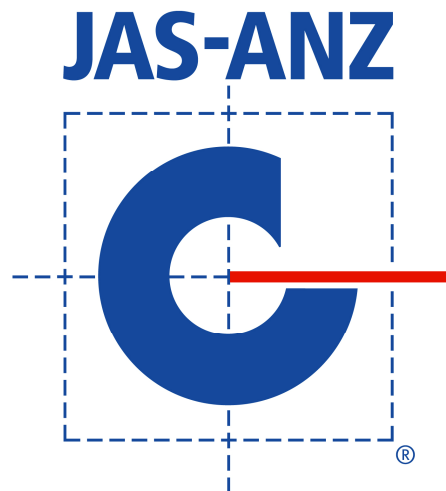


*Joint Accreditation System of Australia and New Zealand*

**POLICY NUMBER 08/09**



**Policy for the transition and implementation of the revised ACC CAB requirements  
and the application of Procedure 31, Issue 4**

Authority to Issue

A handwritten signature in blue ink that reads 'James Galloway'. The signature is written in a cursive style.

Dr James Galloway  
Chief Executive  
With Authority of the Governing  
Board

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## **1 OBJECT AND FIELD OF APPLICATION**

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- 1.1 This policy provides for the application of JAS-ANZ Procedure 31 Issue 4, *Requirements for bodies providing audit and certification of healthcare management systems to the Core Standards for Safety and Quality in Healthcare*, to NZS 8171.
- 1.2 This policy applies to all conformity assessment bodies (CABs) that are currently accredited to JAS-ANZ Procedure 32. This policy also details the transition arrangements from current ACC scheme rules to the revised version released 16 November 2009.
- 1.3 This policy also applies to all new applicants.
- 1.4 This policy shall remain valid until JAS-ANZ Procedure 31, Issue 5 is published.

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## **2 REFERENCES**

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- 2.1 ISO/IEC 17021:2006, Conformity assessment – Requirements for bodies providing audit and certification of management systems.
- 2.2 JAS-ANZ Procedure 31, Issue 4, Requirements for bodies providing audit and certification of healthcare management systems to the *Core Standards for Safety and Quality in Healthcare*.
- 2.3 ACC Requirements for Conformity Assessment Bodies to audit against NZS 8171: Allied Health Sector Standard
- 2.4 JAS-ANZ Procedure 32, Issue 2, Criteria for designated audit agencies operating pursuant to the New Zealand health and disability services (safety) act 2001

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## **3 BACKGROUND**

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- 3.1 Currently the ACC scheme is linked to JAS-ANZ Procedure 32 which was based on ISO/IEC Guide 62. ACC has reviewed their requirements and now require CAB's providing certification to NZS 8171 to be either accredited by JAS-ANZ to ISO/IEC 17021 or by ISQua. The scheme requires third party accreditation and approval by ACC of CAB's.
- 3.2 JAS-ANZ has two CAB's providing certification to the existing ACC requirements – both are currently accredited to ISO/IEC 17021.
- 3.3 Procedure 31 Issue 4 calls up the Core Standards for Safety and Quality in Healthcare, but these do not apply to CAB's delivering certification services under the ACC scheme.
- 3.4 Procedure 31 Issue 4 is to be reviewed to accommodate the healthcare schemes in New Zealand and other healthcare standards.

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## 4 POLICY

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- 4.1 As directed by ACC all existing CABs, recognised by ACC, shall be compliant with this policy within 3 months of the publication of the amended ACC requirements (Reference 2.3)
- 4.2 Once Cabs have demonstrated compliance, accreditation will be granted against JAS-ANZ Procedure 31, which is based on ISO/IEC 17021 and not ISO/IEC 17021.

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## 5 IMPLEMENTATION

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- 5.1 Upon the issue of this policy, all CAB applicants for the ACC scheme will be assessed against JAS-ANZ Procedure 31 and the ACC requirements. References in Procedure 31 to the Core Standards for Safety and Quality in Healthcare shall be read in conjunction with the ACC scheme rules.
- 5.2 JAS-ANZ Procedure 32 will be withdrawn no later than 31 May 2010.
- 5.3 The ACC has documented within their scheme rules the requirements for organisations transferring between CAB's.
- 5.4 The IAF MLA Mark shall not be placed on certificates issued by CAB's under the ACC scheme.
- 5.5 ACC has assessed the risk associated with the delivery of this scheme and determined that this service poses a low risk to consumers and that the overall surveillance programme is overlaid with contractual audits undertaken by Quality and Risk Assurance within ACC (10% of providers- 5 % operating under the EPN contract and 5% operating under the regulated scheme) as well as additional audits carried out depending on the service providers performance. Consequently ACC has determined the certification period to be 4 yearly. The ACC scheme does allow for a shorter certification period "Certification for a period of less than 4 years should be determined by the CAB based on the level of non-conformity and risk as identified through the audit process".
- 5.6 ACC have documented in their scheme rules the transition process for CAB's to extend certification from 3 yearly to 4 yearly.
- 5.7 Surveillance shall be conducted mid way through the certification period; 2 years This means that the minimum surveillance frequency has moved from 18 months to 2 years. This only applies to organisations which have undergone no significant changes. Those that are new or have expanded their service or are operating at a new site will undergo an initial 6 monthly audit.

The ACC specific programme requirements do diminish the requirements of Procedure 31 and ISO/IEC 17021 in relation to surveillance and recertification frequency.