

# NVLAP Assessor Training

## Completing the Assessment Report

# ISO/IEC 17011:2004

## 5.3 Document control

The accreditation body shall establish procedures to control all documents (internal and external) that relate to its accreditation activities. The procedures shall define the controls needed

- d) to ensure that relevant versions of applicable documents are available to personnel, subcontractors, assessors and experts of the accreditation body and CABs at points of use,
- f) to prevent the unintended use of obsolete documents...

# Controlled Documents

NVLAP controlled documents for assessor use are found at the following link:

<http://www.nist.gov/nvlap/index.cfm>

Check the WEB page for current versions of all documents when preparing for an assessment.

# Theme

If You Write Something  
Twice, You Are Wasting  
Time

# Assessment Report Documents

- On-Site Assessment Summary
- On-Site Signature and Narrative Summary
- HB 150 Checklist
- Program-Specific Checklist(s)
- Test Method Review Summary

# On-Site Assessment Summary

- Date of pre-assessment review
- Scope changes
- Summary and recommendations
- Follow-up assessment?
- Signature required
- Do not leave with lab

## NVLAP ON-SITE ASSESSMENT SUMMARY

Please complete this summary and attach it to the original On-Site Assessment Report.

**DO NOT LEAVE THIS SUMMARY WITH THE LABORATORY.**

Laboratory Name: \_\_\_\_\_ Lab Code: \_\_\_\_\_

Fields of Accreditation: \_\_\_\_\_

Assessor Name(s): \_\_\_\_\_

Date of **Pre-assessment** Review of Quality Manual: \_\_\_\_\_

Date(s) of On-Site Assessment: \_\_\_\_\_

This report contains changes to the laboratory's Scope of Accreditation:  additions;  deletions;  modifications. (Please describe in the On-Site Narrative Summary.)

### SUMMARY AND RECOMMENDATIONS.

- The laboratory has no nonconformities and no written response to NVLAP is required.
- The laboratory has nonconformities in the following area(s). I have notified the laboratory of these nonconformities and the requirement to respond to NVLAP in writing about their resolution.

#### 4 Management requirements

- 4.1 Organization
- 4.2 Management system
- 4.3 Document control
- 4.4 Review of requests, tenders and contracts
- 4.5 Subcontracting of tests and calibrations
- 4.6 Purchasing services and supplies
- 4.7 Service to the customer
- 4.8 Complaints
- 4.9 Control of nonconforming testing and/or calibration work
- 4.10 Improvement
- 4.11 Corrective action
- 4.12 Preventive action
- 4.13 Control of records
- 4.14 Internal audits
- 4.15 Management reviews

#### 5 Technical requirements

- 5.1 General
- 5.2 Personnel
- 5.3 Accommodation and environmental conditions
- 5.4 Test and calibration methods and method validation
- 5.5 Equipment
- 5.6 Measurement traceability
- 5.7 Sampling
- 5.8 Handling of test and calibration items
- 5.9 Assuring the quality of test and calibration results
- 5.10 Reporting the results
- Annex A. Referencing NVLAP accreditation
- Annex B. Implementation of traceability policy in accredited laboratories
- Other (Specify) \_\_\_\_\_

Based on my findings regarding nonconformities, staff competence, and laboratory procedures, I recommend that another on-site assessment be performed before this laboratory is granted accreditation.

Signature of Lead Assessor: \_\_\_\_\_

Date: \_\_\_\_\_

# Signature Sheet

- Lab address
- Assessors' signatures
- Authorized Representative's signature
- Guidance and instructions on laboratory responses

<b>Enter Date:</b> _____	<b>Enter NVLAP Lab Code:</b> _____
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National Institute of Standards and Technology  
National Voluntary Laboratory Accreditation Program (NVLAP)

**ON-SITE ASSESSMENT REPORT SIGNATURE SHEET**

Laboratory Name: \_\_\_\_\_

Laboratory Address: \_\_\_\_\_

Field(s) of Accreditation: \_\_\_\_\_

NVLAP Assessor(s):

Name	Signature
_____	_____
_____	_____
_____	_____

On-Site Assessment Dates: \_\_\_\_\_

Type of Assessment (check one):     Initial     Renewal     Monitoring     Other

**Instructions for the Laboratory**

Respond in writing within 30 days of the date of this report, addressing all nonconformities documented by the assessor(s). All nonconformities must be satisfactorily resolved before accreditation may be granted. See page 2 for guidance and instructions on responding to nonconformities.

The On-Site Assessment Report, the information supplied by you, and the results of any required proficiency testing will be reviewed by NVLAP with the assistance of technical experts as necessary. NVLAP is solely responsible for the content of this report and reserves the right to change the findings of the assessor(s), based on the results of this review. The final evaluation of your laboratory, for the purpose of deciding whether to approve or deny an initial or a renewal accreditation, will be conducted by NVLAP. It is the responsibility of the Authorized Representative to understand and respond with sufficient information within the required timeframe. Failure to respond may result in the suspension of your laboratory's accreditation or, in the case of a new laboratory, may delay an accreditation decision. Questions concerning this response should be directed to NVLAP.

Send your response to:    [NVLAP@nist.gov](mailto:NVLAP@nist.gov)

or by mail to:                    NVLAP  
National Institute of Standards and Technology  
100 Bureau Drive, Stop 2140  
Gaithersburg, MD 20899-2140

**Signed Statement**

The assessor(s) has discussed the contents of this report with members of the laboratory management who agree to respond in writing to NVLAP, regarding resolution or correction of any nonconformities noted, within 30 days of the date of this report.

Signature of Authorized Representative or designee: \_\_\_\_\_

Printed Name: \_\_\_\_\_

# Narrative Summary

- Opening meeting lab personnel
- Closing meeting lab personnel
- Follow-up of previous nonconformities
- Changes to scope
- Management and technical requirements
- Approved signatories





DATE: [REDACTED] 2013

NVLAP LAB CODE: [REDACTED]

## CHANGES TO CURRENT OR REQUESTED SCOPE OF ACCREDITATION (Additions, Deletions, Modifications)

The lab has requested that the following test methods be added to their scope.

22/E16a*	IES LM-66:2011	Single-Ended Compact Fluorescent Lamps - Electrical Measurements
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22/L08a	IES LM-49:2012	Incandescent Filament Lamps - Life Test Performance
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22/L10a	IES LM-65:2010	Single-Ended Compact Fluorescent Lamps - Life Test Performance
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22/P08d*	IES LM-20:2013	Reflector Type Lamps - Intensity Measurements
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22/P13c*	IES LM-66:2011	Single-Ended Compact Fluorescent Lamps - Total Flux Measurements
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22/S07*	ANSI C82.77:2002	Harmonic Emission Limits - Related Power Quality Requirements for Lighting Equipment
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22/E16a\*, 22/L08a\*, 22/L10a, 22/P08d\*, 22/P13c\*, 22/S07\* were assessed without nonconformities and can be added to the lab's scope of accreditation.

22/S10*	IES LM-79:2008(Sec. 10)	Solid State Lighting Luminaires - Luminous Intensity Measurements
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22/S10\* was assessed. This equipment is still in the development stage but is operational. Testing of a SSL lamp was observed. There are nonconformities which need to be addressed and resolved before this test method can be added to their scope of accreditation. The system is a type C with a relatively small mirror of approx. 18 inches so it is limited to small lamps, lighting engines and luminaires. The unit is a Sensing commercial goniophotometer with Sensing software.

The lab may have an interest in adding lab developed or non-standard test methods and /or lighting metric methods to their scope. The lab will review with upper management the need and desire to do this and follow up at a later date with NVLAP.

In the near future the lab is planning to add a 1 meter and 2 meter integrating sphere and an 18" mirror type C goniophotometer to their scope of accreditation.

#### 4.3 DOCUMENT CONTROL

The M Sections of the Quality Manual are reviewed by the Director of Research and Technology the T and L sections of the Quality Manual and associated data collection and reporting forms are reviewed and approved by the Technical Manager.

Controlled documents are reviewed at least annually.

To prevent documents from unauthorized edits or changes, documents are controlled as needed by limiting write access of the document to appropriate parties. For example, only the Quality Manager and the administrator have write-access to the Quality Manual, thus preventing accidental and unauthorized changes to the document.

The quality manual includes an Appendix I: Revision Record. This list of manual revisions has 89 separate entries.

#### 4.4 REVIEW OF REQUESTS, TENDERS AND CONTRACTS

The test lab does not have direct contact with end customers but, rather they work with a Principal Investigator (PI) who works directly with the end customer.

The general process by which requests, tenders, and contracts are reviewed at the [REDACTED] is as follows:

1. Client requests are received, logged, and reviewed.
2. Upon review and approval of a request, a contract for [REDACTED] services is drafted.
3. The client and the designated authority at [REDACTED] review and sign the contract.
4. The client tenders payment for the contracted work or makes payment arrangements.
5. The [REDACTED] performs all contracted work.
6. The [REDACTED] reports the results to the client.

All request are signed off by the Risk Manager, Technical Manager and Quality Manager.

Work order A0049 was reviewed, a request for ballast testing.

DATE: [REDACTED]/2013

NVLAP LAB CODE: [REDACTED]

## 5.10 REPORTING THE RESULTS

For each NVLAP Approved Signatory, record the following information: 1) the Signatory's position within the laboratory, 2) physical location from which the Signatory works, 3) whether the Signatory's performance was witnessed during the on-site assessment, and 4) whether training records for the Signatory were reviewed. Add additional sheets, if necessary.

Name of Signatory	Position	Location (main facility or other premise – specify)	Was performance observed?	Were training records reviewed?
[REDACTED]	NVLAP Quality Manager	Main	Yes	Yes
[REDACTED]	NVLAP Risk Manager	Main	No	Yes
[REDACTED]	NVLAP Technical Manager	Main	Yes	Yes

Under normal circumstances  
assessors are expected to  
review performance and/or  
records for each approved  
signatory.

# Approved Signatories (HB 150)

## 1.5.2 Approved Signatory

An individual who is designated by a laboratory and deemed competent by NVLAP to sign accredited laboratory test or calibration reports. An Approved Signatory is responsible for the technical content of the report and is the contact person for questions or problems with the report. Approved Signatories have responsibility, authority and technical capability within the organization for the results produced.

## 5.10.2 Test reports and calibration certificates

Each test report or calibration certificate shall include at least the following information, unless the laboratory has valid reasons for not doing so:

j) the name(s), function(s) and signature(s) or equivalent identification of person(s) authorizing the test report or calibration certificate;

**NVLAP Note** NVLAP defines the person(s) who authorizes the test report or calibration certificate as the Approved Signatory (see 1.5.2).

## NIST Handbook 150 Checklist Program-Specific Checklists

- Make notes of evidence reviewed
- Be consistent
- Record nonconformities and comments –  
“Record the item number and written nonconformity explanation and/or comment on the comment sheet(s) at the end of the checklist.”

NVLAP LAB CODE: [REDACTED]

- 4.1.5 The laboratory shall:
- OK a) have managerial and technical personnel who, irrespective of other responsibilities, have the authority and resources needed to carry out their duties, including the implementation, maintenance and improvement of the management system, and to identify the occurrence of departures from the management system or from the procedures for performing tests and/or calibrations, and to initiate actions to prevent or minimize such departures (see also 5.2);  
[REDACTED]
  - OK b) have arrangements to ensure that its management and personnel are free from any undue internal and external commercial, financial and other pressures and influences that may adversely affect the quality of their work;  
QA 300 Reviewed impartiality agreements of [REDACTED] and § [REDACTED]
  - OK c) have policies and procedures to ensure the protection of its customers' confidential information and proprietary rights, including procedures for protecting the electronic storage and transmission of results;  
QA 300 Reviewed NDA for [REDACTED] and § [REDACTED]
  - OK d) have policies and procedures to avoid involvement in any activities that would diminish confidence in its competence, impartiality, judgement or operational integrity;  
QA 300 Reviewed impartiality agreements of [REDACTED] and § [REDACTED]
  - OK e) define the organization and management structure of the laboratory, its place in any parent organization, and the relationships between quality management, technical operations and support services;  
QA 100 Appendix I
  - OK f) specify the responsibility, authority and interrelationships of all personnel who manage, perform or verify work affecting the quality of the tests and/or calibrations;  
QA 100 sec. 4.6.3-8
  - OK g) provide adequate supervision of testing and calibration staff, including trainees, by persons familiar with methods and procedures, purpose of each test and/or calibration, and with the assessment of the test or calibration results;  
[REDACTED]
  - OK h) have technical management which has overall responsibility for the technical operations and the provision of the resources needed to ensure the required quality of laboratory operations;  
QA 100 Appendix I  
Name of person: § [REDACTED]  
Area of responsibility: Technical Representative [REDACTED]  
Repeat as necessary: \_\_\_\_\_
  - OK i) appoint a member of staff as quality manager (however named) who, irrespective of other duties and responsibilities, shall have defined responsibility and authority for ensuring that the management system related to quality is implemented and followed at all times; the quality manager shall have direct access to the highest level of management at which decisions are made on laboratory policy or resources;  
QA 100 Appendix I  
Name of person: § [REDACTED]

NVLAP LAB CODE: [REDACTED]

OK 4.3.3.2 Where practicable, the altered or new text shall be identified in the document or the appropriate attachments.

[REDACTED]  
Track changes used

4.3.3.3

N/A a) If the laboratory's document control system allows for the amendment of documents by hand pending the reissue of the documents, the procedures and authorities for such amendments shall be defined.

[REDACTED]

N/A b) Amendments shall be clearly marked, initialed and dated. A revised document shall be formally reissued as soon as practicable.

[REDACTED]

OK 4.3.3.4 Procedures shall be established to describe how changes in documents maintained in computerized systems are made and controlled.

[REDACTED]

#### 4.4 Review of requests, tenders and contracts

OK 4.4.1 The laboratory shall establish and maintain procedures for the review of requests, tenders and contracts. The policies and procedures for these reviews leading to a contract for testing and/or calibration shall ensure that:

[REDACTED]  
QA 1001 reviewed quote 13-2805-Q-0500

OK a) the requirements, including the methods to be used, are adequately defined, documented and understood (see 5.4.2);

[REDACTED]

C b) the laboratory has the capability and resources to meet the requirements;

[REDACTED]

OK c) the appropriate test and/or calibration method is selected and is capable of meeting the customers' requirements (see 5.4.2).

[REDACTED]

OK d) Any differences between the request or tender and the contract shall be resolved before any work commences. Each contract shall be acceptable both to the laboratory and the customer.

[REDACTED]

**NOTE 1** The request, tender and contract review should be conducted in a practical and efficient manner, and the effect of financial, legal and time schedule aspects should be taken into account. For internal customers, reviews of requests, tenders and contracts can be performed in a simplified way.

**NOTE 2** The review of capability should establish that the laboratory possesses the necessary physical, personnel and information resources, and that the laboratory's personnel have the skills and expertise necessary for the performance of the tests and/or calibrations in question. The review may also encompass results of earlier participation in interlaboratory comparisons or proficiency testing and/or the running of trial test or calibration programs using samples or items of known value in order to determine uncertainties of measurement, limits of detection, confidence limits, etc.

**NOTE 3** A contract may be any written or oral agreement to provide a customer with testing and/or calibration services.

# Test Method Review Summary

- Not used by all programs
- Directions vary by program

# Questions?