



TPS 51

Edition 2 | August 2008

Accreditation of Multi-Site/Group Laboratories

CONTENTS

	SECTION	PAGE
1	Introduction	2
2	General Guidance	2
3	Defining scopes of accreditation	3
4	Assessment and accreditation processes	3
5	Suspension or reduction of accreditation	3
6	Reference to accreditation	4

CHANGES SINCE LAST EDITION

Removal of Expiry Date

1 INTRODUCTION

- 1.1 This publication supersedes UKAS Publication Lab 7 *Group laboratory accreditation*. It provides some guidance on the application of the requirements of ISO/IEC 17025 *General Requirements for the competence of Testing and Calibration Laboratories* to multi-site laboratories and describes how UKAS will assess and make reference to multi-site laboratory accreditations in future.
- 1.2 The concept of 'group' accreditation described in Lab 7 was introduced following the publication of ISO/IEC 17025 in 1999. This removed the constraints of the strict definitions that previously existed with UKAS publication M10 and allowed UKAS to consider a single accreditation for a legal entity based at multiple locations.
- 1.3 Following a review of processes and practice across the different areas of UKAS' business, UKAS has aligned its approach to describing the scopes of different types of accredited organisations as far as possible. This has resulted in the decision to phase out the use of the term 'Group' laboratory accreditation although the processes and principles applied in the assessment of organisations operating at more than one location will remain largely unchanged. The issuing of multiple schedules to multi-site laboratories covered under a single accreditation number not previously identified as a 'group' will also cease. UKAS will describe the scope of accreditation in terms of the activities and locations that have been successfully assessed against the requirements of the standard for accreditation.
- 1.4 This TPS remains in force until further notice.

2 GENERAL GUIDANCE

- 2.1 In order for more than one location to be covered under one accreditation all parts of the entity seeking accreditation must be subject to the same management system that meets the requirements of ISO/IEC 17025.
- 2.2 In particular, organisations based at multiple locations must:
 - a) Document fully the relationships between the locations and the extent of the interaction (e.g. allocation of testing/calibration work, transfer of samples between locations, movement of technical staff and/or equipment and centralised or otherwise rationalised reporting arrangements)

Note: The extent of interaction possible will depend, among other factors, on the degree of commonality of procedures and their performance characteristics.
 - b) Have mechanisms in place to ensure that enquiries about work in progress are handled efficiently, regardless of any transfer between locations.
 - c) Ensure that reviews of requests, tenders and contracts include appropriate consideration of clients' awareness of the way the organisation operates across the various locations.

3 DEFINING SCOPES OF ACCREDITATION

- 3.1 For all accreditations the scope has to be defined clearly and unambiguously. This is necessary for the clients of organisations performing testing and/or calibration and for UKAS assessment purposes. The locations as well as the activities covered by the scope need to be identified.
- 3.2 Schedules issued for multi-site testing/calibration organisations will identify which activities are conducted where, (this will replace the laboratory managed matrix that was described in UKAS Publication Lab 7). This does not however limit the flexibility that may have been granted to a laboratory to introduce existing scope activities at new locations, indeed it should allow this capability to be more clearly recognised on the schedule.
- 3.3 Laboratories that have previously been issued with either a 'group' accreditation schedule or permanent and site schedules will now be issued with one schedule detailing the activities and locations covered (this will also include mobile and on-site testing activities).
- 3.4 For organisations that hold accreditation for both calibration and testing activities, separate certificates of accreditation bearing distinct accreditation numbers will continue to be issued by UKAS. Each certificate will have an associated schedule. It is not currently the intention to issue only one schedule for an organisation that is accredited for both testing and calibration activities.

4 ASSESSMENT AND ACCREDITATION PROCESSES

- 4.1 The normal assessment and accreditation processes for laboratory accreditation apply irrespective of whether an organisation operates from one or many sites.
- 4.2 In general, each location included in the scope of application/ accreditation will be visited at the initial assessment and at reassessment visits.
- 4.3 Surveillance visits will cover a sample of the activities across the different locations to the extent necessary to form a reliable judgement about compliance with ISO/IEC 17025. It can be expected that each location will be visited at least once in each four-year assessment cycle.

5 SUSPENSION OR REDUCTION OF ACCREDITATION

- 5.1 Suspensions or reductions in scope at one location, whether voluntary or imposed, will automatically involve a full consideration of the implications for the organisation as a whole. This may result in other locations being affected by this suspension/reduction.

6 REFERENCE TO ACCREDITATION

- 6.1 As the use of the term 'group' will now be phased out, any reference to 'Group' accreditation alongside the use of the accreditation mark previously allowed by Lab 7 shall also be phased out. Laboratories will be expected to remove any reference to 'Group' when replacing or revising stationery or by the end of 2008, whichever is the sooner. The mark can be used by any location listed on the schedule of accreditation, subject to the requirements in DTI publication URN 98/887 *Conditions for the Use of National Accreditation Marks by UKAS and UKAS Accredited Organisations* or any revised version of this document.
- 6.2 Where a laboratory makes reference to accreditation without the use of the mark, DTI Publication URN 98/887 requires laboratories to use the phraseology ' a UKAS accredited calibration/testing laboratory No.'. It is acceptable, although not a requirement, to indicate that the accreditation covers multiple locations alongside the use of this statement.