

# **IECRE OD-005**

Edition 3,0 2018-10-01

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# IECRE OPERATIONAL DOCUMENT

IEC System for Certification to Standards relating to Equipment for use in Renewable Energy applications (IECRE System)

## **Testing Laboratory Assessment Report**

Confidential to the applicant, assessment team & IEC Central Office

ME/PV/WE-OMC/ / (assigned by the Secretariat on finalization)

#### **Testing Laboratory:**

Fill in with complete Legal Entity name of the Testing Laboratory and country of domicile.

#### Date of assessment: yyyy-mm-dd

The aim of this document is to provide guidance for Assessors undertaking Testing Laboratory assessments and completing form OD-XXX Testing Laboratory Assessment Report.

Note: orange text is guidance text and should be removed before the report is finalized and submitted to the Secretariat.





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## 1 Object and field of assessment

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1.1 Object						
Assessment covering		IECRE Assessmen	Unified t Assessment	Accreditation Body	Scope of Accreditation	
Initial Assessment (IAR)						
Extension of Scope (EAR)				1		
Re-Assessment (RAR	)			1		
Follow-up Assessmen	t (FAR)					
1.2 Energy Sector 1.2.1 Energy Sect		by the ass	essment			
Please cross (X) as appropromplete list of the scope including editions and ame	e of the asses					
☐ Marine Energy		☐ Solar P	V Energy	☐ Wind Ener	gy	
1.3 Previous Asse	ssment Re	port (if app	licable)			
Previous Assessment	Report Nun	nber ME	/PV/WE-OMC/ /			
Previous Assessment	Previous Assessment Date yyyy-mm-dd					
1.4 Complete lega If the Testing Laboratory is should be checked.	=		ress of the Testing	_	sion the box "Accepted"	
Туре			Candidate	Accepted		
RETL						
Legal Entity Name						
Address						
Contact Person						
Email						
Tel						
Mobile						
Fax						
Website						

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#### **Members of the Assessment Team** 1.5

	Name	Organization
Lead Assessor		
Assessor		
Assessor		
Assessor		

#### Place(s) and date(s) of Assessment

If multiple buildings, include all addresses, such as: ABC Testing Laboratory in City A together with DEF Testing Laboratory in City D.

Main location(s)	
If applicable, other location(s)	

#### **Assessment Base**

IEC CA 01 & Suppl.

IECRE Rules of Procedure IECRE ODs

IEC Standards as noted in Annex 1

ISO/IEC 17025

The above documents are to be based upon the latest published editions

#### 2 Organization

#### Brief history of the Testing Laboratory

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#### 2.2 **Organization of the Testing Laboratory**

Include information relevant to the organization of the Testing Laboratory pertaining to the operated Energy Sector(s).

If the quality management system is charts then this could be attached a				ocedure incl	ude one or more organization
NOTE: The IECRE Executive Se Assessment Report.	cretary will redact	the organizati	on chart(s	) in Sub-C	lause 2.2 for the Summary
2. Barrannal Churchura					
3 Personnel Structure  When the declared years of experinterviews on the awareness and kineasuring as well as CV information	nowledge of the star	ndards, witness	ing of Test	Report revi	ew, witnessing of testing and
NOTE: The IECRE Executive Secre		•			•
3.1 Employees					
Number of overall people em	ployed by the lega	al entity of th	e Testing	Laborato	ry
Number of people involved w assessment	ith the testing acti	ivity within th	ne scope (	of this	
3.2 Responsible Manager	s for Testing				
Name [REDACT NAMES IN SUMMARY	Position (title) and field of	Years of relevant experien	checl	rience ked & priate	To whom do they report? [REDACT NAMES IN
ASSESSMENT REPORT]	expertise	ce	Yes	No	SUMMARY ASSESSMENT REPORT]

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3.3 Principal staff involve	ed in Testing				
Name [REDACT NAMES IN SUMMARY ASSESSMENT REPORT]	Position (title) and field of	Years of relevant experien	check	rience ked & priate	To whom do they report?
ASSESSMENT REPORT	expertise	ce	Yes	No	SUMMARY ASSESSMENT REPORT]
3.4 Staff involved in the 0	Quality Managem	ent System			boratory
Name	Position (title)	Years of relevant	Exper	ked &	To whom does the quality management
[REDACT NAMES IN SUMMARY ASSESSMENT REPORT]	expertise	experien ce	appro Yes	No	system staff report? [REDACT NAMES IN SUMMARY ASSESSMENT REPORT]
3.5 Assessment of staff of	competence				
When the declared years of experinterviews on the awareness and k measuring as well as CV information	ience is low, the ass nowledge of the stan	dards, witness	ing of Test	Report revi	lew, witnessing of testing and

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#### **Quality Management System**

If the Testing Laboratory is accredited, check the most recent accreditation assessment report and the scope covered by the

accreditation.

If the Testing Laboratory is not accredited or if the Testing Laboratory does not make the accreditation report available, the quality management system of the Testing Laboratory shall be examined in detail.

Briefly describe the structure of the quality system, its documentation and degree of implementation, and how it is checked for compliance with ISO/IEC 17025.

State whether reports from external/internal audits, management reviews and corrective action processes have been reviewed and other relevant items from ISO/IEC 17025.

In any case the ODs, clarification sheets, and the Rules of Procedure of the relevant Energy Sector should be assessed in order to verify that they are duly included in the quality management system and implemented in practise and effective.

Is the Testing Laboratory accredited by a reputable Accreditation Body?							
Does the accreditation include the standards covered by this assessment?							
Structure of the Quality System							
Structure of the Quality System							
Document control							
Review of requests, tenders and contracts							
Sub-contracting of tests							
Purchasing services and supplies							

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Service to the client
Complaints
Complaints
Control of non-conforming work
Corrective action
Corrective action
Preventive action
Control of records
Control of records
Internal audits
Management reviews
Midilagenient Teviews

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IECRE Rules of Procedure

## Testing Laboratory Assessment Report

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IECRE Operational Documents	
Clarification Sheets	
Use of appropriate IEC standards	
Current IECRE decisions	
5 Critical Technical Procedures	
Briefly describe if the presence and appropriateness of procedures for sample handling, component acceptance, performance of critical tests, calibration of equipment, measurement accuracy/uncertainty, training and other relevant items from ISO/IEC 17025 Clause 5.0 have been checked.	
Equipment: Verify that the calibration certificates include measurement uncertainty values.	
Sampling: In case of multiple factory location for the same product.	
Environmental conditions	
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Test methods and method validation
Equipment
Measurement traceability
Sampling
Handling of test items
Assuring the quality of test results
Reporting the results

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6 Proficiency Testing Programmes
Indicate the laboratory's participation in any comparative testing programs.
7. Testing with seed during the seed on the
7 Testing witnessed during the assessment
Provide information about the equipment used, the testing methodology, general proficiency, knowledge and competence of the laboratory staff and the relevant standard and clause against which the test has been carried out.
8 Test reports reviewed during the assessment
E.g. To check the validity and completeness of the measurement reported in the Test Report, list of used Test Equipment
reported, proper signatures and reviewers etc.
NOTE: The IECRE Executive Secretary will redact ALL names in Clause 8 for the Summary Assessment Report.

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# **Number of Non-Conformity Reports issued** NOTE: The IECRE Executive Secretary will redact ALL of Clause 9 for the Summary Assessment Report. Number of NCRs appended 10 Recommendations of the Assessment Team This assessment has been a sampling exercise and thus every aspect of the Testing Laboratory's activities has not been covered. It does not follow, therefore, that non-conformances do not exist in areas where none have been reported in this assessment report. Standard recommendations: 1. The Assessment Team recommends acceptance of the assessed organization for the scope(s) as reported in Annex 1 of this Assessment Report as appropriate. ${\bf 2.}$ The Assessment Team recommends $\underline{{\bf acceptance}}$ of the assessed organization for the scope(s) as reported in Annex 1 of this Assessment Report, subject to clearance of the outstanding Non-conformity Reports as appropriate. 3. The Assessment Team recommends that the acceptance of the assessed organization is postponed until a further follow-up assessment is carried out and is found satisfactory. 4. Other, please specify using similar terminology 10.1 Additional Information

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## 11 Signatures of the Assessment Team

Date: yyyy-mm-dd

	Printed name	Signature			
Lead Assessor					
Assessor					
Assessor					
Assessor					
12 Acknowledgement by the assessed organization					
☐ We acknowledge and agree with the content of the Assessment Report.					
☐ We acknowledge the content of the Assessment Report and we disagree for the following reasons:					
Date: yyyy-mm-dd					
	Printed name	Signature			
Testing Laboratory Representative					

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#### Annex 1 **Assessment Scope**

Type of assessment (IAR, EAR, FAR, RAR) Indicate for each standard the type of assessment being conducted as a part of this report.

The assessment team completes this section with the standard(s) selected for this assessment. List the standards in the Testing Laboratory scope, including the editions and amendments.

Number of Test Reports issued during the last three years and the number of test reports reviewed during the assessment: The Testing Laboratory should provide this information during the assessment.

Test Reports completed can also include projects based on the equivalent National Standard.

<u>Sufficient expertise demonstrated:</u>
The assessment team completes this section based upon the on-site assessment.
Where insufficient experience is demonstrated the "No" box shall be checked.

#### Example:

Type of assessment (IAR, EAR,	standard  Number Test Reports issued during the last three			expertise strated
FAR, RAR)		years / test reports reviewed during the assessment	Yes	No
RAR	IEC/TS 62600-10:2015	5 / 2		
EAR	IEC 61215:2005	9 / 4		

Testing/certification experience for national/regional standards that are reasonably harmonized with the equivalent IEC standard can be counted as experience if no experience can be demonstrated for the IEC standard. This shall be clearly indicated by adding an asterisk after the number for test reports issued, for example:

Type of assessment (IAR, FAR,	Standard	Number Test Reports issued during the last three	rts issued demonstrat		
EAR, RAR)		years* / test reports reviewed during the assessment	Yes	No	
IAR	IEC 61400-12-1:2005	3* / 1	$\boxtimes$		

<sup>\*</sup> experience also includes equivalent national/regional standards.

Type of assessment		Number of Test Reports issued	Sufficient expertise demonstrated		
(IAR, EAR, FAR, RAR)	Standard	during the last three years / test reports reviewed during the assessment	Yes	No	

Note: For the organization's full scope please see the IECRE Website

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#### Annex 2 **Organization chart**

Include the relevant organization chart(s) here.

NOTE: The IECRE Executive Secretary will redact ALL of Annex 2 for the Summary Assessment Report.

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## Annex 3 Accreditation Certificate relevant to the IECRE operations

Include the relevant accreditation certificate(s) here.

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#### "Independence and impartiality" including "Commercial consultancy" Annex 4

1. General Operating Procedure	Yes	No
Does the Body have a documented procedure for independence and impartiality that as a minimum includes the following while carrying out conformity assessment activities:  a) to be objective,  b) to identify, avoid, mitigate and manage conflicts of interest, and  c) to ensure independence, so as to increase the amount of trust, confidence and value that those activities have in the market place		
Document title: Document number:		
2. Reference Document	Yes	No
Does the Body have access to ISO/IEC 17025:2005 and in particular Sub-clause 4.1.4 (including Note 2, 4.1.5 B) and 4.1.5 d)?	les	
NOTE: The IECRE Executive Secretary will redact ALL names in Clause 3, Annex 4, for the Summa Report.	ry Asse	ssment
3. Knowledge, training and decision making	Yes	No
Does the Body's staff have knowledge of the basic concepts of independence and impartiality?		
Were the training records of the Body's staff checked?		
Does the Body's selected staff have sufficient knowledge in the principles of independence and impartiality to provide initial training and retraining to other staff?		
Names of person(s): [REDACT NAMES IN SUMMARY ASSESSMENT REPORT]		
Were examples of training programs of the Body's staff reviewed and found to be sufficient?		
Does the Body's staff select and make pass/fail decisions taking the principles of independence and impartiality into account?		
Are the Body's decisions based on objective evidence of conformity (or nonconformity) obtained by the Body's staff?		
Are the Body's decisions influenced by other interests or parties?		
4. Documentation and Implementation	Yes	No
Does the Body have documented and implemented (on an on-going basis) sufficient procedures to ensure the independence and impartiality of all staff?		
Does the Body have documented and implemented (on an on-going basis) sufficient procedures to ensure that the remuneration of staff is free from pressures and inducements and is not dependent on the number, outcome of the result of their activities?		
Note: It is recognized that the source of revenue of the Body is its customers paying for its services and that		
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this is a potential threat to independence and impartiality.			
Does the Body have documented sufficient procedures for the identification, review, resolution and prevention of conflict of interest (including "commercial consultancy") where conflicts of interest are suspected or proven (including subcontracted personnel) and does the Body keep records of such reviews and decisions?			
5. Marketing and advertising materials	Yes	No	N/A
Do the Body's marketing materials give the impression that "commercial consultancy" activities are offered?			
Is the Body linked to an organization that provides "commercial" consultancy services?			
Is there a documented policy/procedure to ensure that there is an effective separation between all conformity assessment activities and consultancy services?			
6. Staff declarations		Yes	No
Does the Body require all staff acting on its behalf to declare any potential conflict of interest?			
		1	ı
7. Compliance		Yes	No
Does the Body comply with all the above independence and impartiality principles on an ongoing basis?  Note: If the answer is NO a Non-Conformity Report must be issued			
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#### **Non-Conformity Reports (NCRs)**

General Copy this template for each non-conformity found.

Non-conformity Report No.
Assign a consecutive number to each NCR issued and include the total number of NCRs issued. Example: 1/5.

Standard Clause / Sub-clause of Non-Conformity and/or IECRE Rule/OD NCR related to ISO/IEC 17025, IEC CA 01 & Suppl, IECRE Rules of Procedure, ODs, Clarification Sheets.

NOTE: The IECRE Executive Secretary will redact ALL Non-Conformity Reports (NCRs) for the Summary Assessment

Non-conformity Report No	1	Date	YYYY-MM-DD	
Standard Clause / Sub- clause of Non-Conformity and/or IECRE Rule/OD.				
Non-conformity description				
		Tastina laba		
Lead Assessor  Testing laboratory representative acknowledgement of the issuance of the NCI		ement of the issuance of the NCR		
Signature and printed name		Signature, printed name and title		
Root cause of non-conformity				
Proposed Corrective action(s)				

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Implementation date	Testing laboratory representative confirms implementation of corrective actions	
YYYY-MM-DD	Signature, printed name, title and date	
Proposed Corrective Action(s) acceptance by the Lead Assessor		
Acceptance, no further verification required		
Acceptance, further verification of implementation is required, <u>without</u> on-site follow-up assessment		
Acceptance, further verification of implementation is required, with on-site follow-up assessment		
Lead Assessor (Signature, printed name and date)		
Implementation verified and final clearance provided by Lead Assessor (only if further verification of implementation is required)		
Lead Assessor signature, printed name and date		

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