SLOVENSKA AKREDITACIJA

OA14

UPORABA STANDARDA ISO/IEC 17020:2012 ZA AKREDITACIJO KONTROLNIH ORGANOV

APPLICATION OF ISO/IEC 17020:2012 FOR THE ACCREDITATION OF INSPECTION BODIES (ILAC-P15:07/2016)

ILAC – Mednarodno združenje za akreditacijo laboratorijev

ILAC je mednarodni organ na področju akreditacije laboratorijev in kontrolnih organov, katerega člani so akreditacijski organi in organizacije zainteresiranih strani po vsem svetu.

ILAC zagotavlja infrastrukturo, ki po vsem svetu z akreditacijo podpira dokazovanje kompetentnosti in enakovrednosti preskuševalnih (vključno z medicinskimi) in kalibracijskih laboratorijev, kontrolnih organov ter drugih tipov organov, ki opravljajo storitve ali podpirajo laboratorije in kontrolne organe. Akreditacija laboratorijev in kontrolnih organov podpira dejavnosti znotraj gospodarstev in med njimi, vključno s trgovino, varovanjem zdravja, varnosti in okolja v javno korist. Njen temeljni namen je zagotoviti zaupanje v kompetentnost organov, ki podpirajo te dejavnosti.

Dogovor ILAC je mednarodni, večstranski dogovor akreditacijskih organov o medsebojnem priznavanju akreditacij. Sodelujoči akreditacijski organi se dogovorijo, da bodo spodbujali priznavanje enakovrednosti poročil o kalibraciji, preskusih in kontroli, ki jih izdajajo akreditirani organizacije. Vsak akreditacijski organ je pred podpisom dogovora ILAC medsebojno strokovno vrednoten v skladu s pravili in postopki ILAC.

ILAC pri uresničevanju svoje vizije, poslanstva, ciljev in s tem povezanih strategij ceni dopolnilne in podporne aktivnosti svojih regionalnih združenj. Člani regionalnih združenj z izvajanjem svojih večstranskih dogovorov o medsebojnem priznavanju zagotavljajo vse vire za medsebojno strokovno vrednotenje kot tudi veliko strokovnih prispevkov v dokumentih ILAC.

ILAC – International Laboratory Accreditation Cooperation

ILAC is the international authority on laboratory and inspection body accreditation, with a membership consisting of accreditation bodies and stakeholder organisations throughout the world.

ILAC provides the infrastructure that supports the world-wide demonstration of competence and equivalence of testing (including medical) and calibration laboratories, inspection bodies and other types of bodies serving or supporting laboratories and inspection bodies through accreditation. Accreditation of laboratories and inspection bodies supports activities within and between economies including trade, protection of health, safety and the environment for the public benefit. Its fundamental purpose is to provide confidence in the competence of bodies supporting these activities.

The ILAC Arrangement is an international, multilateral mutual recognition arrangement for accreditation bodies. Participating accreditation bodies agree to promote acceptance of the equivalence of calibration, test and inspection reports produced by accredited facilities. Each accreditation body undergoes peer evaluation according to ILAC rules and procedures prior to becoming a signatory to the ILAC Arrangement.

ILAC values the critical complementary and supportive activities of its Regional Cooperation Body members in the realisation of its vision, mission, goals and associated strategies. The Regional Cooperation Body members through the implementation of their multilateral mutual recognition arrangements provide all of the peer evaluation resources and much of the technical inputs to ILAC documents.

KAZALO

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1. UVOD

V tem dokumentu so podane informacije za uporabo standarda ISO/IEC 17020:2012 Ugotavljanje skladnosti – Zahteve za delovanje različnih tipov organov, ki izvajajo kontrolo za akreditacijo kontrolnih organov. Namenjen je akreditacijskim organom, ki ocenjujejo kontrolne organe za akreditacijo, kakor tudi kontrolnim organom, ki želijo delovati na način, da izpolnjujejo zahteve za akreditacijo.

Za lažje sklicevanje je vsaka opomba glede uporabe označena s številko pripadajoče točke standarda ISO/IEC 17020 ter z ustrezno pripono, npr. 4.1.4a bi bila prva opomba glede uporabe zahtev točke 4.1.4 standarda.

Izraz “mora” (shall) se v celotnem dokumentu uporablja za označevanje tistih določb, ki se štejejo za obvezne, ker odražajo zahteve ISO/IEC17020, oziroma v nekaj primerih zahteve za delovanje akreditacijskih organov iz ISO/IEC 17011.

Izraz "naj" (should) se v celotnem dokumentu uporablja za označevanje tistih določb, ki sicer niso obvezne, a jih ILAC navaja kot priznan način izpolnjevanja zahtev. Izraz "sme" (may) se uporablja za označevanje nečesa, kar je dovoljeno, izraz »lahko« (can) za označevanje možnosti ali sposobnosti. Kontrolni organi, katerih sistemi ne sledijo napotkom "naj" iz tega dokumenta ILAC, bodo do akreditacije upravičeni samo, če bodo akreditacijskemu organu lahko dokazali, da njihove rešitve enakovredno ali bolje izpolnjujejo ustrezno točko standarda ISO/IEC 17020.

V posameznih kontrolnih shemah so lahko navedene dodatne zahteve za akreditacijo. Ta dokument ne poskuša ugotoviti, katere bi lahko bile te zahteve ali kako se morajo izvajati.

Pri uporabi ISO/IEC 17020 in tega dokumenta naj akreditacijski organi zahtevam ISO/IEC 17020 ničesar ne dodajajo niti odvzemajo. Akreditacijski organi pa morajo še vedno izpolnjevati tudi zahteve ISO/IEC 17011.

2. AVTORSTVO

To publikacijo je pripravil Odbor ILAC za kontrolo (IC) in je bila potrjena za objavo na podlagi uspešnega glasovanja članic ILAC leta 2014.

Spremembo za namen razjasnitve točke 8.1.3 je predlagal ILAC IC, sprejele pa so jo članice ILAC julija 2016.

3. IZVAJANJE

Zaradi izpolnjevanja določb točke 2.1.1 dokumenta IAF/ILAC A2 morajo podpisniki dogovora o medsebojnem priznavanju ILAC MRA ta dokument uveljaviti v 18 mesecih od dneva izdaje.

Sprememba v točki 8.1.3, ki so jo članice sprejele julija 2016, prične veljati z dnem objave dokumenta na ILAC spletni strani.

4. TERMINOLOGIJA

V tem dokumentu se uporabljajo izrazi in definicije iz standardov ISO/IEC 17000 in ISO/IEC 17020.

1. INTRODUCTION

This document provides information for the application of ISO/IEC 17020:2012 Conformity assessment – Requirements for the operation of various types of bodies performing inspection for the accreditation of inspection bodies. It is intended to be used by accreditation bodies assessing inspection bodies for accreditation as well as by inspection bodies seeking to manage their operations in a manner fulfilling the requirements for accreditation.

For ease of reference, each application note is identified by the relevant clause number of ISO/IEC 17020 and an appropriate suffix, e.g. 4.1.4a would be the first application note on the requirements of clause 4.1.4 of the standard.

The term “shall” is used throughout this document to indicate those provisions which, reflecting the requirements of ISO/IEC17020, or in a few cases requirements for the operation of accreditation bodies in ISO/IEC 17011, are considered to be mandatory.

The term “should” is used throughout this document to indicate those provisions which, although not mandatory, are provided by ILAC as a recognized means of meeting the requirements. The term “may” is used to indicate something which is permitted. The term “can” is used to indicate a possibility or a capability. Inspection bodies whose systems do not follow the “should” guidance in this ILAC document will only be eligible for accreditation if they can demonstrate to the accreditation body that their solutions meet the relevant clause of ISO/IEC 17020 in an equivalent or better way.

Individual inspection schemes may specify additional requirements for accreditation. This document does not try to identify what such requirements may be or how they shall be implemented.

When using ISO/IEC 17020 and this application document the accreditation bodies should neither add to, nor subtract from, the requirements in ISO/IEC 17020. Note, however, that accreditation bodies must still fulfill the requirements of ISO/IEC 17011.

2. AUTHORSHIP

This publication was prepared by the ILAC Inspection Committee (IC) and endorsed for publication following a successful ballot of the ILAC voting membership in 2014.

An amendment to clarify clause 8.1.3 was proposed by the ILAC IC and endorsed by the ILAC membership in July 2016.

3. IMPLEMENTATION

In order to comply with the provisions of IAF/ILAC A2 clause 2.1.1, signatories to the ILAC MRA shall implement this document within 18 months from the date of publication.

Implementation of the amendment to clause 8.1.3, endorsed by the membership in July 2016, is from the date of publication on the ILAC Website.

4. TERMINOLOGY

For the purposes of this document the terms and definitions given in ISO/IEC 17000 and ISO/IEC 17020 apply.

5. UPORABE STANDARDA ISO/IEC 17020:2012

Izrazi in definicije

3.1a Izraz "inštalacija" se lahko definira kot "zbirka sestavnih delov, ki so sestavljeni zato, da bi skupaj dosegli namen, ki ga ločeno ne morejo doseči".

Splošne zahteve – Nepristranskost in neodvisnost

4.1.3a Tveganje za nepristranskost kontrolnega organa je treba upoštevati, kadarkoli se zgodijo dogodki, ki bi lahko vplivali na nepristranskost kontrolnega organa ali njegovega osebja.

4.1.3b Kontrolni organ naj s pomočjo organigramov ali z drugimi sredstvi opiše vse morebitne odnose, ki bi lahko pomembno vplivali na njegovo nepristranskost.

Primeri odnosov, ki bi lahko vplivali na nepristranskost, vključujejo:

- odnos z matično organizacijo
- odnosi z oddelki znotraj iste organizacije
- odnosi s povezanimi podjetji ali organizacijami
- odnosi z regulatorji
- odnosi z naročniki
- odnosi osebja
- odnosi z organizacijami, ki predmete kontrole snujejo, proizvajajo, dobavljajo, montirajo, nabavljajo, imajo v lasti, uporabljajo ali vzdržujejo.

4.1.5a Kontrolni organ naj ima dokumentirano izjavo, v kateri poudarja svojo zavezanost nepristranskosti pri izvajanju svojih aktivnosti kontrole, obvladovanju nasprotij interesov in zagotavljanju objektivnosti svojih aktivnosti kontrole. Ukrepi najvišjega vodstva naj ne bodo v nasprotju s to izjavo.

4.1.5b Eden od načinov, kako najvišje vodstvo poudari svojo zavezanost nepristranskosti, je, da relevantne izjave in politike javno objavi.

Strukturne zahteve – Upravne zahteve

5.1.3a Kontrolni organ naj opiše svoje aktivnosti z opredelitvijo splošnega področja in obsega kontrole (npr. kategorije/podkategorije proizvodov, procesov, storitev ali inštalacij) in stopnje kontrole (glej opombo k točki 1 standarda) ter predpisov, standardov ali specifikacij z zahtevami, po katerih se bo izvajala kontrola, če je primerno.

5.1.4a Velikost rezervacij naj bo sorazmerna z ravnijo in naravo obveznosti, ki lahko izhajajo iz delovanja kontrolnega organa.

Strukturne zahteve – Organizacija in vodenje

5.2.2a Velikost, struktura, sestava in vodenje kontrolnega organa morajo skupaj biti primerne za kompetentno izvajanje aktivnosti znotraj obsega, za katerega je kontrolni organ akreditiran.

5.2.2b "Vzdrževanje sposobnosti izvajanja aktivnosti kontrole" pomeni, da mora kontrolni organ poskrbeti za to, da je ustrezno informiran o veljavnih tehničnih in/ali zakonodajnih spremembah, ki zadevajo njegove

5. APPLICATIONS OF ISO/IEC 17020:2012

Terms and definitions

3.1a The term “installation” may be defined as “a collection of components assembled to jointly achieve a purpose not achievable by the components separately”.

General requirements – Impartiality and independence

4.1.3a Risks to the impartiality of the inspection body shall be considered whenever events occur which might have a bearing on the impartiality of the inspection body or its personnel.

4.1.3b The inspection body should describe any relationships that could affect its impartiality to the extent relevant, using organisational diagrams or other means.

Examples of relationships that could influence the impartiality include:

- Relationship with a parent organisation
- Relationships with departments within the same organisation
- Relationships with related companies or organisations
- Relationships with regulators
- Relationships with clients
- Relationships of personnel
- Relationships with the organisations designing, manufacturing, supplying, installing, purchasing, owning, using or maintaining the items inspected

4.1.5a The inspection body should have a documented statement emphasising its commitment to impartiality in carrying out its inspection activities, managing conflicts of interest and ensuring the objectivity of its inspection activities. Actions emanating from the top management should not contradict this statement.

4.1.5b One way for the top management to emphasise its commitment to impartiality is to make relevant statements and policies publicly available.

Structural requirements – Administrative requirements

5.1.3a The inspection body should describe its activities by defining the general field and range of inspection (e.g. categories/sub-categories of products, processes, services or installations) and the stage of inspection, (see note to clause 1 of the standard) and, where applicable, the regulations, standards or specifications containing the requirements against which the inspection will be performed.

5.1.4a The level of provisions should be commensurate with the level and nature of liabilities that may arise from the inspection body’s operations.

Structural requirements – Organisation and management

5.2.2a The size, structure, composition and management of an inspection body, taken together, shall be suitable for the competent performance of the activities within the scope for which the inspection body is accredited.

5.2.2b “To maintain the capability to perform the inspection activities” implies that the inspection body shall take steps to keep it appropriately informed about applicable technical and/or legislative developments

aktivnosti.	concerning its activities.
5.2.2c Kontrolni organi morajo vzdrževati svojo sposobnost in kompetentnost za izvajanje kontrol, ki niso pogoste (praviloma s presledki, daljšimi od enega leta). Kontrolni organ lahko dokaže svojo sposobnost in kompetentnost za kontrole, ki se ne izvajajo pogosto, z "navideznimi kontrolami" in/ali z izvajanjem aktivnosti kontrole na podobnih proizvodih.	5.2.2c Inspection bodies shall maintain their capability and competence to carry out inspection activities performed infrequently (normally with intervals longer than one year). An inspection body may demonstrate its capability and competence for inspection activities performed infrequently through 'dummy inspections' and/or through inspection activities conducted on similar products.
5.2.3a Kontrolni organ mora vzdrževati posodobljen organigram oziroma dokumente, ki jasno označujejo funkcije in linije vodenja za osebje znotraj kontrolnega organa. V organigramu oziroma v dokumentih naj bo jasno pokazan položaj tehničnega vodje oziroma vodij in člana vodstva, omenjenega v točki 8.2.3.	5.2.3a The inspection body shall maintain an up-to-date organisational chart or documents clearly indicating the functions and lines of authority for staff within the inspection body. The position of the technical manager(s) and the member of management referenced in clause 8.2.3 should be clearly shown in the chart or documents.
5.2.4a Pomembno je lahko tudi zagotavljanje informacij o osebju, ki izvaja delovne naloge tako za kontrolni organ kakor tudi za druge enote in oddelke.	5.2.4a It may be relevant to provide information concerning personnel which carry out work tasks for both the inspection body and for other units and departments.
5.2.5a Da bi se za osebo štelo, da je "na voljo", mora biti bodisi zaposlena bodisi kako drugače pogodbeno vezana.	5.2.5a In order to be considered as "available", the person shall be either employed or otherwise contracted.
5.2.5b Da bi zagotovili, da je izvajanje aktivnosti kontrole v skladu z ISO/IEC 17020, morajo imeti tehnični vodja(-e) in morebitni namestnik(-i) strokovno kompetentnost, potrebno za razumevanje pomembnih vprašanj, ki se pojavijo pri izvajanju aktivnosti kontrole.	5.2.5b In order to ensure that the inspection activities are carried out in accordance with ISO/IEC 17020, the technical manager(s) and any deputy(ies), shall have the technical competence necessary to understand all significant issues involved in the performance of inspection activities.
5.2.6a Za organizacijo, v kateri odsotnost ključne osebe povzroči prekinitev dela, zahteva glede namestnikov ne velja.	5.2.6a In an organization where the absence of a key person causes the cessation of work, the requirement for having deputies is not applicable.
5.2.7a Delovna mesta, vključena v aktivnosti kontrole, zajemajo kontrolorje in druga delovna mesta, ki lahko vplivajo na vodenje, izvajanje, zapisovanje ali poročanje o kontrolah.	5.2.7a The position categories involved in inspection activities are inspectors and other positions which could have an effect on the management, performance, recording or reporting of inspections.
5.2.7b V opisu del ali drugi dokumentaciji morajo biti podrobno opisane dolžnosti, odgovornosti in pooblastila za vsako delovno mesto, omenjeno v točki 5.2.7a.	5.2.7b The job description or other documentation shall detail the duties, responsibilities and authorities for each position category referred to in 5.2.7a.
Zahteve glede virov – Osebje	**Resource requirements – Personnel**
6.1.1a Če je primerno, morajo kontrolni organi določiti in dokumentirati zahteve za kompetentnost za vsako aktivnost kontrole, opisano v točki 5.1.3a.	6.1.1a Where appropriate, inspection bodies shall define and document competence requirements for each inspection activity, as described in 5.1.3a.
6.1.1b Glede "osebja, vključenega v aktivnosti kontrole" glej 5.2.7.a.	6.1.1b For "personnel involved in inspection activities", see 5.2.7a.
6.1.1c Zahteve za kompetentnost naj vključujejo poznavanje sistema vodenja kontrolnega organa in sposobnost izvajanja tako upravnih kot tehničnih postopkov, ki se uporabljajo pri izvajanih aktivnostih.	6.1.1c Competence requirements should include knowledge of the inspection body's management system and ability to implement administrative as well as technical procedures applicable to the activities performed.
6.1.1d Če je za ugotavljanje skladnosti potrebna strokovna presoja, je to treba upoštevati pri določanju zahtev za kompetentnost.	6.1.1d When professional judgment is needed to determine conformity, this shall be considered when defining competence requirements.
6.1.2a Vse zahteve standarda ISO/IEC 17020 veljajo enako za zaposlene kot za pogodbene osebe.	6.1.2a All requirements of ISO/IEC 17020 apply equally for both employed and contracted persons.
6.1.5a V postopku za formalno pooblaščanje kontrolorjev naj bo opredeljeno, da so pomembne podrobnosti dokumentirane, npr. za katere aktivnosti kontrole je	6.1.5a The procedure for formally authorising inspectors should specify that the relevant details are documented, e.g. the authorised inspection activity,

oseba pooblaščena, začetek veljavnosti pooblastila, identiteta osebe, ki je dala pooblastilo, in, če je primerno, datum prenehanja pooblastila.

6.1.6a "Obdobje dela pod mentorstvom", omenjeno pod točko b, praviloma vključuje izvajanje kontrole.

6.1.7a Ugotavljanje potreb po usposabljanju posamezne osebe naj se izvaja v rednih časovnih presledkih. Izbere naj se tak presledek, da se zagotovi izpolnjevanje točke 6.1.6 c. Rezultati pregleda usposabljanja, npr. plani nadaljnjega usposabljanja ali izjava, da nadaljnje usposabljanje ni potrebno, naj se dokumentirajo.

6.1.8a Glavni cilj zahtev za nadzorovanje je, da se kontrolnemu organu zagotovi orodje, s katerim zagotavlja doslednost in zanesljivost rezultatov kontrole, vključno z morebitnimi strokovnimi presojami po splošnih kriterijih. Rezultat nadzorovanja je lahko identifikacija potreb po usposabljanju posameznikov ali potreb po pregledu sistema vodenja kontrolnega organa.

6.1.8b Za "drugo osebje, vključeno v aktivnosti kontrole" glej 5.2.7a.

6.1.9a Da bi se dokazi o tem, da kontrolor stalno kompetentno deluje, šteli za zadostne, naj bodo utemeljeni s kombinacijo informacij, kot so:

- zadovoljivo izvajanje pregledov in ugotavljanj skladnosti,
- pozitivni rezultati pregledov poročil, razgovorov, simuliranih kontrol in drugih ocen delovanja (glej opombo k točki 6.1.8),
- pozitivni rezultati ločenih vrednotenj za potrditev rezultatov kontrol (to je lahko mogoče in primerno npr. v primeru kontrole gradbene dokumentacije),
- pozitivni rezultati dela pod mentorstvom in usposabljanja,
- odsotnost upravičenih prizivov ali pritožb in
- zadovoljivi rezultati opazovanja, ki ga izvede kompetenten organ, npr. certifikacijski organ za osebje.

6.1.9b Učinkovit program za opazovanje kontrolorjev na terenu lahko prispeva k izpolnjevanju zahtev iz točk 5.2.2 in 6.1.3. Program naj bo zasnovan z upoštevanjem:

- tveganja in kompleksnosti kontrol,
- rezultatov predhodnih aktivnosti nadzorovanja in
- tehničnih, postopkovnih ali zakonodajnih sprememb, pomembnih za kontrolo.

Pogostnost opazovanj na terenu je odvisna od zgoraj naštetih vprašanj, vendar naj se opravijo najmanj enkrat v ocenjevalnem obdobju, glej tudi točko uporabe 6.1.9a. Če ravni tveganja ali zahtevnosti ali rezultati predhodnih opazovanj to nakazujejo, ali če je prišlo do tehničnih, postopkovnih ali zakonodajnih sprememb, potem je treba razmisliti o večji pogostnosti. Odvisno od področij, vrst in obsegov kontrol, zajetih v pooblastilih kontrolorja, je lahko potrebnih več opazovanj kontrolorja, da se ustrezno pokrije celotni obseg zahtevanih kompetenc. Pogostejše opazovanje na terenu bi lahko bilo potrebno tudi, če je pomanjkanje dokazov o stalnem zadovoljivem delovanju.

OPOMBA SA: ocenjevalno obdobje v postopkih SA vključuje praviloma 3 nadzorna ocenjevanja in ponovno ocenjevanje.

the beginning of the authorisation, the identity of the person who performed the authorisation and, where appropriate, the termination date of the authorisation

6.1.6a The “mentored working period” mentioned in item b normally includes activities where inspections are performed.

6.1.7a Identification of training needs for each person should take place at regular intervals. The interval should be selected to ensure fulfilment of clause 6.1.6 item c. The results of the review of training, e.g. plans for further training or a statement that no further training is required, should be documented.

6.1.8a A major aim of the monitoring requirement is to provide the inspection body with a tool to ensure the consistency and reliability of inspection outcomes, including any professional judgments against general criteria. Monitoring may result in the identification of needs for individual training or needs for review of the inspection body’s management system.

6.1.8b For “other personnel involved in inspection activities”, see 5.2.7a.

6.1.9a To be considered sufficient, the evidence that the inspector is continuing to perform competently should be substantiated by a combination of information such as;

- satisfactory performance of examinations and determinations,
- positive outcome of report reviews, interviews, simulated inspections and other performance assessments (see note to clause 6.1.8),
- positive outcome of separate evaluations to confirm the outcome of the inspections (this may be possible and appropriate in the case of e.g. the inspection of construction documentation),
- positive outcome of mentoring and training,
- absence of legitimate appeals or complaints, and
- satisfactory results of witnessing by a competent body, e.g. a certification body for persons.

6.1.9b An effective program for the on-site observation of inspectors may contribute to fulfil the requirements in clauses 5.2.2 and 6.1.3. The program should be designed considering;

- the risks and complexities of the inspections,
- results of previous monitoring activities, and
- technical, procedural or legislative developments relevant to the inspections.

The frequency of on-site observations depends on the issues listed above, but should be at least once during the accreditation re-assessment cycle, however see application note 6.1.9a. If the levels of risks or complexities, or the results from previous observations, so indicate, or if technical, procedural or legislative changes have occurred, then a higher frequency should be considered. Depending on the fields, types and ranges of inspection covered by the inspector’s authorisations, there may be more than one observation per inspector necessary to adequately cover the whole range of required competencies. Also, more frequent on-site observations may be necessary if there is lack of evidence of continuing satisfactory performance.

6.1.9c Na področjih kontrole, na katerih ima kontrolni organ eno samo strokovno usposobljeno osebo, notranje opazovanje na terenu ne more biti izvedeno. V takih primerih mora imeti kontrolni organ urejeno zunanje opazovanje na terenu, razen če so na voljo dokazi v podporo ugotovitvi, da kontrolor stalno kompetentno deluje (glej 6.1.9a).

6.1.9c In inspection areas where the inspection body has only one technically competent person the internal observation on-site cannot take place. In such cases the inspection body shall have arrangements in place for external observations on-site, unless other sufficient supporting evidence that the inspector is continuing to perform competently is available (see 6.1.9a).

6.1.10a Zapisi o pooblastilu naj navajajo, na kakšni podlagi je bilo pooblastilo podeljeno (npr. opazovanje kontrol na terenu).

6.1.10a Records of authorisation should specify the basis on which authorisation was granted (e.g. the on-site observation of inspections).

6.1.11a Metode nagrajevanja, ki spodbujajo k hitremu izvajanju kontrol, utegnejo imeti negativen vpliv na kakovost in rezultate kontrole.

6.1.11a Remuneration methods that provide incentives to perform inspections quickly have the potential to negatively affect the quality and outcome of inspection work.

6.1.12a Politike in postopki naj osebju kontrolnega organa pomagajo identificirati in obravnavati komercialne, finančne in druge grožnje ali prisile, ki bi lahko vplivale na njihovo nepristranskost, ne glede na to, ali nastajajo znotraj ali zunaj kontrolnega organa. Taki postopki naj obravnavajo, kako se o morebitnih nasprotjih interesov, ki jih osebje kontrolnega organa identificira, poroča in kako se zapisujejo. Upoštevajte pa, da so pričakovanja za integriteto kontrolorjev sicer sporočena v politiki in postopkih, vendar obstoj takih dokumentov ne pomeni nujno prisotnosti integritete in nepristranskosti, ki ju zahteva ta točka.

6.1.12a Policies and procedures should assist inspection body personnel in identifying and addressing commercial, financial or other threats or inducements which could affect their impartiality, whether they originate inside or outside the inspection body. Such procedures should address how any conflicts of interests identified by personnel of the inspection body are reported and recorded. Note, however, that while expectations for inspector integrity can be communicated by policies and procedures, the existence of such documents may not signal the presence of integrity and impartiality required by this clause.

Zahteve glede virov – Zmogljivosti in oprema

Resource requirements – Facilities and equipment

6.2.1a Oprema, potrebna za varno izvajanje kontrole, lahko vključuje npr. osebno varovalno opremo in gradbene odre.

6.2.1a Equipment required to carry out inspection in a safe manner may include e.g. personal protective equipment and scaffolding.

6.2.3a Če so potrebni kontrolirani pogoji okolja, npr. za pravilno izvajanje kontrole, mora kontrolni organ te nadzorovati in zapisati rezultate. Če so bile razmere zunaj sprejemljivih meja za izvedbo kontrole, mora kontrolni organ zapisati, kakšne ukrepe je sprejel. Glej tudi točko 8.7.4.

6.2.3a If controlled environmental conditions are needed, e.g. for the correct performance of the inspection, the inspection body shall monitor these and record the results. If conditions were outside acceptable limits for the inspection to be performed, the inspection body shall record what action was taken. See also clause 8.7.4.

6.2.3b Stalna ustreznost se lahko preveri z vizualno kontrolo, funkcionalnimi pregledi in/ali ponovno kalibracijo. Ta zahteva je še posebno pomembna za opremo, ki ni več pod neposrednim nadzorom kontrolnega organa.

6.2.3b Continued suitability may be established by visual inspection, functional checks and/or re-calibration. This requirement is particularly relevant for equipment that has left the direct control of the inspection body.

6.2.4a Da bi ob zamenjavi opreme omogočili sledenje, je lahko primerno enoznačno identificiranje posameznega kosa opreme, tudi če je na voljo samo en kos.

6.2.4a In order to enable tracking when items are replaced, the unique identification of an item of equipment may be appropriate even when there is only one item available.

6.2.4b Če so potrebni kontrolirani pogoji okolja, naj se oprema, uporabljena za nadzorovanje takih razmer, šteje kot oprema, ki pomembno vpliva na rezultat kontrol.

6.2.4b When controlled environmental conditions are needed, the equipment used to monitor such conditions should be considered as equipment that significantly influences the result of inspections.

6.2.4c Če je primerno (praviloma za opremo iz točke 6.2.6), mora opredelitev vključevati zahtevano točnost in merilno območje.

6.2.4c When appropriate (normally for the equipment covered by clause 6.2.6) the definition shall include the required accuracy and measurement range.

6.2.6a Utemeljitev, zakaj oprema, ki pomembno vpliva na izid kontrole (glej točko 6.2.4), ni kalibrirana, naj se zapiše.

6.2.6a The justification for not calibrating equipment that has a significant influence on the outcome of inspection (see clause 6.2.4) should be recorded.

6.2.6b Smernice za določanje kalibracijskih intervalov je mogoče najti v vodilu ILAC G24.

6.2.6b Guidelines on how to determine calibration intervals can be found in ILAC G24.

6.2.7a V skladu s publikacijo ILAC P10 je mogoče kalibracijo opreme, ki se uporablja za meritve, opraviti interno. Od akreditacijskih organov se zahteva, da imajo politiko za zagotavljanje, da se take interne kalibracijske storitve izvajajo v skladu z ustreznimi kriteriji za meroslovno sledljivost v standardu ISO/IEC 17025.

6.2.7a According to ILAC P10 it is possible to perform in-house calibration of equipment used for measurements. It is a requirement for accreditation bodies to have a policy to ensure that such in-house calibration services are performed in accordance with the relevant criteria for metrological traceability in ISO/IEC 17025.

6.2.7b V skladu s publikacijo ILAC P10 so prednostne poti za organe za ugotavljanje skladnosti, ki za kalibracijo svoje opreme najemajo zunanje storitve, določene v podpoglavjih 1) in 2), v ILAC P10, poglavje 2. Če teh dveh poti iz kakršnegakoli utemeljenega razloga ni mogoče uporabiti, je sprejemljivo, da se uporabi pot 3a) ali 3b) iz ILAC P10, poglavje 2. Od akreditacijskih organov se zahteva, da imajo politiko za zagotavljanje, da se take zunanje kalibracijske storitve izvajajo v skladu z ustreznimi kriteriji za meroslovno sledljivost v standardu ISO/IEC 17025.

6.2.7b According to ILAC P10 the preferred routes for conformity assessment bodies who seek external services for calibration of their equipment are defined in sub- sections 1) and 2) of section 2 in ILAC P10. If however, it is not possible to comply with these two routes for any justifiable reason, then it is acceptable to use the routes 3a) or 3b) of section 2 of ILAC P10. It is a requirement for accreditation bodies to have a policy to ensure that such external calibration services meet the relevant criteria for metrological traceability in ISO/IEC 17025.

6.2.7c Kjer se sledljivost do nacionalnih ali mednarodnih etalonov ne uporablja, je sodelovanje v ustreznih primerjalnih programih ali preskusih strokovne usposobljenosti primer, kako je mogoče pridobiti dokazila o primerljivosti oziroma točnosti rezultatov kontrole.

6.2.7c Where traceability to national or international standards of measurement is not applicable, the participation in relevant comparison programs or proficiency tests is an example of how to obtain evidence of correlation or accuracy of inspection results.

6.2.8a Če kontrolni organi za kalibracijo delovnih instrumentov uporabljajo referenčne etalone, naj imajo referenčni etaloni višjo stopnjo točnosti, kot se to zahteva od delovnih instrumentov, za kalibracijo katerih se uporabljajo.

6.2.8a When inspection bodies use reference standards of measurement to calibrate working instruments the reference standards of measurement should have a higher degree of accuracy than that required of the working instruments they are used to calibrate.

6.2.9a Če se v času med rednimi ponovnimi kalibracijami na opremi izvajajo vmesna preverjanja, naj se določijo narava takih preverjanj, pogostnost in kriteriji sprejemljivosti.

6.2.9a Where equipment is subjected to in-service checks between regular re- calibrations, the nature of such checks, the frequency and acceptance criteria should be defined.

6.2.10a Podatki iz točk 6.2.7a, 6.2.7b in 6.2.7c za programe kalibracije opreme veljajo tudi za programe kalibracije referenčnih materialov.

6.2.10a The information provided in 6.2.7a, 6.2.7b and 6.2.7c for programs of calibration of equipment is valid also for programs of calibration of reference materials.

6.2.11a Če kontrolni organ najame dobavitelje za izvajanje aktivnosti, ki ne vključujejo izvajanja dela kontrole, ki pa so pomembne za rezultat kontrole, npr. registracija naročil, arhiviranje, dobava pomožnih storitev med kontrolo, urejanje poročil o kontroli ali kalibracijske storitve, so take storitve zajete v izrazu "storitve", ki se uporablja v tej točki.

6.2.11a When the inspection body engages suppliers to perform activities which do not include the performance of part of the inspection, but which are relevant for the outcome of inspection activities, e.g. order registration, archiving, delivery of auxiliary services during an inspection, the editing of inspection reports or calibration services, such activities are covered by the term “services” used in this clause.

6.2.11b Postopek preverjanja naj zagotavlja, da se vhodno blago in storitve ne uporabijo, dokler ni preverjena skladnost s specifikacijo.

6.2.11b The verification procedure should ensure that incoming goods and services are not used until conformance with specification has been verified.

6.2.13a Dejavniki, ki naj se upoštevajo pri varovanju celovitosti in varnosti podatkov, vključujejo:

- prakso in pogostnost izdelave varnostnih kopij,
- uspešnost obnovitve podatkov z varnostne kopije,
- protivirusno zaščito in
- zaščito gesla.

6.2.13a Factors that should be considered in protecting the integrity and security of data include;

- backup practices and frequencies,
- effectiveness in restoring data from backup,
- virus protection, and
- password protection.

Zahteve glede virov – Sklepanje podpogodb

Resource requirements – Subcontracting

6.3.1a Kadar imajo aktivnosti kontrole ter aktivnosti preskušanja in certificiranja skupne značilnosti, se lahko prekrivajo (glej uvod v ISO/IEC 17020). Na primer pregled nekega proizvoda in preskušanje istega proizvoda sta lahko v procesu kontrole oba podlaga za ugotavljanje skladnosti. Pripomniti je

6.3.1a Inspection activities can overlap with testing and certification activities where these activities have common characteristics (See Introduction of ISO/IEC 17020). For example, examination of a product and testing of the same product can both be the basis for the determination of conformity in an inspection process. It

treba, da ISO/IEC 17020 določa zahteve za organe, ki izvajajo kontrolo, medtem ko se za preskuševalne organe uporablja standard ISO/IEC 17025 ali ISO 15189.

6.3.1b Po definiciji (ISO/IEC 17011, točka 3.1), je akreditacija omejena na naloge ugotavljanja skladnosti, za katere je kontrolni organ dokazal kompetentnost, da jih izvaja sam. Tako akreditacije ni mogoče podeliti za aktivnosti iz četrte alineje pod opombo 1, če kontrolni organ nima zahtevanih kompetenc in/ali virov. Vendar pa se naloga ocenjevanja in razlage rezultatov takih aktivnosti za namen ugotavljanja skladnosti lahko vključi v obseg akreditacije, pod pogojem, da je dokazana ustrezna usposobljenost.

6.3.3a V opombi 2 k definiciji "kontrole" v točki 3.1 je navedeno, da je kontrola v nekaterih primerih lahko omejena samo na pregled, ne da bi bilo potrebno naknadno ugotavljati skladnost. V takih primerih se točka 6.3.3 ne uporablja, saj ni ugotavljanja skladnosti.

6.3.4a Če ovrednotenje kompetentnosti podpogodbenika delno ali v celoti temelji na njegovi akreditaciji, mora kontrolni organ zagotoviti, da obseg akreditacije podpogodbenika zajema aktivnosti, za katere je sklenjena podpogodba.

Zahteve glede procesov – Metode in postopki kontrole

7.1.5a Kjer je primerno, naj sistem za obvladovanje pogodb ali delovnih nalogov zagotavlja tudi:

- da so dogovorjeni pogodbeni pogoji,
- da so kompetence osebja ustrezne,
- da so prepoznane morebitne zakonske zahteve,
- da so prepoznane zahteve glede varnosti,
- da je prepoznan obseg vseh potrebnih podpogodbenih dogovorov

Pri zahtevah za rutinsko ali ponavljajoče se delo je pregled lahko omejen na upoštevanje časa in človeških virov. V takih primerih bi bil sprejem pogodbe, ki jo je podpisala ustrezno pooblaščena oseba, sprejemljiv zapis.

7.1.5b V situacijah, ko so sprejemljivi ustni delovni nalogi, mora kontrolni organ hraniti zapise o vseh prejetih ustnih zahtevkih in navodilih. Če je primerno, naj se zapišejo tudi ustrezni datumi in identiteta naročnikovega predstavnika.

7.1.5c Sistem za obvladovanje pogodb ali delovnih nalogov naj zagotavlja, da bo med kontrolnim organom in njegovim naročnikom jasen in dokazljiv dogovor glede obsega kontrolnega dela, ki ga bo izvedel kontrolni organ.

7.1.6a Informacije, omenjene v tej točki, niso tiste, ki jih zagotovi podpogodbenik, temveč informacije, prejete od drugih strani, npr. od regulativnega organa ali naročnika kontrolnega organa. V teh informacijah so lahko zajeti splošni podatki za aktivnost kontrole, ki pa niso rezultat aktivnosti kontrole.

should be noted that ISO/IEC 17020 specifies requirements for bodies performing inspection, whereas the relevant standard to apply for bodies performing testing is ISO/IEC 17025 or ISO 15189.

6.3.1b By definition (ISO/IEC 17011, clause 3.1), accreditation is limited to conformity assessment tasks which the inspection body has demonstrated competence to perform itself. Thus, accreditation cannot be granted for activities referred to in the fourth bullet point under note 1, if the inspection body does not have the required competence and/or resources. However, the task of assessing and interpreting the results of such activities for the purpose of determining conformity may be included in the scope of accreditation, provided adequate competence for this has been demonstrated.

6.3.3a In note 2 to the definition of "inspection" in clause 3.1 it is indicated that in some cases inspection may be examination only, without a subsequent determination of conformity. In such cases clause 6.3.3 does not apply since there is no determination of conformity.

6.3.4a If the evaluation of the competence of the subcontractor is based partly or in full on its accreditation, the inspection body shall ensure that the scope of the subcontractor's accreditation covers the activities to be sub-contracted.

Process requirements - Inspection methods and procedures

7.1.5a Where appropriate the contract or work order control system should also ensure that;

- contract conditions are agreed
- personnel competence is adequate
- any statutory requirements are identified
- safety requirements are identified
- the extent of any subcontracting arrangements required is identified

For routine or repeat work requests the review may be limited to considerations of time and human resources. An acceptable record in such cases would be an acceptance of the contract signed by an appropriately authorised person.

7.1.5b In situations where verbal work orders are acceptable, the inspection body shall keep a record of all requests and instructions received verbally. Where appropriate, the relevant dates and the identity of the client's representative should be recorded.

7.1.5c The contract or work order control system should ensure that there is a clear and demonstrable understanding between the inspection body and its client of the scope of the inspection work to be undertaken by the inspection body.

7.1.6a The information referred to in this clause is not information provided by a sub- contractor, but information received from other parties, e.g. a regulating authority or the client of the inspection body. The information may include background data for the inspection activity, but not results of the inspection activity.

Zahteve glede procesov – Zapisi o kontroli

7.3.1a V zapisih naj bo označeno, kateri kos opreme, ki pomembno vpliva na rezultat kontrole, je uporabljen v posamezni aktivnosti kontrole.

Zahteve glede procesov – Poročila in potrdila/certifikati o kontroli

7.4.2a ILAC P8 zahteva od akreditacijskih organov, da specificirajo pravila za uporabo akreditacijskih znakov na poročilih in potrdilih/certifikatih. Opozoriti je treba na to, da morajo kontrolni organi v potrjena poročila in potrdila/certifikate, to je v poročila in potrdila/certifikate, ki se sklicujejo na akreditacijo, vključiti jasno omejitev odgovornosti:

- če ni akreditiran za storitve/preskuse, naštete v poročilih in potrdilih/certifikatih (glej celotno besedilo v poglavju 8.1 ILAC P8), in
- če poročila in potrdila/certifikati vključujejo rezultate neakreditiranih podpogodbenikov ali na njih temeljijo (glej celotno besedilo v poglavju 9.3 ILAC P8).

7.4.4a Koristno bi bilo v poročilu/potrdilu/certifikatu o kontroli identificirati kontrolno metodo, če ta informacija podpira ustrezno razlago rezultatov kontrole.

Zahteve glede sistema vodenja – Možnosti

8.1.3a Izraz »ta mednarodni standard« se nanaša na ISO/IEC 17020.

8.1.3b Možnost B ne zahteva, da je sistem vodenja kontrolnega organa certificiran po ISO 9001. Vendar pa mora akreditacijski organ pri določanju obsega zahtevanega ocenjevanja upoštevati, ali je kontrolni organ po ISO 9001 certificiral certifikacijski organ, ki ga je akreditiral akreditacijski organ, podpisnik IAF MLA oziroma regionalnega MLA za certificiranje sistemov vodenja.

Zahteve glede sistema vodenja – Dokumentacija sistema vodenja (možnost A)

8.2.4a Za lažje sklicevanje se priporoča, da kontrolni organ označi, npr. s preglednico za navzkrižno sklicevanje, kje so obravnavane zahteve ISO/IEC 17020.

Zahteve glede sistema vodenja – Obvladovanje zapisov (možnost A)

8.4.1a Ta zahteva pomeni, da morajo biti vsi zapisi, potrebni za dokazovanje skladnosti z zahtevami standarda, vzpostavljeni in ohranjeni.

8.4.1b V primerih, ko se za odobritev uporabljajo elektronski pečati ali pooblastila, naj bo dostop do elektronskih medijev ali pečata varovan in nadzorovan.

Zahteve glede sistema vodenja – Vodstveni pregled (možnost A)

8.5.1a Del vsakoletnega vodstvenega pregleda naj bo tudi pregled procesa identifikacije tveganja za nepristranskost in njegovi zaključki (točki 4.1.3/4.1.4).

Process requirements - Inspection records

7.3.1a The records should indicate which particular item of equipment, having a significant influence on the result of the inspection, has been used for each inspection activity.

Process requirements - Inspection reports and inspection certificates

7.4.2a ILAC P8 requires accreditation bodies to specify rules for the use of accreditation symbols on reports and certificates. It should be noted that for endorsed reports and certificates, that is reports and certificates making reference to accreditation, such rules shall include the requirement that inspection bodies include a clear disclaimer;

- when not accredited for services/tests listed on reports and certificates (see full text in section 8.1), and
- when reports and certificates include or are based on results from unaccredited subcontractors (see full text in section 9.3).

7.4.4a It may be useful to identify the inspection method in the inspection report/certificate when this information supports an appropriate interpretation of the inspection results.

Management system requirements – Options

8.1.3a The expression “this International Standard” is a reference to ISO/IEC 17020.

8.1.3b Option B does not require that the inspection body's management system is certified to ISO 9001. However, when determining the extent of required assessment, the accreditation body should take into consideration whether the inspection body has been certified against ISO 9001 by a certification body accredited by an accreditation body which is a signatory to the IAF MLA, or to a regional MLA, for the certification of management systems.

Management system requirements – Management system documentation (Option A)

8.2.4a For easy reference, it is recommended that the inspection body indicates where the requirements of ISO/IEC 17020 are addressed, e.g., by means of a cross reference table.

Management system requirements – Control of records (Option A)

8.4.1a This requirement means that all records needed to demonstrate compliance with the requirements of the standard shall be established and retained.

8.4.1b In cases where electronic seals or authorizations are used for approvals, access to the electronic media or seal should be secure and controlled.

Management system requirements – Management review (Option A)

8.5.1a A review of the impartiality risk identification process and its conclusions (clauses 4.1.3/4.1.4) should be part of the annual management review.

8.5.1b Vodstveni pregled naj upošteva informacije o ustreznosti trenutnih človeških virov in opreme, predvidenih delovnih obremenitvah in potrebi po usposabljanju novega in obstoječega osebja.

8.5.1c Vodstveni pregled naj vključuje pregled uspešnosti sistemov, vzpostavljenih za zagotavljanje ustrezne kompetentnosti osebja.

Zahteve glede sistema vodenja – Notranje presoje (možnost A)

8.6.4a Kontrolni organ mora zagotoviti, da v ocenjevalnem obdobju program notranje presoje zajame vse zahteve ISO 17020. Zahteve, ki morajo biti zajete, je treba obravnavati za vsa področja kontrole in za vse prostore, v katerih se izvajajo ključne aktivnosti (glej IAF/ILAC A5).

Kontrolni organ mora utemeljiti izbiro pogostnosti presoje za različne vrste zahtev, področij kontrole in prostore, v katerih se izvajajo ključne aktivnosti. Utemeljitev lahko temelji na upoštevanju:

- kritičnosti,
- zrelosti,
- predhodnega delovanja,
- organizacijskih sprememb,
- postopkovnih sprememb in
- učinkovitosti sistema za prenos izkušenj med različnimi lokacijami in različnimi področji delovanja.

8.6.5a Notranje presoje lahko izvaja kompetentno zunanje pogodbeno osebje.

Zahteve glede sistema vodenja – Preventivni ukrepi (možnost A)

8.8.1a Preventivni ukrepi se sprejemajo v proaktivnem procesu identificiranja možnih neskladnosti in možnosti za izboljšave, in ne kot odziv na identifikacijo neskladnosti, težav ali pritožb.

8.5.1b The management review should take into account information on the adequacy of current human and equipment resources, projected workloads and the need for training of both new and existing staff.

8.5.1c The management review should include a review of the effectiveness of systems established to ensure adequate competence of the personnel.

Management system requirements – Internal audits (option A)

8.6.4a The inspection body shall ensure that all requirements of ISO 17020 are covered by the internal audit program within the accreditation re-assessment cycle. The requirements to be covered shall be considered for all fields of inspection and for all premises where key activities are performed (see IAF/ILAC A5).
The inspection body shall justify the choice of audit frequency for different types of requirements, fields of inspection and premises where key activities are performed. The justification may be based on considerations such as;

- criticality,
- maturity,
- previous performance,
- organisational changes,
- procedural changes, and
- efficiency of the system for transfer of experience between different operational sites and between different fields of operation.

8.6.5a Competent externally contracted personnel may carry out internal audits.

Management system requirements – Preventive actions (Option A)

8.8.1a Preventive actions are taken in a pro-active process of identifying potential non- conformities and opportunities for improvement rather than as a reaction to the identification of non-conformities, problems or complaints.

Dodatek A: Zahteve glede neodvisnosti kontrolnih organov

Aa Dodatka A.1 in A.2 k standardu ISO/IEC 17020 se nanašata na "predmete kontrole" glede na kontrolne organe tipov A in B. V dodatku A.1 b je navedeno, da "zlasti ne smeta biti vključena v snovanje, proizvodnjo, dobavo, montažo, nabavo, lastništvo, uporabo ali vzdrževanje predmetov kontrole". V dodatku A.2 c je navedeno, da "zlasti ne smeta biti vključena v snovanje, proizvodnjo, dobavo, montažo, nabavo, lastništvo, uporabo ali vzdrževanje predmetov kontrole". Tretja oseba dvojine v zgornjih stavkih pomeni sklicevanje na zadevni kontrolni organ in njegovo osebje. Predmeti kontrole so v tem primeru tisti predmeti, ki so specificirani v akreditacijski listini akreditacijskega organa oziroma v prilogi k njej (npr. tlačne posode).

Ab Alineja pod točko d) se nanaša na povezave z ločenimi pravnimi osebami, vključenimi v snovanje, proizvodnjo, dobavo, montažo, nabavo, lastništvo, uporabo ali vzdrževanje predmetov kontrole. Take povezave vključujejo skupne lastnike in imenovane osebe skupnih lastnikov v odborih ali enakovrednih organih. Te povezave so sprejemljive, če vključene osebe nimajo možnosti vplivanja na izid kontrole. Možnost vplivanja na izid kontrole je še zlasti takrat, ko ima oseba možnost:

- vplivati na izbiro kontrolorjev za specifične naloge ali stranke ali
- vplivati na odločitve glede skladnosti pri specifičnih nalogah kontrole ali
- vplivati na nagrajevanje posameznih kontrolorjev ali
- vplivati na nagrajevanje za specifične naloge ali stranke ali
- sprožiti uporabo alternativnih delovnih praks za specifične naloge.

Annex A Independence requirements for inspection bodies

Aa Annex A.1 and A.2 of ISO/IEC 17020 refer to the phrase “items inspected” with respect to Type A and Type B inspection bodies. In Annex A.1 b it is stated that “In particular they shall not be engaged in the design, manufacture, supply, installation, purchase, ownership, use or maintenance of the items inspected”. In Annex A.2 c it is stated that “In particular they shall not be engaged in the design, manufacture, supply, installation, use or maintenance of the items inspected”. The reference to “they” in the above sentences is a reference to the inspection body concerned and its personnel. The items in this case are those items that are specified in the accreditation body’s certificate/annex with respect to the accredited scope of the inspection body (e.g. pressure vessels).

Ab Under bullet point d) reference is made to linkages to separate legal entities engaged in the design, manufacture, supply, installation, purchase, ownership, use or maintenance of the items inspected. Such linkages include common owners and common owners’ appointees on boards or equivalent. These linkages are acceptable if persons involved do not have the possibility to influence the outcome of an inspection. In particular there exists a possibility to influence the outcome of an inspection if the person has the ability to;

- influence the selection of inspectors for specific assignments or customers, or
- influence decisions on conformity in specific inspection assignments, or
- influence remuneration for individual inspectors, or
- influence remuneration for specific assignments or customers, or
- initiate the use of alternative work practices for specific assignments.

6. LITERATURA

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6.3 ISO/IEC 17020 Ugotavljanje skladnosti – Zahteve za delovanje različnih tipov organov, ki izvajajo kontrolo.

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6.5 ISO 15189 Medicinski laboratoriji – Zahteve za kakovost in kompetentnost.

6.6 ISO 9001 Sistemi vodenja kakovosti – Zahteve.

6.7 IAF/ILAC A2 IAF/ILAC Večstranski dogovori o medsebojnem priznavanju – Dogovori (Multi-lateral mutual recognition arrangements – Arrangements): Zahteve in postopki za vrednotenje enega samega akreditacijskega organa (Requirements and procedures for evaluation of a single accreditation body).

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6.10 ILAC P10 Politika ILAC o sledljivosti rezultatov meritev (ILAC P10 ILAC policy on traceability of measurement results).

6.11 ILAC G24 Smernice za določanje kalibracijskih intervalov merilnih instrumentov (Guidelines for the determination of calibration intervals of measuring instruments).

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6.3 ISO/IEC 17020 Conformity assessment – Requirements for the operation of various types of bodies performing inspection.

6.4 ISO/IEC 17025 General requirements for the competence of testing and calibration laboratories.

6.5 ISO 15189 Medical laboratories – Requirements for quality and competence.

6.6 ISO 9001 Quality management systems – Requirements.

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6.10 ILAC P10 ILAC policy on traceability of measurement results.

6.11 ILAC G24 Guidelines for the determination of calibration intervals of measuring instruments.