreditation lapses however before the assessment commences, the process will have to start at the application stage, meaning that the CAB will need to apply a fresh for accreditation starting from clause 3.1.

### 3.9 Reporting

3.9.1 Within one week of any type of assessment, the Lead Assessor shall prepare a report which shall be reviewed for appropriateness by the scheme prior to submission to the CAB.

3.9.2 The assessment report shall consist of positives, recommendations, any non-conformities raised and actual observations. It shall refer to the relevant criteria, scope and status of the CAB's competence.

3.9.3 KENAS shall formally communicate in writing the final assessment report to the CAB. The same report, the corrective actions taken by the CAB and closure of the same shall be presented to the accreditation committee for decision making.

## 4. REFERENCE AND RELATED DOCUMENTS

Ref	Document Identifier	Document Title
1.	KENAS-QM-MAN-001	KENAS Quality Manual



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	7 of 9

2.	ISO/IEC 17011:2004	Conformity assessment – General requirements for accreditation bodies accrediting conformity assessment bodies
3.	ISO/IEC 17000:2004	Conformity assessment – Vocabulary and general principles
4.	KENAS-GUD-003	Assessor Guide
5.	KENAS-TS-OP-008	Selection, Engagement and Contracting of assessment personnel
6.	KENAS-TS-F-020	Assessors-Experts-Trainers Register
7	KENAS-TS-F-022	Application For Accreditation
8	KENAS-TS-F-015	Accreditation Agreement
9.	KENAS-POL-018	KENAS Policy for Dealing with objection of assessors/experts
10	KENAS –TS-OP-018	Procedure for sampling during assessments and internal audits

### 5. PROCEDURE TRAINING

Staff performing one or more of the roles specified in this procedure shall be mad aware of the existence of this procedure. A period not more than one month shall be allocated between the issue date and effective date to facilitate such an awareness.

### 6. REVISION HISTORY

Date	Ver	Revised By	Reason For Revision
03-02-2012	01	AD H&S	Initial copy on the new numbering system Change of format from KENAS/OP/10
03-02-2014	02	ADC	Implementation of actions from the Pre-peer evaluation <ul style="list-style-type: none"> <li>Application process included and signing of accreditation agreement prior to commencement of the process.</li> <li>Included timelines for report generation and submission as well as closure of corrective action</li> <li>Introduced a process flow for more clarity.</li> </ul>
03-08-2015	03	ADC	<ul style="list-style-type: none"> <li>Amendment to 3.5.2 to accommodate escalation of a disagreement for resolution.</li> </ul>
26-11-2015	04	ADIV	<ul style="list-style-type: none"> <li>Amendment of reassessment to re-accreditation assessment..</li> </ul>



## KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	8 of 9
26-03-2017	05	ADIV	<ul style="list-style-type: none"> <li>• Include document review reporting on re-accreditation assessments under 3.8.2</li> </ul>		





# KENYA ACCREDITATION SERVICE

**Document Title: MANAGEMENT OF ASSESSMENT, SURVEILLANCE, RE-ASSESSMENT AND REPORTING**

Document Identifier	Ver	Issue Date	Effective date	Type	Page No
KENAS-TS-OP-010	04	26/02/2017	26/03/2017	OP	9 of 9

## The Accreditation Cycle

