ON-SITE CLEARANCE OF FINDINGS
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1. **PURPOSE AND SCOPE**

The purpose of this document is to describe the SADCAS process for the on-site clearance of findings (CoF) visit. It is applicable to all accreditation programmes offered by SADCAS.

2. **RESPONSIBILITY**

Adherence to the requirements of this document is the responsibility of all SADCAS and assessment personnel.

3. **CONDITIONS FOR RECOMMENDING AN ON-SITE CLEARANCE OF FINDINGS VISIT**

3.1 A recommendation from the assessment team for “granting accreditation or continued accreditation subject to an on-site clearance of findings within a three (3) month period” is applicable to initial assessment, periodic on-site assessment or re-assessment and can only be made where one or more of the following conditions exist:

   a) The finding(s) do not necessarily warrant immediate recommendation for accreditation or suspension but are serious enough to possibly impact the credibility of results produced by the conformity assessment bodies if not addressed immediately;

   b) The findings can only be cleared by means of physical verification of evidence rather than a desk review; or

   c) The organizations’ history in clearing findings does not support confidence in the ability of the organizations’ management system to carry out an effective clearance of findings.

3.2 The recommendation on the SADCAS F 61(c) for a CoF visit should clearly indicate the following, as a minimum:

   a) The scopes or fields that are affected by the on-site CoF, i.e. the nonconformities of all or specified scopes/fields; and

   b) That the CoF visit will be at the cost of the facility.

3.3 The Team Leader (TL) should recommend to the Scheme Coordinator (SC) on the SADCAS F 57, which of the team members could conduct the on-site CoF, i.e. TL or specific Technical Assessor (TA).
4. **PROCESSING AN ON-SITE CLEARANCE OF FINDINGS’ RECOMMENDATION**

4.1 A recommendation for an on-site CoF shall be reviewed by the TM, and where necessary, in consultation with the Chief Executive Officer (CEO), within the shortest period possible after the assessment to decide on the acceptability of the recommendation made by the team.

4.2 The TM’s decision will be communicated by the SC to both the assessment team and the facility in writing. In the case where a recommendation for CoF is rejected by the TM, The decision for this rejection will be motivated and communicated in writing to the team that originated it. The TM in consultation with the CEO may impose conditions for their decision.

5. **CONDUCTING THE ON-SITE CLEARANCE OF FINDINGS VISIT**

5.1 The purpose of an on-site CoF is to verify implementation and effectiveness of corrective actions taken by the facility. The on-site clearance of findings should be conducted within three (3) months of the assessment. All evidence and supporting documentation must first be submitted to SADCAS for perusal and acceptance prior to the on-site CoF visit.

5.2 The assessment team shall only clear the nonconformities if the evidence supports that proper root cause analysis was undertaken, the corrective actions had been effectively implemented and the necessary preventive actions have been put in place.

5.3 Should the assessor/assessment team come across any additional observations that are not related to the original nonconformities and that will impact negatively on the accreditation status of the facility, the assessor shall record the issues on the back of the SADCAS F 61 (c): Assessment Recommendation Report under “Additional Comments/Notes” section. This will inform SADCAS TM of the situation for a decision on the way forward. The TM, in consultation with the CEO where necessary, will decide if the observations will affect the recommendation resulting from the outcome of the CoF nonconformities.

6. **RECOMMENDATION/STATEMENT RESULTING FROM THE OUTCOME OF THE ON-SITE CLEARANCE OF FINDINGS VISIT**

6.1 The Team Leader shall complete the SADCAS F 61 (c) after a CoF and state one of the following depending on the outcome of the visit:

a) If all corrective actions are effective and have been satisfactorily implemented, the statement should indicate that “All corrective actions have been implemented”.

b) If any or all the corrective actions have not been cleared, the statement should indicate that “Corrective actions have not all been implemented/effectively implemented”.

6.2 In either case, the team shall provide sufficient evidence to support the statement.
7. PROCESSING THE OUTCOME OF THE ON-SITE CLEARANCE OF FINDINGS VISIT

7.1 The CoF assessment pack, together with the original pack will be submitted to the Accreditation Approvals Committee and the normal procedure followed to process the assessment documentation.

8. PROCESSING OF ADDITIONAL FINDINGS RAISED AT THE CLEARANCE OF FINDINGS VISIT

Where additional observations have been noted on the SADCAS F 61(c), on receipt of the pack the SC will discuss these issues with the TM for a decision on the way forward. Depending on the severity of the observations the SC and the TM will decide whether to:

a) Request that the facility to submit corrective action for the issue raised before the pack is submitted to the Accreditation Approval Committee (AAC), (where the observation(s) are serious enough to impact the credibility of results produced by the accredited organization);

b) Submit the pack to the AAC in the meantime but still require the facility to submit corrective action/supporting evidence within the stipulated timeframe. In this case the corrective action will be checked by either the assessor or SC for clearance, the pack will not need to be re-submitted to the AAC (where the observation(s) are not considered serious enough to impact on the accreditation status and the facility is able to provide evidence of corrective action taken); or

c) In severe cases such as issues that could result in suspension, arrange an additional assessment of the facility. Refer to AP 18.

9. REFERENCES

- SADCAS F 57 – Feedback from assessment
- SADCAS F 61 (c) – Assessment recommendation report
- SADCAS AP 14 – SADCAS Accreditation Decision Making Process
- SADCAS AP 18: Criteria for Extraordinary Assessments
# APPENDIX - AMENDMENT RECORD

<table>
<thead>
<tr>
<th>Revision Status</th>
<th>Page</th>
<th>Clause/Subclause</th>
<th>Description of Change</th>
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</thead>
</table>
| Issue 1         | 3    | 3.1              | • Line 1: Added “granting accreditation”  
• Line 2: Added “initial assessment” after “applicable to”  
• Line 2: “Surveillance” deleted and substituted with “periodic on-site assessment” | CEO         | 2018-11-18     |
|                 |      | 3.3              | • Line 1: “Lead Assessor” deleted and substituted with “Team Leader”  
• Line 1: “Technical Manager” deleted and substituted with “Scheme Coordinator” | CEO         | 2018-11-18     |
|                 | 4    | 6.1              | Line 1: “Lead Assessor” deleted and substituted with “Team Leader”                    | CEO         | 2018-11-18     |
|                 | 5    | 8                | Paragraph 1, Lines 2 and 3:  
• “TM” deleted and substituted with “SC”  
• “CEO” deleted and substituted with “TM” | CEO         | 2018-11-18     |
|                 |      | 8 - b)           | Line 3: “TM” deleted and substituted with “SC”                                       | CEO         | 2018-11-18     |